

*Post-qualification education and
professional identity in the contested
landscape of Complementary and
Alternative Medicine: a case of
transformative learning in an online
setting*

By

Hazel Ann Partington

*A thesis submitted in partial fulfilment for the requirements for the
degree of Professional Doctorate in Education at the University of
Central Lancashire*

October 2017

STUDENT DECLARATION FORM

Concurrent registration for two or more academic awards

I declare that while registered as a candidate for the research degree, I have not been a registered candidate or enrolled student for another award of the University or other academic or professional institution

Material submitted for another award

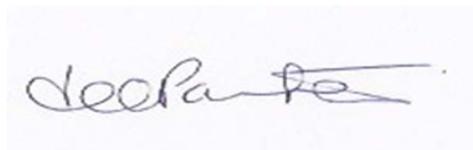
I declare that no material contained in the thesis has been used in any other submission for an academic award and is solely my own work

Collaboration

Where a candidate's research programme is part of a collaborative project, the thesis must indicate in addition clearly the candidate's individual contribution and the extent of the collaboration. Please state below:

Not applicable

Signature of Candidate



Type of Award: Doctorate in Education (EdD)

School: Centre for Excellence in Learning and Teaching

Abstract

The education of Complementary and Alternative Medicine (CAM) practitioners within Higher Education (HE) is controversial, and has attracted criticism from various quarters, yet little is known about the impact of such courses upon CAM practitioners or upon the CAM profession. A programme of online MSc courses for CAM practitioners delivered by the University of Central Lancashire (UCLan) offered an opportunity to explore this topic further. A case study approach using focus group and semi-structured interviews with teaching staff and graduates from the courses facilitated the generation of rich, thick data describing how CAM practitioners' professional lives were influenced by their studies, their experience of the course and achievement of a master's degree. Three key aspects of professional lives were selected as analytic categories, namely: professional identity, practice, and the wider CAM community of practice.

This research contributes to an understanding of the impact of the dominant critical discourse relating to the use of CAM therapies and the provision of HE courses in CAM, in addition to providing valuable insights into qualified CAM practitioners' negotiation of their professional identity in the contested CAM landscape. All participants had been affected by criticisms of CAM, leading in several cases to a devaluation and stigmatisation of their professional identity. Yet graduate participants perceived the influence of their studies and achievement of a recognised academic qualification as immensely beneficial leading to both personal and professional validation.

The overall finding from this research is that study and subsequent qualification at MSc level in international online cohorts may be seen to have had a profound influence upon the CAM professionals participating in this study. There is evidence of an impact on MSc graduate participants' frames of reference, identity, professional

identity, practice, and participation in their community of practice; in addition to the acquisition of knowledge and skills in critical thinking and research.

For the graduate participants in this research the experience of their MSc studies has been a transformative one. The concept of transformative learning (TL) was developed by Jack Mezirow in 1978 and has been further expanded upon by Knud Illeris. Mezirow defines TL as learning which transforms the meaning perspectives or frames of reference by which we understand the world, while Illeris proposes that TL also has an impact on identity. A contribution to the pedagogy of TL may be found in the formulation and utilisation of the analytic categories of professional identity, practice, and community of practice, which offer a new approach for researching TL in professional and/or vocational groups.

This study also demonstrates that e-learning programmes can offer opportunities for transformative learning and adds to the call for an appreciation of the potential of e-learning to deliver profound and meaningful learning experiences.

Contents

Student declaration	2
Abstract	3
Contents	5
List of tables	10
List of illustrative material	10
Abbreviations	11
Dedication	13
Acknowledgements	13
Introduction	14
Structure of the thesis	14
Focus and research questions	16
Research process	17
Terminology	17
The potential contribution of my research	17
Chapter One: Providing the context for my study	20
Complementary and Alternative Medicine: a contested profession	20
What's in a name? Definitions of CAM and their implications	21
The evolution of CAM	22
The post-qualification education of CAM practitioners	27
CAM education at UCLan.....	29
E-learning	35
The pedagogy of E-learning	39
Pedagogy in master's level education.	47
My story	50
Reflecting on my multiple situatedness within the research	53

Chapter summary	54
Chapter Two: Theoretical perspectives	55
Epistemology and ontology	55
Identity theory	58
Terms used	59
The foundations of identity theory	59
Contemporary identity theory.....	62
Cultural identity.....	68
Professional identity.....	69
The professional identity of CAM practitioners	70
CAM professional identity within HE.....	74
Transformative learning	75
Transformative learning and identity.....	80
Communities of practice	86
Communities of practice in CAM.....	88
Communities of practice and identity	89
Chapter summary	90
Chapter Three: Methodology and methods	91
Methodology: Case study	91
The issue of generalisation and case study.	94
The research participants	96
Methods	98
Data collection	100
The pilot of the focus group schedule.....	100
The focus group.....	102
Interviews with graduates.....	105
Evaluation and adjustment of the methods.....	109
Interview follow-up phase.....	110
Ethical issues	110
Validity	113
Limitations	115
Chapter summary	115

Chapter Four: Data analysis.....	116
Thematic analysis	117
Grounded theory	119
Data analysis using computer software	121
The construction of I-poems	123
My data analysis process	125
Reflection on the process.....	130
Chapter summary	131
Chapter Five: Setting the scene and introducing the graduates	132
The case study programmes: structure and pedagogical methods.....	132
Introducing the graduates.....	137
Olivia	138
Connie.....	140
Fran	142
Sally	143
Dilip	145
Sonia.....	147
Yolanda.....	149
Lana	152
Aiman	153
Locating myself in relation to the graduate participants	156
Hazel.....	156
Chapter summary.....	158
Chapter Six: Findings	159
Overall finding:.....	162
E-learning.....	162
Sub-finding One: Motivations	165
Sub-finding Two: Impact on professional identity	171
Sub-finding Three: Transformative learning.....	181
Sub-finding Four: Impact on community of practice.....	187
Sub-finding Five: Impact on practice.....	190
Sub-finding Six: Significant aspects of the courses	194

Chapter summary	199
Chapter Seven: Discussion	201
Introduction	201
Discussion of analytic categories	203
Identity and professional identity	204
Practice	207
Communities of practice	210
Discrepant cases	212
Olivia	213
Dilip	216
Transformative learning – linking the findings to theory	220
Transformative learning in e-learning settings	221
Significant aspects of the courses in the light of TL theories	222
Contributions to theory and practice	223
The contribution of this thesis to pedagogy	223
Contribution of this thesis to the CAM profession	224
Chapter summary	225
Chapter Eight: Conclusion and recommendations	226
Conclusions	227
<i>The professional lives of CAM practitioners</i>	228
<i>Transformative Learning</i>	228
<i>The potential of e-learning</i>	229
Recommendations	229
<i>For Higher Education Institutions</i>	229
<i>For Complementary and Alternative Medicine</i>	231
<i>Future directions for research</i>	232
Closing reflections	233
References	238
Appendices	1
Appendix 1: Documentation	2

1.1 Letter of ethical approval from BAHSS Ethics Committee	2
1.2 Participants' information sheets.....	5
1.2.2 Interview participants' information sheet and consent form	11
Appendix 2: Instrumentation.....	17
2.1 Focus group schedule	17
2.2 Indicative interview schedule	19
2.3 Interview follow up template proforma.....	22
Appendix 3: Publications:.....	24
3.1 Abstract for poster presentation, Homeopathy Research Institute, Rome, 2015	24
3.2 UKCGE 2015 Abstract for group presentation at UKCGE, Glasgow 2015.....	25
3.3 Collaborative article published in International Journal of Doctoral Studies.....	27
Abstract	27
Introduction and Review of the Literature.....	28
Methodology	31
The Problem	32
The Intervention: Evolution of the Facebook Group.....	34
Academic Reflection and Professional Learning.....	35
Discussion	47
Conclusion	50
References.....	51
3.4 UKCGE abstract presentation UKCGE conference Liverpool 2016	54
Appendix 4: Staff 'We-poems'	55
We were so determined	55
When someone asks you 'What do you do?'	56
Appendix 5: List of student and graduate publications:.....	59
Appendix 6: MSc Integrated Healthcare Learning Outcomes.....	61
A. Knowledge and Understanding	61
B. Subject-specific skills	61
C. Thinking Skills.....	62
D. Other skills relevant to employability and personal development.....	63

List of tables

Table 1: Focus group participants	96
Table 2: Graduate participants.....	97
Table 3: A comparison of Braun and Clarke’s (2013) 7-stage data analysis process and my data analysis process	128
Table 4: Findings and key themes	160

List of illustrative material

Figure 1 An illustration of my multiple situatedness	53
Figure 2: An example of central identity and part-identities (Illeris, 2014a:76).....	82
Figure 3: Components of a social theory of learning – an initial inventory (Wenger, 1998:5).....	87
Figure 4 MSc Integrated Healthcare modules.....	134

Abbreviations

AYUSH	Ayurveda, Yoga, Unani, Siddha, Homeopathy
BAHSS	Business, Arts, Humanities, and Social Sciences ethics committee
BERA	British Educational Research Association
BPS	British Psychological Society
CAM	Complementary and Alternative Medicine
CAQDAS	Computer-Aided Qualitative Data Analysis Software
COP	Community of Practice
CPD	Continuing Professional Development
DOH	Department of Health
EBM	Evidence Based Medicine
ENHE	European Network of Homeopathy Educators
FHW	Faculty of Health and Wellbeing
FSM	Friends of Science in Medicine
FTE	Full-time equivalent
GT	Grounded Theory
HE	Higher Education
HEI	Higher Education Institution
HEFCE	Higher Education Funding Council for England
HOC	The House of Commons
HOL	The House of Lords

LDU	Learning and Development Unit
MSc	Master of Science
NHS	National Health Service
NMC	Nursing and Midwifery Council
PCA	Person-Centred Approach
PGCE	Post-graduate Certificate of Education
PSA	Professional Standards Authority
RCCM	Research Council for Complementary Medicine
SAS	Sense About Science
SOH	Society of Homeopaths
STC	Science and Technology Committee
TA	Thematic Analysis
TL	Transformative Learning
UCLan	University of Central Lancashire
UK	United Kingdom
VLE	Virtual Learning Environment

Dedication

This thesis is dedicated with love to my parents Lucy and Len.

Acknowledgements

My sincere thanks to my director of studies Dr Paul Doherty for his advice, reassurance, and generous support. Thank you for your encouragement.

Huge thanks also to my second supervisor and EdD course leader Dr Candice Satchwell who leads the course with grace and kindness, as well as giving astute academic advice.

I could not have undertaken this research without the generosity of the participants who willingly gave of their time, and freely shared their thoughts and experiences. It has been my privilege to work with them, as indeed it has been to work with all past and current staff and students on the MSc programmes.

I have been very fortunate to study with a lively and mutually supportive cohort on the EdD programme. Jacqueline, Kathryn, Lynne, Riz, and Susan – my doctoral experience has been the richer for your company.

My dear friends and colleagues Kate, Jean, and Jacqui provided me with the impetus for my studies and patiently listened as I explored my ideas. I would also like to thank my oldest friends Linda, Pam and the two Rods, for putting up with me burying my head in my studies on high days and holidays. Much love and thanks to you all.

Finally, but by no means least, I would like to thank my husband Alan, my daughters Amy and Laura, their partners Chris and James, my sisters Wendi, Philippa, and Jane, and my grand-children Hannah and Liam for their love, encouragement and inspiration throughout my doctoral studies, the writing of this thesis, and in my life as a whole. You are my treasures and my dear delights.

Introduction

'Your research is a long journey of surprises, blocks, problems, and revelations. Eventually you finish and you have been writing about what you are doing all along...' (Wisker, 2008:274)

Structure of the thesis

This thesis is divided into eight chapters, it is written in a contemporary style with some interweaving of findings and discussion (Wisker, 2008), and the use of two complementary forms of data analysis.

As a way to avoid repetition and provide the thesis with a sense of flow, I have categorised the relevant literatures broadly as either contextual or theoretical. I have placed contextual literature into Chapter One, while literature relating to the theoretical perspectives that have informed my research is located in Chapter Two.

In Chapter One, I contextualise my research against the contested landscape of Complementary and Alternative Medicine (CAM) in addition to providing the local context in terms of the specific CAM courses which are the focus of this study, along with the context of their delivery via e-learning. Finally, I conclude the chapter with my own story as a CAM practitioner and educator within a Higher Education Institution (HEI) and reflect upon my multiple situatedness within the research.

Chapter Two provides a discussion of the key theoretical perspectives which have impacted upon my research, and provides a bridge to understanding how I constructed my findings and conclusions. This chapter includes my epistemological

and ontological stance, my explorations of identity theory, theories relating to transformative education, and communities of practice.

Chapter Three explores methodological considerations, including my use of a case study approach, data collection methods, my experience of conducting the fieldwork, ethical issues, validity and limitations of the study.

Chapter Four details data analysis procedures, including thematic analysis, the incorporation of some grounded theory analysis methods, and the use of Carol Gilligan's voice-centred relational method of analysis to produce I-poems¹.

Key findings from my research are presented in two chapters. Chapter Five opens with a 'scene setting' description of the structure and pedagogical methods employed on the case study courses, before introducing the graduate participants in this research via I-poem vignettes constructed from interview data. Chapter Six provides a more traditional thematic presentation, analysis and some discussion of my findings.

Chapter Seven offers an expanded discussion on identity and professional identity; practice; and community of practice. Two discrepant cases from the research participants are examined in relation to the general findings from the research. The links between findings and Transformative Learning Theory are also explored. The chapter closes by outlining the contributions of this thesis to theory and practice.

¹ Further details of the construction of the I-poems will be provided in Chapter Four.

The final chapter presents conclusions and recommendations arising from the key findings of this study, and a reflection on how the doctoral journey has impacted on my own professional identity.

Focus and research questions

In recent years CAM practitioners have found themselves working within a contested professional landscape wherein the plausibility of and justification for their treatment modalities, has often been called into question along with their integrity as health professionals (Bivins, 2015). A feature of the general critique of CAM has been the strong criticisms of HEIs that offer courses to CAM practitioners (Colquhoun, 2007; Highfield, 2007; Chatfield et al., 2012; Brosnan, 2015), yet little is known about the impact of such courses upon the students or upon the CAM community.

As a CAM practitioner and senior lecturer teaching on three MSc courses (MSc Herbal Medicine, MSc Homeopathy, and MSc Integrated Healthcare) for CAM practitioners delivered wholly online by the University of Central Lancashire (UCLan) I wanted to explore how CAM practitioners' professional lives were impacted by their studies. I identified three key aspects of professional lives and set out to answer the following question:

How does master's level education in an international, online group impact upon CAM practitioners' perceptions of their professional identity, their practice of their chosen therapy (e.g. homeopathy), and their role in their community of practice?

Research process

My research used a case study methodology (Stake, 1995; Bassegy, 1999; Yin, 2003; Thomas, 2016) to facilitate the generation of rich, thick data (Geertz, 1973) describing how CAM practitioners' professional lives had been influenced by their studies. Participants included former and current teaching staff, and nine graduates from the three courses. Teaching staff took part in a focus group discussion, and graduates participated in semi-structured interviews which were followed up with an email member-checking exercise. Data was primarily analysed using thematic analysis (Braun and Clarke, 2006; 2013) with the incorporation of some grounded theory techniques (Charmaz, 2006; 2012). An additional stage of analysis was the use of Gilligan's Listening Guide (Brown and Gilligan, 1992; Gilligan, 2015) to produce I-Poem vignettes for each of the graduate participants (see Chapter Five). The combination of thematic analysis and I-poems provided a way to preserve the polyvocality of this research (Thody, 2006), while still presenting a thorough analysis of the data.

Terminology

All of the participants in this research were qualified to practice at least one CAM discipline, although not all were in practice at the time of their participation. Throughout this thesis I use the terms: CAM practitioners, qualified CAM practitioners, or CAM professionals to describe those who are qualified in a CAM therapy and working in some capacity in the CAM field. I use the word professional to indicate a person who has studied, achieved a 'specific level of competence' and qualified in a practice, in this case in a CAM discipline (McHale, 2015:43).

The potential contribution of my research

Embedding research in our own practice domains can result in a synergy between research and practice that positively affects both domains for practitioner researchers

(Fox et al., 2007). Practitioner-led research is held to be valuable to both the community of practice and to the individual, offering improvement, empowerment, innovation and enhanced efficiency (Costley et al., 2010). As I planned and conducted my research I was inspired by Drake and Heath's (2011) concept of a 'unique confluence' arising from practitioner researchers' generation of new knowledge from the relationship between their overlapping domains, from 'combining understandings from professional practice, higher education practice and the researcher's individual reflexive project' (p2). Taking the professional doctorate route has enabled me to work within my own overlapping practice domains of CAM, higher education and research. As will become evident, my own experience as a CAM practitioner working within HE has brought a reflexive, autoethnographic flavour to the writing of this thesis (Brookfield, 1995; Adler and Adler, 2008; Costley et al, 2010; Ellis et al., 2011).

My research bridges gaps in the literature on CAM practitioners from both professional and educational perspectives; it offers a contribution to the knowledge base and the further evolution of the CAM professional community of practice; and has allowed me to gain significant insights into my own practice. Encompassed within the microcosm of this case study is an illustration of the impact of the dominant critical discourse relating to the CAM profession and the provision of CAM courses in HEIs. This study provides valuable insights into qualified CAM practitioners' negotiation of their professional identity in the contested CAM landscape. As the findings will show, all participants had been adversely affected by criticisms of CAM to various degrees. In several cases participants had experienced a sense of devaluation and a stigmatisation of their professional identity. Yet graduate participants perceived the influence of their studies and achievement of a recognised academic qualification as immensely beneficial, leading to personal and professional validation.

The overall finding from this research is that master's level education and achievement of a recognised academic qualification in international online cohorts may be seen to have had a profound influence upon the CAM professionals participating in this study. There is strong evidence of an impact on MSc graduate participants' frames of reference, identity, professional identity, practice, and role in their community of practice; in addition to the acquisition of knowledge and skills in critical thinking and research.

For the graduate participants in this research the experience of their MSc studies has been a transformative learning experience. The concept of transformative learning (TL) was developed by Jack Mezirow in 1978 and has been further expanded upon by Knud Illeris (2014a). Mezirow (2000) defines TL as learning which transforms the meaning perspectives or frames of reference by which we understand the world, while Illeris proposes that TL also has an impact on identity. A contribution to the pedagogy of TL may be found in the formulation and utilisation of the analytic categories of professional identity, practice, and community of practice, which offer a new approach for researching TL in professional and/or vocational groups.

This study contributes insights into the pedagogy of e-learning at master's level and demonstrates how the use of a student-centred, collaborative approach in combination with an emphasis on critical thinking and reflection and the opportunity for rational discourse through encountering diverse experiences and opinions may engender TL. Thus the study demonstrates the possibility of TL experiences within e-learning programmes and adds to the call for an appreciation of the potential of e-learning to deliver profound and meaningful learning experiences. In addition, I suggest that my findings have the potential to inform pre- and post-qualification CAM education in HEIs and other establishments.

Chapter One: Providing the context for my study

'We do not study a case primarily to understand other cases. Our first obligation is to understand this one case.' (Stake, 1995:4)

This chapter is divided into three parts. In the first I provide the context for my study, describing the evolution and current state of the CAM profession in general, the status of CAM within HE, and the local context of the specific courses wherein my research is situated. The second part continues to set the scene for this thesis with a consideration of the context of e-learning via which the MSc courses are wholly delivered; and pedagogy in relation to both e-learning and master's level teaching and learning. The final part of the chapter details my own journey as a CAM professional working within HE, including the evolution of my overlapping professional identities and how they impact upon each other, and upon my research.

Complementary and Alternative Medicine: a contested profession

It is beyond the scope of this thesis to present a detailed history of the development of the linked therapeutic practices that have become known as CAM², however, as the backdrop of CAM forms an important context to my study this section presents a brief recent history and consideration of the current status of CAM, beginning with the implications of using CAM as a group noun.

² For more details of the history and evolution of CAM see for example: Sharma, 1991; Saks, 2002; 2005; 2015; and Bivins, 2015.

What's in a name? Definitions of CAM and their implications

The term Complementary and Alternative Medicine has become a catch-all designation to describe a varied and often loosely-connected collection of domains of health practice such as acupuncture, aromatherapy, chiropractic, herbal medicine, homeopathy, osteopathy, and reflexology among many other therapeutic modalities (Saks, 2015). As Clarke et al. (2004) point out, the designation CAM itself implies a 'subservience to an unacknowledged and hegemonic orthodoxy, [and] connotes a false sense of unity.' (p329).

The Cochrane Collaboration's adopted definition of CAM establishes the fluidity of what may be included in the term, depending on the politically dominant health system, within particular cultures, at particular times:

*'Complementary and alternative medicine (CAM) is a broad domain of healing resources that encompasses all health systems, modalities, and practices and their accompanying theories and beliefs, **other than those intrinsic to the politically dominant health system of a particular society or culture in a given historical period.** CAM includes all such practices and ideas self-defined by their users as preventing or treating illness or promoting health and well-being. Boundaries within CAM and between the CAM domain and that of the dominant system are not always sharp or fixed.'* (Zollman and Vickers, 1999:693, emphasis as added in: Gale and McHale, 2015:2)

Hence CAM practice is often defined by what it is *not* rather than what it is; as Gale (2014) points out the 'absent presence' in the term is biomedicine, against which CAM practices are deemed to be complementary or alternative (2014:806). Other terms used to describe CAM are: holistic medicine, alternative medicine, integrative medicine, and traditional medicine. Whilst recognising the inherent problems in treating the various therapeutic interventions which have come to be labeled as CAM

as a single entity (Stone, 2015), in this thesis I persist with this convention both for clarity, and as the use of this term reflects the outside-of-the-hegemony status of CAM practices and practitioners.

MacArtney and Wahlbergh (2014) suggest that broadly speaking there are three main standpoints on the use and provision of CAM; firstly endorsement as an alternative to perceived problems with western biomedicine; secondly the pragmatic view that as use of CAM is growing there is a need to make sure that delivery is safe and ethical; and thirdly a concern that patient safety is at risk and that people are not sufficiently well-informed or are being deceived (Dawkins 2007, cited in MacArteny and Wahlberg, 2014; Bivins, 2015; Wahlberg 2015). The political situation of CAM is one of marginality in that CAM practices are not well supported by the state through research funding, or inclusion in mainstream medical curricula (Saks, 2005). This potentially has profound implications for the status of CAM and how CAM practitioners see themselves both individually (professional identity) and collectively (cultural identity). Saks (2002) suggests that rather than focusing on the polarities, it is useful to see CAM and orthodox medicine as being on a changeable continuum where different therapies can become integrated within the mainstream or indeed become marginalised outside it. Hence the designation of particular practices as CAM or mainstream may vary both geographically and historically (Gale and McHale, 2015). However, in terms of the rhetoric and discourse around CAM the perception of polarity currently seems to be firmly established (Singh and Ernst 2008).

The evolution of CAM

In order to delineate and contain the widely-sprawling CAM landscape my discussion of the evolution of CAM is predominantly centred in the western world as the most relevant context for my study. In terms of the impact of policy I have elected to focus upon the United Kingdom (UK) as the courses under discussion are delivered within a British university and therefore affected by UK policy and discourse. However, as the

courses are delivered by e-learning students may attend from anywhere in the world, and participants in this research hail from North America; South-East Asia; Central, Southern and Northern Europe; as well as the UK. Hence their experiences of how CAM is perceived in their own countries are varied.

CAM enjoyed a growth in popularity in the western world from the 1980s onwards (Heller et al., 2005). Literatures relating to CAM from the 1980s until the early 2000s spoke of optimism and exponential growth with expectations that as CAM practitioners and registering bodies engaged with the professionalisation agenda, CAM therapies would be increasingly integrated within orthodox biomedicine (Cant and Sharma, 1996; Cant and Sharma, 1999; Saks, 2002; Heller et al., 2005)

In 2000 the House of Lords (HOL) Science and Technology Committee instituted an inquiry into CAM, their stated purpose was outlined thus:

'The use of complementary and alternative medicine (CAM) is widespread and increasing across the developed world. This raises significant issues of public health policy such as whether good structures of regulation to protect the public are in place; whether an evidence base has been accumulated and research is being carried out; whether there are adequate information sources on the subject; whether the practitioner's training is adequate and what the prospects are for NHS provision of these treatments. It was the need to consider these issues that prompted this Inquiry.' (House of Lords, 2000).

The inquiry and subsequent 'field-breaking' report was seen as a landmark in the CAM community in the UK (Saks, 2015:34). The main recommendation divided CAM therapies into three groups:

- Group 1 – the most organised professions – The ‘big five’ – Homeopathy, Acupuncture, Herbal Medicine, Osteopathy, Chiropractic
- Group 2 – those therapies that most clearly complement conventional care, e.g., aromatherapy, reflexology
- Group 3 – therapies for which no evidence existed at the time of the report.

Further recommendations from the report included the encouragement of research into CAM via pump prime funding to promote research leadership for the next 10 years. In terms of regulation the recommendation was for the development of a single professional body for Group 2 therapies, and the development of a new regulatory regime which respected diversity whilst assuring quality and safety in the delivery of Group 1 therapies (House of Lords, 2000).

The subsequent enactment of the House of Lords science and technology committee’s recommendations (2000) has been patchy in many respects³. Chiropractic and osteopathy were already statutorily regulated and thereby had protection of title at the time of the HOL report in 2000; acupuncture, and homeopathy were denied statutory regulation and protection of title but registering bodies from both disciplines have now achieved voluntary self-regulation with Professional Standards Authority (PSA) for Health and Social Care. The herbal medicine profession was expecting to achieve statutory regulation with the Health Professions Council (HPC), however, the government has now decided against this, citing a lack of evidence for the therapy which made it impossible to set good standards of practice (Donnelly and Mendick, 2015). Robbins (2011) describes this policy or lack thereof as ‘regulating without regulating’; which leaves the majority of CAM professions in the UK without

³ For a fuller picture of the legal and regulatory situation of CAM in the UK see McHale, 2015; Wahlberg, 2015.

protection of title or the respectability and legitimacy associated with statutory regulation. Although the drive to regulate CAM has been primarily framed as necessary to protect the public, one outcome has been the voicing of concerns that the legitimacy conferred by regulation puts the public at further risk (Wahlberg, 2015). The facility for voluntary regulation has been welcomed by many (for example: Society of Homeopaths, n.d.). However, it is important to point out that not all CAM professions or individual practitioners would welcome either voluntary or statutory regulation (McHale, 2015), and that the possibility of voluntary self-regulation does not necessarily apply to all domains of CAM practice (Wahlberg, 2015).

Saks (2015) interprets the marginalisation of CAM as a result of the elevation of the status of biomedicine which provides a 'legally bounded exclusionary social closure' for the medical profession (p31). From my own perspective as a CAM practitioner, educator and member of a registering body, during the time since the HOL report in 2000 it appeared that the push towards regulation whether statutory or voluntary, added momentum to the drive towards professionalisation within the CAM community of practice. However, it also appeared that the move towards professionalisation and thereby legitimacy seemed to generate a backlash of criticism towards CAM practices, leaving CAM professionals like myself working within a contested and somewhat diminishing landscape.

The issue of 'scientific' evidence for CAM therapies is a thorny one and beyond the scope of this thesis, other than to trace the impact that this issue has had upon changing perceptions of CAM therapies over recent years. This has been strongly influenced by the rise of the evidence based medicine (EBM) agenda (Sackett et al., 1996) within biomedicine, in parallel with which the growth and popularity of CAM began to stall. In part this was due to a lack of evidence that was acceptable to the scientific community, and the difficulty in explaining mechanisms of action in

therapies such as homeopathy and acupuncture. The organised criticism of CAM is by no means new (Bivins, 2015), groups such as the Campaign against Health Fraud, also referred to as Quackbusters were formed in the 1980s with the intention of highlighting dubious practices in CAM (Sharma, 1991). More recently the increased use of social media has amplified the scale and dissemination of the sceptic discourse.

Of the HOL designated Group 1 therapies, homeopathy has perhaps fared the worst in receiving criticism from scientists, academics, politicians and the media (Stone, 2015). A pivotal point was the House of Commons Science and Technology Committee (HOC STC) Fourth Report Evidence Check 2: Homeopathy (2010). The report has been criticised as flawed in terms of the make-up of the committee, the imbalance in those who were permitted to present evidence to the committee (only three homeopaths among twelve witnesses), and of selection bias in the studies which were examined (Baldwin, 2010); this is in contrast to the HOL report in 2000, which included a wider range of experts from both CAM and conventional medicine. The pronouncement of the HOC STC that they found no evidence that homeopathy works beyond the placebo effect has reached the status as a piece of evidence in and of itself although the procedures followed did not apply any scientific systematic method (Homeopathy Research Institute, n.d.). However, the evidence check has still had far-reaching consequences for registering bodies, educational establishments, and individual practitioners. Dr Helen Beaumont, chair of the registering body for medically qualified homeopaths, the Faculty of Homeopaths, has recently written of her own experience:

'Quite frankly, I am amazed at the level of hostility homeopathy encounters, particularly from those people who seem unable to have an intelligent debate on the subject without resorting to puerile language and name calling.' (Beaumont, 2016).

As I write now in 2016, the CAM landscape continues to be varied worldwide (Gale and McHale, 2015). In the UK, parts of Europe, Australia, the United States of America,

and Canada the picture remains one of contestation and sceptic activity; although some progress appears to have been made in the UK with the advent of voluntary registration for CAM registering bodies with the PSA. In India, the government continues to promote the use of CAM therapies and in 2014 the Ministry of AYUSH⁴ was established with a focus on development and research in the AYUSH therapies (Ministry of AYUSH, n.d.). In Switzerland the Swiss Interior Ministry has announced its intention to elevate acupuncture, herbal medicine, holistic medicine, homeopathy, and traditional Chinese medicine to the same status as conventional medicine (Swiss Info.ch, 2016).

The post-qualification education of CAM practitioners

The education of CAM practitioners in the UK, both pre and post-qualification, has largely been within private institutions. Post-qualification education within CAM has been traditionally based on improving techniques of practice. However, with the advent of university master's and doctoral courses in CAM there was a shift of emphasis as practitioners were encouraged to develop skills in critical thinking and research.

In parallel to the rise in the popularity of CAM in the 1990s there was an increase in establishments offering training in the practice of CAM therapies, initially in private establishments and from 1998 onwards within universities in the UK. At a time when CAM therapies were flourishing the need for improved standards in education and training was clear and accepted by many (Fulder, 1996; Cant and Sharma, 1999). The recommendations from the 2000 HOL STC report had a positive impact upon the delivery of CAM education within HEIs in many ways and set an agenda for research and development that contributed to the instigation of degrees at undergraduate and

⁴ AYUSH is the acronym chosen by the Indian government to designate the following therapies: Ayurveda, Yoga, Unani, Siddha, Homeopathy.

postgraduate levels in several UK HEIs. In a mapping exercise conducted in 2009 on behalf of the Research Council for Complementary Medicine (RCCM), Robinson and Lewith (2011) identified 80 research active postgraduates with an interest in the CAM field registered for MPhils/PhDs in 21 universities.

The development and progression of CAM courses in HEIs, after an initial growth period, is now vastly reduced. In 2007 a self-styled ‘skeptical’⁵ group in the UK began to campaign against the delivery of CAM courses within universities, describing such qualifications as ‘anti-scientific’ and based on faith rather than on science (Colquhoun, 2007; Highfield, 2007; Chatfield et al., 2012). The sceptic campaign has not been limited to the UK, for example, ‘Friends of Science in Medicine’ (FSM) have lobbied Universities in Australia to cease delivery of CAM courses (Chatfield et al., 2012; Brosnan, 2015). FSM’s key message is premised on the differentiation between science and non-science, with CAM courses being firmly designated as non-science, and therefore damaging to universities’ reputations and claims to legitimacy (Brosnan, 2015). Referring to Bourdieusian notions of capital, Brosnan suggests that FSM’s invocation of ‘bioscientific knowledge as a form of capital that trumps academic credentials’ has led in turn to the devaluation of the status and perceived legitimacy of CAM academics (2015:1054). CAM academics often respond to accusations of offering non-scientific courses by pointing to the science content in their programmes. However, Brosnan suggests that doing so serves only to reinforce the symbolic capital of bioscientific knowledge as the yardstick against which all other healthcare knowledge and practice should be measured (ibid.), although this seems to argue for a continuation of a polarised position from CAM rather than a willingness to move towards integration, which I suggest offers a way to preserve some provision for CAM within HEIs.

⁵ The spelling of ‘skeptical’ with a ‘k’ is generally preferred in American and Canadian English, while in most other English speaking countries ‘sceptic’ is used. However, some sceptic groups prefer to use ‘skeptical’ to imply a particular type of 21st-century scientific scepticism (Grammarist, 2016).

CAM education at UCLan

Turning to the local context of my research, the University of Central Lancashire (UCLan) was among those institutions who developed CAM courses beginning with BSc degrees in Homeopathy, Herbal Medicine and Complementary Medicine for Health Sciences. The courses were originated within what is now the Faculty of Health and Wellbeing (FHW), which has variously been known as the Faculty of Health, the School of Nursing, the School of Nursing and Caring Sciences, and the College of Health and Wellbeing. For the purposes of clarity and consistency within this thesis it will be referred to by its current name, the FHW.

The FHW is one of the larger faculties within UCLan and historically has had a primary focus on the training and education of nurses. According to Scott (2008) it is important when attempting to analyse an organisation to: ‘...ascertain what elements are at play in a given context and the extent to which they work to reinforce or undercut one another.’ (p429)

An examination of the drivers influencing the FHW shows a close alliance with the institution of nursing, as embodied and regulated by the Nursing and Midwifery Council (NMC); the Department of Health (DOH); and with the National Health Service (NHS) and of course UCLan’s own organisational culture. Managers and leaders within the FHW on the whole tend to have been nurses or have worked in an allied health profession under the auspices of the NHS. Over time, courses for other health professions have been developed and incorporated within the college. However, with contracts with the NHS providing the largest income stream for FHW, it appears that the nursing agenda with all its associated institutional and cultural norms has the loudest voice (Scott, 2008).

It is apposite here to consider the pursuit of legitimacy as a driver in the development and growth upon the two nested organisations and associated institutions: UCLan, the FHW, the institution of nursing; and the more loosely-coupled institution of CAM (Meyer and Rowan, 1977). According to Oliver (1991), acquiring legitimacy is important for organisations in order to demonstrate 'social worthiness' (p150) and to mobilise resources. In terms of academic legitimacy, UCLan in common with other post 1992 universities is perceived by some to suffer from comparison with the Russell Group Higher Education Institutions (HEIs).

Kok et al. (2010) suggest that commercial interests exert the greatest pressure upon 'new' universities, while more traditional universities continue to take an academic and research oriented focus. However, UCLan's decision to create a new School of Medicine and Dentistry at UCLan (Else, 2014) offering a self-funded 5-year undergraduate medical programme, encompasses issues of legitimacy, academic credibility and commercial viability.

The institution of nursing can be seen as aiming to leave behind a subservient past through a drive towards professionalisation (Krogstad et al., 2004) and is now a graduate only profession (Staines, 2008); this has inevitably had an impact on the culture within the FHW leading to an increasingly technical-rational approach. As previously shown, the institution of CAM over the last twenty years has suffered a loss of credibility and at times been the subject of savage criticism in an increasingly evidence-based medical discourse (Flatt, 2013). DiMaggio and Powell's (1983) description of the various types of pressures leading to isomorphic organisational change is relevant to the development of UCLan as a 'new' university, and to the professionalisation agenda both of the institution of nursing and the much more loosely linked institution of CAM. Although in the case of nursing the pressures are normative in that the drive is to: 'establish a cognitive base and legitimation for their

occupational autonomy' (ibid:152). In the case of CAM, the pressure is mimetic in that the aspiration to imitate other accepted institutions appears to be a response to the uncertainty raised by adverse publicity and criticisms of the profession. Ironically the pursuit of legitimacy by both professions may have worked against the CAM agenda in that as nursing becomes increasingly professionalised and CAM increasingly criticised it has been strategic for nursing to distance itself from CAM.

The MSc programme of courses for CAM professionals arose out of a suite of bachelor's level courses developed in the early 1990s. The initial development of a certificate course for health professionals followed by a BSc in Health Sciences for Complementary Medicine began with nurse educator Marjorie Curtis who had identified a need for health professionals, and in particular, nurses to become better informed about CAM practices that their patients were resorting to in order to manage their health (Curtis, 1996). In the process of development of the courses Curtis increasingly engaged with the CAM practitioner community of practice (Wenger, 2000) and was:

'...astonished by the variety of training they had undergone. Compared to nurse education, it seemed very ad hoc and non-standardised' (Curtis 1996: 126).

Viewed from the wider organisational level the development of the BSc course programme in CAM would appear to be 'bottom-up' change and not necessarily part of UCLan's overall strategic plan; although this was a time of innovation and creativity in Higher Education (HE) with a willingness among post 1992 universities such as UCLan to consider the delivery of non-traditional courses within a University setting.

The establishment of BSc courses in homeopathic medicine and herbal medicine brought in a group of homeopathy and herbal medicine practitioners as lecturing and

clinical placement staff. In particular, the group of homeopaths had a history of working collaboratively in a peer supervision group. Post-qualification continuing professional development (CPD) in homeopathy and other CAM therapies tends to be predominantly informal practice-based training, leading to the development of close communities of practice (COPs) (Cant and Sharma, 1999; Wenger, 2000), as was the case with this group of practitioners. Wenger (2000) describes how pioneers from COPs may engage with other COPs and bring new knowledge and inspiration back to their home community. This situation occurred when two members of the homeopathy lecturing staff joined the European Network of Homeopathy Educators (ENHE). Their interaction with this group led to the identification of a double bind situation (Engestrom, 2001), in that both groups strongly felt that the way forward for homeopathy to raise standards was to increase educational levels within the community both in terms of education in practitioner qualifying colleges and in terms of equipping homeopaths to carry out good quality research (Partington and Foulkes, 2004). Plans were hatched for a master's level course to be delivered via e-learning and a proposal was put forward to FHW by the homeopathy team, however the initial response from their immediate line manager was not encouraging. In this situation the loose coupling of the university organisation (Knight and Trowler, 2001) worked in favour of the team's aspirations as they persisted in approaching various managers and departments for support until these 'street level bureaucrats' (Lipsky, 2010) found a way of working around the initial refusal.

The ultimate work-around strategy (Oliver, 1991) came in the shape of an alliance with another 'academic tribe' (Knight and Trowler, 2001) who held a strong commitment to the development of e-learning courses producing a £25,000 grant

from UCLan's Learning Development Unit (LDU) which released staff time to develop the course. Delivery of MSc Homeopathy began in 2006⁶.

The MSc course was designed with a modular framework within which students are able to explore their own areas of interest, for example: the historical development, philosophy, practical applications or inter-professional applications relating to their chosen mode of practice. As might be expected in a master's level course the requirement for critical analysis, reflection and evaluation forms a strong thread running through all modules and students are encouraged to bring in perspectives from the wider health and social fields. A fuller picture of the structure and setting of the courses and the pedagogical methods utilised therein will be provided later in this chapter.

The design of the homeopathy course was replicated in MSc Herbal Medicine, and MSc Integrated Healthcare which were added to the programme in 2011 following the initial success of MSc Homeopathy which in 2009-10 met 60% of the SOH recruitment target for postgraduate courses (Duckworth, 2015). There has been a high degree of student and graduate satisfaction, with high retention rates on the courses.

Following the growth of the sceptic movement as discussed above, UCLan, along with other universities delivering CAM programmes, was criticised for offering such courses. In parallel to this situation falling recruitment to the CAM undergraduate

⁶ Appendix 4 presents two 'We-poems' constructed from data extracted from the staff focus group. The first of which reflects the determination and creativity of the team, as they battled to bring their vision for the MSc Homeopathy course to fruition.

courses was compounded by financial factors such as increases in tuition fees, the economic recession and the impact of the equivalent or lower qualifications ruling upon a predominantly mature and well-qualified student population (Chatfield et al., 2012). An internal review at UCLan, whilst recognizing good practice, concluded that it was inappropriate to deliver practitioner-qualifying courses in CAM therapies until individual therapies were statutorily regulated. The BSc courses in homeopathy, herbal medicine, and complementary therapies at UCLan were discontinued by 2008. The MSc courses were not impacted by this decision as students enrolling on these courses were already qualified to practitioner level.

However negative pronouncements about CAM and about CAM education within universities continued to be raised and to an extent acquired the status of 'social facts' (Oliver, 1991:148). This, along with the financial factors mentioned above impacted on recruitment across all three MSc courses which began to fall. Further, there was an increasing number of MSc Homeopathy students transferring to MSc Integrated Health as they perceived the title to have greater capital and transferability. In 2015, in response to these factors the course team proposed to the FHW management that recruitment to MSc Homeopathy should cease and that homeopath applicants would be directed to enroll for MSc Integrated Healthcare. This was a strategic decision by the team, in recognition that MSc Homeopathy was the title that attracted the most external criticism (Colquhoun, 2007). It is still the case however, that homeopaths form the greater part of the student body.

Whilst I have been conducting my research and writing this thesis the trajectory of the MSc Integrated Healthcare course has shifted several times, most recently in July 2016 with the approval of a major change. From September 2017 the course will be known as MSc Transforming Integrated Health and Social Care, reflecting the adaptation of the course to be suitable for practitioners in conventional health and

social care settings. With the changes to the MSc Integrated Healthcare programme and recent cessation of recruitment to MSc Herbal Medicine, the overt foothold of CAM within UCLan is diminishing and becoming embedded within a more integrated model. Hence within the next few years it seems likely that there will be no CAM-specific courses remaining in the portfolio. However, the CAM/Integrated health teaching team continue to adapt to the prevailing climate, most recently with their involvement in the development of an MSc in Sustainability, Health and Wellbeing to be delivered via e-learning commencing in 2017. It is expected that this and the new iteration of MSc Transforming Integrated Health and Social Care course will attract a wide range of practitioners. This in turn will facilitate integration across the health and social care fields, allow the continuation of HE provision for CAM practitioners, and promote engagement in the vitally important integration and sustainability agendas.

E-learning

In this section of the chapter I will discuss the context and pedagogical underpinnings of e-learning or online learning, as this is the mode by which the case study MSc courses are delivered. As seen in the previous section of this chapter on the development of the courses, the need for delivery via e-learning in order to address the logistical needs of a dispersed homeopathy community was identified at a very early stage of discussions within the European Network of Homeopathy Educators.

Definitions of what exactly is encompassed in the term 'e-learning' are difficult to pin down. In 2005 the authors of the Higher Education Funding Council for England (HEFCE) report on a strategy for e-learning, and in the subsequent revision of the strategy in 2009, chose not to define e-learning in recognition of the complexity of the task (HEFCE 2005; 2009). Garrison (2011) defines e-learning as 'networked, on-line learning that takes place in a formal context and uses a range of multimedia technologies' (p4). In practice, the term e-learning is used to describe a variety of

situations encompassing delivery by wholly online methods, or in combination with traditional face to face delivery although this is more usually described as blended learning (Bonk and Graham, 2006). As previously mentioned, the MSc courses under discussion are delivered wholly online, using online study materials, synchronous group tutorials in Adobe Connect Breezerooms, asynchronous discussion boards, and individual tutorials via Skype.

Two key advantages of e-learning for students are accessibility and flexibility (Bischel, 2013). Students are able to have a greater autonomy in deciding when and where to study. The main disadvantage of e-learning relates to difficulties in socialisation. Garrison (2011) and Preece (2000) emphasise the importance of socialisation in building learning communities, highlighting that this can be a crucial element in strengthening student retention and in increasing successful outcomes of their studies. Salmon (2003) concurs with the significance of socialisation as an important aspect in becoming an e-learner and points to the requirement for e-tutors to input considerable effort into encouraging learners to connect with each other. E-Tutors hold much more responsibility for social introductions and the development of socialisation between students than those in more traditional learning environments where students can get to know each other and chat outside of lectures (Hootstein, 2002; Conrad and Donaldson, 2005). However, with the increase in use of social media, once e-tutors have facilitated introductions it seems that e-learning students are now finding it easier to connect and collaborate with each other (Dabbagh and Kitsantas, 2011). Of course, it is still possible for students to be successful e-learners without social activity with their peers, but successful socialisation does seem to offer a distinct advantage (Anagnostopoulou et al., 2009). A further issue with online learning environments relates to technological difficulties; this can be due to equipment failure, or to students' unfamiliarity with the media. To mitigate against these issues, the MSc teaching team include a protracted induction process wherein

students are assigned a series of tasks to introduce them to the various technologies, to facilitate familiarisation with their tutors, and socialisation with their peers.

Although forms of e-learning have been used within HE for some time now (Garrison, 2011), much of the provision is still a blend of face to face and computer mediated communication (CMC) (Moule et al., 2010). The advent of e-learning technologies was expected to revolutionise and disrupt HE (Laurillard, 2004) by widening access, encouraging lifelong learning and contributing to the further democratisation of HE by 'breaking down the elitist walls of the ivory tower' (Carr-Chellman, 2005). Yet whilst e-learning technologies are being utilised to enhance traditionally delivered courses; the full potential of e-learning technology and delivery has still to be realised with a relatively small proportion of HE courses being offered wholly via e-learning.

Attitudes towards e-learning within HE vary considerably, from enthusiastic adoption to resistance and minimal utilisation (Nichols, 2008; Matthews, 2017). Petit dit Dariel et al.'s (2013) exploration of academics' attitudes to the adoption of e-learning in nurse education suggests there are four broad positions taken by teaching staff: e-learning advocates who enthusiastically engage with online learning methods; humanists, who fear that they will miss out on the personal interactions available in an attendance course; sceptics, who may have previously had a bad experience and are sceptical about the impact of online learning upon intended learning outcomes; and pragmatists, who mainly use the virtual learning environment (VLE) to post up teaching materials such as PowerPoints after delivery in class. Herkis's (2017) research into academic attitudes to innovative teaching methods, including online learning, showed that fear of appearing stupid was also a factor that held some lecturers back from engagement with technology-based learning (Herkis, 2017; Matthews, 2017). Serdyukov's (2015) paper exemplifies several commonly-held assumptions about online learning which should be challenged. Such assumptions seem to stem from a standpoint of undergraduate education where students are predominantly but not

exclusively school-leavers and are thus characterised by Serdykov as technology-savvy, with a short attention-span; whilst instructors are described as mostly middle-aged and 'not very friendly with new technologies' (ibid: 62). I suggest that such limited thinking does a disservice to the wide and varied landscape of online learning, and to the teachers and learners engaged within it.

Boyer et al. (2006) also suggest that some educators question the depth of learning that can be possible via online delivery of teaching and learning. In a phenomenological study of graduate students' experience of a primarily online course, which used a content analysis of students' reflective writings, Boyer et al. concluded that transformative learning involving changes in students' previously held assumptions, habits or beliefs, was evident in the online course under investigation (ibid). As my findings will show, I concur with Boyer et al. as to the potential of e-learning courses to deliver transformative learning experiences, although I suggest that transformation may take place at an even deeper level (Illeris, 2014a). An in-depth exploration of the theories of Transformative Learning (TL) (Mezirow, 2000) follows in Chapter Two.

The development of a sense of community is seen as vital in the success of teaching and learning via e-learning delivery (Garrison, 2011). Wenger's (1998) social constructivist perspectives on the furtherance of learning suggests that collaboration and interaction with peers affords learners an opportunity to encounter alternative perspectives and that this in turn can promote optimum conditions for deep learning. Groves and O'Donoghue (2009) citing Kolb (1984) contend that collaborative models of learning, often found in online programmes, lead to 'reflection, self-evaluation, and the initiation of new learning' (Groves and O'Donoghue, 2009:143). This concurs with McKimm et al. (2003) who suggest that in addition to the enhancement of learning, and the provision of course materials, appropriate use of technology may encourage greater autonomy and proactivity in students. However, it is important that the

driving force is the suitability of pedagogical design rather than the technology (Downing, 2001).

The pedagogy of E-learning

Pedagogy is generally defined as: 'the study and theory of the methods and principles of teaching' (Collins English Dictionary Online, n.d.). Referencing the historical and etymological development of the term which was based on the ancient Greek practice of slaves leading children to school, Watkins and Mortimore (1999:3) emphasise the action inherent in the term preferring to define it as: 'any conscious activity by one person designed to enhance learning in another'. Knowles (1996) famously disputes the use of the term pedagogy in connection with the teaching and learning of adults, and highlights differences in the learning processes between children and adults. Whilst in agreement with Knowles' observations, for the purposes of this thesis I will persist with the convention of using the term pedagogy in connection with adult learning to reflect dominant usage (Beetham and Sharpe, 2013).

In this section of the chapter I present an overview of the pedagogy of e-learning, which is necessarily part of the theoretical context in which my study is situated. The primary focus of my research question is the outcome and impact of an MSc programme on CAM practitioners' professional lives, and therefore does not explicitly reference pedagogy. However, it is implicit in that any study which explores graduates' experiences of a programme has the capacity to identify learning with respect to the pedagogical implications. Further, as a professional doctorate this particular case study presented an opportunity to identify good practice and to extend and elaborate on the application of appropriate pedagogies within online learning settings. The contribution of this thesis to the practice and pedagogy of e-learning is explored in Chapter Seven: Discussion.

My interest in this case study was intrinsic, that is to say that I was interested in gaining a clear picture of the case itself and initially did not have a specific research question in mind (Stake, 1995) as will be discussed in Chapter Three: Methodology and Methods. As I sought to clarify my ideas and the direction of my research I considered focussing my attention on the phenomena of communities in online learning. Ultimately however, my overriding interest was in the impact of MSc studies on the professional lives of CAM practitioners and this is where I chose to focus my study and the development of my research question. Through identifying the key characteristics of professional life as professional identity, practice and community of practice I retained some consideration of community albeit in the terms of community of practice (Wenger, 1998) as will be discussed in Chapter Two: Theoretical Perspectives. The pedagogical models of Community of Inquiry (Garrison), Communal Constructivism (Holmes and Gardner, 2006), or Connectivism (Siemens, 2005; Anderson, 2011) are however still relevant in terms of identifying significant aspects of the case study courses, and in leading to recommendations for future research and practice. These community/collaborative pedagogies will be discussed later in this chapter. Firstly, however I will consider pedagogy in general with reference to online learning settings, followed by the potential application of three major pedagogic approaches.

It could be asserted that online learning is in itself a subdivision of learning in general (Anderson, 2004, citing Garrison and Shale, 1990), indeed much of the pedagogy of e-learning relates directly to existing educational theories. In addition to this obvious foundation, the conceptualization of e-learning also incorporates building-blocks from 'psychology, computer science and sociology' (Holmes and Gardner, 2006:77). However, there is some debate as to the transferability of existing pedagogical theories to this relatively new learning environment and whether the advent of technology-enhanced learning necessitates the development of a new online pedagogy (Homes and Gardner, 2006; Serdyukov, 2015). Nichols (2003) suggests that

it is more appropriate to consider e-learning as a means of education rather than a mode of education, he points out that e-learning is not an education system in itself but a range of technological tools that can be used in a variety of educational contexts. Nichols describes e-learning technology as 'pedagogically neutral' (2003:4), suggesting that e-learning can be used within various pedagogical models; and that it is the approach to teaching and learning that determines whether or not a learning activity is instructivist or constructivist rather than a particular technology or technique being used. However, this view is contested, as Laurillard (2013) points out: although there is continuity within education in terms of the understanding of how students learn, the intertwining of pedagogy and technology within e-learning naturally has an impact:

'Digital technologies trigger a different kind of relationship between the teacher, the learners, and what is being learned. Yes, we do need to keep rethinking the style and scope of pedagogy as the digital age continues to throw up new technology-driven challenges.' (Laurillard, 2013: xvi)

Serdyukov (2015) declares that online education still lacks a dedicated pedagogy and raises concerns that pedagogy has become subsumed within a technology-driven learning environment. It is imperative that technologies should not be seen as an end in themselves, but rather as tools which mediate teaching and learning (Holmes and Gardner, 2006). In contrast to Nichols' (2003) perception of e-learning's pedagogic neutrality, Serdyukov (ibid.) offers a strong argument for the development of an 'e-pedagogy' which should:

'...describe current educational theories and methodologies; identify the purpose of education and basic principles of online education built on research and understanding of the traditional and web-based learning together with current trends and future

developments; consider the processes of learner personal, cognitive and social development.’ (2015:70).

Holmes and Gardner (2006) identify three main theories which underpin the pedagogy of e-learning: Behaviourism, Cognitivism, and Socio-Constructivism. They suggest that, whether in the broader context of learning in general or in online learning in particular, these major theoretical traditions are rarely employed in isolation:

‘Arguably all three perspectives occur to some extent in any learning context with much overlap in activity and their objective to increase a learner’s knowledge.’ (Holmes and Gardner, 2006:78).

I will now briefly examine the potential application of each of these theoretical traditions in the context of online learning, before going on to discuss the emergence of community/collaborative e-pedagogies.

Behaviourism

The underpinnings of the behaviourist pedagogy arise from the work of psychologists Pavlov, Skinner and Watson (Holmes and Gardner, 2006). Based on notions of the impact of consequences on behaviour, behaviourist techniques assume that specific behaviours can be taught with sufficient repetition and reinforcement with appropriate stimuli (Holmes and Gardner, 2006; Aubrey and Riley, 2016). This emphasis on conditioning to instill automated responses is criticised as ignoring the place of the student’s own cognitive processes in learning (Holmes and Gardner, 2006). At first glance, there seems little place for behaviourism within Higher Education in general and within a master’s level course delivered by e-learning in particular. Although, one might discern traces of behaviourist approaches used in combination with elements of Vygotskian scaffolding (Aubrey and Riley, 2016) within the induction processes necessary to facilitate students’ negotiation of the online

learning environment (e.g. in learning to navigate the Virtual Learning Environment (VLE) or to successfully participate in synchronous online tutorials). Holmes and Gardner (2006:81) suggest that the application of the 'drill and practice' behaviourist approaches within the online setting might be utilised in some aspects of the teaching of mathematics or in the use of multiple choice questionnaires; however, this approach is not emphasised in the underpinning pedagogies of the case study MSc courses.

Cognitivism and Socio-constructivism

In contrast to behaviourism, cognitivism focuses on the mental processes by which individuals learn, including: perception, memory, the formation of concepts and the use of problem solving (as exemplified in problem-based learning techniques) as a way of demonstrating learning (Holmes and Gardner, 2006; Race, 2015; Aubrey and Riley, 2016). Cognitivism recognises that students are not passive receptors of knowledge but creators of their own meanings and understandings as they interact with bodies of knowledge and make adjustments to their existing meaning schemes (Rogers, 2002; Scales, 2008). Widely-accepted and utilised within HE, this pedagogical approach fits well within an e-learning context where students may have a higher degree of autonomy than within a traditional classroom situation. The technique of scaffolding, which arises from the cognitivist perspective of a graduated progression in learning development, provides stepping-stones in the form of resources and tasks which aim to lead students to increasingly higher levels of learning, development or understanding (Holmes and Gardner, 2006). The use of scaffolding techniques is eminently suitable in facilitating students' introduction to the e-learning environment, in addition to the more traditional use in supporting a progression of learning at increasingly higher levels.

Building on the foundations of cognitivism, socio-constructivism recognises the impact of society and social interactions upon the learner's meaning-making processes (Bartlett and Burton, 2016). The socio-constructivist perspective defines learning as: 'social; reflective; authentic; scaffolded; progressive; experiential' (Holmes and Gardner, 2006: 84). Socio-constructivism's emphasis on social processes of learning has in turn informed the emergence of several collaborative or community based pedagogies as will now be discussed.

Community or collaborative e-pedagogies

Despite the challenges of socialisation in online learning, several theorists propose the emergence of community or collaborative pedagogies such as: Communal Constructivism (Holmes and Gardner, 2006), Communities of Inquiry (Garrison, 2011), and Connectivism as proposed by Siemens (Siemens, 2005; Anderson, 2012). Holmes and Gardner (2006) suggest that the impact of technological advances in communications, information storage and retrieval upon teaching and learning necessitates an expansion of the concept of socio-constructivism. In contrast to the more limited local class-based learning environments in which socio-constructivism was originally conceived, they suggest that e-learning offers a vast variety of interactions, opportunities for support, and for accessing, constructing, storing and disseminating knowledge. They define communal constructivism as:

'...an approach to learning in which students construct their own knowledge as a result of their experiences and interactions with others, and are afforded the opportunity to contribute this knowledge to a communal knowledge base⁷ for the benefit of existing and new learners.' (Holmes and Gardner, 2006:86)

⁷ See Appendix Five for a list of 27 examples of student and graduate publications arising from their MSc studies on the case study programmes, thus demonstrating the extent of their contributions to their communal knowledge base

Garrison (2011:9), bases his notion of communities of inquiry within e-learning settings upon a 'collaborative constructivist view of teaching and learning' proposing that:

'The teaching and learning transaction is a coherent representation and translation of the dynamics of a collaborative and constructive educational experience. The recognition of these two interests is crucial in constructing a theoretical framework through which we can understand and apply e-learning for educational purposes' (Garrison, 2011:10).

Siemens' (2005) theory of connectivism argues that the learning landscape has changed dramatically, and continues to change rapidly with the advances in the internet's capacity for the electronic storage, retrieval and dissemination of information. Rather than needing to permanently acquire or construct knowledge which can quickly be accessed externally, learners need to develop new skills in discernment and evaluation:

'Connectivism is driven by the understanding that decisions are based on rapidly altering foundations. New information is continually being acquired. The ability to draw distinctions between important and unimportant information is vital. The ability to recognize when new information alters the landscape based on decisions made yesterday is also critical.' (Siemens, 2005: paragraph 25)

Anderson's (2012) standpoint is based on Siemens' connectivist model. He too highlights the ability of online learning to enhance collaboration, and emphasises the

potential brought by the aspect of independent study which may be seen to encourage learners' autonomy and self-direction.

Providing a link between such collaborative e-pedagogies and Lave and Wenger's (1991) concept of Communities of Practice⁸ (COPs), Wilson et al. (2004) make a case for online communities of students, which they term 'bounded learning communities' (BLCs), being a particular kind of COP in which:

- 1. The major enterprise is intentional learning, completing required activities, and performing well on course assessments*
- 2. The group membership is based on course enrolment and team assignment*
- 3. Resources are shared and interactions conducted under the guidance of an instructor (Wilson et al., 2004:1496)*

In contrast however to the more spontaneous, informal structures of COPs, in the case of BLCs the tutors have necessarily set up the structure, guidance and resources prior to the commencement of the course. Lave and Wenger (1999), writing of pedagogy and COPs, argue that COPs instigate a decentering of 'common notions of mastery and pedagogy' (p.22) which is echoed in Laurillard's (2004) and Carr-Chellman's (2005) conceptualisations of the potential of online learning to revolutionise and disrupt traditional roles and norms within HE. I suggest that the use of collaborative pedagogies within online learning contributes to this decentering disruption, and that the resultant blurring of traditional expert/learner roles is ultimately empowering for both teachers and students.

⁸ Lave and Wenger's (1991) conceptualisation of Communities of Practice and its further relevance to this case study will be discussed in detail in Chapter Two: Theoretical Perspectives

Having provided an overview of the potential application of three major theoretical approaches in online learning settings and the emerging field of collaborative e-pedagogies, I now turn to a consideration of pedagogy in the context of master's level education via e-learning.

Pedagogy in master's level education.

The QAA Framework for Higher Education Qualifications level descriptors for HE Level 7 set out expectations that students qualifying at Level 7 will have demonstrated:

- *'a systematic understanding of knowledge, and a critical awareness of current problems and/or new insights, much of which is at, or informed by, the forefront of their academic discipline, field of study, or area of professional practice;*
- *a comprehensive understanding of techniques applicable to their own research or advanced scholarship;*
- *originality in the application of knowledge, together with a practical understanding of how established techniques of research and enquiry are used to create and interpret knowledge in the discipline;*
- *conceptual understanding that enables the student:*
 - *to evaluate critically current research and advanced scholarship in the discipline;*
 - *to evaluate methodologies and develop critiques of them and, where appropriate, to propose new hypotheses.'* (QAA, 2008:20)

The emphasis is on criticality in awareness, understanding, and evaluation, and the demonstration of advanced scholarship. It is appropriate here therefore to consider

the application of critical thinking and critical pedagogy to master's level education (Burbules and Berk, 1999).

Critical approaches to education

As previously stated, learning at HE level 7 necessarily entails students' development of critical skills. The use of critical thinking and/or critical pedagogy is eminently applicable in the context of teaching at master's level.

Burbules' and Berk's (1999) comparison of critical thinking and critical pedagogy points to their commonalities, whilst highlighting a surprising lack of cross-discussion between these two influential traditions. It is self-evident that both approaches encourage learners to be critical and sceptical towards accepted knowledge: 'Each says in its own way, "Do not let yourself be deceived".' (Burbules and Berk, 1999:1). While critical thinking is concerned with epistemic adequacy, encouraging learners to discern and challenge weak arguments, sloppy thinking, and flawed logic (Paul, 1994); critical pedagogy encompasses critiquing the political structures and power dynamics in which knowledge is situated. Critical pedagogy therefore implies a drive towards social action, as exemplified by one of its key proponents Paulo Freire (1921-1997) (Smith, 2002). However, Walters (1994) points out that critical thinking also offers the potential for emancipation:

'Instruction in thinking skills should not only improve a student's ability to fairly and reasonably investigate knowledge claims and arguments. It should also provide the student with strategies for personal emancipation from biases and predispositions that blinker her thinking. (Walters, 1994:177)

Although Burbules and Berk (2004) state that while critical thinkers' development of discernment may make them more likely to challenge institutions and authorities they

suggest that this would be in essence a side-effect of critical thinking rather than a pre-defined purpose.

Critical pedagogy has an emphasis on challenging the dominant hegemony of the learner's situation and culture, strengthening subcultures, and emancipating people from oppression (Nesbit et al., 2004). Freire coined the term 'conscientisation' to describe the process of learners developing a critical consciousness which in turn leads to a liberatory praxis which encompasses reflection and action (Burbules and Berk, 1999). Critical pedagogues see the teacher as a midwife helping learners to draw out their own tacit knowledge and developing it, rather than the teacher as a banker depositing knowledge in learners' minds (Nesbit et al., 2004). This model implies that teachers support learners to learn but do not expect them to think in the same way as they do. However, this is challenged by Burbules and Berk (2004), who point to the implicit assumption of the need for social action and democratisation.

The online learning environment with its disruption of traditional norms and roles lends itself well to both critical thinking and critical pedagogy. Implicit in both approaches is the use of a dialogic method, encouraging learners to discuss their experiences and ideas which are in turn reflected back by the teacher to facilitate deconstruction and critical analysis (Nesbit et al., 2004). The use of 'problems' to encourage students' criticality may be found within both approaches, either in the form of 'Problem-Based Learning' (PBL) (Savin-Baden and Wilkie, 2006), or 'problem posing' which Freire saw as the key to initiating critical dialogue (Shor, 2002). As will be discussed in Chapter Two: Theoretical Perspectives, Freire's critical pedagogy is an acknowledged influence on Mezirow's conceptualisation of Transformative Learning theory which aims to encourage learners to transform their meaning schemes or frame of reference by which they understand the world (Mezirow, 2000).

Having considered the contextual and pedagogical aspects of online learning, I now conclude the chapter by recounting my own story as a CAM practitioner and educator.

My story

Critical reflection offers a vital development tool for educators. Our reflections may be prompted by any of four interconnected lenses: the autobiographical lens, the lens of our students' perspectives, the lens of our colleagues' perspectives and the lens provided by perspectives drawn from the literature (Brookfield, 1995). My research into this case has enabled my engagement with all four of these lenses. My resulting reflections are threaded throughout this thesis in my responses to the literatures, and to the perspectives of students and colleagues. As will be further discussed in Chapter Three, whilst not framing my study within an ethnographic methodology, I recognise the parallels between my reflexive approach and autoethnography and see it as an important method of strengthening the validity of my work (Brookfield, 1995; Adler and Adler, 2008; Costley et al., 2010; Ellis et al., 2011). In this section of the chapter I focus through the autobiographical lens, as I tell the story of my journey into HE, before going on to consider my multiple situatedness within this research.

I am a homeopath, a senior lecturer, and a doctoral candidate. In my personal and professional life depending on my audience, I am likely to receive different reactions to this information varying from interest, puzzlement, admiration, surprise, dismissal, jokes about charlatans, and occasionally outright scorn. Perhaps not surprisingly, the identity which causes the most controversy is that of homeopath. Yet this wasn't always the case. When I began to train as a homeopath in 1992, most people didn't know what homeopathy was, or might have a vague idea that it was a complementary therapy, typical comments would be: 'Is it like herbal medicine?' or: 'Do you use oils?'. Now in 2016 many people are still unaware of exactly what homeopathy entails, but there are new stock phrases that arise such as: 'Hasn't homeopathy been shown not

to work?'; and consistently in the press: 'Homeopathy, which has been shown to be no more than placebo.' (NHS, 2015; Wiseman, 2015).

As an academic working within HE I have experienced the heady optimism of the late 1990s when HEIs were enthusiastically validating degree courses in herbal medicine, homeopathy, and other CAM therapies; and the ensuing criticism of 'mickey mouse courses' (Colquhoun, 2007). As a CAM practitioner who has at times been mocked via social media and seen colleagues attacked via sceptic blogs, I have at times found the anti-CAM discourse disheartening. If I had no stake in CAM I might interpret this as robust critique, although the unprofessional language and expression often used in such critiques might give me pause (Beaumont, 2016). I do see the critique of CAM as having been useful to the profession in many ways for example in improving standards, and encouraging a much-needed self-critique within the profession. However, I have also experienced the negative impact of the critique of CAM such as long-established courses in both private colleges and HEIs closing down.

My own career as a CAM practitioner began in 1996 and my career as an educator began shortly after, initially in adult education and private homeopathy colleges and since 2000 in HE. Much of my teaching work has had a focus on CAM, giving me a strong sense of a symbiotic relationship between these parallel careers, which sometimes directly crossed over such as in the nine years I spent running a clinical placement for the BSc in Homeopathic Medicine at UCLan. A third strand in my portfolio career, that of researcher, was a side effect of my strategic decision to gain an MSc to facilitate my path into HE. My MSc research focused on the factors which helped and hindered homeopaths in setting up, developing and maintaining a practice after graduation. I further developed my interest in the experience of CAM practitioners as I took on various research projects for my registering body, the Society of Homeopaths (SOH). Additionally, since beginning my doctorate in education

I have taken on a consultancy post as an education liaison consultant for the SOH, in which I support the work of the professional standards department, liaising with and visiting private homeopathy colleges who offer practitioner qualifying courses.

I used to joke that my decision to study for a doctorate in education was the result of peer pressure, as the two colleagues I work with most closely were both engaged in doctoral studies. However, on the surface, it was more a case of having become increasingly interested in education through professional development activities, and my perception of the accessibility of a professional doctorate format. Digging deeper into my motivations I saw the possibility of doctoral study perhaps expanding and diversifying my role at UCLan, where as a CAM practitioner with a very part-time post within a school predominantly run by nurses I sometimes felt like a very small alternative fish in a very big biomedical pond. I need here to recognise that this decision in itself suggests a sense of my own pragmatic compliance with the dominant hegemonic discourse.

At the beginning of my doctoral studies I considered myself neither a novice nor an expert researcher. However, the step up to doctoral research was somewhat daunting. I had a vague idea of what I wanted to research but kept asking myself, and anyone who would listen 'Is it doctoral enough?'. My choice of topic seemed to me to be a logical follow on from previous projects researching homeopathy practice and practitioners, and from my work as a homeopath in which I am accustomed to being able to follow-up the impact of the interventions that I have prescribed for my patients. As an educator I had repeatedly found myself wondering about the impact of the courses that I was involved in delivering to CAM practitioners. My choice of case study was fitting given the uniqueness of the case I wished to capture, however, looking back now I can also see the parallels with my work with patients, where I attempt to gather a broad range of information to construct a holistic picture of the

person and their situation (Thompson and Weiss, 2006; Eyles et al., 2010). This decision in itself can be interpreted as a representation of my overlapping professional identities, as I will now discuss.

Reflecting on my multiple situatedness within the research

The photo below provides a tangible example of my multiple situatedness within UCLan and in my research. Having got through three years of doctoral study with just a staff identity card, although feeling at times very much like a student I was amazed to find that when I wanted to book a study room in the library I could only do so with an official student identity, hence the generation of my student ID card. Recalling Engstroms's (2011) activity theory, I reflected on how these two 'mediating artefacts' (Vygotsky 1938/1970 cited in Stahl, 2000) represented the oscillation between two of the identities I hold within the UCLan activity system.



Figure 1 An illustration of my multiple situatedness

As a CAM practitioner who has undertaken higher education I have reflected on my own practice and experience both of HE and of practising a CAM discipline. Additionally, as both a senior lecturer teaching on these courses and a UCLan doctoral candidate I have reflected on my various roles within the UCLan organisation and the

impact of my own educational journey upon my practice as an educator (Costley et al., 2010; Drake and Heath, 2011).

'Reflection upon current practice, evaluation of your research work against university criteria and adoption of a reflexive approach to your work are crucial aspects of the learning in work-based projects. Self-development in this area requires you to understand your professional self in relation to your personal self.' (Costley et al., 2010)

I have primarily undertaken this research from the position of my work as an educator and a researcher. As a member of the CAM community of practice and therefore of a contested profession, and as an educator employed on a .2FTE⁹ contract within a large organisation I am acutely aware of potential parallels between my own situation and that of students and graduates from the MSc courses in Homeopathy, Herbal Medicine, and Integrated Healthcare, and will return to this topic in my final chapter.

Chapter summary

This chapter has presented an account of the organisational and political background of my case study in terms of the evolution and status of CAM, the education of CAM practitioners in HE, the local setting of CAM education at UCLAN, and a consideration of pedagogy in the context of e-learning at master's level, followed by my own story and position in the case. The final pieces in this scene-setting jigsaw have been reserved for presentation in Chapter Five: Introducing the graduates which begins the presentation of findings from my research. In Chapter Two I now turn to providing the theoretical context with a consideration of the main theories that have influenced my research.

⁹ Whilst writing this thesis I have been offered and accepted an increase in my UCLan contracted hours from .2FTE to .7FTE.

Chapter Two: Theoretical perspectives

'I recognise that what I am about to say is my own construction, not necessarily an objective (whatever that may be) analysis.'

(Guba, 1990: 17-18)

In this chapter I present the theoretical perspectives that have informed the foundations of my research. As in the quote from Guba above, whilst acknowledging the inherent subjectivity in my selection of perspectives, I aim to present a reasoned and rational account of key theories which are critical to understanding the findings of my study. I begin the chapter with a consideration of my epistemological and ontological stances and how they influenced the design and conduct of my research. I then explore theories in three areas which are directly relevant to the findings of my research: identity theory, theories of transformative learning, and communities of practice.

Epistemology and ontology

My epistemological stance is constructionist/constructivist (Crotty, 1998), this combined stance resonates strongly with my view of how knowledge is constructed, both in the collective, social and cultural generation of meaning (constructionist); and in the generation of meaning through 'the individual mind and unique experience of each of us' (constructivist) (Crotty, 1998:58).

According to Crotty, constructionism can be defined as:

'...the view that all knowledge and therefore all meaningful reality as such is contingent upon human practices, being constructed in and

out of interaction between human beings and their world, and developed and transmitted within an essentially social context.' (1998:42).

Falling within the interpretivist paradigm and contrasting sharply with the objectivism of the positivist paradigm, constructionism does not deny the existence of the objective world; rather the constructionist epistemology holds that the meaning of concepts, objects or experiences is impossible without a consciousness to construct or generate meaning. Truth or meaning is therefore constructed from both objectivity and subjectivity. Constructivism whilst focusing more on the individual generation of meaning is sometimes criticised as lacking criticality; if meaning is unique to each person then it cannot be critiqued. Constructionism by contrast is said to encourage criticality (Crotty, 1998).

A qualitative approach demands that researchers take a holistic view of the phenomenon being investigated including the effect that their own personal story has on the research process; as described by Preissle:

'...we are studying ourselves studying ourselves and others. If we can no longer use detachment, distance and neutrality to achieve objectivity, we can at least document and track how what we study is influenced by who we are.' (2006:691).

Indeed, I must recognise that my interpretation of taking a holistic view relates not just to qualitative research, but also to my experience and values as a CAM practitioner. The key tenet of holism is most frequently described as the whole equaling more than the sum of the parts (Smuts, 1926). My understanding and application of holism also encompasses Smut's notion of the possibility of different levels of explanation, with no one level being superior to another, thus bringing the potential of 'laddering' up or down from level to level (Smuts, 1926). For example, I might look at a health problem from personal, biochemical, sociological, or ecological

levels among others, with each level having the potential to offer a valid explanation. Hence when I discuss theoretical perspectives that have informed my research I do not intend to imply that any one theory is superior to another, although I do at times express my own resonance with a particular stance.

Wisker (2008), citing Schön (1983) discusses the benefits of reflective practice for researchers, describing the reflective cycle of creatively drawing on past experiences and precedents, as they: 'learn anew in each situation, bringing their past learning to bear on the new situation.' (Pp95-96). Reflective practice is a familiar mode of working and one in which I regularly engage both in my practice as a homeopath and as an educator. As a CAM practitioner, an educator, a researcher and a student I have primarily taken an emic or insider perspective (Drake and Heath, 2011). As discussed in Chapter One and as will be expanded on in Chapter Three, this perspective also weaves an autoethnographic thread into my thesis (Ellis et al., 2011). As an insider researcher I have necessarily engaged in personal reflexivity to monitor my own values and biases, and their impact on the research (Costley et al., 2010). Additionally, engagement in epistemological reflexivity throughout the project has been vital to facilitate my awareness of my assumptions about how knowledge is constructed and the implications of this for my research design, implementation, analysis and findings (Sanders and Wilkins, 2010). Indeed, during the writing of this chapter I re-interrogated my epistemological stance to check that it was still coherent with how I conducted my research and how I analysed the data and constructed the findings.

I chose to work from an interpretivist perspective, using a qualitative approach, which is suitable for generating rich descriptions and depth of understanding of the influence of Master's level study within an online, international group upon CAM practitioners, their practices and the wider CAM community. The interpretivist paradigm is essentially concerned with meaning and the quest to understand a shared definition of a situation (Schwandt, 1994). Ontology is assumed to be relative; knowledge and meaning being

perceived as acts of interpretation. Within the interpretivist paradigm, epistemology is primarily assumed to be subjective, building a second order theory or interpretation of members' theories (Schutz, 1973).

Identity theory

As previously discussed, given that one of my primary research questions was how CAM practitioners' professional identities were impacted by their studies I felt that it was important to build a foundational understanding of identity theory in order to construct the groundwork from which to meaningfully examine the impact of post-graduation education upon the professional identity of CAM practitioners. However, as will become evident, during my analysis of the findings I realised that identity theory was directly relevant to my research on two counts. Firstly, the close and sometimes inextricable link between personal and professional identity meant that for some graduates, changes to their professional identity also strongly impacted on their sense of personal identity. Secondly, as will be expounded upon later in this chapter, this also related to Illeris's (2014a) emphasis on changes at the level of identity being indicative of a Transformative Learning experience.

I do not aspire to comprehensively cover the full gamut of identity theory in this section, but rather to offer an overview of aspects that are relevant to my research. I begin by looking at the foundations of identity theory in the works of Charles Horton Cooley, and George Herbert Mead, followed by an overview of contemporary identity theory, and a discussion of theories around cultural and professional identity. I then discuss the formation, development and negotiation of CAM practitioners' professional identity. The section closes with an interwoven I-poem containing 5 voices, including my own, extracted from a focus group conducted with teaching staff on the MSc courses. The extracted fragments of text present staff members' thoughts upon their own professional identity.

Terms used

The terms 'self', 'self-concept', 'identity', 'central identity', and 'core identity' are often used interchangeably in the literature and may be seen to have overlapping meanings (Oyserman et al., 2012). In particular, where 'identity' is used in the singular it is often used synonymously with 'self'; whereas the plural: 'identities' tends to be used to refer to aspects of the self. In this discussion I attempt to be consistent in my usage of 'self', 'self-concept', or 'central identity' to indicate the sense of who one is that feels consistent across time and various contexts; and 'identities' to be psychodynamic and socially constructed aspects of the self (Clarke, 2008; Illeris, 2014a). However, at times according to sources cited this usage may blur as I follow the relevant author's preference.

The foundations of identity theory

The foundations of contemporary identity theory are primarily built upon the works of William James, Charles Horton Cooley, and George Herbert Mead. As far back as 1890, James posits the notion of multiple selves or identities:

'Properly speaking, a man has as many social selves as there are individuals who recognize him and carry an image of him in their mind.' (James, 1890/2004: paragraph 9, emphasis in original)

Expanding upon the work of James and his concept of multiple selves, Cooley (1902) sees the sense of self as being developed by social interactions with others. Given the position of CAM practitioners working within a contested professional landscape, where how they perceive they are viewed can have a direct impact on how they perceive themselves both as individuals and as professionals, Cooley's notion of the 'Looking glass self', seems very relevant to my study. For Cooley the individual and society are inextricably linked in the process of identity formation like 'two sides of the same coin' (Burke and Stetts, 2009). He theorises that people base their self-

concept on their understanding of how they are perceived by others, he terms this 'The Looking-glass self' (Cooley, 1902; Isaksen 2013, Burke and Stetts 2009, Bolender nd).

According to Cooley's theory, as individuals existing in social groups we imagine how we appear to other people, what judgements they make about us, and what feelings they hold towards us. Our imagination of what other people are thinking about us may be correct or may be wrong. However, we may (and often do) go on to change our behaviour, based on how we feel that we have been perceived (Isaksen, 2013). Cooley identifies the importance of emotions in social interaction and the resulting impact upon self-concept which is positive in situations where a person feels that their view of themselves is validated by others; however, negative emotions such as mortification are a consequence in situations where the opposite occurs. Examples of such a reaction will be shown in the findings in Chapter Six, where participants describe the impact of the negative discourse around CAM upon their professional identity. Arising from Cooley's work, the importance of the emotions forms a key aspect of identity theory (Burke and Stetts, 2009).

George Herbert Mead (1934) is credited with the development of a related and more widely-known school of thought in which the emphasis is shifted towards social behaviour; Symbolic Interactionism (SI) offers theories about both the construction and the function of identities (Burke and Stetts, 2009). Like Cooley, Mead sees the self and society as closely linked and constitutive of each other in a continuous feedback loop of communicative social acts (Bolender, 2013). A crucial contribution to contemporary identity theory is Mead's observation that we have the capacity to recognise ourselves with reflexive awareness, thus treating the self as an object, or 'the other' (Burke and Stetts, 2009). Taking the role of the other allows us to imagine

how we may be viewed from other standpoints; this perception influences behaviour and the refinement of the self-concept.

An often neglected aspect of Mead's theories is that of the interconnection of temporality with the ongoing development of the self:

'For Mead, time, self and sociality interconnect: the self is a social phenomenon and also a temporal one, reflecting back on itself, in time and forward from the present in anticipating others' responses and orienting future action in the world. It is always in the process of becoming as well as being.' (Jackson, 2010)

Jackson (2010) notes that reflexivity cannot take place without a temporal aspect, that is to say that as we think about ourselves and our actions we look back at past events, or forward to imagine future possibilities. However, both the future and the past are constructed and re-constructed from the standpoint of the present. This is relevant both to the research participants' reflections on their experiences and the impact of their studies, and my own reflexive efforts during my research and writing processes. How the graduates' viewed their positions prior to and after their studies is inevitably constructed from the standpoint of that present moment during their interviews. In terms of my own reflexivity through the writing process, I have the luxury of being able to revisit my thoughts and to trace the evolution of my theories, however I am always doing so from my own present moment.

Undoubtedly both Cooley and Mead have contributed to the intellectual heritage of identity theory (Burke and Stetts, 2009). In particular, Stryker's further development of Mead's SI into Structural Symbolic Interaction (SSI) has had a great impact (Burke and Stetts, 2009). The main difference between SI and SSI being that whilst SI views

society as continually changing through the actions of individuals, SSI sees society as more stable and consistent, resulting in patterns of interactions between individuals. Society is seen as pre-existent to the person, defining boundaries and influencing individuals' tendency towards the development of particular kinds of interactions, relationships, motivations and identities (Stryker and Vryan, 2003:22 cited in Burke and Stetts, 2009:35). SI and SSI can be seen to be relevant to this study in terms of the impact of social structures (for example, the hegemony of biomedicine) upon the professional lives and self-perceptions of CAM practitioners.

Contemporary identity theory

As can be seen from the above explorations of the construction of the self-concept and the origins of identity theory, the concept of identity is complex and multifaceted. Further influences upon identity theory can be found in the disciplines of philosophy (for example: Hume, Locke), psychology (for example: Erikson, Freud) and sociology (for example: Bauman, Giddens). For the purposes of this section of the chapter I will mainly consider identity from psychological and sociological perspectives, as these are the standpoints I consider to be most pertinent to my research.

The difficulty of offering a single overarching definition of identity is highlighted by Lawler (2014), who cautions that context is vital: 'what identity *means* depends on how it is *thought* about.' (p.7 emphases in original). However, whilst bearing Lawler's caution in mind, it is nevertheless useful to include some attempts at definition.

For structural social psychologists Burke and Stetts (2009), identity is:

'the set of meanings that defines who one is when one is an occupant of a particular role in society, a member of a particular

group, or claims particular characteristics that identifies him or her as a unique person.’ (2009:3).

Burke and Stetts (2009) see multiple identities as being ‘possessed’ by individuals according to their different roles in the context of their different roles in life, their membership of various groups, and their personal characteristics; with the meanings of such identities shared and defined by members of society (Burke and Stetts, 2009). Lawler (2014), disputes that identities can be possessed by individuals, suggesting that identity-making is: ‘a social and collective process’ (p2) ‘something achieved rather than something innate, as done rather than ‘owned’.’ (2014:5). Both Goffman (1963) and Foucault (1977) understand identity as a social construction that is imposed by societal norms; for Foucault (ibid) this was through the mechanism of expert discourses defining ‘normal’ and ‘deviant’ which drive us to align our sense of self with the dominant discourse.

Lawler’s (2014) view of identity as a process concurs in some ways with sociologist Giddens (1991) who, working from the context of a late-modern, globalised society prefers the term self-identity which he defines as:

‘...not a distinctive trait, or even a collection of traits, possessed by the individual. It is the self as reflexively understood by the person in terms of his or her biography.’ (1991:53)

However, in contrast to Lawler’s view, Giddens maintains that: ‘Identity here still presumes continuity across time and space: but self-identity is such continuity as interpreted reflexively by the agent.’ (1991:53.). Giddens (1991) points to the effects of globalisation and electronic media upon social activity and suggests that this necessitates a ‘reflexively organised’ approach towards the project of self-identity (1991:4) with the aim of maintaining a congruent yet continuously edited sense of self within a fluid and changeable landscape. Giddens’s (1991) view of self-identity in a

globally socialised world seems particularly germane to this case study of international students studying an online learning environment.

The concept of identity formation has also been strongly influenced by Erikson's model of eight stages, each characterized by a particular conflict that then moves the ego on to the next stage of identity development (Erikson, 1980; Beijaard, et al., 2004). For Erikson, identity formation is a psychosocial process which is in a constant state of development and change (1968). In contrast to the social constructionist view Erikson emphasises a process of development of a 'coherent sense of inner identity' which takes place both in the 'core of the individual' and in 'the core of his communal centre' (Flum and Kaplan, 2012). Clarke (2008) echoes this, suggesting that identity is a 'complex amalgam' of social construction and psychodynamic process (p510).

Assigning and recognising identities in ourselves and in others often depends on the identification of 'sameness' and 'otherness' (Lawler, 2014). As mentioned in Chapter One, this can be clearly seen in the case of how CAM practice is defined in contrast to biomedicine (Saks, 2002; 2015) but may also relate to any number of characteristics such as ethnicity, personal appearance, religion, political affinities, support of a sports team, etc. Additionally, several authors including Goffman (1961) and Burke and Stetts (2009) point to the element of performativity involved in the construction of identity.

It is proposed by Stryker and Burke (2000) that over time a salience hierarchy of identities is formed, in which more weight is given to a particular identity at a given time in a given context, however as might be expected the hierarchy is not fixed but adjusted in response to contextual conditions:

'...identities may or may not be confirmed in situationally based interaction. And again, if the identity confirmation process is successful, the salience of the identity will be reinforced; if the process is unsuccessful, the salience of the identity will likely diminish, perhaps considerably.' (Stryker and Burke, 2000:289)

Examples of this process may be discerned in the staff we-poem: *When someone asks you 'What do you do?'* presented in Appendix 4, in which teaching staff from the MSc courses discuss their own evolving professional identities within the context of HE. Further examples of shifting salient identities will also be shown in graduates' experiences in the findings chapter and in the concluding chapter where I reflect on my own shifting professional identity.

Educationalist James Gee, offers a sociohistorical understanding of identity; acknowledging the complexity and the many different meanings ascribed to the concept, he sees identity as an 'important analytic tool' in education research (2000:99). Defining identity as: 'what it means to be a certain kind of person in a given context' (Gee, 2000:99) Gee allows for multiple identities which are performed in society, and a core identity which holds more consistently across different situations. He suggests four main perspectives from which identity may be viewed; Nature-identity, Institutional-identity, Discourse-identity, and Affinity-identity.

These perspectives are not separate from each other nor are they mutually exclusive; rather they are often seen to be overlapping in one individual. For example; an aspect of my own identity is that I am a firstborn child, this is one way of looking at who I am through the lens of Gee's Nature-identity. I have not done anything to achieve this, it is not something that was under my control; Gee interprets this state as being determined by nature – the power to which I am subject in this aspect of my identity. A further aspect of who I am relates to my professional identity as a senior lecturer in

a university, in this example of Institutional-identity I am authorised by authorities within the university to hold my position. Moving to yet another aspect of my identity, I am often described by friends and colleagues as a calm person, this is not determined by any institutional authority (although, it is debatable whether this trait is something that I could have been born with). According to Gee, my reputation for calmness relates to a Discourse-identity; in that the power that determines it is the discourse or dialogue of others about this trait and their recognition of it. My identity as a CAM practitioner may be seen as an Affinity-identity, I am primarily a CAM practitioner because I was attracted to the philosophy and values espoused by users of CAM. Within the CAM community there is a sense of common practices and a shared culture. However, in the case of my CAM identity, this is also subject to the authorities of institutions (e.g. CAM registering bodies, national government), and the power of discourse also impacts upon this identity (e.g. Evidence Based Medicine, the sceptic discourse). Extending the discourse perspective further it is possible to see the impact of discourse upon all types of identities in that what it means to be a firstborn child, a senior lecturer or a CAM practitioner is to a large extent determined by the discourse around these identities.

Whilst being careful to avoid taking a reductionist stance and thereby denying the complexities and nuances of our lived experiences of identity (Lawler, 2014), I found Gee's concepts (2000) useful when analysing the findings of my study. By drawing on his four ways to view identity I was able to consider how identity was functioning for participants in the context of the contested CAM landscape and to identify how forces were impacting upon strands of both personal and professional identity.

Most contemporary theorists are in agreement in seeing identity as fluid, responsive to experiences, and continually evolving and changing throughout life. However, the issue of whether or not individuals hold a central identity or essence which persists

across time and contexts, is widely contested (Gee, 2000; Burke and Stetts, 2009, Illeris, 2014a; Lawler, 2014). It is beyond the scope of this thesis to detail the many arguments and counter-arguments relating to this particular aspect of identity. Reflecting upon my own perspectives, I can see how my own history and social interactions have influenced that which I perceive as my self or central identity. The impact of my education both within CAM and within qualitative research has meant that I am entirely comfortable with the notion of multiple and evolving identities, and can recognise several roles or identities that I inhabit. However, whilst accepting and discerning the presence of fluidity and change within my multiple identities, I also strongly hold the sense of a 'me' that although subject and responsive to the events in my life, the ideas I encounter, and the people I interact with remains 'me' and persists across time and contexts. Here I can trace the influences of my catholic education, my introduction to Gerard Manley Hopkins's notion of selfhood (Reeves, 1953), Carl Rogers' theory of the self-actualising tendency (1961), the concept of looking at every person as unique and individual which is a primary tenet in homeopathic philosophy, and a myriad of other influences that I can no longer trace. During my exploration of the literatures around the concepts of central and multiple identities, I was struck by Jackson's elegant conception of the self as a:

'... many stranded cord running through our lives, but one which does not necessarily stay the same since the threads that comprise it can become frayed, broken or detached, spliced together, strengthened and reinforced and are continually being intertwined with other threads, remade over time. So, while we have a sense of our self as continuing, that self is never unchanging and is simultaneously multiple and singular, constructed and reconstructed from the perspective of successive presents. Without a self there would be no past or future, and without the ability to imagine pasts and futures there would be no self.' (Jackson, 2010: 127-8).

However, I differ from Jackson in that she sees this cord as being solely a social

construction, and suggests that acceptance of fluidity of identities excludes the possibility of a central identity. I feel that my reconciliation of the possibility of both multiple, fluid identities and the existence of a central identity is consistent with my constructionist/constructivist stance.

Cultural identity

The word culture is used with many meanings. In this section of the chapter I follow Jandt (2013) in using the term in two senses: to describe a community or group; or to express the group's collective ethos, shared values, norms, and assumptions. Gale and McHale (2015), whilst acknowledging the difficulty in defining culture, point to it as providing an enabling or disabling context for various practices (p.5). As discussed above, perceptions of 'sameness' or 'otherness' in ourselves or others may contribute to the development of an identity which may be in the sense of being an individual or of being part of a particular culture or community. A sense of cultural identity may be linked to diverse factors including a person's race, ethnicity, social class, affinity group, geographical region, or professional group, to name but a few (Jandt, 2013). Dominant discourses and issues of power are strongly associated with cultural identity, the construction of which is influenced by both social and psychological processes (Clarke, 2008). Issues of 'otherness' that arise in the formation and preservation of cultural identity can lead to stigmatisation (Clarke, 2008). Stigma can touch upon many domains of identity including both cultural and professional identities (Goffman, 1963; Clarke, 2008).

Hofstede (2010) highlights four shared aspects of a culture: symbols, rituals, values, and heroes. I suggest that these aspects may be discerned within the CAM profession with for example, symbols such as the caduceus and the specialised language used, the rituals of treatments, the espoused values of holism, and the heroes or key influences on many of the different treatment modalities; for example, Samuel

Hahnemann in homeopathy, Andrew Taylor Still in osteopathy, Frederick Alexander in Alexander technique, and Nicholas Culpepper in herbal medicine.

It is perhaps more correct to identify CAM as a sub-culture rather than a culture in and of itself (Saks, 2002). Jandt (2013) states that although there are common features across the two, subcultures are those that exist within a dominant culture, for example in the case of an ethnic group living in a country which is not linked to the origin of their ethnicity. As already discussed, the CAM subculture is often defined in contradistinction to the dominant hegemony of biomedicine (Saks, 2002; 2015). Individuals may feel a part of the CAM sub-culture through their affinity with CAM values, symbols, heroes, and their engagement in the rituals of CAM whether as a service user, or in a professional capacity as practitioner, researcher, clinic manager, educator, or other allied role. Hence for CAM professionals there is likely to be an overlap between their cultural identity and their professional identity.

Professional identity

Professional identity or 'work identity' (Illeris, 2014a) may be defined as one's self-concept in relation to one's profession or occupation (Slay and Smith, 2011).

Professional identity is closely intertwined with social identity (Wilkinson, 2008) and in a similar fashion evolves throughout one's working life (Sikes et al., 1985).

Professional identity may begin formation during training and is traditionally seen as being conferred by occupation (Sikes et al., 1985; Goldie, 2012), as one begins to identify oneself with a profession or professional group and to develop an identity within it. Bleakley et al. (2011) whilst concurring with the importance of 'doing the job' also highlight 'thinking the job' and 'recounting the job' as important processes in identity formation and maintenance; pointing to the influence of the discourse and rhetorical strategies employed both within and around a profession (2011:54).

Professional/work identity is seen as one of the most important identities that adults

hold, given that engagement in a profession usually involves a significant amount of time, provides a framework for social connections, and is financially necessary (Illeris, 2014a; 2014b). Professional identity may remain an important facet of the self-concept even after retirement from the linked occupation (Teuscher, 2010). In the case of vocational groups, such as CAM practitioners, professional identity is likely to be significantly intertwined with the core identity.

Dent and Whitehead (2002) suggest that traditional professions (such as medicine, law etc.) once functioned as ‘anchors of order’ (p1) stabilizing culture, class and society. This is in contrast to Saks’s (2015) view of the professions as a form of exclusionary social closure (p31). Dent and Whitehead (2002) see the status and identity of all professionals as having been undermined by the rise of the ‘relentless, cold logic of the global market’ with a managerial emphasis on audit and accountability (p.2). They contend that this has resulted in increasing pressures upon the professions and has eroded traditional trust in professional judgment. This is echoed in the drive for evidence within the medical and caring professions, which has had a profound effect on the identity and status of CAM practitioners. Furthermore, in a time when professional identity is uncertain even in the traditional professions such as medicine, law, and education, this adds to the difficulties of forming and sustaining a professional identity within a disputed field such as CAM.

The professional identity of CAM practitioners

In the case of the CAM graduate participants in this study, it is important to remember that as qualified practitioners, they arrived to study the MSc courses with already formed professional identities. This is in contrast to practitioner qualifying courses where part of the curriculum is aimed at facilitating students’ formation of a professional identity as CAM therapists. Hence for the students and graduates of the

MSc courses under discussion, it was a matter of negotiation of professional identity rather than formation.

Given the dearth of literature on the topic of professional identity within CAM, which predominantly focuses on professionalisation (Saks, 2002; Gibson, 2003), it was a useful process to explore literatures from other professions such as medicine, education and management. Using criteria suggested in other similar occupations (e.g. Gazzola et al., 2011) led me to conclude that there is evidence of a CAM professional identity, albeit one with a wide variance between the different CAM professions and even within the same professions. The common defining characteristic of a CAM professional identity lies in the definition of CAM in opposition to the dominant discourse of the biomedical hegemony (Saks, 2002; 2015).

A consideration of the training and education of CAM practitioners shows a wide variation between different CAM treatment modalities and often a variation within modalities. Education may be at certificate, diploma, or degree level, delivery of teaching and learning is often part-time and within private colleges (Fulder, 1996; Smith et al., 2006). Whilst training and employment within state recognized institutions are not commonly part of a CAM practitioner's experience, there is nevertheless the potential for positive experiences of CAM educational institutions, although these are largely unrecognised by the state and usually in less formal settings. For some, this is an attractive feature of the training and links to the strong counter-culture within CAM (Saks, 2002; Heller et al., 2005). Lifestyle and philosophy often play a large part in the formation of a CAM professional's work identity (Fulder, 1996) and this is reinforced in the educational environments as students become socialised into the CAM culture. Gale (2007) suggests however, that socialisation is only part of the story, and points to the importance of student practitioners' own agency in the development of their professional identity. Gale's ethnographic study of

practitioner education in a college of homeopathy, and a college of osteopathy identifies a sense of embodied knowledge of the chosen therapy as key in the development of practitioner identity (ibid.). What is generally lacking within CAM practitioner education is the prospect of employment within a state recognized institution and the security and sense of stability that this might bring. However, as Fournier (2002) points out, not all CAM practitioners aspire to be professionals. As an academic who trained in aromatherapy to use with friends and family, she was surprised to find how much of the training focused on professional standards. Her consideration of professional identity within CAM suggests that rather than amateurism being a developmental stage or precursor to professionalism that the figures of the amateur and the 'quack' are necessary devices to define and legitimise professional practice (Fournier, 2002; Porter, 2005). Unfortunately, the spectre of the quack is currently being raised from outside the CAM community, potentially serving a role in reinforcing the legitimacy and professional identity of biomedicine.

Fournier's (2002) experience illustrates another factor that may foster or hinder a sense of professional identity as a CAM practitioner; that of offering services to clients or patients (Gazzola et al., 2011). In Fournier's case she intentionally limited her use of her skills in aromatherapy to family and friends and did not develop a sense of professional identity in the CAM field. Presumably as an academic, she already had a more salient professional identity linked to her academic role (Stryker and Burke, 2000). Fournier's situation may be similar to many CAM practitioners who often retain another form of paid employment, although intention to practice will also play a strong part in formation of professional identity. The predominantly part-time nature of the majority of CAM practice has several implications; financial, political and professional. Gender bias is also a feature of the CAM culture in the western world with the majority of practitioners and service users being female (Gibson, 2003; Flesch, 2010). Nissen (2011) suggests that women's practice and use of CAM challenges the patriarchal practices of biomedicine and offers opportunities for

‘personal transformation and social change’ (p187). This is an appealing notion, although it is somewhat challenged by the disproportionate amount of males in positions of power in the CAM field e.g. as teachers, authors, directors of associations etc.

In applying the theories that I encountered about identity formation to professional and cultural identity in CAM I could see aspects of both Erikson’s (1980) and Foucault’s (1977) theories. I reasoned that the confusion of identity in CAM with its wide variation and disparate practices can be related to Erikson’s (1980) theory about the development of identity which he saw as the central challenge of youth. Although many of the CAM disciplines are relatively long-established, it seems reasonable to place the CAM professionalisation agenda at the stage of youth. Erikson proposes that if challenges at the youth stage are successfully met the result is the formation of a coherent and stable identity. However, a lack of success results in uncertainty about who one is and where one fits in society; furthermore, this state is likely to block successful transition through the later adult stages (Erikson, 1980; Illeris, 2014a). Turning now to Foucault (1977), I can see that to a large extent CAM appears to be kept in place by the dominant positivist scientific and orthodox biomedical discourses (Saks, 2002; 2015). Considering both theories with reference to CAM, I turn again to Clarke’s contention that the formation and negotiation of identity is a ‘complex amalgam’ of both a psychodynamic process and social construction, and suggest that this applies equally to professional identity (Clarke, 2008:510).

Slay and Smith’s (2011) work on the construction of professional identity where cultural identity is stigmatised is relevant to the case of CAM practitioners. Building on Ibarra’s (1999) theories about the generation of ‘provisional selves’ (1999:764) as an adaptation strategy used by professionals during transitions to new roles, Slay and Smith (2011) suggest that where there is a stigmatised cultural identity then the task

becomes redefinition rather than adaptation. They see the experience of being stigmatised as an important precursor to redefinition, which involves creating new professional rhetorics and the development of values and aims based on a positive sense of their cultural and professional identity. The implication being that a stigmatised cultural identity can be turned to a positive outcome and as a result of the redefinition process can help to lessen the stigma. As will be shown in the findings in Chapter Six, many of the graduates had felt stigmatised in their professional roles and in some cases this provided a motivation for their postgraduate studies. It should be noted however, that the stigmatisation of the CAM cultural identity is not universal and does vary both geographically and between different CAM therapeutic modalities.

CAM professional identity within HE

It is appropriate here to briefly consider the situation of CAM professionals working within HEIs. As stated in Chapter One, the foothold of CAM within HE both in the UK and in other countries is diminishing (Brosnan, 2015). This has had profound implications for CAM educators working in a climate of scepticism towards their discipline. Academic professional identity is rooted primarily in teaching and research activities, but is also strongly linked to the subject or discipline taught (Clarke et al., 2013), as can be seen in the formation of academic 'tribes' (Becher and Trowler, 2001). In common with many other academics in times of increased marketisation, and competition for scarce resources, CAM academics are also suffering from an erosion of the value of their expertise (Becher and Trowler, 2001). In the constant pursuit of academic legitimacy (Oliver, 1991), previous alliances are falling away as other academic tribes seek to distance themselves from this contested area. With a decreasing validation of their salient identity, adaptability and fluidity is required for CAM academics wishing to remain employed within HE (Stryker and Burke, 2000; Stryker, 2008).

As will be discussed at greater length in Chapter Three, although, strictly speaking, the teaching staff on the MSc courses are not the subjects of my study, I elected to involve them in a focus group as a way to provide context for the case, and observed that in some instances staff and graduates were experiencing a parallel process of adjustment to professional and/or academic identity. Evidence of the staff process of adjustment to their salient identities may be found in Chapter Five: Findings, Sub-finding two, Impact on identity and professional identity, and in Appendix six: Staff we-poems.

This section of the chapter has provided an overview of identity theory, as a foundation for understanding the formation and negotiation of professional identity with a particular focus on the situation of CAM practitioners working in a contested domain. The issue of identity also arises in the theories of Transformative Learning (Illeris, 2014a) and Communities of Practice (Wenger, 1998), both of which are directly relevant to my research findings as will be shown in the remainder of this chapter.

Transformative learning

I now turn to a discussion of Transformative Learning theory, which directly relates to one of the key findings from my research, namely that changes at the levels of frames of reference¹⁰ and/or identity indicate that graduate participants had undergone a transformative learning experience through their studies and achievement of an MSc qualification. The following discussion of TL theories illuminates the debate around the criteria against which TL may be said to have occurred.

¹⁰ The terms 'frames of reference' and 'meaning perspectives' tend to be used interchangeably in the TL literatures to indicate 'the structure of assumptions and expectations through which we filter sense impressions' and result from our ways of interpreting our experiences of the world (Mezirow, 2000:16).

I did not begin my research journey with Transformative Learning (TL) in mind, however at an early stage of the taught component of the doctoral programme I was introduced to articles which spoke of the impact of the experience of doctoral studies upon doctoral candidates' identity (for example: Fenge, 2010; Forbes, 2008). Whilst none of these articles directly referenced TL or Mezirow's work I was left with the notion that my doctoral studies would change me in some way, and this also reinforced my interest into how the MSc courses impacted upon CAM practitioners and their professional identity. Through my explorations of the literatures relating to identity theory I came across Illeris's book on transformative learning and identity (2014a), which introduced me to the concepts of TL, and his extension of Mezirow's (1978) original theory. From here I worked backwards to explore the origins and evolution of TL theories some of which I now present, before going on to discuss Illeris's proposal of a link between TL and identity (Illeris, 2014a).

The concept of TL was originally proposed by humanist sociologist and educator Jack Mezirow in 1978. Inspired by witnessing the transformative experience of his wife Edee's return to college to complete her undergraduate degree, Mezirow conducted a study of women entering community colleges after a long period away from education (Mezirow and Associates, 2000; Mezirow, 2009). Mezirow observed a process of personal development and perspective transformation following the women's engagement in bringing their beliefs, assumptions, and views of their role in society into critical awareness (*ibid.*). TL is seen as offering an argument against the concept of education as a simple transmission of knowledge from teacher to student, and thus locates the overarching aim of adult education as to facilitate the learner's journey towards autonomy of thinking 'by learning to negotiate his or her own values, meanings, and purpose rather than uncritically acting on those of others' (Mezirow, 1997:11, cited in Taylor, 1998:12).

Mezirow's (2009) definition of TL shows an expectation of movement towards personal development and self-improvement:

'Transformative learning is defined as the process by which we transform problematic frames of reference (mindsets, habits of mind, meaning perspectives) – sets of assumption and expectation – to make them more inclusive, discriminating, open, reflective and emotionally able to change. Such frames are better because they are more likely to generate beliefs and opinions that will prove more true or justified to guide action.' (2009:92)

Vital components in the process of TL are seen as: the starting point of the learner's own experience, critical reflection upon previously unquestioned assumptions, and the opportunity for rational discourse (Grabove, 1997; Taylor, 1998; Bloom, 2015). Mezirow (1978) hypothesises that in most cases, TL may be triggered by the experience of a 'disorienting dilemma', or by an accumulation of transformations in a person's lower order meaning schemes which culminates in a change to their meaning perspectives or frames of reference. Although the necessity of a disorienting dilemma is less emphasised in later TL literature (Taylor, 1998:9). Comparisons may be drawn with Meyer and Land's (2005) theory of Threshold Concepts particularly in the notions of the disorienting dilemma, or in Meyer et al.'s terms encountering 'troublesome knowledge', both of which are seen as instigating critical reflection and ontological shifts (Meyer et al., 2010). A further similarity with Threshold Concept theory is evident in that both theories suggest that development arising from the TL process or from crossing a conceptual threshold is irreversible and non-regressive (Taylor, 1998; Meyer et al., 2010), although this is disputed by Illeris (2014a).

Critics such as Atherton (2013) point to the implicit assumption in Mezirow's theory that critical reflection upon underlying assumptions will always lead to some form of movement towards a more open, inclusive attitude and a more conscious awareness of oneself, which may not always be the outcome. Brookfield (2010), whilst

acknowledging his agreement with Mezirow, and his own hope that TL should always proceed towards a broadening rather than a narrowing point of view; also points to a tacit arrogance in educators' assumptions that their vision is the 'right way' to transform. Other criticisms of Mezirow's TL include his emphasis on the cognitive and rational process, and his relative neglect of the emotional, intuitive and imaginative aspects of TL experiences. In his later writings, Mezirow allows that this is a justified criticism and adds his observation that the process of transformation may often manifest as 'a difficult, highly emotional passage' as individuals let go of their long-held assumptions, and engage in self-examination which may generate feelings of guilt, fear, anger, or shame (2009:95). Perhaps the most scathing criticism of TL theories in all their variations, comes from Newman (2012a), who suggests that TL does not exist, and that it would be more correct to simply label such experiences the outcome of 'good learning'. Newman's main issue seems to be a question of the scale; he rejects anything short of a total metamorphosis as equating to a transformation. However, his criticism of the over-use of the term is justified and shared by Brookfield (2010). Newman cites several studies which claim to provide examples of TL that seem to be results of straightforward change arising from learning (Newman, 2012a). The ensuing dialogue between Newman (2012a; 2012b), Cranton and Kasl (2012), and Dirkx (2012) shows Newman's points being answered systematically, with the main response being that by focusing primarily on the work of Mezirow he has failed to take accounts of later developments which address most of his concerns. Newman's final response (2012b) in the dialogue concedes many of the points made by Cranton and Kasl (2012) and Dirkx (2012), and sadly paints a picture of a disillusioned academic at the end of his career. That said, Newman's critique offers a salient reminder that although, as Cranton (1994:160) asserts, education leads to change in knowledge, skills, competencies, communication, understanding, self-concept, and perceptions of one's social world; 'not all change is transformative and not all critical reflection leads to transformation' (Grabove, 1997:89). Illeris (2014a), whilst offering a robust critique of TL proponents for not situating the theory in adult learning theory as a whole, suggests that Mezirow's original conception of transformation occurring at the level of

meaning perspectives is too narrow, and that TL impacts upon the level of identity. I will return to Illeris's expansion of TL in more detail later in this chapter.

The application of TL theories to teaching practice is not a simple formulaic matter, the transformation of an individual's frames of reference cannot be scheduled or guaranteed, However, programmes can be planned to provide opportunities for the articulation of assumptions, exposure to alternative viewpoints, engagement with critical self-reflection, opportunities for rational discourse, revision of assumptions and perspectives, and encouragement towards action based on those revisions (Cranton, 2002). Ultimately the choice whether or not to transform lies with the learner:

'When a student transforms her assumptions, becoming open to alternatives and new ways of thinking, it is a magical moment in teaching. We cannot teach transformation. We often cannot even identify how or why it happens. But we can teach as though the possibility always exists that a student will have a transformative experience. There are no special methods that guarantee transformation, although transformation is always one of our goals.'
(Cranton, 2002:66).

Mezirow's TL theories have been widely influential in adult education, particularly in North America, and have been adapted and expanded by other educators. Interpretations of TL may be broadly divided into those which emphasise a cognitive, rational process and those which see the process as extrarational, imaginative and intuitive. Taking a holistic perspective of the various TL theories, Cranton and Roy (2003) call for a tolerance of the co-existence of the rational and extrarational perspectives of TL, seeing both approaches as complementary; and argue for the validity of both individual and social goals of transformation (Cranton and Roy, 2003; Dirkx et al., 2006). They suggest that integration of the various TL perspectives may be

achieved through focusing on the concepts of individuation and authenticity. Individuation is a Jungian concept relating to the process by which 'we become aware of who we are as different from others' and how we fit in or do not fit in with those around us (Cranton and Roy, 2003:91). Our frames of reference are in general socially constructed and unconsciously assimilated from the collective circumstances in which we live. Individuation involves a questioning of assumptions and often a pulling away or self-differentiation from certain aspects of our culture, community, or family. However, individuation does not signal a withdrawal from the collective, but rather the development of a clearer sense of who we are and where we fit in the world, 'becoming more fully the person you were meant to be' (Cranton and Roy, 2003:92). As will be shown in Chapter Six, several graduate participants described having gone through a process of questioning their own previously held assumptions, and in the case of one participant (Fran) this led to a reconfiguration of her idea of what it meant to be a herbalist, which directly impacted on her sense of personal identity.

The concept of authenticity within the context of TL is intertwined with the process of individuation and the dawning sense of our own self and our place in the community. Passive acceptance of socially constructed norms can result in living an inauthentic life, whereas individuation and authenticity facilitate the separation of the individual 'from the undifferentiated and unconscious herd' and enable the expression of the genuine self within society (Sharp, 1995, cited in Cranton and Roy, 2003:94). Clear links may be discerned here between the TL concepts of individuation and authenticity, and identity theory and the development of the self-concept or personal identity. This theme is taken up in the work of Illeris and Tennant which I shall now go on to discuss.

Transformative learning and identity

As will be shown in Chapter Six, my research findings clearly showed changes in graduate participants' frames of reference thereby indicating a TL experience according to Mezirow's criteria (1978; 2000). However, the issues of identity and

professional identity were key to my original research question about how the courses impacted upon graduates' professional identity, practice and community of practice. Hence my interest in Illeris's (2014a) conception of TL occurring at the level of identity where I discerned profound changes in graduates' self-perceptions.

Both Illeris (2003; 2009; 2014a; 2014b; 2015) and Tennant (2005; 2012) link TL with self and identity, although with the subtle difference that Tennant's location of change arising from TL is the self, while Illeris suggests that TL impacts upon the level of identity (2003; 2014). However, at times it appears that they are using different words to describe the same phenomenon. Acknowledging the work of Erikson (1980) and Giddens (1991) as key influences, Illeris's model of identity encompasses the existence of a central identity and satellite part-identities. Illeris views the central identity as:

'the instance that fundamentally contains the experience of being a distinct and particular individual, being the same in different situations and different connections, and also throughout the entire life course, in spite of any development or change. And it is also the centre of the identity that unites and co-ordinates the complexity and diversity of identity elements.' (2014a:70)

He suggests that although the central identity is impacted by learning processes throughout life, it has an innate drive to protect the continuity of self, thus changes at this level are likely to be gradual unless triggered by a sudden or intense experience. Both the central identity and the part-identities are seen as having the same structure of three layers, with the core area as the most stable and resistant to change, the middle area as more flexible and where Illeris posits that TL takes place, while the outer layer is seen as being more unstable and easily changed (2014a:75).

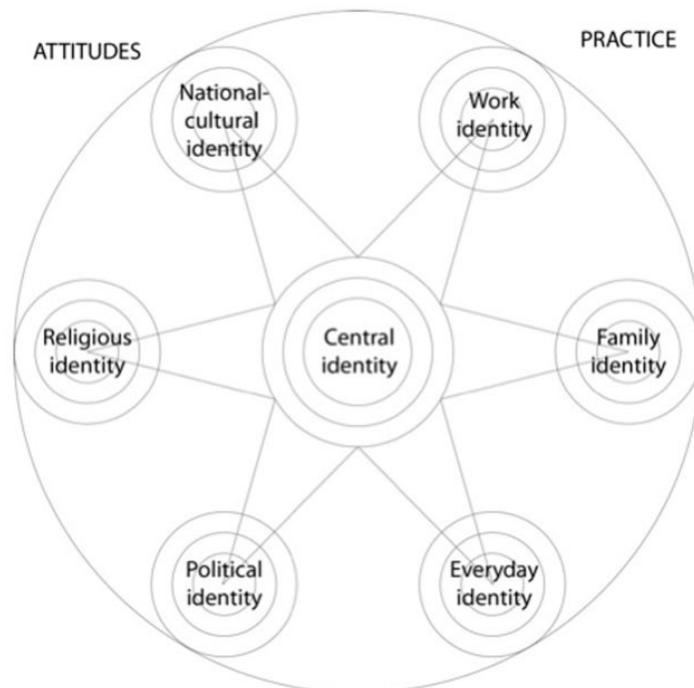


Figure 2: An example of central identity and part-identities (Illeris, 2014a:76)

In common with Giddens (1991), both Illeris and Tennant see late modern life or 'liquid modernity' (Bauman, 2000 cited in Illeris, 2014a:65) as presenting many challenges to the formation and maintenance of identity or self-concept. Since the post-war period, the breaking down of traditions, and the information revolution have led to both a liberation and an increased responsibility for self-definition. Within a rapidly changing and, via the amplification of social media, a constantly self-expressive global society there is a growing need for flexibility and revision in identity as 'the anchoring points for identity and expectations of life trajectories are challenged and disrupted' (Tennant, 2005:103).

For many people the work identity is often one of the most important part-identities due to the investment of time in working life, and the dependence on the work identity for financial security. However, the concept of a job for life with a strong work/professional identity has all but disappeared (Association of Graduate Recruiters, 1995), demanding a readiness to adapt to changing conditions by engagement in lifelong learning (Illeris, 2003; Tennant, 2005; 2012). Tennant borrows

Foucault's (1998: 16) term: 'technologies of the self' to describe this work on the self by the self (Tennant, 2005:102; 2009), which he sees as being employed for the purposes of transformative change and self-re-creation. This echoes Giddens's (1991) view of the self as a reflexive project.

Illeris firmly locates TL in the context of general learning theory (2003; 2014a). Seeing learning as a psychosocial process involving internal psychological acquisition and reactive to external societal, cultural and environmental factors; he contends that knowledge can no longer be seen as something stable and lasting to be acquired, but rather as ever-changing, fluid, and in need of constant adjustment:

'In the later modern globalised world, all of these interactions are mixed up in a giant and rapidly changing hodgepodge that offers unlimited – and to a great extent also unstructured – possibilities for learning.' (Illeris, 2003:246).

Learning therefore spans the cognitive (relating to knowledge and skills), emotional (relating to feelings and motivations) and social (relating to communication and co-operation) dimensions (Illeris, 2014a:82), and is embedded within a 'societally situated context' (Illeris, 2003:247). Illeris identifies four patterns or types of learning: cumulation, assimilation, accommodation and transformation (2003; 2009; 2014a). Cumulative learning implies the acquisition of mechanical learning which can only be applied in certain contexts. Assimilative learning is probably the most common type of learning and entails the linking of new learning to established meaning schemes and patterns. Accommodative learning occurs where new learning does not readily fit into existing patterns, requiring a re-structuring of schemes or patterns in order to link in the new information. This process can be difficult and disconcerting for the learner, but the resulting learning is applicable in many contexts. Illeris reserves the use of the term transformative for 'only the structurally comprehensive kind of learning – entailing simultaneous restructuring in all three learning dimensions' i.e. cognitive,

emotional and social dimensions (2003:249). Mezirow's (2000) conception of TL with its emphasis on the cognitive process seems to fit well with the description of accommodative learning, although as Illeris points out Mezirow does also acknowledge the importance of emotional and social dimensions. The four types of learning in Illeris's model differ in complexity, yet he is clear that this should not be seen to imply a value hierarchy, each type of learning is seen as useful with the more basic learning providing necessary preconditions for the more complex (2003).

In contrast to Mezirow (1978; 2000), Illeris asserts that transformation is not always progressive; he suggests that in instances where transformation is too overwhelming or appears to threaten an individual's status quo, the core identity may initiate a regression, which may in itself be a type of transformation (Illeris, 2014a; Ostrouch-Kaminska and Vieira, 2015). In addition, Illeris also posits the possibilities of restorative and collective transformations (2014a). As will be shown in Chapter Six, graduate participant Fran's redefinition of her identity as a herbalist described earlier in this chapter may be seen as an example of a restorative transformation.

In practice, most proponents of TL are in agreement that TL cannot be taught (Cranton and Roy, 2003; Illeris, 2015) but rather that programmes may be designed to provide opportunities for transformation. Illeris favours the use of project work and sees education towards the development of competences as conducive to TL (2003; 2015). As discussed earlier in this section, the rapidly changing globalised, information-rich landscape of the late modern market society demands a different approach to education. The development of competences equips learners not only to solve current problems, but also gives them the potential to 'deal with problems that are unknown and unpredictable at the time when the competence in question is acquired' (Illeris, 2003:246). It should also be noted that identity is likely to influence the competences that an individual is drawn to develop, and in turn the development of a competence

will impact on how the learner identifies themselves (Illeris, 2014b). In the MSc programmes under investigation, the use of critical analysis, rational discourse, introduction to the philosophy of science, and the development of research skills whilst not defined or assessed specifically as competences, is aimed at equipping graduates to work in unpredictable and complex situations and has the potential to impact upon frames of reference and elements of identity.

The link between education and personal or social change is not a new one. It might be said that most educational experiences lead to change in one way or another, but not all change is transformative. A key question to ask here is who decides exactly what qualifies as transformative, how to gauge if a student has indeed been transformed (Newman, 2012a). As I have shown, there are many who have offered their considered opinion upon this matter. Whilst hugely admiring of the work of Mezirow, Illeris, and other TL theorists, and the persuasiveness of their humanist ideals, I am also wary of the tacit conceit in assumptions that students should transform, and that there is a particular ideological direction in which they should transform. In terms of the frameworks for TL, I agree with Cranton and Roy (2003), that there is more than one way to transform and that ultimately it is the student who decides whether or not this will take place. I found that Illeris's theories strongly resonated with my own views as I explored professional identity and searched for a way of understanding how it might be impacted by master's level study in an international, online group of CAM practitioners. As previously stated, when designing and conducting my research, I did not set out to 'discover' transformation, but instead to focus upon how the experience of the course, and of gaining a master's qualification had impacted upon key aspects of practitioners' professional lives. However, as will be shown in the presentation of findings, changes were evident in graduates' perceptions of their professional and in some cases, personal identity; and in their frames of reference. Thus indicating the occurrence of transformative learning as defined by both Illeris (2014a; 2014b), and by Mezirow (1978; 2000).

Communities of practice

As has been discussed in the introduction to this thesis, my research aimed to look at the impact of CAM practitioners' post-qualification studies upon key aspects of their professional lives. From quite an early point in my research design I identified the CAM community, and/or the CAM Community of Practice (COP)¹¹ as one such aspect and therefore relevant to my research questions. However, through my explorations of COP and identity theories and during the process of analysing my findings, I came to see an individual's participation in a COP as an important expression of identity and/or professional identity, change in which could also be indicative of TL.

The final section of this chapter looks at the theoretical perspective provided by Lave and Wenger's (1991) social theory of learning and the key constitutive element of their proposed framework: Communities of Practice (Lave and Wenger, 1991; Wenger, 1998). The identification of the COP concept arises from Lave and Wenger's recognition of learning as 'ubiquitous and ongoing' (Lave, 1993:5 cited in Smith, 2009:1) taking place in any number of situations, for example in the workplace, the home, or during participation in leisure interests; rather than being solely confined to the classroom (Lave and Wenger, 1991; Wenger, 1998; Smith, 2009). Hence, a COP may be said to be present where such learning takes place within a mutually engaged and interactive collective (Wenger, 2009).

The four key characteristic components of Wenger's theory of 'social participation as a process of learning and of knowing' (1998:4-5) are identified as:

¹¹ In the interviews with graduates I chose to question participants about their involvement in the wider CAM/herbal medicine/homeopathy community, rather than use the term 'community of practice' which I reasoned might be unfamiliar to the participants.

1. *Meaning: a way of talking about our (changing) ability – individually and collectively to experience our life and the world as meaningful.*
2. *Practice: a way of talking about the shared historical and social resources, frameworks, and perspectives that can sustain mutual engagement in action.*
3. *Community: a way of talking about the social configurations in which our enterprises are defined as worth pursuing and our participation is recognisable as competence.*
4. *Identity: a way of talking about how learning changes who we are and creates personal histories of becoming in the context of our communities (Wenger, 2009:211).*

The interconnections of these components are shown in the figure 3 below:



Figure 3: Components of a social theory of learning – an initial inventory (Wenger, 1998:5)

In recognising the phenomenon, and giving name to the concept of COPs, Lave and Wenger (1991), have had a great impact on both educational and organisational theories. They contend that COPs are everywhere and that they are an integral part of daily life, with each of us being likely to belong to several of them (Wenger, 1998). COPs are defined as:

'groups of people who share a concern, a set of problems, or a passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis' (Wenger et al., 2002:4)

There are three main components of a COP:

- a shared domain of interest;
- a community of people involved in joint activities in the pursuit of their shared interest, who build relationships to enable them to learn from one another;
- a shared practice which brings along with it a shared set of resources such as stories, experiences, tools, and ways of working with problems or challenges (Smith, 2009; Wenger-Trayner and Wenger-Trayner, 2015).

Communities of practice in CAM

Although the concept has been widely taken up in organisations, institutions and industry; belonging to a COP does not necessarily involve meeting or working together every day. COPs may be formed in many situations, and may involve face to face or virtual interactions. Within the loosely-coupled institution of CAM I suggest that there are many COPs, some operating locally and others nationally or internationally. The basis of interaction and belonging to a CAM COP may be based on: the practice of a common treatment modality; membership of a registering body; lobbying for the provision, promotion and/or defence of CAM theories and values; or conducting research in the CAM field. Additionally, for many CAM practitioners, access to continuing professional development activities is through interaction with a local or

modality based COP. It is important to stress however, that not all communities or groups are COPs, the key aspect is that all three features of a COP: domain, community and practice, must be evident.

Although the concept of COPs is particularly related to informal learning situations, students' engagement with the MSc programmes do meet the criteria of holding a shared domain, community, and practice. However, on completion of the course graduates appeared to gravitate back to their original COP, and in some cases engaged with new COPs. Wenger (2000) describes how pioneering members of COPs may engage with other COPs to extend their learning and to take back new knowledge to their original COP. I suggested in Chapter One that this was the case when members of the MSc teaching staff engaged with the European Network of Homeopathy Educators, and will show in my findings that this may also describe the process for some of the MSc graduates. The MSc course team could be said to offer a good example of a COP in action, in that there is a shared domain of interest, community, and practice. Mutual engagement and sharing of resources facilitate members of the team learning from each other in an informal way, reminiscent of Wenger's study of claims processors (1998). Further, I believe that a demonstration of the impact of this COP on the broadening identity of its members may be discerned within the We-poem: *'When someone asks you 'What do you do?'* (see Appendix 4, Staff We-poems)

Communities of practice and identity

Straddling and overlapping with aspects of professional identity and cultural identity, membership of a COP is strongly linked with the negotiation of identities (Wenger, 1998). In the context of Wenger's theories, identity can be characterised as a bridge between the social and the individual, and encompassing: 'a negotiated experience, community membership, a learning trajectory, a relation between the local and the global, and a nexus of multimembership' (Wenger, 1998:149).

Wenger's use of the term 'multimembership' denoting individuals' concurrent memberships of several different communities offers an alternative to the notion of multiple identities (1998). For Wenger identity:

'extends in space, across boundaries. It is neither unitary nor fragmented. It is an experience of multimembership, an intersection of many relationships that you hold into the experience of being a person, at once one and multiple. It is not something we can turn on and off' (2000:241-242).

For me, Wenger's view of identity succinctly encapsulates the experience of being human in a busy, late-modern life. As I sit at my desk my salient identity is that of doctoral candidate, however, this does not in any way diminish my identification with other roles, I am still a wife, mother, grandmother, educator, homeopath, etc.; and when I walk away from my desk to engage with one or more of my other identities I do not leave my doctoral identity behind.

Chapter summary

Building on Chapter One, in this chapter I have provided an explanation of the theoretical foundation of my thesis. I began by detailing the ontological and epistemological stances that have influenced the conduct of my research. I then moved onto key theoretical perspectives that have been meaningful in the construction of my findings. As has been shown the theme of identity is pervasive, and overlaps with theories of transformative learning, and communities of practice. These threads will be further drawn together in the words of the research participants in Chapters Five and Six. In Chapter Three I now turn to offering an account of the methodology and methods I used to conduct my research.

Chapter Three: Methodology and methods

'Real research is often confusing, messy, intensely frustrating, and fundamentally nonlinear.' (Marshall and Rossman, 1999:21)

Rather than hide the inner drama of my doctoral work with its leaps of intuition and stumbling time-line (Bargar and Duncan, 1982:2), in this chapter I aim to give a reflexive and transparent account of the choice and development of my methodological approach to the project, the selection of research participants, the process and evolution of my fieldwork and of my learning both in terms of the practicalities of data collection and of my engagement with reflexivity throughout the process, along with ethical issues, and limitations of the study.

Methodology: Case study

I selected case study as the design frame for my research both for its familiarity to my own working practices as a CAM practitioner and for its appropriateness given the bounded nature of the programmes under investigation, which at the time of the inception of the research were the only online courses offering Master's level study to qualified CAM practitioners in the world. Furthermore, results from case study research can be more accessible to non-academic audiences (Cohen et al., 2011); this will be an advantage when disseminating results to the wider CAM community, as it is my hope that this study will be able to contribute both to the enhancement of practitioner knowledge within my own organisation, other HEIs, and to CAM educational establishments and organisations.

There are various typologies and associated purposes of case study (Stake, 1995; Bassegy, 1999; Yin, 2003; Thomas, 2016). From the outset I strongly resisted the idea of

using case study as an evaluative tool, as I did not want to take a stance whereby I would be reviewing the work of colleagues. Rather, I identified my study as fitting into Stake's categorisation as an 'intrinsic case study', that is to say that my interest in the case itself provided the impetus for the research, and led to the development of research questions; rather than having an initial question to answer and seeking a case to generate answers as in an 'instrumental case study' (1995). In terms of Bassey's (1999) categorisations my study would be described as a 'story-telling' case study as opposed to a 'theory-seeking' or 'theory-testing' case study (1999:62). However, in retrospect I can see that as I progressed in my research process and in my exploration of the case, the emphasis and purpose of my case study shifted towards an explanatory mode (Thomas, 2016).

Variously defined as a method (Crotty, 1998), a methodology (Grix, 2010), a combination of both method and methodology (Wisker, 2008), or a design frame (Thomas, 2016), the case study approach aims to generate a rich and detailed description enabling an in-depth understanding of the case (Stake, 1995). The rich, descriptions generated by focusing on 'an instance in action' (Walker, 1974 cited by Somekh and Lewin, 2011:54) in case study research are seen as one of the key advantages of this approach enabling an in-depth presentation of participants' perspectives (Somekh and Lewin, 2011). Stake (1995) holds that the most important aspect of designing a case study is to make decisions that will enable the researcher to gain a thorough understanding of the case.

Whilst I had always been drawn to case study as the most fitting methodology for my own research given the bounded nature of the population (i.e. graduates from specific courses), I did consider whether or not ethnography might be an appropriate alternative to investigate the CAM sub-culture but ultimately decided that case study was most suitable to this study. I was aware of the possibility of conducting an ethnographic study in an online community, however, I did not feel that this was appropriate given that I was working with graduates who were no longer connected in

a cohesive community. Use of autoethnographic techniques such as incorporating a reflexive authorial point of view offered a way of incorporating aspects of ethnography within my chosen case study framework (Ellis et al., 2011; Gomm, 2011). Ellis describes autoethnography as acknowledging and accommodating: 'subjectivity, emotionality, and the researcher's influence on research, rather than hiding from these matters or assuming they don't exist' (Ellis et al., 2011: paragraph 1). As previously discussed, as a CAM practitioner myself I was already immersed in the wider CAM field, and was ideally placed to draw on my own experiences whilst acknowledging their impact on the conduct of my research and my construction of the findings (Gomm, 2011; Ellis et al., 2011).

Thomas (2016) emphasises that case studies should ideally encompass two linked components: the subject and object, or analytical frame. The subject or 'practical historical unity' (Wieviorka, 1992:159) is formed by the bounded entity that is the focus of the case study (Thomas, 2016). The object, or analytical frame provides the means of interpreting and providing context for the case (ibid). One of the first decisions I attempted to make was to define what exactly was 'the case'. As my research ideas developed I periodically asked myself this question, and at times came up with different answers as my ideas and understanding developed (Ragin and Becker, 1992); and as will be detailed below, on one occasion due to external circumstances. I knew that I wanted to focus on the MSc courses for CAM practitioners, and initially saw the subject of my case as the online community of students. However, a rethink of this was required early in the process after the Dean of the School of Health requested that I should exclude current students from participation in the research. Although I suspect that even without this imposed change, the focus of my case would have evolved as I refined my research questions and data collection strategies. At one stage I considered that the courses themselves were the subject of the case and that they encompassed staff, students, graduates, and the teaching materials. Ragin and Becker (1992) suggest that strong preconceptions about the subject and object of a case study are likely to impede

conceptual development, they recommend that the questions ‘What is the case?’ (subject) and ‘What is this a case of?’ (object) should be continually asked throughout the development and execution of the research process; and that it is often only at later stages of the research and writing-up process, that researchers are able to confidently answer these questions.

*‘What it is a **case of** will coalesce gradually, sometimes catalytically, and the final realization of the case’s nature may be the most important part of the interaction between ideas and evidence.’
(Ragin and Becker, 1992:6, emphasis in original)*

This process of periodically questioning myself and observing the gradual coalescence of my focus on the theme of professional identity eventually led me to the conclusion that the subjects of my case study were the graduates of the courses and the object of the case was how the courses impacted upon the graduates’ professional lives, including their professional identity, practice of their therapy, and how they saw their role in the wider CAM community of practice (Thomas, 2016).

The issue of generalisation and case study.

One of the most frequently-cited criticisms of the case study approach is the issue of limited generalisability, although different experts offer various solutions to this problem. Yin (2003) offers the defence that analytic rather than statistical generalisation is eminently possible from case study research and that extrapolations can be made from case study to broader theory. Stake (1995) suggests the emergence of naturalistic generalisations from case study, occurring when a reader recognises and resonates with the findings that are relevant to their own situation. Bassey (1999:12) refers to ‘fuzzy generalizations’ generated by practitioner research that may be transferable to similar contexts; these fuzzy generalisations are expressed as propositions or assertions of likelihood or unlikelihood rather than definite statements. Donmoyer (2000) points out that in addition to being able to learn from

case studies about similar situations, one may also learn from situations which are opposite to one's own.

Some suggest however that it is inappropriate to even consider generalisation as a desirable outcome of case study (Thomas, 2016). Lincoln and Guba declare that: 'The only generalisation is: there is no generalisation' (2000:27), they deconstruct the traditional reliance on generalisation and the belief that generalisations can produce consistent and absolute truth suggesting instead that case study (and indeed any research) may produce 'working hypotheses'. Lincoln and Guba (ibid) refer to Cronbach (1975) as formulating the concept of the tentative working hypothesis that takes account of the unique local and temporal factors for each research situation and represents a truer reflection of findings than conclusive generalisations. Lincoln and Guba (2000) suggest that such working hypotheses may be applicable to other situations depending on the 'fittingness' or congruence between situations. After thoroughly exploring different perspectives on the case study approach I concluded that Stake's model was most in accordance with my aims as a researcher:

'The real business of case study is particularization, not generalization. We take a particular case and come to know it well, not primarily as to how it is different from others but what it is, what it does. There is an emphasis on uniqueness, and that implies knowledge of others that the case is different from, but the first emphasis is an understanding of the case itself.' (Stake, 1995:8)

As a CAM practitioner, this resonated strongly with my own values and the principles that inform my practice of homeopathy where the emphasis is to gain a deep and holistic understanding of the experience of each patient as a unique individual. This has in turn influenced my approach to generalisation, in that rather than attempting to generalise from my findings I offer tentative working hypotheses (Lincoln and Guba, 2000) which may be transferable to other cases or contexts, as such the judgement of transferability rests with the readers of my research. Further, I recognise that

additional and/or alternative working hypotheses may be identified by readers, or if another researcher were to analyse the same data.

The research participants

My aim to generate a clear depiction of the case under consideration naturally informed the selection of participants. In addition to myself, the course team comprises four senior lecturers, all of whom were invited and agreed to participate in a focus group. The focus group schedule was piloted in a semi-structured interview format with a retired member of the course team. The course team were uniquely situated to be able to provide a contextual background to the case study including the development and evolution of the courses, and their observations and perceptions of the impact of the courses upon the graduates.

Table 1: Focus group participants

Pseudonym	Practice qualification	Practising?
Jane	Herbal Medicine	Yes
Roy	Herbal Medicine	Yes
Jess	Homeopathy	No
Cora	Homeopathy	Yes
Hazel (moderator)	Homeopathy	Yes

Whilst it would have been inappropriate within this qualitative case study to aim for statistical representation, when it came to selecting graduates to invite for interview I aimed for a variation of individuals with diverse practice backgrounds and experiences of the courses in order to reach a reasonably balanced group of participants. I

identified the following factors and constructed a matrix (see Table 2 below) to inform my selection: degree title (MSc Herbal Medicine, MSc Homeopathy, MSc Integrated Healthcare), date of graduation, modality of practice, and geographical location. In a form of theoretical sampling (Charmaz, 2006) the matrix was updated after each interview and reviewed as new participants were invited in order to identify any gaps and check that each participant could add something to the case study. Further information about whether or not the participant was currently in practice was added to the matrix as it became available during the interview process, and this was incorporated as a factor to balance. Suggestions of suitable graduates to interview emerging from the focus group with the course team also informed the selection of interviewees. As the MSc Homeopathy course had been running since 2006 and the other two courses only since 2011 there was a higher proportion of graduates of the MSc Homeopathy course. At the time of the fieldwork, there were three graduates from MSc Herbal Medicine, and four from MSc Integrated Healthcare. All graduates from MSc Herbal Medicine were invited to be interviewed, all initially accepted, however one was later unable to participate. Three graduates from MSc Integrated Healthcare were invited to participate and all three accepted. Two graduates from MSc Homeopathy volunteered their participation, and a further two were invited and agreed to participate.

Table 2: Graduate participants

Pseudonym	Degree title	Location	Dates of attendance	Practice modality	Practising?
Olivia	MSc Homeopathy	UK	2006-09	Homeopathy	Yes
Connie	MSc Herbal Med	North America	2011-14	Herbalist	Yes
Fran	MSc Herbal Med	UK	2011-14	Herbalist	No - Blogger

Sally	MSc Homeopathy	UK and North America	2009-14	Multiple therapies including homeopathy, nutrition	Yes
Aiman	MSc Integrated Health	South-East Asia	2011-14	Naturopath and homeopath	Yes – large practice
Dilip	MSc Integrated Health	North America	2011-14	Multiple therapies including Ayurveda	Negligible practice. Involved in education re CAM and HIV
Yolanda	MSc Homeopathy	Southern Europe	2010-13	Homeopathy	No – blogger and editor of e-journal
Sonia	MSc Homeopathy	Central Europe	2009-13	Homeopathy	Yes
Lana	MSc Integrated Health	Northern Europe	2010-14	Homeopathy	Yes

Methods

Focus group and semi-structured interviews were employed as the primary methods of data collection, a third phase of email follow-ups to the interviews was added at a later stage. My original plans for the research had included a focus group with staff, an anonymous electronic questionnaire with current students, and semi-structured

interviews with graduates. The use of an anonymous electronic questionnaire was designed to mitigate the power issues of working with my own students (Costley et al., 2010). The draft questions were planned to be open-ended allowing students to freely express their opinions rather than trying to fit their responses into tick boxes. Although aware of the power issues inherent in working with my own students I was keen to include them to provide a sense of immediacy and be able give them a voice in my study. However, on application to the Dean of the School of Health for his approval of my research he felt that it was inappropriate for current students to participate. Whilst supportive of my plan to conduct a case study exploration of how courses delivered by e-learning impact on students and graduates he suggested that I select another e-learning course as my case. The ensuing exchange with the Dean, helped me to see how important it was to me to explore this particular case with its dual aspects of CAM and e-learning. Following our discussions, the Dean gave his endorsement to my research on the proviso that I only worked with staff and graduates, and excluded current students from the data gathering process. Whilst this was a blow I felt grateful that at least I could pursue my original aim to explore the impact of master's level post qualification education upon CAM professionals, and considered how best to amend my plans and still achieve a thorough understanding of the case (Stake, 1995).

As this was a late change to my plans coinciding with my application for ethical approval, I kept the questionnaire element in my application and substituted the participation of graduates instead of current students. I intended to use the questionnaire to reach a larger number of graduates than would be possible by using interview alone and to inform the development of the interview agenda (Cohen et al., 2011). After discussion with my director of studies and after reaching a greater clarity about the issue of generalisation within case study, the need for greater numbers seemed less pressing (Opie, 2004). I finally concluded that I was likely to get richer

data and make better use of time by concentrating my efforts on the focus group with lecturing staff and interviews with graduates (May, 2002).

Data collection

The pilot of the focus group schedule

One of the issues when working with unique groups is the lack of similar populations with which to meaningfully pilot research instruments. This was especially the case with the planned focus group with lecturing staff, there was no other group with whom I could test out my questions and gain insight into the likely success or otherwise of my plans. After considering various options, I decided to test the focus group schedule in an interview with John, a retired member of the teaching staff who could meaningfully replicate the knowledge and experience of the staff group and offer authentic responses to my questions.

The experience of the pilot

I came away feeling that the interview with John had gone well, however on reflection I realised that I had missed an opportunity by sticking too closely to my questions. Rather annoyingly in my homeopathy practice where I use a similar loosely-structured interview/consultation format I pride myself on being able to gather key information while adopting a fluid approach that is able to respond to opportunities to go 'off-piste' as sometimes an aside can reveal crucial information. Yet I had passed over such an opportunity with John when he responded to a question about the impact of the courses on graduates' professional identity by answering about his own professional identity. After acknowledging his comments, I steered him to talk about graduates rather than himself. On finishing the interview, I congratulated myself on having dealt tactfully with his misunderstanding but then realised that as a former CAM practitioner himself, his thoughts on his own professional identity could have been very informative. Reflecting on this process I recognised that my determination to get my questions answered was perhaps the result of some initial nervousness on

beginning the fieldwork for my doctoral research. Although to counter this, in other sections of the interview I did work with the flow of this 'conversation with a purpose' (Burgess, 1984: 102) and did not stick slavishly to the questions or the planned order.

On reviewing my transcript, I identified a second issue which I took to supervision; John is an expert in Carl Rogers' person centred approach (PCA) (Rogers, 1961) and whilst I do not claim the same expertise I also incorporate the values and techniques of the approach in my work as a health practitioner. I realised that during the interview we had established a pattern in our interaction that echoed a PCA consultation, in that after listening to John's response I would check my understanding with him and on occasion offer a new term which he would then take up in his next utterance. In my reflective journal I referred to this as our engagement in a 'PCA dance'. Discussion of this with my supervisor led us to conclude that it was something that I needed to monitor in future interviews but to recognise that as a CAM practitioner and educator teaching on the courses being studied I was inevitably immersed in the case. This incident highlighted the need to work reflexively at every stage of the research process, identifying the influence of my own history and background upon my choice of project, my approach, and choice of methods, questions, data collection, analysis and write-up (Hsiung, 2008). Indeed, Ackroyd and Hughes (1992) make the point that in effect the selection of data begins with the choice and construction of the research questions and the data collection instrument. For me this links with the impossibility of the concept of the unprejudiced observer which is one of the key principles in homeopathy (Hahnemann, 1842/1996). In a similar manner to 'bracketing' within phenomenology, as a homeopath one is expected to work with each patient without preconceptions. However, within a postmodern world many homeopaths now accept the impossibility of this stance and aim instead to minimise the impact of any biases or preconceptions through reflective practice. Reading about qualitative interviewing and working reflexively through my fieldwork has deepened my understanding about both interviews and consultations,

which I now interpret as a collaborative activity in which knowledge is co-constructed by the researcher (or homeopath) and interviewee (or patient) (May, 2002). My view resonates strongly with Best's (2003:895) description of fieldwork as an interactional context in which the researcher and the researched 'construct their symbolic worlds through talk of it, rely on taken-for-granted notions... and in doing so embed these notions within the research encounter', using it as a reminder to question the taken-for-granted notions that I share with my research participants.

The focus group

Focus groups are described by Morgan (1997) as:

'a research technique that collects data through group interaction on a topic determined by the researcher. In essence, it is the researcher's interest that provides the focus, whereas the data themselves come from the group interaction.' (p6)

The group interaction or synergism is seen as one of the main advantages of focus groups (Hess, 1968 cited in Clough and Nutbrown, 2012). Other advantages are that the focus on a particular topic may yield insights that may not have emerged from individual interviews; the production of a considerable amount of data in a relatively short timeframe (Cohen et al., 2011); and the flexibility and adaptability of the format (Morgan, 1997). The potential difficulties in conducting focus groups are seen as ensuring that the group discussion is not dominated by a lone voice; making sure that members of the group have expertise, knowledge, or experience in the required topic and that they are comfortable in expressing their opinions. Morgan (1997) suggests that the impetus of the researcher's interests driving focus group research can be both strength and a weakness of the method. On the one hand focus groups can be very efficient in producing relevant data; on the other hand, the researcher or moderator may exert undue influence upon the group discussion and thereby affect the emergent data.

Focus group discussion was selected for use with staff for several reasons; including the group synergism (Hess, 1968 cited in Clough and Nutbrown, 2012); the generation of the collective view to capture some semblance of the group dynamic that initiated the development of these unique courses; the shared interest, knowledge and experience within the group relevant to the research topic (Cohen et al., 2011); the characteristics of members of the group who were all experienced academics and likely to actively and easily express opinions on the discussion topics; and the accessibility and convenience to both researcher and participants (Morgan, 1997). Additionally, this method was selected in consideration of potential issues arising from the close working relationship between researcher and participants, where individual interviews might too easily blur the boundaries between my position within the lecturing team and my role as a practitioner-researcher (Costley et al., 2010). The power issues related to working with colleagues were thoroughly considered when designing this aspect of the study. As the newest member of the lecturing team, working the fewest hours on a fractional (0.2FTE) post, I did not believe that my colleagues would feel that there was any imbalance of power which obliged them to participate in the study as we are all senior lecturers. However, participants were briefed in all information concerning the research that their participation was entirely voluntary. I did consider using a moderator to run the focus group in order to further mitigate potential boundary issues, however on reflection and after consulting with my director of studies I decided that as a familiar colleague I was in the best position to engage in the co-construction of the focus group output.

The aim of the focus group discussion was to gather background information for example: on the purposes and intentions behind the setting up of the courses; the experience of delivering online courses to an international group; and observations of the influence of the courses upon graduates' individual practice, their professional

identity and the wider CAM community. Staff were also asked for their suggestions as to suitable graduates to approach for interview.

The experience of the focus group

Piloting the focus group schedule with John had the added advantage of being able to try out my questions in the relative safety of a one to one situation. Having considered all the power issues relating to conducting a focus group with my colleagues and determined that given the part-time nature of my role and our longstanding association there would be no imbalance of power or sense of coercion or obligation involved; I had been surprised to realise as I approached the date that actually our association had an impact on me as a researcher. I felt quite daunted at the prospect of conducting the focus group under the scrutiny of my colleagues' knowing eyes. I am usually very comfortable in meetings with my colleagues but in this new role of doctoral researcher I suppose I felt insecure that my research might not seem worthwhile, or that my questions might not be good enough. In the event I need not have worried, my colleagues were enthusiastic in their participation and two of them emailed me afterwards to say that they had felt the meeting had been of benefit to the team.

Following my experience with John, when discussion in the group turned to their own professional identities I encouraged discussion in this direction and was rewarded with one of the participants coming up with a question that I incorporated into my interviews with graduates: 'If you meet someone for the first time and they ask you "What do you do?" How do you answer them?' (Focus group, 29/4/14). I was delighted with this question; it was one of those 'aha' moments when I wondered why I had not thought of asking it myself, but in the same moment as the focus group was continuing it gave me the dilemma of deciding whether or not I should join in this discussion. I elected to wait until all the others had answered this question, and then gave my answer. In my reflective journal I noted that it would have felt odd not to

answer the question myself, and it has been a question that I still ask myself periodically as a prompt for reflexivity. In the interviews with graduates this deceptively simple question has been one that gets straight to the heart of how CAM practitioners identify and describe themselves. I have been able to contextualise this further in interviews with graduates by asking if there was a difference in how they answered before their MSc and since graduating and both questions have yielded some useful insights. My own answer to this question was that I am a homeopath and that I teach at university, depending on the questioner I may have added that I am also studying for a doctorate in education. However, as will be discussed in Chapter Seven, my answer has changed over the course of my studies.

Holding the focus group with lecturing staff served several purposes, in particular, I felt that individual interviews with colleagues might lead to confusion of my role as researcher. On a one to one basis it would have been easy to slip into our usual sort of interaction as co-workers having a chat that potentially might bring up off topic disclosures that could be difficult to deal with (Williams, 2009). By meeting in the novel context of a focus group it did feel easier to hold my role as researcher. Further I definitely felt that my research gained from the benefits of the group interaction and the ideas generated thereby (Morgan, 1997). Mainly though I saw the focus group as providing important background information for my case, a formative process to help guide the development of my interview schedule, and as a source of suggestions for potential interviewees amongst the graduates.

Interviews with graduates

Semi-structured interviews were conducted with nine graduates from the courses, this was originally planned to be with up six former students, however following the removal of the questionnaire element the number of interviews was increased. The interviews enabled the collection of rich, thick descriptive data about graduates'

experiences, their learning on the courses and the influence upon their professional lives.

Described by Burgess as a type of: 'conversation with a purpose' (1984:102 cited in May, 2002:2), interviews have long been widely used in various ways within qualitative research. Interviews allow researchers to explore participants' attitudes, beliefs and concepts at a deeper level than other methods such as questionnaire (Opie, 2004). As with a focus group, participants can develop their own ideas, insights and attitudes during the interaction process, although in this case with the researcher rather than with other participants. Oppenheim (1992 cited in Opie, 2004) suggests that encouragement to interviewees to engage in this way promotes a richer, more spontaneous dialogue between interviewer and interviewee. The degree to which the structure of an interview is pre-determined by the researcher may vary from tightly structured with all questions planned in advance to open-ended and unstructured. The purpose of the interviews and the ontological and epistemological stance of the researcher play an important part in the design of the interview schedule (May, 2002; Cohen et al., 2010). Inevitably my experience as a CAM practitioner informed my preference here for a loosely structured interview schedule within which I felt that whilst I had a guiding structure and clear idea of the purpose of the interview, I also felt free to follow leads from the interviewee to follow-up hunches, inserting extra questions or omitting others in response to the flow of the interaction.

My aim in conducting the interviews was to work more as a co-creator of knowledge with the interviewees rather than as an 'excavator' or 'miner' unearthing facts (May, 2002). This approach sits within the constructionist/constructivist epistemology as described in Chapter Two. The use of interviews as a process of co-construction is described by Kvale as:

*'an **inter-view** where knowledge is constructed in the inter-action between the **interviewer** and the interviewee.'* (Kvale, 2007:2, *emphases in original*),

thus emphasising the process of an exchange of views between interviewee and researcher and the resultant co-construction of knowledge, where knowledge, values and ideologies are fluid rather than static and are processes of social construction.

The success of interviews as a research method is inextricably linked with the skills of the interviewer; this is seen as one of the main weaknesses of this research method. As a CAM practitioner who works with a semi-structured interview format within my clinical and supervisory practices I am reasonably confident in my interviewing skills and am aware that this format was also familiar to the interviewees as qualified CAM practitioners. However, I was cognisant that there were potential pitfalls in our familiarity with this form of interview and I took care to closely monitor the direction that each interview took in order to ensure that it did not slip into either a therapeutic or a supervisory format. This leads onto consideration of another potential weakness of interviews as a research method; that of the interviewer exerting undue influence upon the interviewee's responses. I aimed to gently steer the process, whilst observing opportunities to use prompts to gain further information or clarification and allowing respondents to express their own views and perspectives (Opie, 2004).

Interviewing is 'one of the most common and most powerful ways we use to try to understand our fellow human beings' (Fontana and Frey, 1994:361). In choosing to interview graduates from the MSc courses I knew that I was in a fortunate position in that my prospective participants were likely to be articulate, reflective and able to provide me with rich, thick data. As previously discussed I have been using a form of interview within my healthcare practice for many years. Having taken an interpretivist perspective in other research projects I was comfortable with the notion that the

findings that I drew out of an interview or focus group would be my interpretations of my participants' interpretations, but still somehow I saw an interview as a way of getting information from another person. Now, however as I approached the interview phase of my research and engaged with the work of Ely et al. (1991) and May (2002) I gained a fuller appreciation of my own part in this inherently co-constructive process:

*'Asking, listening and interpretation are **theoretical projects** in the sense that how we ask questions, what we assume is possible from asking questions and from listening to answers, and what kind of knowledge we hear answers to be, are all ways in which we express, pursue and satisfy our theoretical orientations in our research.'*

(May, 2002:2, emphasis in original)

The experience of the interviews with graduates

Participants in the interview phase were without exception very obliging with their time and their willingness to reflect on their experience of their studies and what has emerged since. I conducted a pilot of the graduate interview schedule in a face to face situation, all other interviews were conducted online using skype or adobe connect.

I had been reading about narrative interviewing before the pilot and had planned a very open interview schedule that started with quite a long preamble and an initial question that asked for the story of the participant's journey from their decision to take the course through their experience of it and what had emerged out of it. When the pilot interviewee started answering my question but then quite quickly said 'So what was the other thing you asked me about?' I realised that was something that needed to be broken down into several shorter questions and went back to a slightly more structured format for subsequent interviews, although still keeping a flexibility to follow where the interview took us within reason. Pursuing my interest in professional identity I used the question generated by the focus group: 'If you meet

somebody for the first time and they ask you: “what do you do?” How do you answer them?’ and was interested to note that although I asked ‘what do you do?’ the responses tended to be ‘I am a ...’.

It has been interesting to observe the difference between the face-to-face and online interview formats. Although with Skype or Adobe connect it is still usually possible to see each other via a webcam, if the signal is poor it is better to forego video in order to improve the sound quality. In my first online interview there was a significant sound delay which did impact on how I conducted the interview, in that I became less spontaneous with my responses and further questions as I needed to allow adequate time to make sure that the interviewee had taken their thoughts to their natural conclusion rather than interrupting them by interjecting too soon. This felt like it helped to balance my concerns about when and how much to participate in discussion and meaning checking with my interviewees, and resulted in my taking a little longer to respond to an answer or to move on to the next question.

Evaluation and adjustment of the methods

I believe that the two methods of focus group and individual semi-structured interviews complemented each other in the generation of the rich data required by a case study approach (Stake, 1995). However, I did have some concerns that removing the questionnaire element of my study had left a gap in the research design, mainly in terms of using an adequate variety of research methods in order to be able to fit with the usual case study approach of employing multiple data collection methods. At the beginning of the interview phase of the fieldwork I had planned to conduct two interviews with each participant, the second shorter interview was intended to enable me to check my understanding and interpretation of the participants’ experiences of their studies at UCLan. However, after reviewing the considerable amount of data generated from the focus group and interviews I amended my plans to follow-up the interviews via email.

Interview follow-up phase

In order to construct an instrument that would allow for a meaningful follow-up process, I reviewed, summarised and identified the major areas of focus from each interview. I then produced an individual summary for each graduate interviewee with the topics broadly organised into the question areas from the first phase of interviews, e.g. reasons for taking the course, choice of course etc. These topics were supported by extracts from the interviews either paraphrased or quoted directly to allow participants to review their thoughts and my interpretation of them. Space was provided on the proforma (see Appendix 2: Instrumentation) for participants to add any further comments. I also added in extra questions for several participants to check my understanding, or to ask questions that had emerged at a later stage of the interview phase. In addition, a further question was asked of all participants to broaden the context of how they described their occupation.

This phase was rewarding in its simplicity of execution and in that it allowed me to check that interviewees were happy with my identification of the key points in their interview. Most took the opportunity to add comments, although one participant added no further comments beyond answering the additional question. As this was the first proforma returned I was concerned that the design and instructions may not have been clear and so emailed to check that she was happy with my summary, her reply was reassuring: 'Yes! Your summary says it all! I have no further comments to all said!' (Yolanda, email communication 27/5/15). Overall I felt happy that this phase had confirmed my understanding of the interviews and had provided additional contextual information relating to professional identity.

Ethical issues

Ethical approval for the study was granted by the Business, Arts, Humanities, and Social Sciences (BAHSS) ethics committee at UCLan. My research was informed by

existing ethical codes: that of the British Educational Research Association (BERA) (BERA, 2011), and that of: The British Psychological Society (BPS) Code of Human Research Ethics (BPS, 2011). My aims were to protect from harm, respect the rights and dignity of participants in the research and secure the legitimate interests of stakeholders. The review of ethical requirements has been an ongoing process throughout the conduct of this research in order to protect the rights of the participants, the researcher and the organisation (UCLan).

There are a number of ethical issues common to the use of focus group and interviews namely: the need for clear information for participants to make an informed decision whether to not to participate; the need for clear withdrawal strategies should respondents wish to discontinue their participation; the avoidance of undue pressure on participants both during the recruitment process and during the research activity; respect for participants' rights and dignity; and the confidential treatment of any sensitive information disclosed by participants.

I considered my position as a lecturer on the courses and a CAM practitioner regarding potential power and boundary issues in relation to the focus group with staff and the interviews with graduates. As graduates of the courses, not all of the students had been taught by me, some had hardly encountered me at all during the course of their studies. Nonetheless, where that was not the case there was a potential that graduates or staff might feel a sense of 'indebtedness' and that their decision to participate in the research might be based on a previous relationship with me and my identity as their teacher or as a colleague within the CAM community. Hence, I took care that all participants were fully informed of the research and my role in it and all information concerning the research reiterated that participation was entirely voluntary (see Appendix 1: Documentation for participant information sheets).

Only one ethical issue arose for me during my fieldwork in the form of a piece of troublesome knowledge (Williams, 2009) when a graduate disclosed their feelings of dissatisfaction with their dissertation mark, and their frustration at not having discussed this with their supervisor after completion. I stayed in my researcher/interviewer role, giving the participant space to say what they needed to, and asked a few related questions which revealed that they did recognise that their mark had been affected by personal circumstances including a bereavement. At the end of the interview I let the participant know that I had stopped recording and stepped back into tutor mode by asking if there was anything they would like me to do for them to resolve the situation. Their response was that there was nothing they needed me to do and that they felt that talking about it in the interview had been helpful. I then had the dilemma of whether or not to mention this incident directly to the tutor concerned, but did not want to break the participant's confidentiality. I reflected that I knew this to be a rare occurrence, but felt that it was something that needed to be flagged up. Hence at the next team meeting I made a general comment to my colleagues in which I stressed the importance of our normal practice of giving students and graduates an opportunity for follow-up feedback and discussions on all assignments.

Further ethical issues involved in disseminating my findings relate to confidentiality and anonymity (Cohen et al., 2011). As the CAM world is a relatively small one especially when looking specifically at CAM within HE it is conceivable that in some instances identification of respondents may be possible from their responses via 'deductive disclosure' (Kaiser, 2009: 1632). This issue is a problem common to many forms of data analysis and dissemination. Participants in my research have been made aware in the information and consent documentation that while it is possible that participants could be identified (for example by reference to specialism, gender or nationality) all efforts have been made to remove any identifying material. Braun and Clarke (2013) point out that in some cases although anonymity may seem to be

protective of research participants, it may mute their voice and impact on aims relating to social justice. Given the sceptic activity to which CAM has been subjected I feel that the need for anonymity took precedence and did not envision a resultant dilution of participants' voices, however this is an issue that I continued to be mindful of. I chose to conduct all data collection, transcription and analysis myself; this was both as a safeguard of participants' anonymity and as by far the best method of familiarisation with the data (Howitt and Cramer, 2008)

Validity

As many authors have pointed out the issue of validity in qualitative research is by no means clear-cut (Lincoln and Guba, 1985; Maxwell, 1992; Cresswell and Miller, 2000; Rolfe, 2006; Lincoln et al., 2011). Three basic stances can be discerned in the debate:

1. the validity of qualitative research should be appraised using the same criteria as has traditionally been applied in quantitative research conducted within a positivist paradigm
2. validity in qualitative research is important but a set of criteria which is more sympathetic to the interpretivist paradigm should be applied (although there appears to be no consensus as to which of the many sets of alternative criteria is most suitable or acceptable)
3. it is inappropriate to appraise validity in qualitative research at all (Rolfe, 2006).

Whilst my own intellectual inclination is to lean towards the third option, in that if we accept that research within the interpretivist/constructivist tradition offers a subjective view of a phenomenon and that multiple viewpoints have equal merit, then it seems naive to apply a set of pre-determined criteria with which to judge the research. However, on a more emotional level, I am aware of the wish that my research will be assessed by others as authentic and conducted in a trustworthy manner with self-awareness and transparency; and perhaps also a fear that if I do not

engage in the validity 'dance' then my work will be deemed substandard. Further, during my study, my efforts to conduct and write up my research in the best way that I could naturally led me towards practices which may be seen to support the validity of my research:

- Tracing my decision-trail (Rolfe, 2006) throughout the write-up of my research
- Writing reflexively and transparently about my own positionality and its impact upon my research
- Providing a detailed description of data collection method and analysis
- Engaging in a form of member checking in providing interview participants with an opportunity to review and comment upon a summary of their interview and the key aspects emerging
- Inclusion of sample instruments
- Engaging in a form of triangulation, in that data was gathered from both staff and graduates.

After considering different forms of validity, I found that I was most in sympathy with Braun and Clarke's suggestion that ecological validity is most relevant to qualitative research. Ecological validity: 'is concerned with the relationship between the "real world" and the research' (Braun and Clarke, 2013:280). In other words, ensuring that the findings of the research are meaningful to real life and applicable to real world settings. I feel that this sits well with my epistemological stance of constructionism/constructivism (Crotty, 1998), in that my research has encompassed both social and individual forms of meaning-making. Ely et al.'s (1991) description of her transition from quantitative to qualitative researcher provides further insight into criteria for ecological validity:

'Now I could ask questions such as, "How adequately did I represent what I witnessed?" "What's the match between my vision and those of the people I studied?"' (Ely et al., 1991, p94).

It is my hope that the steps I have taken in my research and the writing of this thesis have enabled me to adequately represent the experiences of graduates and staff and to provide a rich and detailed description of the case.

Limitations

It is important to recognise that my thesis represents a particular point in my doctoral timeline; my views and insights have evolved from my first engagement with the doctoral process and will continue to change and evolve throughout the process and after achievement of my doctorate. The submission of this thesis and its subsequent defence at viva can be seen as end-points in the sense that they signify the conclusion of my doctoral studies, however I do not claim that they should be taken to represent a definitive 'truth'. My work is my interpretation of how participants in this study interpret their world, and as such is context-laden and influenced by the time and space in which I have undertaken the research and analysed the data.

Chapter summary

This chapter has summarised my methodological approach of case study, the methods employed in data collection, and a reflexive account of my experiences in designing the research and conducting the fieldwork. In the following chapter I discuss my approach to data analysis.

Chapter Four: Data analysis

'Whatever your approach to data analysis, it seems fair to say that you, the researcher, are in charge of making meaning, of making sense of your data. No-one else can do that job since you are so intimately bound up with shaping your study and with understanding what you studied. In this sense, all qualitative data analysis is idiosyncratic. To accept that you are at the helm is often frightening at first and comforting at last. It can be any of several shades of overwhelming, as well as liberating and powerful.'

(Ely et al., 1991:143)

This chapter describes my experiences 'at the helm' as I analysed my data. I am in agreement with Ely et al. (1997) in that I accept the inherent idiosyncrasy of qualitative data, and see the findings of my research as my interpretation and construction rather than something which has 'emerged' from my data:

'If themes 'reside' anywhere, they reside in our heads from our thinking about our data and creating links as we understand them.'

(Ely et al., 1997:205-6)

As will be detailed below, my approach to data analysis evolved during my learning on the taught element of the doctoral programme and as my research progressed. I have primarily used Thematic analysis (TA) (Braun and Clarke, 2013) with the addition of some Grounded Theory (GT) techniques (Glaser and Strauss, 1967). In consideration of the volume of the data collected I elected to use N-vivo data analysis software for the majority of the coding process, although this was augmented by some manual coding in the pilot stages of data collection. As a response to the fragmenting process of analysis using software, and in order to strengthen the sense of participants' voices I

have also used an extended version of Brown's and Gilligan's Listening Guide (Kiegelmann, 2009), to produce extended I-poem vignettes¹² for each of the graduate participants, and a We-poem and five interwoven I-poems for staff participants. It is my hope that my idiosyncratic weaving together of analytic techniques has facilitated the presentation of a holistic picture of the case.

Thematic analysis

After careful consideration of a number of data analysis methods, I elected to use Thematic Analysis (TA) as my primary method, with the addition of some Grounded Theory (GT) techniques such as the comparison of data and memo writing. My decision to use TA was informed by an assessment of the value of TA in relation to my methodological position and my chosen methods of interview and focus group. I evaluated the potential ethical issues and tensions, and felt that TA was an appropriate method of data analysis which would facilitate demonstration of an ecological validity in my presentation of findings. Braun and Clarke (2006) define Thematic Analysis as:

'A method for identifying, analysing and reporting patterns (themes) within data. It minimally organizes and describes your data set in (rich) detail. However, frequently it goes further than this, and interprets various aspects of the research topic.' (2006:79).

Gibson and Brown's (2009) description of TA expands on how the data should be analysed:

*'according to commonalities, relationships and differences across a dataset. The word "thematic" relates to the aim of searching for aggregated **themes** within data.'* (2009:127, emphasis in original).

¹² Vignette is used here in the sense of 'a short piece of writing that clearly expresses the typical characteristics of something or someone' (Cambridge Dictionaries Online, n.d.)

TA is a frequently used, although not always explicitly labelled, technique for the analysis of qualitative research data (Braun and Clarke, 2006). Both Gibbs (2011) and Gibson and Brown (2009) suggest that Grounded Theory, Interpretative Phenomenological Analysis, Template Analysis and Framework Analysis all employ TA techniques, thus reinforcing Braun and Clarke's claim that TA is essentially a 'foundational method for qualitative analysis' (2006:78). At the time of Braun and Clarke's influential 2006 paper 'Using thematic analysis in psychology', TA was seen as a poorly demarcated process employed within other analytic approaches (e.g. grounded theory) rather than as an analytic method in its own right (Boyatzis, 1998).

Through the work of Braun and Clarke (2006; 2013), who have further developed a definition and demarcation of TA; the method has gained ground in recent years and is valued for its flexibility in that it may be employed within a wide range of theoretical and epistemological frameworks. The use of TA fits well within a case study approach and my interpretivist theoretical perspective, which facilitated the production of a rich, thick description of my case and provided a creative and intuitive method of engaging with data (Simons, 2009). TA is eminently suitable to use with a wide variety of data collection methods and presented a manageable and sympathetic system of coding and analysing data from my chosen methods of focus group and loosely-structured interviews (Harding, 2013). Howitt and Cramer (2008) contend that there is a tendency to be unclear about exactly how TA techniques have been applied when writing up research reports, suggesting that this makes TA less accessible for early-career researchers. However, many other authors agree that value may be found in the accessibility of TA, both in its relative ease of use for early-career researchers, and in terms of communicating research findings (Gibbs, 2011; Braun and Clarke 2013; Flick, 2014). This is an advantage when communicating research findings to mixed audiences, as is the case with my own research which will be disseminated both within HE and within the CAM professional community. Throughout the analysis process I have aspired to follow Simons' (2009) exhortation to present the story of my

case study as: 'data-rich, located in its socio-political context and fairly and accurately represent participants' judgements and perspectives' (Simons, 2009:147).

TA is sometimes criticised for taking a broad brush-stroke approach to the analysis of data which in the process loses some of the finer detail resulting in 'accounts that can be quite distant from the experience of any one individual' (Harding, 2013:4).

However, this is countered by Gibson and Brown (2009) who recount how TA:

'... provides a way of linking diverse experiences or ideas together, and of juxtaposing and interrelating different examples and features of the data. The themes do re-present and re-contextualise the data to which they relate, but this can be of value in creating new readings and renderings of that data.' (Gibson and Brown, 2009:129).

Although quite familiar and comfortable with the use of TA from work in previous research projects, I found that as I reviewed and refined my research design that the nagging feeling of 'is it doctoral enough?' applied not just to the issue of my research topic, but also to each stage of the research process, including data analysis. Whilst confident in the value of TA, I was also intrigued by suggestions in the literature that GT might strengthen the rigour or lend extra kudos to my research. The next section of this chapter describes my consideration of GT data analysis techniques as a potential alternative to TA, and how I ultimately elected to incorporate some of those techniques into my use of TA.

Grounded theory

Due to the inductive nature of my research, when initially deciding on a suitable method of data analysis I considered GT as a possible option. At first glance it seemed that the GT methodology should be fitting with my own inductive approach which is

rooted in my training as a homeopath, the philosophy of which calls for practitioners to treat each patient as an individual and to attempt to take the stance of an 'unprejudiced observer' (Hahnemann, 1842/1996). This resonated with the 'tabula rasa' or blank slate of GT which was held as vitally important by Glaser and Strauss (1967) who recommended that literature should not be examined prior to fieldwork in order to keep findings and theory grounded in the data (1967). Postmodern sensibilities and a widening acceptance that 'knowledge cannot be separated from the knower' (Alvesson and Skoldberg, 2009:1), have impacted upon qualitative researchers' views of the achievability of such a state of openness (Gibbs, 2007). In terms of my own evolution as a reflexive practitioner and educator ascribing to work from a humanistic perspective (Rogers, 1961) I value the aspiration to remain as open-minded as possible whether working with a new patient, student or research project. However, I also appreciate and value the absolute need for reflexivity and awareness of the preconceptions and assumptions that one brings to any situation. The concept of the tabula rasa has been one of the major areas for criticism of GT, both for its failure to acknowledge the elements of deduction involved in selecting a field of study and the impossibility of putting aside one's assumptions and preconceptions (Thomas and James, 2006). Perceptions of the importance and achievability of the tabula rasa have been modified somewhat in later versions of GT (e.g. Strauss and Corbin, 1998; Charmaz, 2006) in which an analysis of literature prior to fieldwork is seen as acceptable.

The thoroughness of GT techniques is seen to offer a sense of reassurance to researchers, however some criticise GT as restrictive and liable to miss finer nuances within the data (Braun and Clarke, 2006; Thomas and James, 2006; Simons, 2009). Simons (2009) criticises the classical GT approach as being a 'step too far from the immediate and lived experiences' of research participants (2009:125). Flick highlights the practical issues of working with a 'potential endlessness of options for coding and comparisons' (2014:417). Whilst recognising that with many research methodologies

there can be an issue of knowing when to stop it seemed to me that this would be a particular issue with GT and one which concerned me given the timeframe within which I was working and being aware of my own propensity to take things to the 'nth degree'.

Data analysis using computer software

As discussed in the introduction to this chapter, during the pilot stages of fieldwork I began my coding and analysis process using manual coding techniques such as highlighting text in different colours, making notes in the margins, and copying and pasting text between themed word documents. Along with many other researchers I do feel that there is great benefit in working physically with transcripts in order to get a sense of the data. However, as my fieldwork progressed and with almost 80,000 words in focus group and interview transcripts it became apparent that use of Computer-Aided Qualitative Data Analysis Software (CAQDAS) would help me to organise my data and manage my workload. I elected to use N-vivo as both the software and training were available through UCLan. 'Table 3: A comparison of Braun and Clarke's (2013) 7-stage data analysis process and my data analysis process' on pages 120-121 of this thesis provides further details as to how my use of N-vivo fitted into the data analysis process.

The advent of data analysis software that is suitable for use in qualitative research is both applauded and criticised (e.g. Thomas, 2013; Flick, 2014). The obvious advantages of using software relate mainly to the management and storage of multiple types of data including audio and video interview recordings, transcripts, field notes, literature, and memos. Other benefits include the ease of amending and retrieving codes, the facility to visualise data in a number of different ways, and the facility to conduct word searches to check for missed codes.

One of the main disadvantages of the use of CAQDAS is the potential for fragmentation of data, which can distort the researcher's perspective (Harding, 2013; Flick, 2014). I found that as I analysed my data, there were times when I wanted to look back at the paper copies of transcripts, and during my construction of themes I got to a certain stage with N-vivo and then felt the need to write out the codes on pieces of paper so I could easily move them around (see Table 3: A comparison of Braun and Clarke's (2013) 7-stage data analysis process and my data analysis process, pp120-121 for further details).

Being readily able to manipulate data in several different ways using CAQDAS may allow researchers to think more creatively about their data (Harding, 2013 citing Bryman, 2008). As this was my first experience of using N-vivo I found that once I got over my initial caution of 'messing it up', I soon gained in confidence and enjoyed trying out different ways of handling the data and feel that this did at times help me to make creative leaps. Mauthner and Doucet (1998) suggest that researchers may feel that their use of CAQDAS technology 'confers an air of scientific objectivity', however data analysis essentially remains a 'fundamentally subjective, interpretative process' and requires a critical reflexivity from the researcher about their use of such programmes (1998:123). Whilst analysing my data using N-vivo I found the facility to store memos very useful in supporting my reflexive efforts, additionally I continued to write in my handwritten reflective journal, and to periodically refer back to Braun and Clarke's writings (Braun and Clarke, 2006; Braun and Clarke, 2013) to check my working processes. Of course, CAQDAS programmes do not analyse the data, there is still a lot of work to be done by the researcher (Flick, 2014), and I did do a lot of work, but I greatly appreciated the addition of this tool to my research toolbox.

The construction of I-poems

My use of Gilligan's Listening Guide method to construct I-poems (Brown and Gilligan, 1992; Kiegelmann, 2009) has been a way of mitigating against issues of fragmentation by analysis, honouring the polyvocality inherent in my research, and protecting the coherence of participants' voices (Thody, 2006; Edwards and Weller, 2012). Although I had intended to work solely with my conception of TA informed by GT, whilst writing this thesis I decided that I wanted to find a meaningful and respectful way to introduce the research participants. Having already experimented with an adapted version of the Listening Guide during the taught component of my doctoral studies, I turned again to this method to construct a vignette for each graduate participant along with a brief analytic commentary on the story told and the contrapuntal voices that were expressed in each I-poem. The resulting I-poems and analysis are presented in Chapter Five of this thesis.

The development of the Listening Guide arose from feminist ethicist and psychologist Carol Gilligan's work on identity and moral development with her students (Hesse-Biber and Leavey, 2006; Milligan and Woodley, 2010). The development of the method was a feminist response to the recognition that the apparently neutral standpoint of psychological research at the time was anything but:

'The standpoint was androcentric, reflecting a gender binary and hierarchy that privileged autonomy over intimacy and relationships, reason over emotion, and actively discouraged research on women and girls as if human were synonymous with masculine and the category feminine could only confuse the issue.' (Gilligan, 2015:70)

The Listening Guide method has been widely taken-up, initially in psychological research and then more generally in other qualitative research fields including sociology and education (Raider-Roth, 2014)

In practice a 'listening' is often actually a reading of a transcript, and indeed the first iteration of this method was in the development of a 'Reader's Guide' to help psychology students systematically focus on the subjectivity of research participants, and the relationship between researcher and participant. Gilligan's most recent article (2015) recommends three 'listening' stages or reviews of the transcript each asking a different question:

- a) What are the psychological features of this landscape?
- b) How does the 'I' or first-person voice move across this terrain? (This is the stage at which 'I' phrases, are extracted, usually just with the 'I' and the verb, in order to construct an I-poem in the same sequence in which the phrases appear in the transcript)
- c) What voices within this transcript or text speak to or inform the researcher's question? (This is the stage at which the interviewee's contrapuntal voices are identified and reflected upon) (Gilligan, 2015).

As with many research approaches, researchers often make adaptations in their application of methods and the Listening Guide is no exception. There have been several studies in which an extended version of the I-poem has been used, wherein longer sections of text are used in order to make the poems more accessible and to give a meaningful insight into the participants' situation (Mauthner and Doucet, 1998; Balan, 2005; Milligan and Woodley, 2010). As my primary intention in the use of I-poems was to construct introductory vignettes, and because I was conducting educational rather than psychological research, I chose to use the extended method, incorporating some contextual text to complete the anchoring 'I' statements. Initially I had intended to use the poems as standalone, self-explanatory introductions, however on exploring the method further, it seemed a wasted opportunity not to engage in the analysis process and revised my plan. Hence Chapter Five now includes analysis based on Gilligan's method (2015).

My data analysis process

Inevitably in writing a description of my data analysis process there is an element of 'tidying up' so as to produce a coherent account for the readers of this thesis.

However, I would like to acknowledge here my agreement with Mauthner and Doucet that:

'data analysis is not a discrete phase of the research process confined to the moments when we analyse interview transcripts. Rather, it is an ongoing process which takes place throughout, and often extends beyond, the life of a research project.' (1998:123).

My data analysis process has been a long one, beginning with tentative manual coding after pilot interviews, moving on to pages and pages of transcripts spread out on desks in a classroom to see the shape of my data, then on to uploading of transcripts into N-vivo, learning how to use the programme to produce nodes and sub-nodes, cutting up bits of paper to play with codes and themes while on my holiday in Crete; and it continued to be ongoing as I wrote this thesis, constructed I-poems, and re-engaged with the literature. Sometimes it was more to the back of my mind, and other times at the forefront, but it was always there.

According to Braun and Clarke (2006) the notable difference between GT and TA is that TA is not aimed at producing a theory, although as previously stated this is not necessarily the aim in all GT research (Charmaz, 2012). As I was working within an intrinsic case study approach my aim was not to test or produce theory, therefore on this count I felt more drawn to TA as an analysis tool. Although, as discussed in Chapter Three, I now realise that some theorisation was inevitable.

My exploration of GT influenced my application of TA in that I revisited and compared data to see how my understanding of it had evolved with a new cycle of data

collection, coding and analysis. Reflecting upon the different stages of my coding process I can detect a progression from an initial broad-brush approach, to a honing in on finer details in later iterations.

TA might be seen as a building block form of analysis and less exotic or exciting than other methods, but for me there was an appeal in the simplicity and natural feel in the TA way of handling data. It seemed like common sense, or how I would analyse data if nobody had told me how to do it. As I gained confidence in taking ownership of my research I found that I was more sure of my decision to stay with the straightforwardness of TA, although making use of the GT technique of writing analytic memos to record and assess my deepening understanding of and insights into the data. Ely et al. refer to this practice as a researcher's conversation with themselves seeing it as playing an important role in 'moving methodology and analysis forward' (1991:80). I also felt that my coding process benefitted from experimenting with coding for actions and processes (Charmaz, 2012) and comparing it to coding for topics and themes. When just coding for actions and processes I was left with a sense of incompleteness, however I think that awareness of this technique added another dimension to my coding process.

Braun and Clarke (2013) suggest a 7-stage process for the coding and analysis of data. As will be seen below in Table 3 I have used Braun and Clarke's stages more as a guiding framework in an iterative process rather than a fixed 'recipe' to be followed to the letter, and indeed this is what they recommend. During the pilot and early stages of data collection I transcribed data as soon after collection as I could and constructed a rough and evolving list of themes, constituent codes and potential relationships. Subsequent data collection and analysis cycles led to further adjustments and clarifications of what each theme encompassed, as Howitt and Cramer write (2008), this was somewhat of a trial and error process. Stages 3 and 4 were engaged in

cyclically in a similar way to GT analysis, in that coding was revisited several times and compared across datasets, as was the search for themes. For example, I found that my take on the focus group data was somewhat modified following an interview with a graduate; listening to her describing her weariness in defending CAM made me look again at data from the focus group discussion about how staff described their work which led to the code 'distancing professional identity from CAM'.

My initial coding of the entire focus group data generated a large number of codes and themes that I found challenging to fit together in a cohesive schema. As Howitt and Cramer (2008) state, the identification of a few superficial themes is a relatively easy matter when working with TA, but the formulation of themes which are reflective of a higher level of analysis is more challenging. I did get to a point with the focus group data where I had worked and worked on it but still felt a sense of dissatisfaction with what I had produced. It then struck me that what I needed to do was to collect more data to help move the process forward. Indeed, I found during the process of conducting the interviews with the graduates that my ideas about the themes and the relationships between them became clearer. In the light of this clarification it was very useful to then revisit the focus group data (Howitt and Cramer, 2008). Right through the data analysis process I seemed to oscillate between clarity and uncertainty on a regular basis, although frustrating at times, on looking back I can see that this was a necessary part of the process. During these oscillations I made good use of my support network and conferred with colleagues on the course team, peers on the doctoral programme, and in particular took my codes and themes to my director of studies for discussion. The resulting variety of input and expertise provided a useful balance of challenge and support, adding another layer of rigour to my analysis process (Ely et al., 1991).

In a similar way to my mode of working as a health practitioner analysing a patient's case I took a largely inductive approach to coding, with my primary focus being on codes and themes that were evident within the data, however inevitably elements of a deductive process came into play both in the collection of data in the construction of questions, and in the coding and analysis process which cannot be undertaken in an 'epistemological vacuum' (Joffe and Yardley, 2003; Braun and Clarke, 2006). Hence my tentative thoughts in this area were also informed by my exploration of literatures. The use of diverse approaches to data analysis is recommended as offering further insight and illumination (Coffey and Atkinson, 1996) and TA and the Listening Guide method are seen as contrasting yet complementary TA approaches (Edwards and Weller, 2012). As detailed above my use of the Listening Guide to construct I-poems, came at a later stage in my analysis and has been intertwined with the writing of my thesis. The table below lays out in detail my own data analysis process mapped against Braun and Clarke's (2013) 7-stage process for data analysis.

Table 3: A comparison of Braun and Clarke's (2013) 7-stage data analysis process and my data analysis process

Braun and Clarke's 7 stage process of data analysis	My data analysis process	Notes
<i>Throughout each of the stages below I made use of my support network and conferred with colleagues, peers and my Director of Studies to check my coding and the development of themes</i>		
Transcription.	I completed transcription as soon after each interview as possible. As and when gaps in the interview schedule allowed I interspersed transcription with coding.	I jotted down brief notes during interviews, and wrote short reflections, seeing this as laying the foundations for the data analysis process. I immersed myself in the data by transcribing all interviews and the focus group myself.
Reading and familiarisation, noting items of potential interest	I checked each transcription against the recording, and then read through all transcriptions again, making notes of items of interest.	By this stage I felt very familiar with the data, so moved onto manually coding the pilot interview with John and the staff focus group using the comments facility in Microsoft Word and

		handwritten notes on the printed transcripts.
Coding – complete across entire data set	I created basic nodes in N-vivo based on the interview questions. I coded all graduate interviews and email responses in N-vivo, liberally creating further nodes when necessary.	I found it helpful to keep a written master list of nodes which I adjusted as I made changes, e.g. deleting, or collapsing of nodes. I wrote memos in N-vivo throughout the coding process and continued to write in my reflective journal.
Searching for themes	I wrote each node onto a separate piece of paper and rearranged them into themes several times.	This exercise enabled me to view the nodes and themes flexibly. I then made adjustments in N-vivo and to the written master list.
Reviewing themes – producing a thematic map of provisional themes, sub-themes and relationships between them	I decided to review individual nodes in Nvivo, some nodes were deleted or converted to sub-nodes. I coded the focus group and pilot interview with John into N-vivo using my previous manual codes but also revising as I went along.	Some of the larger nodes were printed out for ease of review. This felt like a useful exercise to check how the coding compared to the graduate interviews. Some nodes which had previously discarded were reinstated, while others which had come up during the focus group did not come through strongly enough in the graduate interviews to remain.
Defining and naming themes - refining the specifics of each theme and the overall story the analysis tells	I produced an index card for each theme showing the nodes and sub-nodes. The cards were arranged to produce a thematic map.	Being able to move the themes about and try different configurations enabled me to discern how the themes fitted together and to begin to plan how I would tell the story of my research in the write-up.
Writing – finalising analysis	I constructed extended I-poems from the focus group and the graduate interviews. The graduate I-poems are presented in Chapter Five as introductory vignettes.	Writing this thesis has indeed helped to finalise my analysis process as I have necessarily reviewed and refined my themes along with related theoretical perspectives and literatures.

Reflection on the process

TA while offering guidelines and a flexibility of approach making it suitable for use in a variety of methodologies does not offer certainty that methods like GT appear to promise, this is both liberating and frustrating at times. I found as I was coding and analysing data for my doctoral studies that I was sometimes more unsure than I have been in previous research work, I think this was partly a result of wanting my work to stand up well to the level of doctoral study, and partly the desire to achieve a higher order analysis than I perhaps have in previous projects. Ribbens and Edwards (1998) allude to the pressure of feeling the need to be acceptable to others or to fit in with prevailing discourses and conventions, warning that researchers may inadvertently silence both their own voice and those of the subjects of their research. In such situations I tried to take a step back and work reflexively in order to clarify my thoughts and to accept that I was 'at the helm' (Ely et al., 1991:143) whilst remaining mindful of my own positionality and how that impacted upon my research.

As a CAM practitioner who has undertaken higher education I needed to reflect on my own practice and experience both of HE and of practising a CAM discipline. Additionally, as both a senior lecturer teaching on these courses and a UCLan doctoral candidate I needed to reflect on my multiple situatedness within the UCLan organisation and the impact of my own educational journey upon my practice as an educator (Costley et al., 2010; Drake and Heath, 2011). Working within both CAM and Higher Education (HE) I could clearly offer an emic perspective on the position of CAM practitioners within HE, but I needed to step back sufficiently to take an analytic stance, to make the familiar unfamiliar (Ely et al., 1991). I was aware that I could inadvertently be selective in the data that I drew on in order to reflect my own experience, therefore I needed to challenge and interrogate my own understanding through regular engagement with supervision and reflexive work. As a CAM professional the habit of using reflection and supervision was already deeply ingrained in my professional life and indeed in my psyche; by using my existing supervision

networks within CAM and with my director of studies and peers on the doctoral programme I was fortunate to have access to a broad range of skills and experience that I made use of with the aim of keeping a balanced perspective which respected the voices of my research subjects and yet was still able to challenge my own assumptions and those of my participants (Ribbens and Edwards, 1998).

Chapter summary

This chapter has provided a detailed and reflexive account of my data analysis process, using a combination of Thematic analysis with the addition of some Grounded Theory techniques, and the construction of I-poem vignettes. The resulting vignettes follow in the next chapter as I introduce the graduate participants.

Chapter Five: Setting the scene and introducing the graduates

It stands to reason that themes, social rules, and constructs/vignettes do not stand alone. They are devices that are established through analysis and offered to provide meaning, cohesion, and color to the presentation. They serve also to counter the danger of over-abstracting by anchoring the findings firmly in the field that gave rise to them.’ (Ely et al., 1991)

This chapter firstly sets the scene for the case study by detailing the structure and pedagogical methods employed on the MSc programmes in question, before going on to introduce the graduate participants by use of I-poem vignettes. Use of Gilligan’s I-poem analysis techniques (2015) affords the presentation of an analysis that is rooted in each individual’s personal story and situation; this contrasts with and complements the more traditional presentation of findings in Chapter Six.

The case study programmes: structure and pedagogical methods

The case study MSc courses are designed with a modular framework within which students are able to explore their own areas of interest, for example: the historical development, philosophy, practical applications or inter-professional applications relating to their chosen mode of practice. To provide an example, the learning outcomes for MSc Integrated Healthcare are shown in Appendix Six. Embedded within the philosophical and pedagogical underpinnings of the course it is possible to discern the backgrounds of those who were responsible for its development (Anderson, 2012), who in addition to all being qualified CAM practitioners variously held experience and qualifications in philosophy, law, ethics, person-centred counselling,

and professional conduct. As described in Chapter One, one of the drivers for the development of the courses was a desire to contribute to the improvement of educational standards within CAM, which fitted well with the expected outcomes for a course delivered at HE Level 7 (QAA, 2008). Hence, as might be expected in a master's level course the requirement for critical analysis, reflection and evaluation forms a strong thread running through all modules:

'Course objectives: The Quality Assurance Agency for Higher Education (QAA, 2010) has set out the objectives of study at Masters Level, and this course has been designed with these in mind. They state that the student should demonstrate "conceptual understanding that enables the student to evaluate critically current research and advanced scholarship in the discipline and to evaluate methodologies and develop critiques of them and, where appropriate, to propose new hypotheses".'

(MSc Integrated Healthcare Course Handbook 2016:4)

In order to foster a broadening of viewpoints, students are encouraged to engage with perspectives from the wider health and social fields, and to bring these into their written and presentation work.

As shown in figure 4, the basic structure across all three courses comprises three compulsory modules in year 1: Deconstructing Practice, Introduction to Postgraduate Research, and Developing Practice. These modules encourage students to question the assumptions they hold about biomedicine and CAM in general, and their own practice in particular. Additionally, students are introduced to the philosophy of science and begin to develop an understanding of research methods and methodologies. In year 2, students complete a core module specific to their chosen pathway and exit award; Creative Prescribing for MSc Herbal Medicine, Advancing Homeopathy Practice for MSc Homeopathy, and Perspectives on Integrated

Healthcare for MSc Integrated Healthcare. Students select two further modules from a list of options which include: Applying Methods in Health Research; Research, Ethics and Governance; Inspiring Education; Therapeutic Relationships; and a Student Initiated module. Year 3 is devoted to the completion of their dissertation.

Year 1	Deconstructing practice (compulsory)
	Introduction to postgraduate research (compulsory)
	Developing practice (compulsory)
Year 2	Perspectives of integrated healthcare (core)
	Applying methods in health research (optional)
	Research, ethics, and governance (optional)
	Inspiring education (optional)
	Student initiated module (optional)
	Therapeutic relationships (optional)
Year 3	Dissertation (triple module, compulsory)

Figure 4 MSc Integrated Healthcare modules

The course learning activities, intended learning outcomes, and assessment methods are constructively aligned to give learners opportunities to engage in meaningful activities which are appropriately assessed (Biggs, 2011; Race, 2014). A variety of formative and summative assessments are used including individual and group presentations during synchronous tutorials in Adobe Connect Breezerooms, discussion activities using asynchronous discussion boards, seminar papers, essays of varying lengths, patchwork texts, and the writing of articles for publication. Detailed and

constructive feedback is provided in writing and verbally via Skype tutorials at the student's request both during the writing process and after marking.

Pedagogical methods such as the use of study buddies and formative group assignments foster a sense of community and collaboration which support the students and mitigate the difficulties of socialisation in online programmes. In terms of the various models for learning in communities, Lave and Wenger's more spontaneous and informal COP model (1999) may be seen as more applicable to the case study programme than Wilson et al's Bounded Learning Community (2004), where the community structure is imposed by the tutors. Whilst tutors on the case study programme are keen to encourage a sense of community, they recognise that not all students wish to fully participate. That said, there is generally a strong sense of community on the course. Further as shown in Appendix Five: Student and graduate publications, students' learning has the potential to extend beyond the programme to the wider CAM community via published articles and conference presentations. Hence there is a sense of students learning both for and with their wider communities (Anderson, 2004; Holmes and Gardner, 2006).

As CAM practitioners or ex-practitioners, the tutors tend towards a collaborative socio-constructivist pedagogy, holding a respect for learners' previous knowledge and experience, and seeing themselves as collaborators and co-constructors of knowledge rather than experts at the front of the class. This model is reinforced to an extent by the logistical necessities of e-learning, which are more suited to relatively short online tutorials than longer lecture based lessons. In terms of other traditional pedagogies, there is little evidence of behaviourism in the methods adopted. However, cognitivist techniques of scaffolding are employed both in the induction process, and in the additional study skills sessions which are provided to support students who may be

unfamiliar with using the electronic library and may lack skills in referencing, and searching electronic databases.

In essence, the course team employ a flipped classroom methodology wherein learning materials are provided on the VLE for students to study in advance of the synchronous online session (Tucker, 2012). Materials are mainly presented in the form of written study units, which often include links to external websites, articles and video materials. Using elements of PBL or problem posing, at the end of each study unit, students are asked to come to the online tutorial ready to discuss a particular issue, as for example in the first unit on the Deconstructing Practice module:

- *Can you identify any sacred cows in your own belief system?*
- *How could they be impacting upon your practice?*
- *Try to distinguish between knowledge and belief in your understanding.*
- *How can we distinguish between rhetoric and reality in teaching?*

Discussion during online sessions is backed up and extended by use of asynchronous discussion boards, which also provide a way of facilitating peer support activities. Increasingly, the course team are also seeing students' independent use of social media to work collaboratively and to stay connected with each other. All synchronous online sessions are recorded and students are provided with web links to access them. This serves a dual purpose in allowing students who were unable to attend a session to catch up, and is also used as a way of providing assignment guidance and study skills sessions which students can access asynchronously.

In terms of encouraging criticality, the course approach veers more towards critical thinking than critical pedagogy, again this may be in part due to the tutors' history and experience as CAM practitioners and a philosophy of a person-centred, non-directive approach (Rogers, 2002). However, the status of the CAM profession does tie in with a critical pedagogy agenda and in many cases students and graduates are seen to be developing their own praxis.

From the outset of the course, students are encouraged to engage in critical reflection and analysis of their own profession and of the landscape in which it is situated. Their explorations of epistemology and the philosophy of science lead naturally to a re-evaluation of the rhetoric and reality of their own practice. This is expanded further with an overview of the concepts, benefits and blind-spots of EBM (Sackett et al., 1996), and an introduction to postgraduate research. Traditionally, awareness and engagement with research concepts and practices have been somewhat lacking within the CAM professions (Partington and Foulkes, 2004), hence for many students there is a sense of learning a new and empowering language.

This section of the chapter has provided a scene-setting for the research by describing the pedagogical methods employed within the case study programmes. The topic of e-learning and related pedagogies will be taken up again in Chapter Seven: Discussion, where I will discuss the contribution of this thesis to the pedagogy of e-learning. I now continue to set the scene and begin the presentation of my findings as I introduce the graduate participants.

Introducing the graduates

This section of the chapter provides vignettes as a way to introduce the MSc graduates who participated in the interview phase, to anchor my findings in the field

(Ely et al., 1991), and to respect the polyvocality of this research (Thody, 2006). As detailed in Chapter 4 Data Analysis, the construction of the I-poems was a later stage in my analysis process with an initial goal of producing introductory vignettes. However, I soon realised that here was an opportunity to add another layer of analysis, providing a further check on my use of TA which in some instances did result in slight adjustments to my presentation of findings in Chapter Five.

Each graduate's vignette opens with a short biography, followed by an I-poem which been constructed from their interview transcript, and concludes with a brief analysis (Gilligan, 2015). The chapter closes with my own I-poem extracted and constructed from this thesis as a way of locating myself in relation to the research participants.

Olivia

Olivia lives in the UK; she was in the first cohort of the MSc Homeopathy programme and completed the course within 2 years. Olivia did not enter University as a school-leaver. She graduated with BSc Homeopathic Medicine during her 30s and then completed a Post-Graduate Certificate of Education (PGCE). Olivia teaches in HE, and has a small part-time homeopathy practice. Olivia is currently studying at doctoral level.

Olivia's I-poem

I always wanted to do an MSc, I'd got the bug for education

Now I think I'm far more confident about things

I decided maybe practice wasn't for me

I needed to do more for me, I can achieve at this educational level

I need to be not as niche

I've had to work hard for this

I love the science bit because then I feel like I'm on a level with scientists

I am a scientist

I might not be a scientist in the conventional sense but

I am a scientist

I don't like to be boxed in

"You've done your degree, now get on with being a mum and a little bit of a homeopath"

I want to be more than that, I need to break free from that

Here I am working for a doctorate

It's been a stepping stone

I used to say I'm a homeopath. Now I say I'm a lecturer

I get a bit fed up of defending complementary therapies

I've gone from homeopath to educator and that's my professional identity now

I strive to be a professional.

Before I was just a homeopath and a mum

Now it's important that people know I lecture for a profession and that I am well educated

Now it's my time to be a professional

I am a researcher and that makes me feel quite proud

I just like academia and that's important.

Olivia's I-poem tells a story of striving for educational achievement and professional respect. Having qualified as a homeopath she found that she didn't identify strongly with the profession - practising homeopathy didn't feel like it was 'for her' (although at the time of the interview she still maintained a small practice). We hear in Olivia's story a voice of resistance to being boxed in by others' expectations of her, we also hear a voice of weariness regarding the defence of CAM and a voice of determination to move away from the potentially stigmatising label of homeopath to a new professional identity as an educator. The MSc has been a stepping stone for her and has contributed to a change in her personal and professional identities. The strong link between how Olivia feels she is perceived professionally and how she views herself personally is apparent in her contrasting statements about being seen as *just* a homeopath and a mum, and her proud declarations of being well-educated, professional, a scientist and a researcher. There is a clear sense that this is for her – 'now it's my time'.

As Olivia was the pilot participant for the graduate interviews I sent her this I-poem and asked her what she thought. I received this reply: 'I love it!! Showed it to [my husband] and he said it was very enlightening...'. (Personal correspondence, 4/4/16)

Connie

Connie lives in North America, she had a career in art before becoming a herbalist. Connie graduated with MSc Herbal Medicine; she is currently a practising herbalist and studying for a professional doctorate, her area of study is the history of herbal medicine. Connie has been frustrated with perceptions of herbal medicine in her country, where she feels it is often compared unfavourably with naturopathy.

Connie's I-poem

The way I work with patients is completely different than it was before the MSc

I knew that I had a large hole in my understanding

I knew that if I didn't find a course to help me fill that hole

I was going to have to do an awful lot of self-study

I almost could draw you the size of the hole that I was seeing in the way I was working

I approach how I work in clinic markedly different

It has reawakened that I love research

I'm in my late 50s now

If I'm not going to find a time to be able to answer those questions when is it going to happen?

It was like somebody, maybe the universe – who knows? was saying:

"This door's been waiting for you to open it

Just open it up and go through

We're showing you how and now's your time"

I would say doing this programme has completely changed everything for me.

Connie tells a story of change and transformation, she vividly portrays a sense of a gap in her previous understanding of herbal medicine, she can almost draw us a picture of the size of it. She tells us a tale of change in her practice and of reawakening her love of research. In Connie's story we hear the voice of another – the universe – telling her to seize the opportunity offered by the MSc. In the early part of Connie's I-poem we can hear her uncertainty about her practice, at the close this has changed to a strong certainty – this 'has changed everything for me'.

Fran

Fran lives in the UK, she graduated with MSc Herbal Medicine. Fran gave up the practice of herbal medicine while she brought up her children, but this decision was also influenced by some difficulties that she had experienced whilst in practice. Bringing up her family is still the priority for Fran although she also finds time to write a blog on the topic of herbal medicine. Her dream job would be to be an adviser to the National Trust or a similar organisation on the cultivation of herb gardens.

Fran's I-poem

I couldn't rely on my previous training to answer the questions that had come up in practice

I remember feeling quite terrified when I was accepted – like being stood at the edge of a very dark forest

Having stopped practice and being at home to look after the kids

I didn't feel like a herbalist, I felt bad about it

This helped me to understand what a herbalist is

I don't have to practice and that actually I'm a herbalist

And it's OK to be the type of herbalist I am

It's given me a qualification

It's let me explore myself as a herbalist

I feel totally in a different place now than I did 3 years ago

I felt as though I had to tell people that I was a herbalist and

I was a medical herbalist and I wasn't practising at the minute

But these were the things I'd done and this was what I'd achieved

I was kind of really insecure

It was a relief to say actually I'm studying a master's degree

I wouldn't tell people I was a herbalist, it was just about studying

These days I'm quite happy to say I'm a herbalist

I don't feel I've got to justify

I'm happy to say I'm a herbalist

But it's just one bit of what I am

I feel as though the practice is just the tip of an iceberg

I put so much into the importance of practising

I don't feel like that anymore

It's about me and my life habits, my lifestyle.

Fran's I-poem tells a story of feeling that her identity as a herbalist was dependent on being a herbalist in practice (Sikes et al., 1985; Goldie, 2012). Through her studies she has broadened her own perspective of what being a herbalist entails. She now feels confident in claiming this identity as her own and is very clear that it resonates with her habits and lifestyle. In Fran's I-poem we hear voices of fear and uncertainty turning into a confident expression of who she is and what it means to her.

Sally

Sally lives and works in the UK and North America. Sally is the first person in her family to enter HE. She graduated with MSc Homeopathy. Sally's practice encompasses a wide range of CAM therapies. Through her involvement in a CAM association, Sally has

done a lot of media work over the years including radio and television appearances to promote and to defend CAM. An accomplished social media networker, Sally also teaches, and writes magazine articles on the topic of health and CAM therapies

Sally's I-poem

I was absolutely determined

I had done a few things media wise

I did not feel grounded in the science side of things

I needed more of an understanding of what constitutes decent research in science

It meant a lot more than I thought, it's the gift that keeps on giving

I loved the process

I hadn't done an undergraduate degree

It was a baptism of fire

I found that I was viewing the world in a different way

I feel much more empowered

If I am faced with a critic, I feel much more empowered

I am able to just put my hands up and say I don't know but I know where to go for the answers

I come from a family that has not had any kind of higher education

These people are really clever, I shouldn't even be here

Oh wow I've written all these words and

I think that sounds reasonably intelligent – where did that come from?

I'm a practitioner

I work with people side by side to help them understand what the issues are

I really don't name it

I believe what I do has to be very fluid

In my heart and soul though I'm first and foremost a homeopath

Sally's I-poem tells us a series of related stories, her motivation to study for an MSc, her experience of being the first in her family to go into Higher Education, and how she describes her occupation. Her descriptions are vivid – it was 'a baptism of fire', 'she loved the process'. In Sally's I-poem we hear a voice of uncertainty when faced with critics of CAM, a voice of determination in her attitude to her studies, a voice of empowerment that she is viewing the world in a different way and that it's ok to say if she doesn't know something, and a voice of joy and pride in her achievements. The final voice seems to be more elusive, in her heart and soul she is first and foremost a homeopath, but she doesn't really name it and has a 'fluid' way of describing how she works with clients. In some ways this is representative of the type of work that Sally does in using several types of therapies, and perhaps there is less focus on homeopathy in her practice, but I am left wondering if despite the MSc there is still a sense of homeopathy being the therapy that 'dare not speak its name'.

Dilip

Dilip lives in North America, he graduated with MSc Integrated Healthcare. Dilip is trained in several CAM therapies and works for an organisation that supports people with HIV and AIDS. At the time of the interview Dilip was engaged in studying for a professional doctorate.

Dilip's I-Poem

I needed something credible

When I talk about peer research in the workplace

People will assume that I do understand what I'm talking about

I want to look at the broad strokes, I think it's important to look at everything

It allowed me to think in a different framework

I've been submitting at some conferences

I think my director at work is pretty glad that I did this

It is useful and helpful to have the MSc at the back of my name

I talk about where I work full-time then what I am researching

I talk about mind-body complementary medicine

I've noticed a shift in whether people take what you're talking about seriously

The fact that I'm doing a doctorate made everyone pay attention

It is something that I can confidently use as leverage when I speak to people about issues

I have the same knowledge before as I do now

It's just the psychology of how people relate to you

I've been asked to join a couple of other research teams

I can speak more clearly on different methodologies; it helps to give more depth to what I'm talking about

I do a lot of presentations

It helps me speak in more research language, I can provide a different analysis

I recommend the programme,

I'm very glad I did it, long story short.

Dilip's I-poem tells a story of a search for credibility which he feels has been helped by the addition of MSc at the back of his name, and his progression on to a doctoral programme. He feels that he is now taken more seriously and that people pay attention to what he is saying. Dilip feels that he has the same knowledge as before the MSc, but that now he thinks in a different framework, this resonates with Mezirow's (1978; 2000; 2009) definition of TL as impacting on frames of reference. Dilip's poem speaks mainly of outward-facing activities; presentations, conferences etc. His credibility at such events is important to him and he can now speak in a research language. The voice we hear in this I-poem seems to predominantly belong to Dilip's outward facing professional persona, he is business-like and to the point – 'I am glad I did it, long story short'.

Sonia

Sonia graduated with MSc Homeopathy. She practices and teaches homeopathy in two Central European countries, although recently one country has stopped the practice of homeopathy by non-medically qualified practitioners. Sonia mentors and supervises new homeopathy practitioners and has been involved in the running of homeopathy colleges. Sonia is currently undertaking a professional doctorate.

Sonia's I-poem

I know it sounds weird but it was about getting a status, an accredited certificate from a real university

When I speak about it to my colleagues I temper it a bit because it sounds so euphoric

From the new law we closed down our practices, we had 10 days to do it

Then there was a message online saying we could register

We were frenzied

I can practice until given negative advice about my application

It's difficult to build a practice if you don't know whether you will be continuing practice

We are like the biggest quacks there can be on the bottom of the bottommost of the pit

The MSc has provided me a place

"Oh you have a master's, oh you have a master's in homeopathy, oh you can come in"

I like it a bit

I feel I can say something because I have proven

I can say something because I have an MSc

I would still have chosen homeopathy

I don't care about the law

I'm a homeopath and they can permit me to practice but they can't permit me to be who I am or how I think about it and I can't change it

I feel I am respected for that from both sides

I can rightfully take my place that's also one thing the MSc has done for me

I want to help homeopathy out of the gutters

I want to show them: "Look you think we are quacks; we are not professional."

But look I am one of them and I am professional."

I try to stand for our group of practitioners

Now I am doing a doctorate, I have to do something

Otherwise there's a black, a terrible gap when all homeopathy will fall away

Sonia's I-poem tells us a story of a search for her place in a rapidly changing professional landscape. Perceived as a quack in a country that is legislating against non-medically qualified homeopaths she is at the bottom of the bottommost pit, yet the MSc qualification from a 'real university' has given her a place - she can rightfully take her place, she is told that she can 'come in'. We also hear in Sonia's poem how important homeopathy is to her and to her identity, she wants to help homeopathy out of the gutters and fears a black terrible gap if it falls away. Pursuing further academic qualifications provides an insurance against such an eventuality. In Sonia's poem we can hear a voice of fear and frenzy, a voice of tempered euphoria, and a voice of resistance that appears to speak from Sonia's innermost identity – 'I am a homeopath – they can't permit me to be who I am'. Intertwined amongst these voices is a voice of permission – 'I can say', 'I can rightfully take my place', 'you can come in'. It appears that the MSc has enabled Sonia to give herself permission to speak after a time of feeling unable to, hopefully her progression on to a doctoral programme will build on this and enable her to take her rightful place.

Yolanda

Yolanda graduated with an MSc Homeopathy, she also holds a BSc in Homeopathic Medicine. Homeopathy has always been in Yolanda's life. German by birth although not living in Germany, Yolanda gets frustrated when people assume that she is a *heilpraktiker*, she is very proud of her BSc and MSc Homeopathy and sees them as superior qualifications. Yolanda lives in a Southern European country where regulations make it difficult for her to practice homeopathy. She writes a blog and

runs an online magazine promoting the availability of referenced and reliable information about homeopathy.

Yolanda's I-Poem

I wanted to continue on from the BSc

I was seeking

I want to develop professionally

I could plan around it; I could merge it in what I was doing in everyday life

I enjoyed it, I enjoyed it very much

I take over into my everyday life this ability to work on my own

My computer literacy would not be where it is today had I not been on this course

My critical view of what I find online and my researching skills would not be where they are today

I don't think I would have ever done this project because it wouldn't have dawned on me

I said there is so much information out there but most of it is hidden access from the normal person

I wanted to make a space where there is access to this

The response has been quite good I'm happy with it

I am a homeopath that's got a BSc and an MSc,

My professional identity is being educated in homeopathy

I want to be good at what I'm doing

I pursued a university degree to get me to have the academic standard

I am a homeopath, I'm a born homeopath, I grew up with homeopathy

I am a homeopath through and through, it's a passion it's part of me

It's natural I would have studied homeopathy

I'm not currently practising but that's due to the system here, I'm trying to find a way around it

When I say: "I am a homeopath, BSc, MSc", there is a greater acceptability of my work

I think we as homeopaths have to keep a connection because we are this community of practitioners so it's a united front

Yeah I do see myself as part of that connection

I wouldn't be here in the world-wide-web without the online course.

Yolanda's I-poem tells a story of a move in an unexpected direction. Unable to practice in the country where she is currently residing, yet steeped in homeopathy since childhood, her MSc studies have enabled to develop new skills and to work with and for homeopathy in a different way. In Yolanda's I-poem we hear a voice of pragmatism, a voice of passion for homeopathy, and a voice of pride in her qualifications and in her computer literacy. She is very aware of her place in the world-wide web and of the value of the work she is doing in providing referenced information about homeopathy. She feels strongly that the community of homeopaths have to keep a connection and Yolanda firmly sees herself as part of that connection.

Lana

Lana lives and works in Northern Europe. She enrolled on the MSc Homeopathy course, then switched to MSc Integrated Healthcare as she felt it would be a more generally acceptable and respected qualification. Since her MSc Lana is moving to focus more on research in her work. Lana came to homeopathy after a career in physiotherapy. Although Lana had a busy and successful homeopathy practice this is rare in her country. She feels that there is a great amount of depression amongst her homeopathy colleagues, it seems to her that homeopathy has all but been killed off there. Lana is now studying for a professional doctorate on the topic of autism.

Lana's I-poem

I thought this is a great idea

I just joined the course

I wanted a formal degree in homeopathy

I wanted to structure my academic education

I think it means a lot for my confidence and the way people respect what I say

As a homeopath you may be regarded as someone who is a little bit spacey or very alternative

A university degree increases your status and the way people respect you

And the way I respect myself

I thought it's better to be a homeopath but to have a degree without the name in it

I have more confidence

I know what I know and I know what I don't know

I know the difference between knowing and belief

I have a great confidence in what I like to do and what I will not spend my time on

The course has reminded me that I love academia actually

When you say you're a homeopath people stop talking and don't listen to you

I think when you have a master's degree it helps them listen in a different manner

I am well-researched I can defend my views much better

I say I am a homeopath

I say I have changed my interest into homeopathic research

I feel it's better now because

I know my role

Lana's I-poem tells a story of finding her role as a researcher. Although still identifying strongly with homeopathy she took the pragmatic decision to change from MSc Homeopathy to MSc Integrated Healthcare. She sees a difference in how she is perceived as a homeopath (spacey) and how she is perceived as a researcher with an MSc (respected). We hear a voice of confidence in herself and her direction, and a voice of enthusiasm for her reawakened love of academia, we also hear a voice of resistance she is ready to defend homeopathy when needed. She speaks simply but profoundly about her learning – she knows the difference between knowledge and belief, and she knows what she doesn't know. The poem closes with a voice of contentment – it's better now because she knows her role.

Aiman

Aiman lives in South-East Asia, he graduated with MSc Integrated Healthcare. Aiman runs a very busy natural medicine practice. In his early career Aiman felt that he was

labelled as a 'quack', although in his country the tide of public opinion towards CAM therapies has now shifted in a positive direction. As a successful practitioner with a vast experience of treating cardiac complaints he frequently gives presentations to medical doctors. At the time of the interview Aiman was engaged on a PhD programme in a medical school in his home country.

Aiman's I-poem

I was already a very successful practitioner

I will excel, I know my level of determination

I decided, I was accepted, I did the course

I am a speaker, I travel, I am already somebody in my country in terms of success

I have got strings of chronic cases, good result, excellent result

I was prepared to study hard

I have to admit there had been a lot of rhetoric in my practice, in my public speaking

I learnt, I learnt

Whenever I go and give a public talk I am talking about research

I am talking about science, I am talking about scientific knowledge

I am able to speak with much confidence

I am already seeing myself as a researcher, I am not just a practitioner now

I am also a researcher

20 years ago people call us quacks

Nowadays people don't call us quacks so I come a long way.

This is how I identify myself

I stand proud to be a naturopath, homeopath, CAM practitioner

We have to keep on learning so that will not in the future be labelled as quack

So in the future they have to respect us more and more

Today I give talks and lecture at medical school

I am a flag-bearer

I set myself as an example, but I'm not resting on my laurels

I have a burning desire inside me to want to do something a lot more for CAM

I am proud yet I am very humble

Aiman's I-poem tells us a story of a CAM practitioner who has been labelled a quack, but who has now risen above the stigma and become respected and successful in his own country. He defines his success in terms of the results he achieves for his patients and the respect he is accorded. When he came to study for an MSc he was 'already somebody', he was not seeking to bolster gaps in his self-perception. However, he describes the course as having broadened his professional identity – 'I am not just a practitioner now, I am also a researcher'. Aiman's language is vivid and indicates his passion for his work and his 'burning desire' to do more for CAM. In Aiman's poem we hear a voice of pride and confidence in his own capabilities, there are also hints of a voice of anger at those who label CAM practitioners as 'quacks' and a voice of vindication at the reversal of attitudes to CAM in his country. We also hear a voice of self-awareness as he reflects on his previous use of rhetoric, however we can also hear echoes of that rhetoric in the poetic cadences in his words. We are left with the image of Aiman as the proud yet humble flag-bearer.

Locating myself in relation to the graduate participants

Reading through the graduates' I-poems, I find that I am often touched by their stories. I cannot help but feel fond of them, admiring and proud of their achievements, and above all grateful for their participation in my research. Working with the Listening Guide method to produce these I-poems brought their individual stories out to me very strongly, the poems bringing back the immediacy of the interviews but in a crystallised form.

I began by writing this reflective section in the traditional way, comparing my experiences to that of the graduates; but then it occurred to me that perhaps the best way to capture my own process and to lay myself bare was with an I-poem extracted from this thesis and to reflect on the voices I identified. This is not an exact replication of the process of producing the graduates' I-poems which were constructed from interview transcripts, whereas my I-poem has been constructed from my writings. However, when I wrote the 'My story' section in Chapter One from which this poem is extracted, I had no idea that I would later use it in this way. In order to follow as similar process as possible I firstly begin with some autobiographical information.

Hazel

I live and work in the North of England where I have practised homeopathy for 20 years. I elected not to go to university after A levels. After careers in retail management and libraries, I looked for a change of direction following the birth of my children, and trained as a homeopath. I have always enjoyed education and was keen to get involved in teaching homeopathy. My decision to study for my MSc in Holistic Approaches to Healing from John Moore's University in Liverpool was a deliberate step towards entering the world of HE. I am the first person in my family to study for postgraduate qualifications.

My I-poem

I work with the literatures, I focus through the autobiographical lens

I tell the story of my journey

I am a homeopath, a senior lecturer, and a doctoral candidate

I am likely to receive different reactions

I have experienced the heady optimism

I have experienced the negative impact

I developed my interest, I took on various research projects

I saw the possibility

I sometimes feel like a very small alternative fish in a very big biomedical pond

I considered myself neither a novice nor an expert

I had a vague idea I wanted to research

Is it doctoral enough?

I am accustomed to following up

I had repeatedly found myself wondering about the impact

I can see parallels, I was amazed

I reflected, I hold

I have reflected, I have reflected

I am acutely aware

My poem tells the story of my work as an educator, a homeopath and a researcher. I can hear pleasure in my voice at working with the literatures and an autobiographical lens. Threaded through my poem I can hear hard-work and determination. My story is also one of living and working in a changing landscape, and consequently I have sometimes been unsure of my position and of the value of my area of knowledge. The voice of doubt also relates to my research and my identity as a researcher – Is it doctoral enough? The last lines of the poem describe a clearing of the clouds, moving from a vague idea to seeing parallels, feeling amazement, and then moving to reflection, holding, more reflection and awareness.

Chapter summary

In this chapter I have set the scene for my study by describing the case study programmes and the pedagogical methods utilised within them. I began the presentation of my findings in a somewhat unconventional manner by using I-poem vignettes to introduce the graduate participants in this research as it was important to me that their individual voices were heard and balanced against the more traditional thematic exposition in the following chapter. Analysis using methods recommended by Gilligan (2015) afforded a listening to the participants' contrapuntal voices within the I-poems, thus preserving the polyvocality in my research (Thody, 2006). I have also presented my own I-poem, using material constructed from the 'my story' section of Chapter One.

Themes evident in the graduates' I-poems in this chapter include: identity and professional identity, motivations, credibility, confidence, communication, looking for answers, seeking qualifications, and defending CAM. These themes pre-figure those identified in the major findings from my research, and will be expanded upon in Chapter Six along with additional themes identified in the graduate interviews and the staff focus group.

Chapter Six: Findings

'Any text purporting to describe, report on or analyse events in the world inevitably does so only as an interpretation...'

(Drake and Heath, 2011:104)

Having introduced the subject(s) of my case study in Chapter Five, in this chapter I now move on to engaging with the object of my study (Thomas, 2016): exploring how the MSc courses impacted upon the graduate participants' professional lives. To do so, I identified three key aspects of qualified CAM practitioners' professional lives as analytic categories, namely: professional identity, practice, and community of practice. Semi-structured interviews with graduate participants, with follow-up member checking via e-mail facilitated the collection of rich data about how graduates perceived the impact of their studies. Some of this data has been presented in Chapter Five in I-poem form in an attempt to preserve the polyvocality of my research (Brown and Gilligan, 1992; Thody, 2006), and to give a sense of the participants in my research as whole people rather than hide them behind the cipher of 'my participants'. Now, however, I turn to a more traditional thematic presentation of my findings.

Contrasting with and building on Chapter Five, this chapter presents the main themes and findings that I have constructed from my study. I identified one overall finding and six sub-findings. I firstly present the overall finding, followed by each of the sub-findings which form a framework within which to present key themes identified in the data. To give a sense of the graduates' journeys, the sub-findings begin with Sub-finding One which relates to motivations to study. The influence of the MSc courses on the key aspects of graduate participants' professional lives will be covered in detail

in Sub-findings Two, Three, Four, and Five; and Sub-finding Six deals with significant features of the courses. To avoid unnecessary repetition, I mainly deal with individual themes under the finding that seems to me to be most relevant, although as might be expected there is some overlap of themes across the findings. The theme of the contested CAM professional landscape is not addressed separately as it is embedded throughout other themes. The theme of E-learning is addressed under the overall finding. The following table shows the findings and related themes, with the main theme for each finding shown in upper case.

Table 4: Findings and key themes

Overall finding		The contested landscape of Complementary & Alternative Medicine
Study and subsequent qualification at MSc level in international online cohorts may be seen to have had a profound influence upon the CAM professionals participating in this study. There is evidence of an impact on MSc graduate participants' identity, professional identity, frames of reference, community of practice, and practice; in addition to the acquisition of knowledge and skills in critical thinking and research. This study suggests that E-learning programmes have the potential to deliver transformative learning experiences.		
Sub-findings	Themes	
1. Graduate participants were motivated to engage in MSc studies for a number of reasons including: a desire for recognised qualifications, a desire to answer their own questions about the practice and philosophy of their therapy, a desire to improve credibility, and 'my time to be a professional'.	MOTIVATIONS Qualification Looking for answers Credibility My time to be a professional	
2. Most participants in the study had encountered negative reactions to their profession, leading in some cases to a sense of devaluation or stigmatisation of their professional identity. MSc studies and achievement of a postgraduate degree impacted upon graduates' professional identity in 3 main ways; destigmatising professional identity, strengthening professional identity, and broadening professional identity.	PROFESSIONAL IDENTITY Destigmatising Strengthening Broadening - Distancing	

<p>3. The impact of the MSc courses upon graduate participants' frames of reference and professional identity suggests that in most cases transformative learning has taken place.</p>	<p>TRANSFORMATIVE LEARNING</p> <p>Frames of reference</p> <p>Transformation</p> <ul style="list-style-type: none"> - The emotional dimension 	
<p>4. Following their studies, most graduate participants identified a potential to impact positively upon their own community of practice, and to interact with new communities of practice.</p>	<p>COMMUNITY OF PRACTICE</p> <p>Finding a role</p> <p>Opening doors</p> <p>Too soon to say</p>	
<p>5. Positive changes in practice were attributed to their MSc studies by some graduates, although others felt that any changes were more the result of a natural evolution with increased experience. However, all participants identified a positive impact on their communications with patients, the public, researchers and other health professionals.</p>	<p>PRACTICE</p> <p>Enhancing practice</p> <p>Less time to practise</p> <p>Freedom not to practise</p> <p>Enhancing communication</p> <ul style="list-style-type: none"> - Communicating to defend 	
<p>6. Significant aspects of the courses were identified as: developing skills in critical reflection, analysis, and evaluation; gaining knowledge and skills in research; and encountering different perspectives through working with an international, inter-professional group.</p>	<p>SIGNIFICANT ASPECTS</p> <p>Questioning assumptions</p> <p>Gaining research skills</p> <ul style="list-style-type: none"> - Learning a new language <p>Encountering different perspectives</p>	

I now address each finding in turn, providing illustrative extracts from my data accompanied by my analysis. Words in square brackets [example] have been inserted into quotes from participants, to substitute for identifying information, or to clarify meaning.

Overall finding:

Study and subsequent qualification at MSc level in international online cohorts may be seen to have had a profound influence upon the CAM professionals participating in this study. There is evidence of an impact on MSc graduate participants' identity, professional identity, practice, community of practice, and frames of reference; in addition to the acquisition of knowledge and skills in critical thinking and research. This study suggests that E-learning programmes have the potential to deliver transformative learning experiences.

This finding encapsulates the major findings from my study. Through exploring graduate participants' perceptions of changes to the identified key aspects of their professional lives, and through my explorations of identity and TL theories I came to recognise that participants had experienced transformative learning as a result of their studies and achievement of their master's degrees (Mezirow, 1978; Mezirow and Associates, 2000; Illeris, 2003; 2009; 2014a). As detailed above, the main analytic categories and the theme of TL are expanded upon in the relevant sub-findings. However, as the online learning environment is the overall context in which graduates' studies have taken place, rather than embed the theme of e-learning under one particular sub-finding it seems appropriate here to consider the place of this mode of delivery as experienced by the graduates, and as related to TL.

E-learning

Accessibility

All participants welcomed the convenience and accessibility of e-learning:

'It was the only way I could have done this course and so if it wasn't available by e-learning I wouldn't be doing an MSc in herbal medicine at all.' (Connie).

Aiman's comments below show his appreciation of the convenience of e-learning, and perhaps an awareness that there are those who see online courses as inferior to traditional attendance courses (Petit dit Dariel et al., 2013):

'It gave me an opportunity...I would not have done it because number one I do not have the time ... so e-learning in my own time ... it is excellent ... and I want to add it is no less effective, no less in value, e-learning or full-time' (Aiman).

Connecting online

Graduates' experiences of connecting with their fellow students during the courses varied. Some missed the social aspects of an attendance course:

'I think that's the only thing that was missing it's kind of the social side and whilst we had study buddies and chat rooms it's not the same as just kind of spending two minutes chatting to someone or going for a coffee' (Fran)

while for others it was not a problem:

'I liked being able to stay connected by coming into the classroom setting, exchanging with people and then going back to work on my own – it was a wonderful way of working.' (Yolanda).

A sense of belonging

As seen above, it can be difficult to generate and maintain a sense of belonging when working online (Hootstein, 2002; Conrad and Donaldson, 2005), although the use of study buddies and group work helps to mitigate this (Salmon, 2003). Even though graduates are spread all over the world, a substantial number do travel to the UK for their graduation ceremony which for most is the only chance to meet their tutors and fellow graduates in the flesh and to greet each other as old friends. One such was

Aiman; during his interview I asked him why he had travelled so far, given that he said that it was the learning from the course rather than the MSc qualification that was important to him:

'I have strings of diplomas and degrees and professional qualifications ... but I told Jess if I do not go there for the final convocation probably ... I may not feel the sense of belonging so I want to at least step foot on it, take pictures and say yes I am the alma mater ... I belong to this university, so this is something I can claim for the rest of my life' (Aiman).

Aiman's attendance at his graduation gave him a sense of belonging to the university. A sense of belonging amongst the alumni and staff however, does not seem to depend on being in the same physical space and has been greatly assisted by social media as illustrated here by retired member of staff John:

'I haven't taught on the course for what three years now and I'm still in contact with those people ... I am Facebook friends with them all and it's just good to see what's happening in their lives.' (John, pilot interview for focus group).

An unexpected direction

As discussed in the previous chapter, Yolanda's experience of e-learning took her in an unexpected career direction, that of blogger and e-zine editor. Yolanda's story provides us with an example of the impact of globalisation and electronic media upon social and professional activities (Giddens, 1991). Yolanda credits her experience of studying online with her redefinition of her professional world:

'I would have stayed very much more locally rather than being on the world-wide web I would never have done that without the online course so yes definitely it has had an impact I wouldn't be here in the

*world-wide web if I had not had the prior exchange via the course’
(Yolanda).*

Yolanda was not the only graduate participant who became an e-learning advocate (Petit dit Dariel et al., 2013):

‘I’m now myself making an online course I use WizIQ¹³ instead of Adobe and I draw from the experience of studying online so knowing that you have to have easy accessibility and all that but I am quite you know into all this modern technology I really I have no problem with it not at all.’ (Sonia).

It should also be noted that the online delivery of the course made it possible for students to encounter a range of perspectives and experiences through the international nature of the cohort. However, this is not exclusive to e-learning and is equally possible in traditionally delivered courses. That said, the online delivery of the courses did provide students with access, flexibility and the ability to connect with an international group who would otherwise have not had the opportunity to take this type of course. The benefits of working in an international group will be discussed under Sub-finding Six.

Sub-finding One: Motivations

Graduate participants were motivated to engage in MSc studies for a number of reasons including: a desire for recognised qualifications, a desire to answer their own questions about the practice and philosophy of their therapy, a desire to improve credibility, and ‘my time to be a professional’.

An examination of participants’ motivations to embark upon MSc studies affords insight into their perceptions of any gaps or imbalances in their professional lives that

¹³ WizIQ – a learning delivery platform, Adobe – the system used on the MSc courses.

they were looking to address. I began the interviews with graduates by asking them about their motivations for study. This felt like a natural place for them to start telling their stories, and connected them back to the thought processes that had inspired their studies. Several participants spoke of looking for an appropriate MSc programme for a number of years.

Desire for a recognised qualification

For Sonia and Lana, the status of having a recognised qualification was an important consideration:

'it was just like it sounds a bit weird but it was just about getting kind of a status kind of an accredited certificate from a real university you know' (Sonia)

'you know going to just study homeopathy - it's a three-year thing but you don't have you don't have formal degree so I wanted to sort of structure my academic education or I don't know how to say it but you know to have a formal degree' (Lana).

Although Yolanda had a recognised qualification in her BSc Homeopathy degree, she felt that this was no longer enough:

'professionally a BSc is in my opinion not enough anymore in the world of work out there. It means a lot I would say to patients also if you have a homeopath BSc MSc rather than just homeopath BSc, I think it is part of the decision that patients actually take' (Yolanda).

Looking for answers

Some graduate participants, in addition to seeking a recognised qualification also saw their MSc studies as a way to answer questions arising from their practice and their previous training. Connie initially described her motivations in terms of a pragmatic assessment of the logistics of the programme and of the reputations of the teaching

staff, however, as she went on to explain, she also hoped that the MSc would help her to answer questions that she had about the philosophy and practice of herbal medicine:

'I knew before I began the MSc that I had a large hole in the way I worked with patients and in my understanding of the various levels and parameters of working in herbal medicine I knew that if I didn't find a course to help me fill that hole I was going to have to do an awful lot of self-study. I got to a point where I practised long enough that I was able to identify - I almost could draw you the size of the hole that I was seeing in the way I was working and so this programme came along at exactly the right time for me in order to try to be able to address that' (Connie).

Her sentiments were echoed by Fran who also expressed an aspiration towards furthering personal growth:

'when I initially trained to be a herbalist ...there was so much personal growth that I benefitted from during that time and I hoped that using this as a structure that might happen again...there was a lot of questions that I had about the philosophy of herbal medicine as well as the practice that I just I didn't know where to turn to to try answer them and I hoped that this might offer me tools in which to do that' (Fran).

Fran's description of the personal growth she experienced during her initial education in herbal medicine provides a valuable reminder that entering the CAM world brings about profound personal growth and change for many CAM practitioners. Thus qualified CAM practitioners may already have crossed conceptual thresholds during their training, and possibly undergone a transformative learning experience (Meyer and Land, 2005; Lombaerts, 2010)

Credibility

Dilip felt that gaining research skills was important for his credibility:

'in the nature of the work that I do much of my work involves regarding peer review with research looking at various data analysis so I couldn't possibly give, I couldn't possibly do much credibility if I did not have any analysis in the research I want to do'(Dilip).

Dilip's expression of 'giving' and 'doing' credibility at first glance seems to be a search for the right words, but on a deeper level perhaps indicates the performative nature of identity construction (Goffman,1961; Burke and Stetts, 2009), suggesting that here is a professional identity under negotiation and reconstruction (Dent and Whitehead, 2002).

Desire for credibility - answering the sceptics

As described in Chapter One, CAM practitioners have increasingly come under fire in recent years leading some to take positive action in the acquisition of new knowledge and skills in order to be able to respond to the sceptic discourse as Sally explained:

'so really it was those attacks on homeopathy in particular and from Sense about Science¹⁴ from Simon Singh and various others, Ben Goldacre and you know Edzard Ernst and all of that crowd...I felt I needed to have a bit more of an understanding of really what constitutes decent research in science and so on' (Sally).

Issues of identity and professional identity can be discerned as underlying many of these motivations, in particular those related to validation, credibility and achievement of a more widely-recognised qualification. The pursuit of legitimacy maybe in terms of individual credibility or for the credibility of the wider CAM

¹⁴ Sense about Science (SAS) is a charitable trust that describes its purpose as being to equip people to make sense of scientific and medical claims in public discussion (<http://www.senseaboutscience.org/pages/about-us.html> 2016), the group has been at the forefront of several anti-homeopathy and anti-CAM campaigns along with science author Simon Singh, doctor and journalist Ben Goldacre, and academic Edzard Ernst.

profession as illustrated by Aiman's story of how he came to consider taking the course. Aiman was already seen in his own country as a highly successful practitioner, however he was motivated to reach other audiences, including the sceptics:

'I started from meeting Jess ... and I was telling her the success cases ... and she said: "Oh good but why not put it in a format? Put it into a scientific method and then document all this using the scientific method, then it would be much better" ... Within me there has always been a burning desire to want to be better than the allopaths¹⁵. To be able to answer to the sceptics of CAM. Furtherance of education will certainly help. I grew up over the last 30 years having to swallow the bitterness of being labeled as 'quacks' for CAM practitioners' (Aiman).

Aiman's vivid description of swallowing the bitterness of being labelled a quack, evocatively conveys how difficult this has been for him, and the conflict he experienced as a practitioner who was achieving success in his treatment of patients yet was still labeled a quack. His resulting determination to be seen as better than the allopaths is understandable; here we see his self-definition in opposition or contradistinction to conventional medicine (Saks, 2002; Lawler, 2014). When I met Aiman at his graduation ceremony he told me that CAM is currently on the ascendance in his region of the world, and now no longer labeled a quack he is in a position where he is looked up to and treats members of his prime minister's family. It is notable that Aiman's burning desire to be better than the allopaths has not seemed to interfere with his pride and pleasure at being accepted to study for a PhD in a medical school:

¹⁵ Allopathy is a term coined by the originator of homeopathy, Samuel Hahnemann. It is used by homeopaths to indicate medical approaches which produce different or opposite symptoms to the ailment being treated, whereas homeopathy uses substances which produce similar symptoms to those being treated. Here Aiman is using the term allopaths to describe biomedical professionals

'now that I am accepted into the PhD course into a not just a PhD course but in a medical school - a PhD course in a medical school - my supervisor is a cardiologist so it also means a lot - it carries a lot of weight' (Aiman).

My time to be a professional

Motivations may also be a combination of reasons, in Olivia's case her motivations included a desire for an MSc, self-validation, a rebellion against other peoples' expectations and a dawning recognition that the practice of homeopathy might not be for her; above all though her reasons culminated in 'my time to be a professional'.

'I think the MSc it was confirmation that actually I can achieve at this educational level ... and it's not to prove myself to anybody except to myself ... I suppose it's self-validation ... I keep thinking it's my time now the children are grownup ... I've done my job with them and you know I'm always there for them but now it's my time to be a professional' (Olivia)

Here it seemed that Olivia was equating her MSc to a sign of being more educated and more professional. As discussed in the previous chapter she had realised that practice did not seem to be a good fit for her and was in search of something else. It may be that the devaluation of CAM professional identity by the climate of negative discourse was a factor contributing to Olivia's sense that homeopathy practice did not fulfil her desire to be seen as a professional person. Ironically, her move into HE via her PGCE may have further devalued her sense of the credibility of her BSc in Homeopathic medicine. As shown in Chapter Five, she saw the additional credibility offered by her MSc qualification as a stepping stone to facilitate her employment in HE and her revalidation of herself as a well-educated and professional person. Olivia has continued to further her quest for validation and credibility in the HE field by

undertaking doctoral studies. A further discussion of Olivia's case is located in Chapter Seven.

Sub-finding Two: Impact on professional identity

Most participants in the study had encountered negative reactions to their profession, leading in some cases to a sense of devaluation or stigmatisation of their professional identity. MSc studies and achievement of a postgraduate degree impacted upon graduates' professional identity in 3 main ways; destigmatising professional identity, strengthening professional identity, and broadening professional identity.

Graduates' perceptions of the impact of their studies provide an insight into how CAM therapists negotiate their professional identity within a contested profession, and the role that further study and achievement of a recognised qualification can play. It is, of course, important to remember that graduates were reflecting retrospectively upon how they felt at the outset of the programme through the lens of how they felt at the time of the interview (Jackson, 2010).

Perceptions of professional identity were elicited in several ways; graduates were asked what the term professional identify meant to them and what being a herbalist/homeopath/CAM practitioner meant to them. I also used the question that emerged from the focus group with staff: 'If you meet someone for the first time and they ask "what do you do?" how do you answer them?'; and in the interview follow-up phase I built on this and asked:

'If you are filling out an official form which asks for your occupation, how do you answer?

- Is this different to your response when speaking to people about what you do?
- If it is different, why is this?

How would you have answered before your MSc studies?’

In the following section I draw on all of the sources described above.

Destigmatising professional identity

Nearly all participants, including the teaching staff, recalled occasions where they felt that their profession had become devalued and in some cases stigmatised. Some described being seen as quacks, or spacey; or feeling that they wouldn’t be listened to or respected. As discussed in Chapter Two, Slay and Smith (2011) suggest that the impact of a stigmatised professional and/or cultural identity can sometimes lead in a positive direction towards redefinition and destigmatisation. Within several graduates’ stories there are indications of a degree of destigmatisation and an increased confidence in their professional identity arising from their experience of their studies and their academic achievements. As in the graduates’ motivations described above, the theme of credibility was clearly discernible here.

Both Lana and Sonia described the experience of being perceived negatively because of their profession as homeopaths, but felt that their MSc qualification had changed how they were now recognised and accepted by others:

‘Over the past 10 years when you say you’re a homeopath people stop talking and don’t listen to you, but when you have a master’s they listen in a different manner.’ (Lana).

For Sonia, the MSc had opened a path to work with doctors who are also qualified as homeopaths:

'In [my country] we are like the biggest quacks there can be; so really, really on the bottom of the bottommost of the pit as I may say. It's not a nice position to be in but doing the MSc - as I put it of course on my cards - has provided me a place in - like there is something going on with doctor homeopaths, they are making up standards so I am involved in that committee and that's only because I have on my card MSc "Oh you have a masters, oh you have a masters in homeopathy, oh you can come in" ... and also when there is any formal meeting I am not myself showing off but I have a colleague who is very showing off and she presents me to her doctor colleagues and she says "This one she's got a masters in homeopathy" and they are "What? does it exist? Where is it from? It's from a real university" like that and well I like it a bit ... I feel like I can say something because I have proven and I can say something because I have the MSc' (Sonia).

Sonia felt that she had gained a voice in a situation where she might not previously have even had admittance. It was interesting to note that it seemed that it was not only Sonia who was benefitting from her MSc, but also that her colleague was perhaps improving her own standing and that of the non-medically qualified homeopathy community by association with Sonia.

Homeopathy is often seen as one of the most controversial and stigmatised CAM professions (Stone, 2015), however, the problem is not exclusive to homeopathy:

'When I was an early herbalist I might have been in a position of feeling like I was apologising for the profession a bit, ... I feel that I'm standing on much more historically firm ground now for the profession as a whole, but I would say for myself that I personally now have a much stronger sense of self-confidence about who I am and what I do, that I didn't before I started the master's' (Connie).

Dilip did not overtly describe any sense of stigmatisation, however, his desire for credibility and the leverage that that brings implied that he had previously felt perceived as lacking credibility:

'because of what I do in my full time job and who I deal with having more professional credentials carries a lot more weight ...so having a masters you know working for a doctorate, any kind of credentials I've noticed a shift in whether people actually take what you're talking about seriously ... and it is something that I can also confidently use as leverage when I speak to people.' (Dilip).

The question arises however, of whether any destigmatisation and/or transformation at the level of identity is the result of graduate participants' studies or of achieving a recognised academic qualification, I suggest that my data shows that it is a combination of both, as in this quote from Fran:

'it's felt almost doing the MSc has felt a closure on certain things, because everybody keeps saying: "What are you going to do with it now?" and actually I don't feel like I need to do anything with it now. It's almost allowed me to put the lid on a past that used to screw me up (laughs), so instead of it being a kind of a stepping stone to something else it's kind of actually just healed some of the past things and I don't know if that's the content of the MSc or having achieved a recognised qualification I think it's probably a bit of both ... and yeah I suppose from this we go back to this personal growth and it is - it's been immense' (Fran).

As discussed in Chapter Two, in contrast to Mezirow's conception of a uni-directional positive transformation (Taylor and Cranton, 2013), Illeris contends that transformation may also be regressive, restorative, or collective (2014a). Although some might see Fran's decision not to practice herbal medicine as a regressive

transformation, I suggest that it is the learner who has the ultimate judgement as to the direction in which they are moving. Fran's reflections on her experience seem to indicate that she has experienced a restorative transformation.

Strengthening professional identity

For all graduate participants there has been an impact on professional identity. Often there was a sense of being able to articulate more clearly what their profession meant to them. This new insight and understanding seemed to be strengthening for their sense of professional identity. Sonia articulately described what being a homeopath meant to her, and located her sense of what it is to be a homeopath at a paradigmatic level:

'[Being a homeopath] means to me a set of convictions, the paradigm that you have an encounter with someone, you have to meet them in their own world, not from what I am or who I am or what I know, but from his point of view standing in his shoes and trying to understand him, and that's a way of life ... it's what it means to me and it doesn't necessarily involve a treatment, it's a way of relating' (Sonia).

Taylor and Cranton (2013), writing of the importance of empathy in TL suggest that a change in learners' meaning perspectives can result in the development of an empathetic understanding and identification with others' perspectives (p37). Thus Sonia's realisation that she was working from a particular paradigm, also enabled her to comprehend that others are working from their own particular paradigms which she succinctly summed up as 'a way of relating'. Whilst strengthening Sonia's perception of herself this also has implications for interactions with other communities of practice and an enhancement of communication which will be discussed under Sub-findings 4 and 5 respectively.

Whilst professional identity is traditionally seen as being conferred by occupation (Sikes et al., 1985; Goldie, 2012) we see in Fran's case that she felt that her MSc studies had helped her to reconcile her non-practising status with her identification with herbal medicine:

'I think having stopped practice and been at home to look after the kids I didn't feel like a herbalist ... and actually this has helped me understand what a herbalist is and that I don't have to practice and that actually I'm a herbalist and it's ok to be the type of herbalist I am' (Fran).

For Fran this was a strengthening of her identity as a herbalist, which she saw as a personal identity rather than professional:

'whenever I thought of the term professional identity I think I always felt that was also a personal identity and so I suppose I've never had a professional identity as such ... I felt that I was a herbalist and that's what I am personally' (Fran).

Fran's story movingly illustrates Cranton and Roy's (2003) description of the process of individuation, whereby through questioning her own assumptions of what it meant to be a herbalist, Fran was able to develop a clearer definition of who she is and where she fits in the world.

In the cases of Fran and other graduates such as Yolanda and Sonia, it appeared that for them holding a CAM professional identity did not depend upon being a practitioner, but was based on their own affinity with the profession. Parallels may be seen here with Teuscher's (2010) study which indicated that retirement from a profession does not necessarily interfere with the persistence of professional identity as a self-description. A possible explanation in the case of CAM professionals is that because the institution of CAM is weakly defined and loosely-coupled the CAM

institutional identity is weak. However, the affinity identity for those aligned with CAM is stronger being based as it is on CAM subcultural symbols, rituals, values, heroes and lifestyle (Gee, 2000; Hofstede, 2010). Additionally, it may also be because the affinity with CAM goes beyond the level of professional identity and is held at a level of personal identity/self-concept. An example of this was Yolanda who lives in a country where it is difficult for her to practice, but there was no doubt in her mind that she was a homeopath through and through:

'I think I'm a born homeopath (laughs)I grew up with homeopathy from I think as early as 9 years old...and I am now 40 so I am a homeopath through and through...it's a passion, it's part of me as it is, and it's natural I would have studied homeopathy'(Yolanda)

when asked in the email follow-up to her interview how she defined her occupation on an official form she wrote:

'My occupation: Homeopath BSc, MSc; Editor; Writer' (Yolanda).

Sonia's situation adds yet another perspective; she had been practising and teaching homeopathy for many years until recently when legislation was passed in her country which limited the practice of homeopathy to qualified doctors only. At the time of her interview the legal situation was still uncertain, and she was considering how she might move forward, here I question her about one of the options she had mentioned:

'Hazel: you said that one of the options some of you had considered in [your country] was to practise without remedies, is that – that's sort of connected isn't it that there's more to being a homeopath than handing over a remedy?

Sonia: ya, that's it, experimenting a bit with it (laughs) but yeah but would it still then be homeopathy?

Hazel: so it might not still be homeopathy, but would you still feel like a homeopath?

Sonia: I would still feel like a homeopath, ya, yeah, yeah.'

Sonia's feeling that she would still be a homeopath even if she had to renounce the prescription of homeopathic remedies reflects the complexity and non-specific effects of both CAM and biomedical therapeutic interactions (Kaptchuck, 2002). Treatment from a homeopath is a complex intervention usually involving a lengthy and detailed case-taking process in addition to the prescription of a homeopathic remedy. There are debates within the profession and CAM research as to whether the 'active ingredient' is the consultation process, or the remedy, or a combination of both (Thompson and Weiss, 2006). Although, as intimated above this issue applies to both CAM and biomedical interventions, one of the primary ways of explaining the effects of CAM by sceptics is that the detailed consultation has a therapeutic or placebo effect. Hence Sonia's proposed strategy to work without homeopathic remedies in order to preserve her practice is not without risks and may well require a further redefinition of her professional identity, at least as far as the legal authorities are concerned. Although it seems that her self-concept as a homeopath would remain intact.

Broadening professional identity

Graduates' studies and achievement of an MSc had provided stepping-stones towards expanding their professional horizons, and initiated shifts in their salience hierarchies of identity (Stryker and Burke, 2000). For some this involved a broadening of their professional identity for example: by learning the language of research, by adjusting frames of reference, and/or by engaging with new roles and COPs.

'I am already seeing myself as a researcher, that has changed me I am not just a practitioner now I am also a researcher' (Aiman).

Some interviewees, for example Lana, Aiman, and Connie, seemed to have managed to both strengthen their identity as a CAM professional and yet expand into the new area of research:

'I say I am a homeopath and I also say I have changed my interest into homeopathic research so I am doing more and more of that'
(Lana).

As discussed in Chapter Two, the salience hierarchy of identities is fluid and liable to change in response to an individual's circumstances. Stryker and Burke (2000) describe how the success or otherwise of a new venture is key to the persistence of an adjustment to the salient identity. As both Aiman and Lana are currently engaged in doctoral studies it seems that this shift in their professional identities will continue, although of course should their studies be disrupted a further adjustment may occur.

Distancing from CAM

A broadening of professional identity brings with it a potential for change in one's professional focus. Olivia was alone amongst the graduates in seeming to want to distance her professional identity from CAM. In the interview she said that prior to her MSc studies and qualification she would have described her occupation as 'homeopath', but since her MSc and moving into teaching in HE her professional identity had shifted and she described herself as 'a lecturer'. Although still involved within the CAM field through her continuing practice of homeopathy, and teaching on a foundation degree in complementary therapies, Olivia expressed her weariness of defending CAM:

'I get a bit fed up of defending complementary therapies because people always laugh at you and go "oh have you got your oils?" "have you got your smelly things?" and you just get fed up of it and I just think sometimes it's easier for me to say, [when] they say "what do you lecture in?" and I go "research methods" because actually

that is the thing I do lecture in most ... so I don't feel like I'm lying saying that but also avoid the "oh well what's homeopathy?" and I just think "just move on everybody". So yeah I would describe myself as lecturer' (Olivia).

However, I have recently been in touch with Olivia again and she told me that having taken on roles as educational advisor to two CAM institutions she was feeling pulled back towards the CAM field. She now sees her professional identity as an educator with an interest in CAM (2016, private communication).

Echoes of Olivia's position of distancing from CAM could be seen in the staff focus group discussion about how they described their occupation:

'Jess (to Cora): so if you meet someone new and they ask you what you do what you say?

Cora: University lecturer

Jess: and they ask you what in what do you say?

Cora: Erm (sighs) well I teach nurses, I teach medical law and ethics, and I teach CAM practitioners

Hazel (to Jess): what do you say?

Jess: I say I work at university and I teach mainly research methods, ethics I never mention anything else about either homoeopathy or CAM anymore because I feel like my skills are - I don't teach anything to do with homoeopathy or CAM, nothing I only teach broad-based stuff now

Cora: which I think is why I said - I teach CAM practitioners, I don't teach CAM

Jess: I don't teach CAM specific, nothing that that I teach is CAM specific I might say I supervise CAM students in their research'

(Staff focus group)

The issue of holding a CAM professional identity in an HE setting seemed to be particularly troublesome for those who were qualified in homeopathy and seemed to be less of an issue for the herbalists who were interviewed. Further research would be necessary to establish if the struggles of homeopath educators working in HE is a widespread phenomenon, however the closure of CAM courses in several HEIs suggests that it is likely to be an issue for other CAM professionals working in HE, irrespective of their area of expertise (Colquhoun, 2012; Moynihan, 2012).

Sub-finding Three: Transformative learning

The impact of the MSc courses upon graduate participants' frames of reference and professional identity suggests that in most cases transformative learning has taken place

As discussed in Chapter Two, Mezirow (1978; 2000) defines TL as learning which transforms the meaning perspectives or frames of reference by which we understand the world, while Illeris proposes that TL has an impact on identity (2003; 2014a). Illeris's location of the impact of TL on the level of identity calls for a deeper degree of change in order for a learning experience to be deemed transformative. Undoubtedly however, both definitions of TL indicate a profound and meaningful learning experience. All graduate interviewees seemed to have experienced transformation at the level of frames of reference. Additionally, the majority of them seemed to have experienced change at the level of identity. Professional identity represents an important aspect of personal identity for many people (Illeris, 2014a). I suggest that as CAM professional identity is linked to affinity, and cultural identities (Gee, 2000; Hofstede, 2010) it is fair to assume that for many CAM professionals any change to professional identity also impacts at the level of personal identity.

Frames of reference

This section illustrates graduates' experience of changes to their frames of reference:

'The course allowed me to think in a different framework and really deconstruct and challenge the way I think.' (Dilip).

Dilip's experience of transformation at the level of frames of reference is clearly stated here. During my analysis process I could see that in Mezirow's terms (1978; 2000) Dilip had experienced TL; I was initially less certain however of any change for Dilip on the level of identity or professional identity as proposed by Illeris (2003; 2014a). However, as can be seen in the following quote, although he seemed in a way to disclaim profound change, by saying that he had the same knowledge as he did before, yet he reported feeling a big change in the way he was perceived which he attributed to his new academic credentials.

'What is interesting is that I have the same knowledge before as I do now in terms of MSc and having a candidature for a doctorate carries different equations right, it's just psychology of how people relate to you and of course my director wants me to print new business cards with my credentials maybe I'll get them done (laughs)' (Dilip).

In the follow-up phase of the interviews I asked Dilip if he had had his new business cards printed yet, and he confirmed that he had, giving him and his employer a tangible way of demonstrating his credibility to the world he works in. Dilip's case and his level of transformation is discussed further in Chapter Seven.

Nohl (2009), drawing on Mead's (1934) theories on the relationship between the self and society, suggests that social recognition can form an important role in the continuation of a learner's process of transformation by reinforcing the relevance and importance of newly developed roles and activities. He sees this taking place at various stages of the transformation process, with the initial phase of recognition

primarily taking place within a local context amongst friends and family, and the later phase of social recognition occurring in a wider arena (Nohl, 2009). This seems pertinent to several of the graduate participants, who felt seen in a different way following their studies and qualification.

Sally also described a change in her frames of reference:

'where it's been transformational in one way has been the idea that ... going back to Kuhn and the SSR¹⁶ you know which is one of the first texts that we were asked to [read] you know that was for me a that was a transformational moment reading his works and knowing that everything is in a state of flux, particularly science and you know there's no one right answer and science is going to keep evolving.'
(Sally).

The first cohort to study for the MSc Homeopathy was predominantly made up of homeopathy teachers and college principals; during the staff focus group Jess described the impact on them and on education practice in homeopathy:

'a lot of the teachers told me the same thing that they suddenly realised they couldn't teach stuff when they didn't know what the source was or how reliable the information was and they had to relook at the way that they did things and the way that they practised and yeah everything' (Jess, staff focus group).

This observation was echoed by Lana:

'I know the difference between knowing and believing.' (Lana).

¹⁶ The Structure of Scientific Revolutions by Thomas Kuhn (1962)

Transformation

I have already provided examples of transformation in graduate participants' personal and professional identities, as required by Illeris's definition of TL (2003; 2014a) under Sub-finding 2: Impact on professional identity. I now add to the picture of transformation by presenting further evidence of the profound changes experienced by graduates.

Sally spoke directly of transformation:

'The MSc was very expansive, it enabled a bigger understanding of science, philosophy and research. It was deeply transformational; I feel more empowered.' (Sally).

The choice of the word 'transformation' was Sally's own, this was not a word that I had used in the interview that she had picked up on. On checking her transcript, I noted that she used it several times.

The teaching staff in the focus group were very aware of many of their students experiencing profound change, as illustrated by this quote:

'they didn't come into the course thinking that their whole lives would change which is what happened to some of them and they tell us afterwards the course has changed my life completely where they were only doing it for a bit of paper originally (laughs) they weren't expecting it' (Jess, staff focus group).

Connie used the metaphor of an outward bound experience to describe her realisation of changes to her self-concept:

'Some people would say that it was an outward bound experience, outward bound is a group that people sign up to they pay money to join and they are taken into a place where it's they're having one of the biggest challenges in their life so maybe white water rafting or having to cope on your own or with a small group out in the middle of the forest for a number of days, and in so doing you meet yourself and end up realising that you're capable of more than you think you are and this was a bit of that for me where I came out the other end and went oh goodness and I can actually do more than I thought I could' (Connie).

The emotional dimension

As discussed in Chapter Two, Illeris places TL within the context of general learning theory (2003; 2014a), and requires that learning spans cognitive (knowledge and skills), social (communication and co-operation), and emotional dimensions (feelings and motivations) (Illeris 2003:3). Evidence of impact upon cognitive dimensions has been presented under the theme of frames of reference. Social dimensions of learning have to an extent been covered within the theme of identity, and will be expanded further within Sub-finding 4: Impact on communities of practice, and Sub-finding 5: Impact on practice. The emotional aspects of graduate participants' experiences can also be discerned as threaded through several themes, in particular Sub-finding 1: Motivations, and the I-poem vignettes in Chapter Five. Below I present further instances of impact on the emotional dimension.

The predominant emotion mentioned by participants was one of enjoyment:

'I told my colleagues here I actually am enjoying the course I am actually enjoying writing, reading, writing the thesis though it was tough work.' (Aiman).

I could strongly identify with Lana who spoke of her delight at being able to 'indulge' in her studies when her family were away as this was sometimes how I have felt during my doctoral studies:

'I really enjoyed it ... and then if you have a free weekend when everybody's away then you can really indulge and study.' (Lana).

Sonia felt that her experience of her MSc studies had been life-enhancing:

'I really found it a life enhancing experience I usually when I speak about it to my colleagues I temper it a bit because it sounds so euphoric you know but it really was'(Sonia).

Determination was another common feeling:

'it was a baptism of fire ... to me it was at times like reading a foreign language ... I just couldn't understand it but again these things open up and you know you by force of will or by force of sheer determination or whatever it is I don't know but suddenly if you just keep applying yourself it then starts to open up.' (Sally).

On the whole, graduates tended not to mention experiencing many negative emotions, Fran and Lana have both been quoted elsewhere as expressing some fears in the initial stages of their studies. Fran also described her emotions as being affected by assignment marks:

'it comes down to too much significance put on that I put on the assignment marks because I think you feel those marks are not just assessing how you've presented something but whether you're right and wrong in what you've said so when you're not getting a good mark you think oh I must be really wrong in what I'm thinking ... so it's yeah it's kind of on a knife edge all the time really' (Fran).

However ultimately she presented her experience of the course as a happy one:

'let's just get those happy thoughts back (both laugh) I really, really enjoyed those three modules and there was a lot of healing and laying to rest of worries and things that I felt that I got wrong when I was practising through the therapeutic relationships module and I think the creative prescribing and education [modules] just opened so many doors to me to know where I can go from here and that felt amazing so really did so that was a good feeling' (Fran).

As has been discussed previously, different authorities define TL in various ways, I have privileged the views of Mezirow and Illeris as most relevant to my study, however others offer valuable perspectives as will be discussed in Chapter Seven: Discussion.

Sub-finding Four: Impact on community of practice

Following their studies, most graduate participants identified a potential to impact positively upon their own community of practice, and to interact with new communities of practice.

As discussed in Chapter Two, a community of practice comprises a shared practice, domain of interest, and community (Lave and Wenger, 1991). CAM professionals are likely to hold multi-membership in a number of COPs (Wenger, 1998), for example through a particular mode of practice, engagement with CAM research, and identification with the wider CAM community. Themes relevant to this finding are: finding a role, opening doors, and 'too soon to say'.

Finding a role

Several of the graduates felt empowered and motivated to take a more active role in their COP, for example, Lana saw her role as initiating research:

'Now I have a much clearer role to play, I try to initiate research and try to see from the wider angle what are the needs of the homeopathic community.'
(Lana).

While Yolanda's aim was to keep supporters of homeopathy connected in a united front:

'it's the exchange of information and the sharing of information, keeping people connected ... and I think we as homeopaths have to keep a connection because we are this community of practitioners that has to not unfrequently fight against scepticism and criticism so it's a united front yeah I do see myself in a bit being part of that connection' (Yolanda).

Opening doors

Additionally, some spoke of moving to engage with new COPs, and having their path eased by their MSc qualification.

'I did a talk recently; in fact, I was the only non-medical doctor on the roster that day. I did the opening keynote on surviving in a post-antibiotic world and I have a funny feeling that had I not had the MSc that I would have been passed over for that ... I think that speaks very much to the MSc actually I do, so I think yeah I think the MSc is enabling me to again get a foot in the door in places I probably wouldn't have done previously.' (Sally).

Lana also felt that her MSc had facilitated her entry into new COPs:

'people want to use me as somebody to collaborate in projects so that's been very good ... anyway I feel that people listen more to me

and that I am able to or I get invited to join groups where I have common interests' (Lana).

This theme also links to the theme of broadening professional identity which showed that both graduates and staff had expanded their professional identity as they moved to engage with new COPs.

Too soon to say

At the time of his interview, Aiman felt that it was too soon to say that his MSc studies had enabled him to impact upon his community of practice, but he had hopes that this would change after the publication of his MSc dissertation:

'I have not seen it yet I have to be honest not yet, probably not so soon but I am writing a book and publishing my thesis ... so with this publication hopefully then maybe my role may change slightly but it doesn't matter ... my role isn't so important what is important to me is how many I can impact on the vast masses in south-east Asia and can change their lives that there is an alternative to a lot of allopathic treatment' (Aiman).

Four months after the interview in his response to the email follow-up phase, Aiman seemed to be seeing expansion in his role in his COP:

'I am fast becoming an opinion leader in my circle of contacts. The priority now is to continue to cure patients and influence the masses on natural medicine. I am also on a rush to write more and more papers for publications.' (Aiman).

Not all graduate participants saw a role for themselves in their COP; although living in different countries, both Connie and Fran had previously experienced a cliquey attitude in their regional herbal communities and had withdrawn from engagement with their COPs. As Fran was not practicing she did not foresee this changing in the

near future, however, Connie had hopes that her research into the historical foundations of herbal medicine may be beneficial to the wider herbal community:

'the more I can help contribute to the historical and traditional evidence base of herbal medicine the more I feel that I'm making a distinct contribution ... and that would be to the community as a whole not just in [my country].' (Connie).

My work on this study has led me to see activities and perceptions of roles within COPs as potentially important aspects of personal and professional identity, this will be discussed further in Chapter Seven: Discussion.

Sub-finding Five: Impact on practice

Positive changes in practice were attributed to their MSc studies by some graduates, although others felt that any changes were more the result of a natural evolution with increased experience. However, all participants identified a positive impact on their communications with patients, the public, researchers and other health professionals.

Practice of their therapy seemed to be the area where graduates were least aware of direct change resulting from their studies, with some saying that their practice of, for example homeopathy, would have continued to evolve over time. This is possibly because relatively few of the participants relied solely on the practice of their chosen therapy as their main source of income, so this aspect may have come out more strongly with a different group. As professional identities broaden, practice may come to mean something other than practice of a therapy, and may encompass practice in research or education. However, comments from interviewees were predominantly about the practice of a particular therapy or group of therapies. Graduate participants described the impact of their studies on practice in various ways including: enhancing

practice, less time to practice; and perhaps surprisingly, feeling a freedom not to practice. Enhancing communication was also a theme not only in practice with patients, but also in a wider arena.

Enhancing practice

Sally felt that the emphasis on reflective practice during her studies had changed how she worked with patients:

'It's raised my game dramatically as a practitioner. I was much more directional with patients before, I'm checking myself much more, [asking] why am I doing that with this patient' (Sally).

Connie felt that she had developed a deeper understanding of herbal medicine:

'I approach how I work in clinic markedly different and it's going to change even more in the future I can already see ways that that's going to happen' (Connie).

Less time to practice

A few graduates spoke of having less time to practice through the expansion of their role in other fields or their progression onto doctoral studies:

'yes, yeah I hardly had time for my patients (laughs)' (Lana).

Freedom not to practice

Fran's reconceptualisation of what being a herbalist meant to her has already been discussed under Sub-finding Two: Impact on professional identity. Additionally, she felt that her experience of the course had helped to dispel her fear of practice, and had liberated her from feeling that this was her only career choice

'I'm not fearful of going back into practice now, but maybe I don't enjoy it as much as I should. I used to feel trapped that I had to go back to practice but having a master's degree the world is a bit more of my oyster' (Fran).

Enhancing communication

I have chosen to deal with the theme of communication under this sub-finding of impact on practice, as this was one of the main changes that graduates noted in their practice. However, as will be shown, the enhancement in communication was not confined to practice, hence this theme overlaps with strengthening of confidence in professional identity, broadening of professional identity, and interactions with new COPs through the ability to communicate effectively in new domains (e.g. research). Several graduates identified an impact from their understanding of research and evidence which has in turn had an effect on communication with patients and other health professionals:

'I think one of the challenges that we find in Complementary Medicine is that because there's so much misinformation out here about what we do ... I think that that can be quite off-putting for people if they've come from a very sort of hard science type of background so when they see that actually yeah we're sort of speaking the same language... it's less off-putting for them so sometimes I think that's a direct result of the masters' (Sally).

Connie found that her studies in the module 'Inspiring Education' had particularly helped in her communication with patients:

'One of the things that I learned out of the research that I did in the education class was how to be able to appeal to different people in different ways in order to have them understand the point I was

trying to make, you know just the understanding that not everyone gets it in the same way that I might, and I suppose in the long way around it also helped me to understand my own learning style - that there are definite ways that I need to be able to take information in in order to comprehend it - and there are other ways that work for other people that don't work for me' (Connie).

Communicating to defend

Sally's media work often placed her in a position where she was called upon to respond to critics of CAM. Since taking the course she had felt more confident in such situations:

'I feel much more empowered to if I am faced with a critic ... to be able to actually just put my hands up and say I don't know, but I know where to go for the answers, or to understand that their view of science may not be the same as my view of science but it is you know, it's a sort of constantly evolving or moveable feast ... and you know it's funny because when I first spoke to Jess about coming onto the course actually one of the things she said was it will really enable you to address the critics and the sceptics and she was absolutely right about that' (Sally).

Fran recounted a recent interaction with a critic of herbal medicine and how she had felt able to communicate her views calmly and confidently with an evidence-based response:

'I've come across a lot of people really slamming down herbal medicine ... somebody did it to me the other day and I challenged them when I'd never be able to do this before ... I cited a few research papers and it felt great and they couldn't go anywhere and I'd not been horrible I just challenged what their misconceptions

were and I did it calmly and kind of knowing that I'd read the research and knew what I was talking about and that felt brilliant instead of scrabbling to defend herbal medicine I actually was able to do it calmly and confidently so it shut them up (both laugh)' (Fran).

As discussed above, it may be that a different group of participants may have reported greater changes in practice. Within this group Aiman and Sally had continued to have busy practices although both were also diversifying into research, and Aiman was undertaking a PhD. Lana, Sonia, Connie, Dilip and Olivia were also studying for professional doctorates, with Dilip, Olivia and Lana having reduced their practices. However, both Dilip and Olivia seemed to have relatively small practices before their MSc studies and had substantive employment elsewhere. Sonia had had a busy practice until legislative changes had disrupted this leaving the future uncertain for homeopaths in her country, and Yolanda was also living in a country where it was difficult for her to practice homeopathy.

Sub-finding Six: Significant aspects of the courses

Significant aspects of the courses were identified as: developing skills in critical reflection, analysis and evaluation; gaining knowledge and skills in research; and encountering different perspectives through working with an international, inter-professional cohort.

During the interviews I asked participants if there were any aspects of their studies which we had not covered elsewhere that had been particularly significant for them. Key aspects are listed in the finding above. Notable features running through these themes which link to TL are those of questioning previously held assumptions, critical reflection, change in frames of reference through the development of knowledge of research, and the opportunity for dialogue with people holding differing perspectives.

Questioning assumptions

This theme relates to the graduates' development of skills in critical thinking. The structure of the MSc courses is such that students are required to critically reflect, analyse, and evaluate their own practice discipline. Deconstructing practice¹⁷ is the first module in the first year of the course, and immediately begins the process of encouraging the questioning of assumptions. The quotes here illustrate how much the graduates valued this module, whilst also acknowledging the challenge that they experienced in questioning their assumptions. When I initially read of Mezirow's theory (1978) of a disorienting dilemma being a catalyst for transformative change I did not see it as readily fitting into the case that I was studying. However, on reflection I realised that it was there in plain sight in the Deconstructing Practice module which I came to see as a potential provider of a disorienting dilemma as illustrated by this quote from Olivia:

'Deconstructing practice – that's the one that messes with your head!' (Olivia).

The necessity of a disorienting dilemma for TL to occur is less emphasised in more recent TL literature and the focus is more on critical reflection which was previously seen as a result of the disorienting dilemma (Mezirow and Associates, 2000). In this quote from Aiman, we can see that this module was where he first realised that there were things in his practice and in the wider field of CAM that needed to change which he summed up as a very big impact and a good one:

'the first module 'Deconstructing practice' made the first big impact it pulled me down to earth, made me realise that things need to change - this is academic - that you cannot claim whatever you

¹⁷Module learning outcomes: Critically examine the basis of knowledge that underpins and informs practice; Deconstruct and critically reflect upon assumptions and beliefs about practice; Challenge and analyse how practice beliefs impact upon clients, self and others; Identify, analyse and debate whether there is a gap between the rhetoric and reality of practice

claim - it has to be on a certain basis and there's no two-way about it that was a very big impact and it was a good one' (Aiman).

The requirement for critical reflection was challenging for many students, as illustrated by Olivia's comment:

'I think the ones where I had to reflect (laughs) I found them really, really, really difficult and really put your head on the desk kind of modules but got through them and I think the second or the third one I got a really good mark and I was dead chuffed and thought oh I've finally cracked this' (Olivia).

Discussions in the focus group showed that teaching staff were very aware of the process of disorientation:

'they don't realise what they come in with they often call knowledge but it is actually a belief and when we explain to them the difference it can shake their foundations quite severely can't it? And when they realise that a lot of their practice is based just on belief that can be very challenging, but they do get to build up again' (Jess, staff focus group).

Gaining research knowledge, skills and experience

Sally valued the broadening of her knowledge and understanding of research, which had given her the ability to draw on a wide range of evidence:

'I'm not scared of the evidence base in homeopathy anymore whereas before I would have thought ... I feel like the ground I am on is going to give way any minute whereas now I don't feel that way because I can actually go not just to homeopathy but I can go to

other disciplines ... I'll draw from petrochemical studies, water studies you know and so the MSc has enabled me to - it's opened my ability to use different disciplines and to inculcate you know things from different disciplines in order to be able to [explain] what we're doing and why we're doing it and why it works and what the theory is behind it and turn that into English that people can understand - that's really important' (Sally).

For Connie, the discovery of a natural inclination and ability in research was a profound moment:

'the significant moments in the course would be realising that although I always felt that I enjoyed the research and searching for more information I don't know that I actually ever realised that I was quite good at it that there was a natural inclination or skill there.'
(Connie).

Learning a new language

For some there was a sense that learning about research had taught them a new language:

'it helps me sort of speak in more research language that is useful to the clinicians that I work with and because that's how we understand research' (Dilip).

Encountering different perspectives

During the interviews with graduates, I asked a question specifically about working in an international cohort. Participants valued the differing perspectives they had encountered through meeting practitioners from other countries and cultures. Although for some it was initially a daunting prospect:

'It was scary at first to study online and meet people from different cultures with different ways of communicating but then it was great to get to know people around the world with different views and opinions but who share your interests' (Lana).

Sonia valued encountering different perspectives, and saw this as aiding her own evolution:

'It was the most nice aspect of it because to meet all these international cultures ... it was great because if you have someone with another perspective and something to argue about. if you're always with like-minded people then there is no evolution actually so there was evolution in seeing things in a theory and a philosophy of homeopathy especially.' (Sonia)

As did Connie:

'the interaction like between colleagues in other countries it was great, it's really wonderful to get to hear other people's take on things. Each one would have been educated in a slightly different way, each one had a different type of practice, a different type of focus ... you know there were all kinds of different contributions that were made and it made it really dynamic and quite exciting' (Connie).

Whilst recognising the differing perspectives, Fran was reassured by her realisation of shared issues:

'I think that was brilliant having people all across the world it was really interesting and very reassuring because you realised that all herbalists are pretty much the same (laughs). We might use different herbs but we're all coming from the same place and that was really nice... I think just the kind of the difficulties we face in trying to

become accepted and gaining respect we're all thinking the same things and that was quite reassuring' (Fran)

Significant aspects of the course in the light of TL theories will be discussed in Chapter Seven: Discussion.

Negative comments

As has been shown in this chapter, participants' comments about their experiences of the MSc courses have been predominantly positive, with very few negative comments recorded. For the sake of transparency, I now mention that in addition to one participant's disappointment in her dissertation mark and lack of follow-up (as discussed in Chapter Three, ethical issues), and some graduates' mention of difficulties with socialisation in an e-learning format which have already been presented; Dilip mentioned that he would have liked the programme to encompass a broader perspective of CAM, and that at times he experienced it as very Western-centric. Although as students chose their own topics for exploration, this experience reflects the make-up of the cohort he studied with rather than any deliberate decision to limit the types of CAM covered. Of course it may be that as I am a member of the course teaching team, graduates felt less able to share negative comments with me. However, as discussed in Chapter Three: Methodology, strenuous efforts were made to ensure that participants felt under no obligation to me, and by using a combination of interview and email follow-up I aimed to give participants an opportunity to share their feelings freely.

Chapter summary

This chapter has presented the overall finding from my research, which is supported and expanded upon by six sub-findings. Discussion of the findings and links to relevant theories have been threaded throughout the chapter. Notwithstanding the

predominantly positive nature of participants' experiences of their studies, the tone of this findings chapter is by no means all positive. Turning to look at the picture presented of the CAM professional landscape and the status of CAM within HE, makes for sombre reading. However, the graduate participants' experiences of their studies and achievement of MSc qualification do seem to offer a seed of hope for them as individuals and perhaps eventually for the CAM community.

Chapter Seven: Discussion

"The time has come," the Walrus said,

"To talk of many things:

Of shoes and ships and sealing-wax

Of cabbages and kings..."

(Carroll, 1872)

Introduction

I conducted my qualitative research using a case study approach to generate an in-depth picture of a particular case, that of a group of qualified CAM professionals who had graduated from the online MSc programmes delivered at UCLan. Data was collected from a focus group with five members of staff to provide context, before semi-structured interviews and follow-up member checking via emails were conducted with nine graduates from the MSc programmes: two from MSc Herbal medicine, four from MSc Homeopathy, and three from MSc Integrated Healthcare.

The data was coded, analysed and organised initially by research question, and then by thematic categories and sub-categories using Thematic Analysis processes (Braun and Clarke, 2013). A further layer of analysis was added following the construction of I-poem vignettes for each of the graduate participants, analysis was then conducted in line with Gilligan's Listening Guide method (2015).

In this study I set out to assess the impact of master's level education in an international online group upon the professional lives of CAM practitioners. My research question listed three analytic categories which I deemed to be important aspects of a CAM practitioner's professional life:

*How does master's level education in an international, online group impact upon CAM practitioners' perceptions of their **professional identity**, their **practice** of their chosen therapy (e.g. Homeopathy), and their role in their **community of practice**?*

It was hoped that this study would provide an understanding of the impact of postgraduate education for CAM practitioners within HE, and would provide insights into CAM practitioners' negotiation of their professional identities against the backdrop of the contested CAM landscape. A further dimension was added by the international nature of the cohort which broadened the picture of the professional lives of CAM practitioners. The online setting of the case study programmes added an opportunity to examine the influence of the delivery mode, and generate insights into the nature and impact of the pedagogical methods used.

My research question was largely satisfied by the findings presented in Chapters Four and Five. The overarching finding of this study showed that:

Study and subsequent qualification at MSc level in international, online cohorts may be seen to have had a profound influence upon the CAM professionals participating in this study. There is evidence of an impact on MSc graduate participants' identity, professional identity, frames of reference, community of practice, and practice; in addition to the acquisition of knowledge and skills in critical thinking and research. This study suggests that E-learning programmes have the potential to deliver transformative learning experiences.

Six sub-findings provided a fuller picture of the case and further detail for each of the main thematic categories: motivations, professional identity, transformative learning, community of practice, practice, and significant aspects of the course.

In this chapter I will discuss the findings from my research in the light of relevant literature. This will include how my findings extend or elaborate on the theories presented in Chapter Two: Theoretical perspectives. Bloomberg and Volpe (2008:139) suggest that the purpose of a discussion chapter is to: ‘reconstruct a more holistic understanding’ of the research providing interpretive insights in an integrated picture of the case. In order to do this, I will discuss how my findings have extended or elaborated on theories relating to identity, practice and communities of practice. This will be followed by a consideration of the discrepant cases of Olivia and Dilip whose experiences may be seen to refine the general findings of this study (LeCompte and Goetz, 1982; Ely et al.,1991). I will also expand my discussion from previous chapters to demonstrate how the transformational learning that I identified in my case study links back to relevant theory. Finally, I discuss the contributions made by this thesis to theory and practice, in particular to pedagogy and to the CAM profession.

Discussion of analytic categories

In this section of the chapter I will offer an in-depth consideration of my three analytic categories: (professional) identity, practice and community of practice. As previously mentioned I identified these three categories as important aspects which formed a ‘gestalt’ of the professional lives of qualified CAM practitioners, and used them as a foundation for my study. Asking graduates and staff about professional identity, practice and perceptions of their roles in their COPs, along with contextual questions relating to motivations and significant aspects of the courses, enabled me to discern the transformative quality of graduates’ experiences of studying and qualifying at master’s level in international, online groups. This suggests that these analytic

categories may be useful in exploring the learning experiences of other professional or vocational groups, in particular where there is a strong affinity-identity linked to the professional culture and/or identity such as may be found in the CAM profession (Gee, 2000; Hofstede, 2010). Personal identity is strongly connected to professional identity for many members of professional, occupational or vocational groups (Illeris, 2014a). I suggest that professional identity is both expressed and impacted by individuals' activities in practice and in COPs.

Identity and professional identity

This research extends and elaborates knowledge of the education and professional identity of CAM practitioners, on which there has been little research to date. In terms of sociological research into CAM, the focus has predominantly been on the users of CAM or on professionalisation (Siahpush, 2000; Gale, 2014). Whilst not explicitly referencing professional identity, Siahpush's (2000) suggestions for research into the career paths, occupational culture and community of CAM practitioners holds some resonance with the present study. Gale's (2007) ethnographic study of student osteopath and homeopath practitioners' experiences included observations on the formation of professional identity; a topic to which she later returned with the same groups in a study on how CAM practitioners can make a living (2014). Gale's 2014 study emphasised the importance of new practitioners reflecting on their emerging identity and aspirations. Fledgling practitioners' activity with and contributions to communities of practice were also seen as important, as was the cultivation of adaptability and resilience. The present study provides information about CAM practitioners' negotiation, redefinition and destigmatisation of professional identity through engaging in higher education and achieving a master's degree, in addition to exploring activity in practice and COPs as expressions of professional identity.

Although at the outset of this research I set out to look at professional identity, the overlap with personal identity soon became apparent. Identity theories relevant to my case study have been discussed at length in Chapter Two, where I made a case for professional identity being a significant aspect of the self-concept or personal identity (Illeris, 2014a). This was backed up to a large degree by my research with this group of CAM practitioners in that there was evidence of a strong intersection between their personal and professional identities (Wilkinson, 2008; Illeris, 2014a; 2014b), as echoed by Wenger's (1998) notion of identity as a bridge between the social and the individual. Referring back to Gee's (2000) perspectives on identity, I suggest that in part this is due to the presence of a strong affinity-identity being based on participants' connection with the rituals, values, and ethos of CAM (Hofstede, 2010). For example, graduate participant Fran was very clear that she experienced her identity as a herbalist as personal rather than professional. This sense was echoed by other participants including Yolanda, Sonia, Connie, Aiman, Sally and Lana. This is not to say that personal identity and professional identity are always interchangeable terms and should not be viewed as such, however in examining the cases of the graduates in this study, a degree of overlap is evident.

Most participants in this study referred to having felt negatively perceived at some point in their careers through their association with CAM, which in several cases had motivated them to enrol on the MSc course. In opening the interviews with graduates with a question about the beginning of the MSc journeys and their decisions to take the course, I was able to gather insights into how this group of CAM professionals viewed themselves within an often contested profession. For some of the graduates the decision to study for an MSc appeared to be a response to how they thought they were seen i.e. as lacking formal qualifications, credibility, and adequate knowledge. This fits with Cooley's hypothesis of individuals taking corrective action based on their response to the 'looking-glass self' (Cooley, 1902; Burke and Stetts, 2009; Isaksen, 2013). Mead's theory of Symbolic Interactionism (1934) is also relevant in that the

graduates' desire for credibility was often not just on a personal level but also on a societal level as it related to the credibility of their therapy or for CAM in general.

Motivation to take action may be seen to be closely associated with the formation and negotiation of identity (Waterman, 2004). Illeris (2014b) holds that the strength of learners' motivations is an important predictor of whether or not TL is possible, suggesting that the impetus to transform arises from 'deeply-rooted' drives which may not immediately be visible to either the learner or the teacher (p584). Whilst several of the participants spoke of the desire for a recognised qualification, an examination of their motives showed deeper concerns such as Dilip's desire for credibility, Olivia's drive for personal and professional validation, Fran's wish for personal growth, and Sonia's fear of the black hole should homeopathy fall away.

The findings from this study relating to identity and professional identity reinforce Illeris' s theories about TL occurring at the level of identity (2014a), although this should not be taken to discount the value of TL taking place at the level of meaning perspectives as described by Mezirow (1978, 2000). All graduate participants in this study may be perceived to have experienced TL, albeit to varying degrees, which in most cases has impacted on their sense of identity and or professional identity (Illeris, 2014a). My findings suggest that certain significant aspects of the case study courses have facilitated this impact on identity such as: encouragement of students to question previously-held assumptions about their own practices, CAM in general, biomedicine, and evidence-based practice; and gaining confidence through developing skills in research and critical thinking. Graduates' sense of their own professional identity was variously experienced as strengthened, broadened and in several cases redefined and destigmatised (Slay and Smith, 2011). Changes in salience identities were noted in both graduates' and staffs' professional identities (Stryker and Burke, 2000).

This study also offers an insight into the impact of the sceptic discourse relating to CAM education in HE, where educators may be seen to be working within a diminishing field. One graduate participant and some of the lecturing staff had seemed to find it expedient to distance their professional identity from CAM. This phenomenon seemed to be more of an issue for those holding qualifications in homeopathy within this particular group of participants. Since the focus group and interviews were conducted in 2015 there have been further instances of HEIs closing their CAM provision, suggesting that this trend is continuing. However, it should be noted that while the stigmatisation of professional identity of CAM practitioners and educators is widespread it is not universal and in some countries is reversing, as illustrated by the case of Aiman.

In summary, the findings of this study fill gaps in the literature relating to CAM practitioners' negotiation of their professional identity, and suggest that as an affinity identity a CAM professional identity may form an important aspect of an individual's self-concept. It is also further suggested that practice and activities within COPs may be seen as expressions of personal and professional identity as will now be discussed.

Practice

CAM practitioners' experience of their practice is also an under-researched topic, with most research to date focusing on practitioners' experiences of treating particular client groups or illnesses (e.g. Reid, 2007; Relton et al., 2007; Chatfield and Duxbury, 2010). It is notable that of the nine graduate participants, seven were in practice at the time of the interviews (Olivia, Connie, Sally, Aiman, Lana, Sonia, Dilip) and two were not (Fran, and Yolanda). Sonia's practice was under imminent threat of closure due to the legal status of non-medically qualified homeopaths in her country, and although Dilip spoke a little about practice it was in the context of referring enquiries on to another practitioner. Of those practising four had very small practices (Olivia,

Lana, Dilip and Sonia). Hence, insights into the practices of CAM practitioners from this study are somewhat limited. It may be that a larger or different sample would have generated a different picture; however, it seems reasonable to surmise that the experiences of the graduate participants are reflective of the situation for some CAM practitioners.

As Gale's (2014) study pointed out, it can be challenging for CAM practitioners to make a living, and many of those qualifying from CAM courses never transition into full-time practice, or indeed practice at all. My own MSc research which examined factors which helped or hindered homeopaths' entry into and development of practice after qualification amongst the graduates of one college, found that out of 110 survey respondents 85 (77%) were currently in practice, with 25 (23%) not practising, and 6 (5.5%) had never practised at all. Of those in practice, 75% were practising part-time and only 25% considered their practice as full-time (Partington, 2003). It is common within many CAM therapies for practitioners to work part-time in their practice and supplement their income with other work, and some graduates from CAM courses may never intend to practise professionally (Fournier, 2007). The portfolio nature of many CAM professionals' careers might be another reason why the influence of the MSc courses on practice seemed to be to a lesser degree when compared to the impact on professional identity or activities in COPs. Further, given the nature of the MSc programmes with their emphasis on research and critical thinking skills, it may be that those who elected to take these courses were looking for something additional or alternative to practice rather than an enhancement of their status quo as might be offered by more traditional post-qualification courses in CAM.

As described in sub-finding five, some participants in this study had experienced their studies and qualification as enhancing the practice of their therapeutic modality, for example Sally and Connie, who both emphasised the benefits of critical thinking and

reflection on their practices. However, both Olivia and Aiman speculated that any developments in their practice would have happened over time as they gained further knowledge and experience. Communication was an area where graduate participants had experienced benefits not only with their patients, but also in terms of communication with researchers and other healthcare professionals which in turn impacted on confidence and professional identity. Several graduates spoke of joining the courses to look for answers about their practices; some also mentioned the benefits they found in deconstructing and critiquing the rhetoric and realities of CAM practice; and several spoke about gaining an understanding of research. There may be lessons to be learned here regarding gaps in the pre-qualification education of CAM practitioners, hence my recommendation in the next chapter that course providers may benefit from incorporating such skills into curricula.

Another strand of the story told by this research which encompasses both identity and practice arises from an examination of the cases of Yolanda, Sonia and Fran. Of these three, Yolanda and Fran were not in practice, and Sonia's practice was under threat of closure due to the legal situation in her country. However, there was no doubt in their minds of their continued identification with homeopathy (Yolanda and Sonia) or herbal medicine (Fran). Thus, although practice is seen to play an important role in the formation of professional identity (Sikes et al. 1985; Goldie, 2012), this research suggests that being a practitioner is only one aspect of holding a CAM identity, and that the discontinuation of practice is not necessarily associated with a disconnection from that identity. Some graduate participants such as Lana, commented that they had found less time to practice since their studies, suggesting a shift in their salience hierarchy of identity (Stryker and Burke, 2000). In the case of Lana and some of the other graduates there seemed to be a correspondence between decreased activity in practice and increased activity in COPs, as will now be discussed.

Communities of practice

During the course of my research, I came to see COP membership and activity as important expressions of identity and professional identity, which concurs with Wenger-Traynor's view of the link between COPs and the attribution of identity (2016).

Most graduates felt connected in some way to their discipline COP. In some cases, there was a sense of graduates such as Sonia, Lana, and Yolanda matching Wenger's description of COP 'pioneers' who, having engaged in new learning through their MSc studies, return to their home COP to share their insights and experience (Wenger, 1998). Although in Lana's case her identity as a practitioner of homeopathy had moved down the salience hierarchy, her identity as a homeopathy researcher was in the ascendance. This had opened up opportunities for her in new COPs, which she saw as having the potential to benefit the wider homeopathy COP. During her interview Lana spoke of finding her role within the homeopathy community and saw this as beneficial both to herself and to the community. This may be seen to demonstrate a process of individuation as conceptualised within TL which is seen as development of a clear sense of who we are and where we fit in the world (Cranton and Roy, 2003).

Wenger is clear about the link between identity and multimembership of COPs (1998), which as shown in Chapter Two is similar to James' original concept of holding multiple social selves (1890/2004). Wenger holds that the nexus of COP multimembership forms an important aspect of identity, linking personal and social conceptualisations of the self (1998; 2000). In some cases, in addition to acting as pioneers working to take new knowledge back to their existing COPs graduates were also able to further their own career aspirations and broaden their professional roles and identities through joining new COPs.

In common with Lana, several participants expressed altruistic impulses in wanting to further the cause of CAM as exemplified by Aiman's 'burning desire to do a lot more for CAM', and Sonia's aim to help to pull homeopathy 'out of the gutters'. At the time of the interviews, Sally and Aiman had busy practices and were already in a position where they held some degree of status in their own countries. Both were very committed in their efforts to defend their profession; and although Sonia's professional status was under threat through changes to the legal situation she was well-known within the homeopathy COP in Central Europe. This may indicate that having reached a reasonable degree of respect for themselves they were then able to turn their energies to the good of the community. However, the exertions of others should not be ignored; both herbalists, Fran and Connie, had each expressed difficulty in engaging with their local herbal COPs, yet both were still determined to contribute to the wider herbal community. As discussed in Chapter Two, there are many different types of CAM COPs: practice or research focused; local, national, international; based on a particular therapeutic modality or style of treatment; or based on CAM in general. Thus failure to engage with one particular COP does not rule out the possibility of connecting with other communities. Connie saw the potential of her doctoral studies to impact on the international herbal COP in time; and Yolanda and Fran through their blogging and e-publishing activities were supporting existing COPs and cultivating new COPs.

In Chapter One I suggested that although COPs are usually found in informal learning situations, MSc students on the case study programmes may be seen to share in the three key components of a COP during their studies, i.e. a domain of interest, community and practice. Although students rarely meet in person before graduation, they do form strong community connections. I have been privileged to observe students, tutors and graduates greeting each other as old friends when meeting up at conferences such as the Homeopathy Research Institute conferences, where over the last three events in Barcelona (2013), Rome (2015) and most recently Malta (2017),

UCLan tutors, students and graduates have on average made up between 10-15% of the 200+ delegates with a significant number also presenting. Thus providing another demonstration of how the use of collaborative e-pedagogies may add to the knowledge base of COPs (Siemens, 2005; Holmes and Gardner, 2006; Garrison, 2011).

Ultimately, this thesis concurs with Wenger-Traynor's suggestion of the strong link between COP activity and identity, and that COP activity is in effect an expression of identity (2015). Illeris when locating TL in the context of general learning theory suggests that learning spans cognitive, emotional and social dimensions (2003, 2014a), thus changes in graduates' perceptions of their roles in COPs or in COP activity may also be an indicator of social change and the occurrence of TL.

Discrepant cases

Both commonalities and differences between research participants are important when analysing qualitative data (Braun and Clarke, 2013). The presentation of information about discrepant cases strengthens the credibility of research reports, in that the presence of discrepant cases offers a cogent demonstration that the researcher has not forced data to fit a certain shape or theme (Cresswell, 2014). While negative cases in the form of *exceptions* to emerging rules may be used to refute constructs, discrepant cases in the form of *variations* to emerging rules may be of use in refining a construct (Ely et al., 1991), or in generating or verifying 'more adequate explanations' (LeCompte and Goetz, 1982:34). Given that each of the graduate participants in this study have their own unique experiences and varied outcomes of their MSc studies it would be a simple matter to argue for any of them to be singled out as discrepant in some way, for example: Yolanda for her diversion into e-publishing, Fran for the restorative transformation of her identity as a herbalist, Aiman the proud yet humble flag-bearer, or Sonia for her fear of the 'black hole' should

homeopathy 'fall away'. However, the cases of Olivia and Dilip stand out as meriting further discussion within this chapter.

Olivia

I first encountered Olivia as a student when I was the clinical placement tutor for UCLan's BSc Homeopathic Medicine degree. She was an excellent student and passed with distinction. When she joined the first cohort of the MSc Homeopathy programme I was not on the teaching staff for the course and so had no interaction with her during her studies. However, as the UK homeopathy community is a relatively small one and we lived in the same area I did encounter her from time to time at conferences and peer group events. Through these encounters I learned that Olivia had a small practice in homeopathy but was mainly focussing on developing her career in HE. I knew from colleagues that she had once again been a very engaged student and had completed her MSc degree in two years whilst concurrently taking a PGCE.

Yolanda's case contains some similarities to Olivia's in that both are qualified at BSc and MSc level in homeopathy, and Yolanda is not practising. However, this is for legal reasons and her alternative to practice is still very much rooted in the homeopathy community and in the promotion and defence of homeopathy. In her interview Olivia spoke of her weariness of defending CAM, and her discussion of how she answered the question 'What do you do?' echoed some of the sentiments expressed in the teaching staff focus group. It appeared that in terms of professional identity Olivia had more in common with the teaching staff on the course, than with the other graduate participants. The evidence of this study would suggest that this may be related to her working within an HE setting, and her experience of the erosion of the value of CAM professional identity and expertise in a contested and diminished field (Becher and Trowler, 2001). At a period when times are challenging for HE in general (Feldman,

2016), and as previous academic allies distance themselves from controversial areas in their own pursuit of legitimacy and longevity, CAM academics need to cultivate adaptability and fluidity in their salient professional identities (Oliver, 1991; Stryker and Burke, 2000; Stryker, 2008). As discussed in Chapter Two, with the growth of scepticism towards CAM and the loss of many CAM specific courses it seems increasingly difficult for educators with a CAM background to experience confirmation of this aspect of their professional identity, thus requiring a shift in the hierarchy of their salient identities (Stryker and Burke, 2000).

As discussed in the previous chapter, after my analysis of Olivia's interview I revisited my coding of the staff focus group and came up with the sub-code of 'distancing professional identity from CAM' to sit under the code 'broadening professional identity'. This insight was further highlighted as I worked with Gilligan's Listening Guide analysis (Brown and Gilligan, 1992) to produce Olivia's I-poem as presented in Chapter Five. During her interview, Olivia listed several motivations for her decision to study MSc Homeopathy, including a desire for postgraduate qualification, a rebellion against others' expectations, and a sense that homeopathy practice was not where her future lay. As discussed previously, following her MSc Olivia progressed onto doctoral studies in which she is investigating the labelling of non-traditional students in HE in terms of their own experiences and perceptions, and how they are perceived by staff. This topic echoes Olivia's own rebellion against being tagged with a label that she feels has become devalued and does not respect the hard work she has put into gaining her qualifications and professional status.

In terms of TL, Olivia's case offers a clear illustration of someone who has experienced transformation at the level of both identity and professional identity (Illeris, 2014a). She sees herself differently as a result of her MSc experience and qualification, and feels that others also see her differently (Cooley, 1902; Isaksen, 2013; Burke and

Stetts, 2009). However, Olivia's situation is also an example of a transformation in progress. Whilst other graduates had experienced a sense of the destigmatisation of their professional identities, this seems to have been more difficult for Olivia within the world of HE (Slay and Smith, 2011; Brosnan, 2015). Working in HE, she had a sense that she needed to continue her journey with doctoral study for several reasons including her avowed love of education, her urge for further self-validation, and to strengthen her professional profile as an educator. Of course, Olivia is not the only graduate participant who has pursued doctoral studies; Aiman, Lana, Sonia, Connie and Dilip were all doctoral candidates at the time of their interviews. However, in Olivia's case the need for a qualification without the label of homeopathy seemed to be more pressing. Olivia's continued negotiation of her professional identity is reflective of Giddens's (1991:4) notion of self-identity as a project which demands a 'reflexively organised' approach within a globally socialised world.

At the time that Olivia began her course, MSc Homeopathy was the only CAM option offered by UCLan. During the writing of this section I began to speculate whether she would have considered studying MSc Integrated Health if it had been on offer. As I have remained in touch with Olivia I posed the following question by email:

If MSc integrated healthcare had been on offer when you began the master's would you have gone for that instead of homeopathy? Or do you think at that point you would still have connected more with homeopathy?

Olivia sent this reply:

I probably would have gone with integrated healthcare because although homeopathy is my first love I would have considered broadening my options (Private communication, 28/5/17).

As discussed in Chapter Six: Findings, research participants are always working from their own present moment as they try to recollect or reason how things were or might have been (Jackson, 2010), hence I cannot be sure what decision Olivia would have made had the choice been available. Olivia herself sounds a little uncertain in her reply: 'I *probably* would have gone with integrated healthcare'. However, her reply does give us some clear indications that although she was looking to broaden her options, she still retains a strong connection to homeopathy which she looks on as 'my first love', even after several years of working mainly in HE which has necessitated a distancing of her professional identity from CAM in order that she may progress in her career and be respected as a credible and professional educator. During her interview she expressed the hope that achievement of her doctorate would contribute to this, and enable her to leave the CAM label behind, or at least to push it further down the hierarchy of others' perceptions (Stryker and Burke, 2000). As mentioned in the previous chapter, since the interview she has taken on consultancy work for two CAM organisations, and now considers her professional identity to be that of an educator with an interest in CAM.

The theme of credibility came through strongly in the motivations of several of the graduate participants, both in terms of being better placed to defend the CAM profession or their own treatment modality (Aiman, Sally, Sonia) and in terms of gaining respect for themselves as professionals (Dilip, Lana, Olivia, Sonia, Yolanda). I will now consider Dilip as a discrepant case and explore what light this sheds on the case study as a whole.

Dilip

Dilip's case may be perceived as discrepant on two counts: firstly, that he made no allusion to having felt stigmatised as a CAM professional; and secondly, that the level

of Dilip's transformative learning experience appeared to be at a different level to the rest of the graduate participants.

In the interviews with students and the focus group with staff I was careful to couch my questions in general terms so as not to lead participants towards particular answers. A stigmatisation of professional identity was spontaneously referred to by Sonia, Fran, Olivia, Aiman, Sally and Lana. However, as alluded to in the presentation of the findings from this study, Dilip did not express any sense of stigmatisation as a CAM professional. This may have been for several reasons: he may not have thought to mention it; or because by the time of his interview his CAM practice was negligible he no longer strongly identified as a CAM professional; or that the community that he works in is more accepting of a range of healthcare options including CAM; or that working with the HIV community where stigmatisation may be a common experience, any stigmatisation associated with links to the CAM profession would pale in comparison to that experienced by those living with HIV. However, although Dilip did not express any sense of stigmatisation, his avowed motivations for taking the course were strongly suggestive of a desire for credibility. As discussed in the previous chapter, Dilip's reference to giving and doing credibility spoke of the performative aspect of professional identity (Goffman, 1961; Burke and Stetts, 2009). Further his desire for credibility and leverage may indicate that he has at times felt perceived as lacking in credibility. He stated that he felt that he had been taken more seriously since gaining his master's qualification and embarking on doctoral studies, and expressed his confidence in using this as leverage in his interactions with other professionals. As in Olivia's case, Dilip's negotiation and reconstruction of professional identity continues as he proceeds with his doctoral studies.

Mezirow's original conception of TL is very clear in defining it as: 'the process by which we transform problematic frames of reference (mindsets, habits of mind, meaning

perspectives)' (2009:92), and it is this definition on which much of the TL literature and research is based (Taylor and Cranton, 2012). Hence, in terms of the competing theories of criteria to identify TL, Dilip's learning experience clearly meets Mezirow's (1978; 2000; 2009) requirements for change at the level of frames of reference or meaning perspectives thus indicating transformation. Dilip spoke of frameworks quite frequently in his interview, in particular of the scientific framework and being able to bring it into the CAM field, and of its usefulness in his work with the HIV community. According to Illeris's (2014a) criteria Dilip's adjustment to his meaning perspectives would be defined as accommodative learning with a greater degree of certainty, while the criteria of change in identity and therefore transformative learning is less clearly evidenced. It should be noted that although as discussed in Chapter Two, Illeris defines four types of learning: cumulation, assimilation, accommodation and transformation, each with an increasing level of complexity; he stresses that no value hierarchy should be implied and that all types of learning should be seen as equally valuable (2014a).

However, the possibility of change at the level of identity for Dilip should not be discounted as in both his interview and in his response to the member-checking exercise, he referred to being perceived differently by others since developing a fluency in the language of research, gaining his MSc qualification, and 'having a doctoral candidature'. In line with the theories of Cooley (1902) and Mead (1934) self-perception is strongly impacted by how we believe we are perceived (Burke and Stetts, 2009; Isaksen, 2013). As previously discussed, the construction and negotiation of identity may be seen as located in both social and psychodynamic processes (Erikson, 1969; Clarke, 2008). Dilip's comment that his manager wanted him to add his MSc to his business cards and his later confirmation that he had done so reinforces the impression that both Dilip and his manager felt there was something to be gained by advertising his qualification. This echoes Sonia's experience of her friend capitalising on Sonia's MSc, and her own admission that she liked it 'a bit'. Although as

discussed Dilip seemed to disclaim any changes to his knowledge as a result of the MSc, this is contradicted to an extent by his delight in his developing skills in 'scientific research'. In a sense, Dilip's perceptions resonate with communal constructivist (Holmes and Gardner, 2006) and connectivist (Siemens, 2005) theories regarding the need for the development of new skills in discernment and evaluation in a globalised environment. It may indeed be that Dilip's 'store of knowledge' feels unchanged, but his ability to access, apply, analyse and communicate his knowledge in different ways seems to have expanded (Siemens, 2005; Holmes and Gardner, 2006; Serdyukov, 2015).

A recent online check of Dilip's professional profile shows that he now describes himself as an education and training co-ordinator working with healthcare providers and allied healthcare practitioners; there is no explicit mention of CAM. However, during his interview, Dilip spoke of being 'quite well known in the HIV community for using and talking about complementary medicine'. When asked about his practice, he spoke of it as 'very part-time' and revealed that he was tending to refer any requests for treatment to a naturopath as he was concerned that his reduced availability would not enable him to offer an adequate service. As in the case of Olivia, it seems that Dilip's identity as a CAM practitioner is low down in terms of his salience hierarchy (Stryker and Burke, 2000), and unlikely to be reinforced since his withdrawal from practice (Fournier, 2002; Gazzola et al., 2011). Whilst Dilip's professional identity is no longer being conferred by practice (Sikes et al., 1985; Goldie, 2012), his developing competence and confidence in the research setting is reinforcing the salience of the new identity that he is carving out for himself (Illeris, 2014a).

Transformative learning – linking the findings to theory

As previously discussed in Chapter Two: Theoretical Perspectives and Chapter Six: Findings, although I have focused on the views of Mezirow and Illeris as most relevant to my study, different authors define TL in various ways, such as Dirkx's et al.'s conception of TL as a journey of the soul (2006), Boyd's and Myer's (1988) view of TL as a process of individuation, and Brookfield's (2010) notion of TL as involving the critique of hegemonic assumptions. Much of the discourse about TL theories involves debate as to the balance between individual and social transformation (Cranton and Roy, 2003). I have stated several times during this thesis, that I did not set out to look for TL, but feel that in selecting the analytic categories of professional identity, practice, and COP I discovered a useful formula with which to optimally explore graduates' transformative experiences. These categories which arose from my conceptualisation of the 'gestalt' of CAM practitioners' lives captured both the personal and social negotiation of change in identity and professional identity. The interaction between the three aspects seem in effect to offer an expression not only of how practitioners identify with their occupation and the inherent culture and ethos, but also of their confidence, empowerment and level of autonomy within their profession. I am in agreement with Illeris (2003; 2009; 2014a; 2014b; 2015) that looking at TL through the lens of identity combines both individual and social dimensions, and that a consideration of individuals' roles and actions within their COP(s) can add a further perspective. Whilst still valuing Mezirow's (1978) ground-breaking conception of TL as involving changes to frames of reference/meaning perspectives and the potential for liberation and empowerment therein, it seems to me that Illeris's (2014a) notion of change at the level of identity holds even greater potential. Cranton and Kasl (2012) point out the problem in seeing TL as finite, and offer a salutary reminder that change is ongoing:

The 10 steps or stages of transformative learning, first out-lined in 1975 and included in most descriptions of his theory, implicitly suggest a finite process, though Mezirow's definition of the

outcomes of transformative learning demonstrates open-ended and ongoing learning and change. (Cranton and Kasl, 2012:398)

Placing transformative change on a continuum rather than seeing it as having a fixed end-point allows the inclusion of both sets of criteria as transformative. Hence it may be considered that all participants in this study experienced TL to some degree.

Transformative learning in e-learning settings

Meyers (2008:223), suggests that e-learning modes of delivery may act as 'highly effective conduits' for TL. Whilst recognising that lecturers and teachers may be puzzled at this apparent paradox, he points out that the more informal nature of online teaching sessions may challenge the traditional classroom power dynamics and make for more collegial and collaborative learning experiences in which learners feel better able to express their own ideas (2008). Dirx and Smith (2009) recounting their own experiences of delivering online courses argue that deep learning is eminently possible even in an online context. I do not intend to suggest that it was the online mode of delivery alone that provided a vital ingredient that initiated transformation in the participants in the present study. However, I do seek to address the commonly-held perceptions that e-learning is in some ways less effective than more traditional deliveries of teaching and learning (Boyer et al., 2006; Petit dit Dariel et al. 2013; Selwyn, 2014), and to argue for a greater appreciation of the potential of online learning. Aiman's comment that, in his experience, e-learning was 'no less effective' than studying full-time in a traditional setting showed that he was aware of negative perceptions of e-learning and had perhaps been slightly sceptical himself before studying online. In contradiction to the impression that online learning is inferior in some way, several studies comparing online learning and traditional face to face learning have showed no significant differences in students' achievements and engagement (Neuhauser, 2002; Nguyan, 2015).

The generation of opportunities for TL is multi-factorial (Cranton and Roy, 2003; Illeris, 2015), and learners may potentially experience TL in many different types of settings including traditionally taught face to face programmes, study via blended learning, and programmes that are delivered wholly online, as in the case study MSc courses. Clearly, each setting and mode of delivery has its own advantages and disadvantages. An examination of the pedagogy of online learning in the light of TL and COP theories shows that the disruption of traditional normative roles (Laurillard, 2004; Carr-Chellman, 2005), and the emergence of collaborative e-pedagogies may have a profound influence on students' experiences of learning. This echoes Lave and Wenger's suggestion that in order to understand collaborative learning within COPs requires a 'decentring of common notions of mastery and pedagogy' (1991:94). In terms of the logistical conditions of online learning, lecturers may be seen occasionally to experience similar technological frustrations to the students (e.g. when the broadband signal is weak or fails). Such frustrations can offer a sense of a levelling of status, thus contributing to bonding and camaraderie within the group. Further, within the MSc courses under discussion, it may be that some of the adjustments that were made to the online delivery of teaching and learning facilitated students' development of autonomy and confidence in their work and thereby helped to foster TL such as: an emphasis on self-initiated projects within a modular framework; use of asynchronous discussion boards; and the use of collaborative facilitated discussion in synchronous sessions, rather than lectures led from the front by 'experts'.

Significant aspects of the courses in the light of TL theories

When I began reading up on TL theories, I was surprised to find that much of the set-up of the MSc courses seemed designed to offer transformative opportunities. As discussed previously, the first year module Deconstructing Practice encourages students to challenge the myths and rhetoric of their discipline. For many this was a disorienting experience, redolent of Mezirow's 'disorienting dilemma' (1978) leading to critical reflection on previously unquestioned assumptions. Concurrently, the

introduction to post-graduate research provides students with insights into a new world and teaches them a new language. Running right through the course is the opportunity for rational discourse with tutors and fellow students using discussion boards, and synchronous online tutorials (Taylor, 1998). Additionally, as an HE level 7 programme, the need for critical reflection and critical analysis is threaded through all assignments. Following my explorations of TL, I asked the colleagues who were instrumental in designing the programmes how much they knew about TL, to be told that it was a concept that they had not heard of. Yet, without knowing of TL theories, they had produced a programme which provided transformational opportunities. It may be the case that this demonstrates that TL is perhaps a typical outcome of courses delivered at this level, or it may be that this population of CAM practitioners with their stigmatised cultural and professional identities were ripe for transformation. Whilst this is not intended to imply that all students on these courses experience a transformation, I propose that I have presented strong evidence that the graduate participants in this study have experienced TL.

Contributions to theory and practice

The contribution of this thesis to pedagogy

The contribution of this thesis to the pedagogy of e-learning is the identification of how the use of collaborative e-pedagogies, a student-centred approach, an emphasis on critical thinking and reflection, and providing students with the opportunity to encounter diverse experiences and opinions may combine to present opportunities for TL in online settings. A further contribution is to the pedagogy of transformative learning theory in the identification of the interaction between identity, professional identity, and activities in practice and communities of practice as indicative of transformative change in professional or vocational learners.

The depth of changes experienced by the graduate participants in this study in terms of their frames of reference and/or identity, and professional identity suggest that programmes delivered entirely online may provide the opportunity for transformative learning experiences. This is not the first study to make such a claim; however, previous studies into TL in online settings have tended to focus on Mezirow's criterion of change to frames of reference (e.g. Meyers, 2008; Dirkx and Smith, 2009), whereas this study has also drawn on Illeris's criterion of change at the level of identity being indicative of a TL experience (2009; 2014a; 2014b; 2015).

I close this section of the chapter with Sedyukov's (2015) vision for the future of online learning and call for academics to put aside their reservations and embrace the potential offered:

'The need for an innovative technology is conditioned by a number of factors. 21st century economy needs creative, open-minded, critically thinking workers who do not just acquire certain knowledge and skills in a university, but develop an ability to construct new knowledge, solve unique problems, and develop original ideas.'
(Serdyukov, 2015:61)

Contribution of this thesis to the CAM profession

This thesis contributes to an understanding of the impact of the dominant critical discourse about the place of CAM education within HE. I contend that the findings of my study validate the provision of such courses as potentially transformative for CAM practitioners, and for the CAM community of practice. My research offers a valuable contribution to the CAM knowledge base, in particular in relation to the professional lives of CAM practitioners. This contribution encompasses CAM practitioners' negotiation of their professional identities, their practices, and roles in their

community of practice; all situated within a contested landscape. Further, my research demonstrates the potential of postgraduate study and qualification to build professional status and respect for individuals working outside of hegemonic norms in sub-cultural groups, such as CAM. This suggests that these findings may also be applicable to other similar professional, occupational, stigmatised, or marginalised groups. I believe that the CAM community of practice may be able to draw new understandings from my research regarding the education and continuing professional development of CAM practitioners. As previously stated, I do not intend to imply that the picture that I have presented is universal, yet I believe that it will resonate and has relevance to the situation of many CAM practitioners; including those working within HE.

Chapter summary

This chapter has provided an in-depth discussion of my three chosen analytic categories: professional identity, practice and community of practice. The chapter also presented a consideration of two discrepant cases; Olivia and Dilip. Additionally, I have reviewed my findings in the light of transformative learning theory and presented the contributions made by this thesis to pedagogy and to the CAM profession. Conclusions from this research and recommendations for future research are now presented in the final chapter, along with my reflections on the doctoral journey.

Chapter Eight: Conclusion and recommendations

'Very importantly, writing transforms the writer, for writing is a means of working out what one thinks.' (Drake and Heath, 2011:109)

'...there ain't no journey what don't change you some.'
(Mitchell, 2004:297)

This chapter presents the conclusions and recommendations arising from my research including suggestions for further research, before closing with my reflections on my doctoral journey.

As discussed in Chapter Three: Methodology, any conclusions here presented are in the form of tentative working hypotheses that may inform educational practice and future research (Lincoln and Guba, 2000). The picture presented in this thesis is constructed from my own analysis and interpretation of how the participants interpret their world and is inevitably context-laden. The story I have presented is of a particular case in a particular setting, at a particular point in time (Stake, 1995). Efforts were made in the recruitment and selection of participants to include representatives from different practice disciplines, MSc courses studied, time since graduation, and geographical regions. Inevitably, however, given the history of the courses with MSc Homeopathy running for several years prior to the introduction of MSc Herbal Medicine, and MSc Integrated Healthcare, homeopathy professionals have a stronger representation within this study. There were also more participants who were not in practice or were operating a reduced practice than I had anticipated. It may be that a different group of participants would have produced a slightly different picture. I

believe that I have faithfully represented the experiences of participants in this study, and in doing so have produced a rich and detailed picture of this case. Similarly, I hope that my findings and conclusions may offer insights into similar cases or contexts, however, the judgment of any potential transferability rests with the readers of this research (Bassey, 1999; Donmoyer, 2000; Lincoln and Guba, 2000).

Conclusions

The overall finding of this case study is that:

Study and subsequent qualification at MSc level in international online cohorts may be seen to have had a profound influence upon the CAM professionals participating in this study. There is evidence of an impact on MSc graduate participants' identity, professional identity, practice, community of practice, and frames of reference; in addition to the acquisition of knowledge and skills in critical thinking and research. This study suggests that E-learning programmes have the potential to deliver transformative learning experiences.

In my presentation of the six sub-findings: Motivations, Impact on professional identity, Transformative learning, Impact on community of practice, Impact on practice, and Significant aspects of the course, I have 'fleshed-out' the various facets of the single overarching finding. The overall finding and six sub-findings are supported by the themes identified in the graduates' I-poem vignettes in Chapter Five. The conclusions drawn from this case study follow the research question, the overall finding and the sub-findings and address three main areas: the professional lives of CAM practitioners, which encompasses professional identity, practice and community of practice; Transformative Learning; and the potential of e-learning.

The professional lives of CAM practitioners

My investigations of students' motivations for study, and their stories of their experiences led me to a picture of a devalued and often stigmatised CAM profession. Yet I also found optimism for the future of the profession in the profound changes that I witnessed in participants' professional lives, specifically in their perceptions of their professional identity, their potential to impact upon their community of practice, and to a lesser extent upon the practice of their therapy. The experiences of the graduate participants in this study suggest that engagement with HE and the achievement of a recognised academic qualification may offer CAM professionals a potential route to strengthen, broaden, and/or destigmatise professional identity.

Professional identity for CAM practitioners appears to be based on an affinity with the CAM culture, rituals, values and ethos; and as such may be seen to overlap or intertwine with personal identity thus forming an important aspect of the self-concept. Whilst practice of a CAM therapy is an important facet of holding a CAM professional identity, my research suggests that identification as a CAM professional can persist without engagement in practice. However, activities and interactions in practice and communities of practice may be seen as both impacting on and expressive of CAM professional identity. It is suggested that this may also be relevant to other professions, particularly where there is a strong affinity identity.

Transformative Learning

My explorations of this case went beyond my initial expectations and took me into the realm of Transformative Learning (Mezirow, 1978; 2000; Illeris, 2003; 2014a); where, as has been discussed in Chapter Seven, I found that in selecting my analytic categories, I had discovered a formula which captured both the personal and the social negotiation of change in identity and professional identity. I suggest therefore that the examination of perceptions of professional identity, practice and community

of practice offers a potentially useful way to explore TL within the education of professional, vocational, or marginalised groups.

In appreciation of both Mezirow's (1978; 2000) and Illeris's (2003; 2014a) criteria for defining transformative learning, I suggest that viewing transformative change as being on a continuum allows for the inclusion of both sets of criteria as transformative.

The potential of e-learning

Participants' identification of significant aspects of their studies concurred with and expanded on accepted key strategies for fostering TL such as the questioning of assumptions, the opportunity for discourse, an emphasis on critical thinking and reflection, exposure to new perspectives, and gaining new skills (Taylor and Cranton, 2012). Additionally, the use of collaborative e-pedagogies, and a student-centred approach has been shown to provide an environment within which TL may occur. This research adds a strong voice to the call for an appreciation of online learning as having the potential to foster transformative learning experiences.

Recommendations

My recommendations are based on the findings, analysis and conclusions of this case study. The recommendations that follow are for: Higher Education Institutions, key stakeholders in the CAM profession, and future directions for research.

For Higher Education Institutions

Regarding integration

- My overall finding, and several of the sub-findings in this study support the benefits of the provision of programmes within HE for CAM professionals. As

an educator I have an innate bias towards the benefits of education, as an educator involved in the delivery of these courses I also have a bias towards the desirability of continuing and expanding the availability of such programmes to CAM professionals. My ideal scenario would see HEIs making bolder decisions to confront and perhaps reject sceptic intolerance of CAM programmes, and to have faith in the purpose of universities to generate knowledge, raise educational standards, meet the needs of the community, and ultimately their own validation processes which initially allowed CAM courses into HE. However, in the light of financial conditions, the current attitudes towards CAM; and the market-driven, legitimacy-seeking climate of HE, I find that I hesitate to make any recommendations to HEIs about such provision. Quite simply, it is often not in the best interests of HEIs to overtly associate themselves with CAM courses. However, a way forward may be found in the expansion of integrated health and social care degrees which are open to a wide range of practitioners. I would argue that recruitment to such courses should include CAM practitioners and thereby continue to contribute to a raising of educational standards, cultivating research-awareness, and the fostering of a self-questioning culture within the CAM field. An additional advantage from this inter-professional strategy would be to provide students who are biomedical or social care practitioners with a more nuanced and grounded understanding of CAM practice, values, and ethos which will in turn be of benefit to service users.

Regarding e-learning

- The overall finding of this study supports the potential of online learning to deliver profound and meaningful learning experiences. Having worked with e-learning for a number of years, to me it is simply another way of delivering teaching and learning, and I work with the same philosophy and values as I would in any other teaching situation, albeit with suitable pedagogical

adjustments in the light of the online setting. However, despite the vast body of literature proclaiming the positive features of e-learning, many educators are still reticent about the quality of teaching and learning that may be delivered in this mode (Petit dit Dariel et al., 2013; Herkis, 2017; Matthews, 2017). I hope therefore, that this research will reassure and encourage those educators who are sceptical or fearful of delivering learning online to review their position and embrace the possibilities of e-learning.

Regarding the education of professional, vocational or marginalised groups

- Several of the findings specifically support the benefit of the course ethos of questioning previously held-assumptions, the development of research skills, and exposure to wider perspectives, in facilitating professionals' deconstruction of their own practice. Other benefits such as the capacity to broaden professional identity, and engage with other COPs, suggest that key features of this course may offer useful strategies to educators working with other professional, vocational, or marginalised groups.

For Complementary and Alternative Medicine

- For practitioners: Study for an MSc or other recognised post-graduate qualification has the potential to impact positively upon individuals' professional identity, practice, and community of practice and is strongly recommended as an option for CAM practitioners who wish to enhance their skills and/or broaden their professional options.
- For educators: Findings relating to graduates' motivations for study, and to significant aspects of the courses support the notion that qualified CAM practitioners may feel a lack of professional credibility, and ill-equipped to deal with criticisms of their practice. This points to issues in their pre-qualification

training and education. Hence my recommendation that students at pre-qualification level in CAM education should be exposed to a wider range of perspectives to encourage inter-professional co-operation and understanding, and provide students with a grounding in basic research principles and paradigms.

- For organisations: Sub-finding Four relating to participants' interactions with their own, and new COPs suggests the benefits of CAM organisations working towards building inter-professional co-operation and research awareness in their communities. Whilst recognising the difficult financial climate in CAM, I recommend that such organisations prioritise the strengthening of research awareness and understanding in their communities by a) provision of Continuing Professional Development events aimed at the development of research awareness and skills for practitioners and b) provision of bursaries for key individuals in organisations to act as COP pioneers by studying for postgraduate research degrees.

Future directions for research:

- Research into the post-qualification education of other professional, vocational, or marginalised groups would add to the understanding of how much influence the learner's starting point, professional status etc. has on the generation of transformative learning experiences.
- Further research into the post-qualification education of CAM practitioners both within and outside of HE could assist CAM practitioners to focus their efforts and investment in continuing professional development in a direction appropriate to their desired outcomes.
- Another interesting avenue for further research would be the impact on biomedical professionals of learning about the philosophy, ethos, and issues in researching CAM therapies.

- I propose that use of the analytic categories of identity, professional identity, practice, and community of practice would be beneficial in further research into the fostering of Transformative Learning in professional, vocational, or marginalised groups.
- Adopting a similar approach in the study of other online MSc courses for professional, vocational, or marginalised groups would contribute further to the pedagogy of online learning, and expand the understanding of the potential of this mode of delivery to deliver profound and meaningful learning experiences.

Closing reflections

As I complete my thesis I am aware that although this does not represent the endpoint of my doctoral journey, it is nevertheless a significant milestone and hopefully one with the end in sight. Wise travelers pause as the journey's end approaches to catch their breath, take in the landscape, and reflect on their passage through it. The final section of this closing chapter offers my reflections on the research process and my own inner journey.

I set out to explore the impact of postgraduate education on qualified CAM practitioners who had engaged in MSc studies within international cohorts, on courses which were delivered wholly online. The impetus for this study came from my background as a homeopath, I was accustomed to knowing what happened to patients that I had prescribed for, and wanted to replicate this process in my education practice. I was generously helped in my quest by my fellow travelers, the participants in this study, who worked with me to co-construct the body of data that resulted in my findings.

I have from the outset taken a holistic approach to my research. My epistemological stance of constructionism/constructivism enabled me to honour and respect the lived-experience of the participants, and was fitting given the focus on professional identity and transformative learning which encompasses both individual and social processes of meaning-making (Illeris, 2014a). As discussed in Chapter Three, case study seemed an obvious choice of methodology given the bounded and unique nature of the setting and the subjects of this study (Stake, 1995). Further, the use of this approach incorporating an autoethnographic viewpoint, along with the choice of thematic analysis resonated with the experience and skills that I held as a CAM practitioner. This framework gave me the freedom to adapt and tailor my process to produce a piece of work that I feel authentically represents the participants in this research, and myself in terms of my own personal identity and professional identities as an educator, researcher, and CAM practitioner. The addition of grounded theory techniques, such as constant comparison and memo writing, to the thematic analysis process allowed me to fulfil my urges for thoroughness in my approach (Charmaz, 2006); and the construction of I-poems allowed me to draw on my creative side to preserve and honour the voices of the participants in this research whilst gaining further insights into their experiences (Gilligan, 2015).

I focused on three key aspects of CAM practitioners' professional lives: professional identity, practice and community of practice, which became my analytic categories. It seems relevant in this reflection to apply my chosen analytic categories to the context of my own professional life. As an educator in HE, my confidence has built within the organisation, to the point where although I am still a slightly alternative fish within a predominantly biomedical pond, my perceptions of the contrast between the two positions have blurred and I feel more certain of my place and the contribution that I can make. As an educator working mostly in an online environment, I have deepened my appreciation for this mode of delivery and its far-reaching potential for providing learners with profound and meaningful learning experiences, which in the case of the

courses under consideration is rippling out and having a positive impact on the CAM profession.

As a CAM practitioner, I find that my salient identity has shifted in that having increased my contract with UCLan I have recently taken a decision to reduce my homeopathy practice, and my focus is now much more on my educational practice. If asked now about my occupation, I answer that I am a teacher or a lecturer at a university. If asked for further details I still locate myself in the CAM field, and talk about delivering online masters' level courses to qualified CAM practitioners. As a member of the CAM and homeopathy communities of practice I feel that my doctoral studies have shifted my contributions to take a focus on enhancing and improving educational standards in the profession. Whilst not wishing to distance myself entirely from the CAM field, I will welcome the EdD title as a passport to a wider horizon to travel towards. However, I still hope to work with CAM practitioners in the important drive to strengthen the profession. In terms of change to my own frames of reference, I think my main learning has been that whilst I already accepted the inherent ambiguity of knowledge I now have a deeper appreciation of how a reflexive approach can bring balance in an uncertain world, and support my aspirations to be an authentic educator and researcher.

In the latter stages of writing this thesis, I have had a phrase running through my mind: 'All education is change, but not all change is transformation'. I was convinced that this was said by Mezirow, and searched repeatedly to find the reference before eventually realising that I had inadvertently paraphrased and combined statements from Cranton (1994:160) and Grabove (1997:89). This self-constructed axiom holds true for me, in that I understand any adult's decision to engage in education to indicate a desire for change, however, it is the depth of change that determines whether or not transformation has taken place. At a recent conference presentation, I

was asked if I was aware if any graduates of the courses had transformed to the extent that they had rejected CAM, my answer was that whilst that would indeed be a transformation it is not one that I have witnessed to date. As has been discussed, there is an indication of some CAM professionals in HE distancing themselves from the field, but this does not so far seem to involve a wholesale rejection of CAM philosophy and values.

Whilst considering these matters, I have asked myself if have I experienced a transformative learning experience during my doctoral studies. Based on Mezirow's (1978; 2000) theory of change in frames of reference, Illeris's (2003, 2014a) location of transformation at the level of identity, my own proposed analytic categories, and my gut feeling, my answer is a resounding 'Yes'. I qualify this however with the understanding of my learning as a transformation in process, of which the writing of this thesis forms a vitally important stage.

I believe that this thesis presents a clear and honest account of my research journey (Bargar and Duncan, 1982). The choice of a professional doctorate has been a good one for me, I cannot overstate the benefits I have felt from doctoral study within a cohort model, although as a group we faced our fair share of trials and tribulations, and initially needed to work hard to forge the bonds that have ultimately supported us all through our studies¹⁸.

¹⁸ As a cohort we wrote and published an article in collaboration with our course leader: 'Our breadcrumb trail through the woods': reflections on the use of a secret Facebook group as a strategy for surviving and thriving on the doctoral journey' (Satchwell et al., 2015). Article available in Appendix 3: Publications

My doctoral journey has been by turns, wonderful, frustrating, tiring, and life-enhancing; with relatively few roadblocks or diversions on the way. Although as alluded to in the previous chapter, my work on this study has at times been somewhat disheartening as I considered the declining status of CAM, particularly within HE; it has been predominantly inspiring as I worked my way through the various theoretical concepts, and most of all, the stories of the participants.

Here at the end of my thesis I am struck by the significance of the quote from Drake and Heath (2011) that I have placed at the beginning of this chapter. For me, the writing of the thesis has been vital in helping me to work out my thoughts and theories about this research, and has been an important phase of this transformative journey; as the second quote from David Mitchell's *Cloud Atlas* (2004:297) states '...there ain't no journey what don't change you some', and this has been no exception.

References

- ACKROYD, S. and HUGHES, J. (1992) *Data collection in context* (2nd edition) London: Longman.
- ADLER, P.A. & ADLER, P. (2008) Of rhetoric and representation: The four faces of ethnography. *The Sociological Quarterly*, 49, pp. 1-30.
- ALVESSON, M. & SKOLDBERG, K. (2009) *Reflexive methodology* (2nd edition) London: Sage.
- ANAGNOSTOPOULOU, K., PARMAR, D. & PRIEGO-HERNANDEZ, J. (2009) An exploration of perceptions of learning and e-learning held by students who withdraw and those who persist with UK higher education. *Brookes E-Journal of Learning & Teaching*. February 2009, Volume 2, Issue 4
http://bejlt.brookes.ac.uk/article/an_exploration_of_perceptions_of_learning_and_e_learning/ Accessed: 27 April 2011.
- ANDERSON, T. (2012) Learning technology through three generations of technology enhanced distance education pedagogy. *European Journal of Open, Distance and E-Learning*. Available at:
<http://www.euodl.org/index.php?p=current&sp=full&article=523>
- ASSOCIATION OF GRADUATE RECRUITERS (1995) *Skills for graduates in the 21st century*. Cirencester: The Association of Graduate Recruiters. Available at:
http://www.agr.org.uk/write/Documents/Reports/Skills_for_Graduates_in_the_21st_Century.pdf Accessed: 20 July 2016.
- ATHERTON, J.S. (2013) Learning and Teaching; Critical Reflection. Available at:
<http://www.learningandteaching.info/learning/critical1.htm> Accessed: 5 February 2016.
- AUBREY, K. & RILEY, A. (2016) *Understanding and using educational theories*. London: Sage
- BALAN, N. (2005) Multiple voices and methods: listening to women who are in workplace transition. *International Journal of Qualitative Methods*, 4(4), pp. 1-21.
- BALDWIN, EARL OF BEWDLEY (2010) *Observations on the report Evidence Check 2: Homeopathy by the House of Commons Science and Technology Committee*, February 2010. Available at: https://www.hri-research.org/wp-content/uploads/2014/07/Baldwin_Observations-on-Evidence-Check-2-Homeopathy-report-2010.pdf Accessed: 4 January 2016.

BARGAR, R.R. and DUNCAN, J.K. (1982) Cultivating creative endeavour in doctoral research. *Journal of Higher Education*, 53, pp. 1-31.

BARTLETT, S. & BURTON, D. (2016) *Introduction to education studies* (4th edition)
London: Sage

BASSEY, M. (1999) *Case study research in educational settings*. Buckingham: Open University.

BEAUMONT, H. (2016) Don't hate the homeopaths. *The Hippocratic Post*. 24 March. Available at: <http://www.hippocraticpost.com/integrative/dont-hate-homeopathy/>: Accessed: 30 March 2016.

BECHER, T. & TROWLER, P.R. (2001) *Academic tribes and territories: Intellectual enquiry and the culture of disciplines* (2nd edition). Buckingham: The Society for Research into Higher Education and Open University Press.

BEETHAM, H. & SHARPE, R. (2013) *Rethinking pedagogy for the digital age: Designing for 21st century learning*. Abingdon: Routledge

BEIJAARD, D., MEIJER, P.C. & VERLOOP, N. (2004) Reconsidering research on teachers' professional identity. *Teaching and teacher education*, 20(2), pp. 107-128.

BEST, A. (2003) Doing race in the context of feminists interviewing: Constructing whiteness through talk. *Qualitative Inquiry*, 9(6), pp. 895-914.

BIGGS, J. & TANG, C. (2011) *Teaching for quality learning at university: What the student does*. (4th edition) Maidenhead: Open University Press/SRHE

BISCHEL, J. (2013) *The state of e-Learning in Higher Education: An eye toward growth and increased access (Research Report)* Louisville, CO: EDUCAUSE Center for Analysis and Research. Available at: <https://net.educause.edu/ir/library/pdf/ers1304/ers1304.pdf> Accessed: 29 September 2014.

BIVINS, R. (2015) Limits and liberties: CAM, regulation and the medical consumer in historical perspective. In: GALE, N. & MCHALE, J., (eds.) *Routledge Handbook of Complementary and Alternative Medicine*. Abingdon: Routledge, pp. 13-29.

BLEAKLEY, A., BLIGH, J. & BROWNE, J. (2011) *Medical education for the future: identity, power and location*. London: Springer.

BLOOM, N. (2015) *Conversation at home with Jack Mezirow*. Available at: <https://youtu.be/iEuctPHsre4> Accessed: 5 January 2016.

BLOOMBERG, L.D. & VOLPE, M. (2008) *Completing your qualitative dissertation: a roadmap from beginning to end*. London: Sage

BLUMER, H. (1969) *Symbolic interactionism*. New Jersey: Prentice-Hall.

BOLENDER, R.K. (no date) Charles Horton Cooley 1864-1929 Bolender Initiatives: Focusing on near-future ideas that are changing global society. Available at : <http://www.bolenderinitiatives.com/sociology/charles-horton-cooley-1864-1929>
Accessed: 17 February 2016.

BOLENDER, R.K. (2013) George Herbert Mead 1863-1931 Bolender Initiatives: Focusing on near-future ideas that are changing the global society. Available at : <http://www.bolenderinitiatives.com/sociology/george-herbert-mead-1863-1931>
Accessed: 17 April 2016.

BONK, C.J., & GRAHAM, C.R. (2006) *The Handbook of Blended Learning: Global Perspectives, Local Designs*. San Francisco CA: Pfeiffer.

BOYATZIS, R.E. (1998). *Transforming qualitative information: Thematic analysis and code development*. London: Sage.

BOYD, R.D. & MYERS, J.G. (1988) Transformative Education. *International Journal of Lifelong Education*, 7(4), pp. 261-284.

BOYER, N.R., MAHER, P.A. & KIRKMAN, S. (2006) Transformative learning in online settings: The use of self-direction, meta-cognition, and collaborative learning. *Journal of Transformative Education* 4, October 2006, pp. 335-361.

BRAUN, V. & CLARKE, V. (2006) Using thematic analysis in psychology. *Qualitative research in psychology*, 3, pp. 77-101.

BRAUN, V. & CLARKE, V. (2013) *Successful qualitative research: A practical guide for beginners*. London: Sage.

BRAUN, V. & CLARKE, V. (no date) *Thematic analysis: Frequently asked questions*. University of Auckland <https://www.psych.auckland.ac.nz/en/about/our-research/research-groups/thematic-analysis/frequently-asked-questions-8.html>
Accessed: 7 August 2014.

BRITISH EDUCATIONAL RESEARCH ASSOCIATION (2011) *Ethical guidelines for educational research*. <https://www.bera.ac.uk/researchers-resources/publications/ethical-guidelines-for-educational-research-2011> BERA.
Accessed: 23 March 2013.

- BRITISH PSYCHOLOGICAL SOCIETY (2010) *Code of human research ethics*.
http://www.bps.org.uk/sites/default/files/documents/code_of_human_research_ethics.pdf British Psychological Society. Accessed 23 March 2013.
- BROOKFIELD, S.D. (1995) *Becoming a critically reflective teacher*. San Francisco: Jossey-Bass.
- BROOKFIELD, S.D. (2010) View of transformative learning. OLA Media Project. Available at: <https://vimeo.com/12803805> Accessed: 5 June 2016.
- BROSNAN, C. (2015) Quackery' in the Academy? Professional knowledge, autonomy and the debate over complementary medicine degrees. *Sociology*, 49(6), pp. 1047-1064.
- BROWN, L.M. & GILLIGAN, C. (1992) *Meeting at the crossroads: Women's psychology and girls' development*. Harvard: Harvard University Press.
- BURBULES, N.C., & BERK, R. (1999) Critical thinking and critical pedagogy: relations, differences, and limits. In: POPEKEWITZ, T.S. & FENDLER, L. *Critical theories in education*. Abingdon: Routledge
- BURGESS, R. (1984) *In the Field: An Introduction to Field Research*. London: Allen and Unwin.
- BURKE, P.J. & STETTS, J.E. (2009) *Identity theory*. New York: Oxford University Press.
- CAMBRIDGE DICTIONARIES ONLINE, Vignette definition. Cambridge Dictionaries Online. Available at: <http://dictionary.cambridge.org/dictionary/english/vignette> Accessed 18 May 2016.
- CANT, S. & SHARMA, U. (1996) Demarcation and transformation within homeopathic knowledge: A strategy of professionalization. *Social Science and Medicine*, 42, pp. 579-588.
- CANT, S. & SHARMA, U. (1999) *A new medical pluralism? Alternative medicine, doctors, patients and the state*. London: UCL Press Ltd.
- CARR-CHELLMAN, A.A. (2005) *Global Perspectives on E-learning: Rhetoric and Reality*. (Kindle Edition) London: Sage.
- CARROLL, L. (1872) The Walrus and the Carpenter. Available at: <http://www.jabberwocky.com/carroll/walrus.html>
- CHARMAZ, K. (2006) *Constructing grounded theory: A practical guide through qualitative analysis*. London: Sage.

CHARMAZ, K. (2012) *The power and potential of grounded theory*. Lecture to British Sociological Association MedSoc group. Available <https://youtu.be/zY1h3387txo> Accessed: 6 September 2014.

CHATFIELD, K. & DUXBURY, J. (2010). Practical and ethical implications of homeopathy in mental healthcare. In Johannes, C.K. & van der Zees, H., *Homeopathy and mental healthcare: Integrative practice, principles and research* (Chapter 19). Holland: Homeolinks.

CHATFIELD, K., PARTINGTON, H. & DUCKWORTH, J. (2012) The place of the university in the provision of CAM education. *Similia: The Australian Journal of Homoeopathic Medicine*, 42(1), pp. 16--20.

CLARKE, D.B., DOEL, M.A. & SEGROTT, J. (2004) No alternative? The regulation and professionalization of complementary and alternative medicine in the United Kingdom. *Health and Place*, 10, pp. 329-338.

CLARKE, M., HYDE, A. & DRENNAN, J. (2013) Professional identity in higher education. In: KEHM, B.M. & TEICHLER, U. (eds.) *The academic profession in Europe: new tasks and new challenges*. London: Springer, pp. 7-21.

CLARKE, S. (2008) *The Sage Handbook of Cultural Analysis*. London: Sage.

CLOUGH, P. & NUTBROWN, C. (2012) *A student's guide to methodology*. London: Sage.

COFFEY, A. & ATKINSON, P. (1996) *Making sense of qualitative data: Complementary research strategies*. London: Sage

COHEN, L., MANNION, L. & MORRISON, K. (2011) *Research Methods in Education* (7th edition) Abingdon: Routledge.

COLLINS ENGLISH DICTIONARY ONLINE (nd) Definition of pedagogy. Available at: <https://www.collinsdictionary.com/dictionary/english/pedagogy>. Accessed 13/6/17

COLQUHOUN, D. (2007) Science degrees without the science. *Nature*, 446(22), pp. 373-374.

COLQUHOUN, D., (2012) Complementary medicine courses in universities: how I beat the university quacks. *The Telegraph Science news*. 31st January 2012
<http://www.telegraph.co.uk/news/science/science-news/9051103/Complementary-medicine-courses-in-universities-how-i-beat-the-varsity-quacks.html> Accessed 13 March 2014

CONRAD, R.M. & DONALDSON, J.A. (2005) *Engaging the Online Learner: Activities and Resources for Creative Instruction*. San Francisco: Jossey-Bass.

- COOLEY, C.H. (1902) *Human Nature and the Social Order*. New York: Scribners.
- COSTLEY, C., ELLIOTT, G. & GIBBS, P. (2010) *Doing Work Based Research: Approaches to enquiry for insider-researchers*. London: Sage.
- CRANTON, P. (1994) Self-directed and transformative instructional development. *Journal of Higher Education*, 65 (6), pp. 726-744.
- CRANTON, P. (2002) Teaching for transformation. *New Directions for Adult and Continuing Education*, 93(Spring 2002), pp. 63-71.
- CRANTON, P. & KASL, E. (2012). A response to Michael Newman's "Calling Transformative Learning into question: some mutinous thoughts". *Adult Education Quarterly*, 62(4), pp. 393-398.
- CRANTON, P. & ROY, M. (2003) When the bottom falls out of the bucket: Toward a holistic perspective on transformative learning. *Journal of Transformative Education*, 1(2), pp. 86-98.
- CRANTON, P. & TAYLOR, E.W. Transformative Learning Theory Seeking a More Unified Theory In: TAYLOR, E.W. & CRANTON, P. (2012) *The handbook of transformative learning: Theory, research and practice*. San Francisco: Wiley. pp3-20
- CRESSWELL, J.W. (2014) *Research design* (4th edition) London: Sage
- CRESSWELL, J.W. & MILLER, D.L. (2000) Determining validity in qualitative inquiry. *Theory into Practice*, 39(3), pp. 124-130.
- CROTTY, M. (1998) *The foundations of social research: Meaning and perspective in the research process*. London: Sage.
- CURTIS, M. (1996) The development of the BSc (Hons) health sciences for complementary medicine. *Complementary Therapies in Nursing and Midwifery*, 2, pp. 126-129.
- DABBAGH, N., & KITSANTAS, A. (2011) Personal Learning Environments, social media, and self-regulated learning: a natural formula for connecting formal and informal learning. *Internet and Higher Education*. Available at: <http://anitacrawley.net/Articles/DabbaughPLE.pdf> Accessed: 4.4.17
- DENT, M. & WHITEHEAD, S. (eds.) (2002) *Managing professional identities: Knowledge, performativity and the 'new' professionals*. Abingdon: Routledge.

DI MAGGIO, P.J. & POWELL, W.W. (1983) The iron cage revisited: institutional isomorphism and collective rationality in organizational fields. *American Sociological Review*, 48(2), pp. 147-160.

DIRKX, J.M. (2012) A response to 'Calling transformative learning into question: some mutinous thoughts' by Michael Newman. *Adult Education Quarterly*, 62(4), pp. 399-405.

DIRKX, J.M., MEZIROU, J. & CRANTON, P., 2006. Musings and reflections on the meaning, context, and process of transformative learning: a dialogue between John M. Dirkx and Jack Mezirow. *Journal of Transformative Education*, 4(2), pp. 123-139.

DIRKX, J.M. & SMITH, R.O. (2009) Facilitating transformative learning: engaging emotions in an online context. In: MEZIROU, J., TAYLOR, E.W. & ASSOCIATES, (eds.) *Transformative learning in practice: Insights from community, workplace and higher education*. San Francisco: Jossey-Bass, pp. 57-66.

DONMOYER, R. (2000) Generalizability and the single-case study. In: GOMM, R., HAMMERSLEY, M. & FOSTER, P. (eds.) *Case study method*. London: Sage, pp. 45-68.

DONNELLY, L. & MENDICK, R. (2015) 'Herbal doctors will not be regulated, despite pleas from Prince Charles'. *The Telegraph Health News* 27 March.
<http://www.telegraph.co.uk/news/health/news/11500275/Herbal-doctors-will-not-be-regulated-despite-pleas-from-Prince-Charles.html> Accessed 27 March 2016

DOWNING, K. (2001) Information technology education and health care constructivism in the 21st century. *Educational Studies*. 27(3).

DRAKE, P. & HEATH, L. (2011) *Practitioner research at doctoral Level: Developing coherent methodologies*. Abingdon: Routledge.

DUCKWORTH, J. (2015) *Private communication*.

EDWARDS, R. & WELLER, S. (2012) Shifting analytic ontology: using I-poems in qualitative longitudinal research. *Qualitative research*, 12(2), pp. 202-217.

ELLIS, C., ADAMS, T.E., BOCHNER, A.P. (2011) Autoethnography: an overview. Forum: Qualitative Social Research, 12, article 1. Available from: <http://www.qualitative-research.net/index.php/fqs/article/view/1589/3095%3Cbr> Accessed 24 September 2016]

ELSE, H. (2014) Opening of private medical school delayed after GMC raises concerns. *Times Higher Education* 4th September
<http://www.timeshighereducation.co.uk/news/opening-of-private-medical-school-delayed-after-gmc-raises-concerns/2015567.article> Accessed 4 September 2014.

- ELY, M., ANZUL, M., FRIEDMAN, T., GARNER, D. & MCCORMACK STEINMNETZ, A. (1991) *Doing qualitative research: Circles within circles*. London: The Falmer Press Teachers' Library.
- ELY, M., VINZ, R., DOWNING, R. and ANZUL, M. (1997) *On writing qualitative research: Living by words*. London: Falmer Press.
- ENGESTROM, Y. (2001) Expansive learning at work: toward an activity theoretical reconceptualization. *Journal of Education and Work*, 14(1), pp. 133-156.
- ENGESTROM, Y. (2011) Activity theory and learning at work. In: MALLOCH, M., CAIRNS, L., EVANS, K. & O'CONNOR, B.N. (eds.) *The Sage handbook of workplace learning*. London: Sage, pp. 74-89.
- ERIKSON, E.H. (1968) *Identity, youth and crisis*. London: W.W. Norton and Company.
- ERIKSON, E.H. (1980) *Identity and the lifecycle*. London: W.W. Norton and Company.
- EYLES, C., LEYDON, G.M., LEWITH, G. & BRIEN, S. (2010) A grounded theory study of homeopathic practitioners' perceptions and experiences of the homeopathic consultation., *Evidence Based Complementary and Alternative Medicine*, 1(12), pp. (doi:10.1155/2011/957506).
- FELDMAN, P. (2016) Higher education leaders share challenges of the sector. JISC. Available at: <https://www.jisc.ac.uk/blog/higher-education-leaders-share-challenges-of-the-sector-27-jun-2016> Accessed 29.5.17
- FENGE, L. (2010) Sense and sensibility: Making sense of a professional doctorate. *Reflective Practice*, 11(5), pp. 645--656.
- FLATT, J. (2013) Critical discourse analysis of rhetoric against complementary medicine. *Creative Approaches to Research*, 6(2), pp. 57--70.
- FLESCH, H. (2010) Balancing act: women and the study of complementary and alternative medicine. *Complementary Therapies in Clinical Practice*, 16(1), pp. 20--25.
- FLICK, U. (2014) *An introduction to qualitative research* (5th edition) London: Sage.
- FLUM, H. & KAPLAN, A. (2012) Identity formation in educational settings: A contextualized view of theory and research in practice. *Contemporary Educational Psychology*, 37, pp. 240-245.
- FONTANA, A. & FREY, J.H. (1994) Interviewing: the art of science. In: DENZIN, N.K. & DENZIN Y.L. (eds.) *The Handbook of Qualitative Research*. London: Sage pp. 361-376.

- FORBES, J. (2008) Reflexivity in doctoral research. *Reflective practice*, 9(4), pp. 449-460.
- FOUCAULT, M. (1977) *Discipline and punish: The birth of the prison*. London: Penguin.
- FOUCAULT, M. (1998) Technologies of the self. In: MARTIN, L.H., GUTMAN, H. & HUTTON, P.H. (eds.) *Technologies of the self: A seminar with Michel Foucault*. London: Tavistock Press, pp. 16-49.
- FOURNIER, V. (2002) Amateurism, quackery and professional conduct. In: DENT, M. & WHITEHEAD, S. (eds.) *Managing professional identities: Knowledge, performativity and the 'new' professionals*. Abingdon: Routledge, pp. 116-135.
- FOX, M., MARTIN, P. & GREEN, G. (2007) *Doing Practitioner Research*. London: Sage.
- FULDER, S. (1996) *The Handbook of Alternative and Complementary Medicine*. Oxon: Oxford University Press.
- GALE, N.K. (2007) *Knowing the body and embodying knowledge: An ethnography of student practitioner experiences in osteopathy and homeopathy*. PhD Thesis, University of Warwick. Available at: <http://wrap.warwick.ac.uk/1145/> Accessed: 3 September 2014.
- GALE, N. K. (2014) How can you make a career as a complementary therapist? Dissemination Report, 'Putting Embodied Knowledge into Practice' (ES/J002828/1). Birmingham: Health Services Management Centre, University of Birmingham.
- GALE, N.K. (2014) The sociology of traditional, complementary and alternative medicine. *Sociology Compass*, 8/6, pp.805-822
- GALE, N.K., and MCHALE, J. (eds.) 2015 *Routledge Handbook of Complementary and Alternative Medicine*. Abingdon: Routledge.
- GARRISON, D.R. (2011) *E-learning in the 21st Century: A framework for research and practice*. Abingdon: Routledge Falmer.
- GARRISON, D.R. & ANDERSON, T. (2003) *E-learning in the 21st century: a framework for research and practice (1st edition)* OpenUniversiteitNederland Available at: [http://portal.ou.nl/documents/89037/89380/Garrison+%26%20Anderson+\(2003\).pdf](http://portal.ou.nl/documents/89037/89380/Garrison+%26%20Anderson+(2003).pdf) Accessed: 28.5.17
- GAZZOLA, N., DE STEFANO, J., AUDET, C. & THERIAULT, A. (2011) Professional identity among counselling psychology doctoral students: A qualitative investigation. *Counselling Psychology Quarterly*, 24(4), pp. 257--275.

- GEE, J.P. (2000) Identity as an Analytic Lens for Research in Education, *Review of Research in Education*, 25(1), pp. 99-125.
- GEERTZ, C. (1973) *The interpretation of cultures*. New York: Basic Books.
- GIBBS, G.R. (2007) *Analysing qualitative data*. London: Sage.
- GIBBS, G.R. (2011) Coding part 2: thematic coding. Available at: <http://youtu.be/7X7VuQxPfpk> Accessed 16 July 2014.
- GIBSON, B.L. (2003) *The mountain behind the clouds: an ethnography of the professionalisation and integration of alternative medicine in the UK*. PhD Thesis. Available at: <http://ethos.bl.uk/OrderDetails.do?uin=uk.bl.ethos.428882> Lancaster University. Accessed 12 May 2013.
- GIBSON, W. & BROWN, A. (2009) *Working with qualitative data*. London: Sage.
- GIDDENS, A. (1991) *Modernity and self-identity: Self and society in the late modern age*. Cambridge: Polity Press.
- GILLIGAN, C. (2015) The listening guide method of psychological inquiry. *Qualitative Psychology*, 2(1), pp. 69-77.
- GLASER, B.G. & STRAUSS, A.L. (1967) *The discovery of grounded theory: Strategies for qualitative research*. New York: Aldine de Gruyter.
- GOFFMAN, E. (1961) *Asylums: Essays on the social situation of mental patients and other inmates*. London: Penguin Books.
- GOFFMAN, E. (1963) *Stigma: Notes on the management of spoiled identity*. New York: Simon & Schuster.
- GOLDIE, J. (2012) The formation of professional identity in medical students: Considerations for educators. *Medical Teacher*, 34(9), pp. 641--8.
- GOMM, R. (2011) *Methodspace: Case studies and ethnography*. Sage Publications. Available at: www.methodspace.com/forum/topics/case-studies-and-ethnography?com Accessed 5 June 2013.
- GRABOVE, V. (1997) The many facets of transformative learning theory and practice. *New Directions for Adult and Continuing Education*, 74, pp. 89-96.

- GRAMMARIST (2015) Sceptic vs. skeptic. Grammarist.com. Available at: <http://grammarist.com/spelling/sceptic-skeptic/> Accessed 31 May 2016.
- GRIX, J. (2010) *The Foundations of Research* (2nd edition) Houndmills: Palgrave.
- GROVES, M. & O'DONOGHUE, J. (2009) Reflections of students in their use of asynchronous online seminars. *Educational Technology and Society*, 12(3), pp. 143-149.
- GUBA, E.G. (1990) The alternative paradigm dialog. In: GUBA, E.G. (ed.) *The Paradigm Dialog*. London: Sage, pp. 17-27.
- GULATI, S. (2004) Constructivism and emerging online learning pedagogy: a discussion for formal to acknowledge and promote the informal. Paper presented at the Annual conference of the Universities Association for Continuing Education – Regional Futures: Formal and Informal Learning Perspectives, Centre for Lifelong Learning, University of Glamorgan, 5-7 April 2004. Education-Line. Available at: <http://www.leeds.ac.uk/educol/documents/00003562.htm>
- HAHNEMANN, S. (1842/1996) *Organon of the medical art*. Pao Alto, California: Birdcage books.
- HARDING, J. (2013) *Qualitative data analysis from start to finish*. London: Sage.
- HELLER, T., LEE-TREWEEK, G., KATZ, J., STONE, J. & SPURR, S. (eds.) (2005) *Perspectives on complementary and alternative medicine*. Abingdon: Routledge.
- HERKIS, L. (2017) *Understanding and overcoming institutional roadblocks to the adoption and use of technology-enhanced learning resources in Higher Education*. Interim Report, July 2017 Carnegie Mellon University. Privately circulated.
- HESSE-BIBER, N. & LEAVEY, P. (2006) On the listening guide: a voice-centered relational method. In: HESSE-BIBER, N. and LEAVEY, P. (eds.) *Emergent methods in social research*. London: Sage, pp. 253-272.
- HIGHER EDUCATION FUNDING COUNCIL FOR ENGLAND (2005) *Strategy for e-learning*. Available at: http://webarchive.nationalarchives.gov.uk/20100202100434/http://www.hefce.ac.uk/pubs/hefce/2005/05_12/ Accessed 21 April 2012.
- HIGHER EDUCATION FUNDING COUNCIL FOR ENGLAND (2009) *Enhancing learning and teaching through the use of technology: A revised approach to HEFCE's strategy for e-learning*. Available at: http://www.hefce.ac.uk/pubs/hefce/2009/09_12/09_12.pdf Accessed 21 April 2012.

- HIGHFIELD, R. (2007) Alternative medicine degrees 'anti-scientific'. *The Daily Telegraph* 22 March 2007.
- HOFSTEDE, G.H. (2010) *Cultures and organisations: software of the mind: Intercultural co-operation and its importance for survival*. New York: McGraw Hill.
- HOLMES, B. & GARDNER, J. (2006) *E-learning: concepts and practice*. London: Sage
- HOMEOPATHY RESEARCH INSTITUTE (no date) UK Science and Technology Report Homeopathy Research Institute Available: <https://www.hri-research.org/resources/homeopathy-the-debate/uk-select-committee-report/> Accessed 1 April 2016.
- HOOTSTEIN, E. (2002) *Wearing Four Pairs of Shoes: The roles of e-learning facilitators*. Association for Talent Development. Available at: <https://www.td.org/Publications/Newsletters/Learning-Circuits/Learning-Circuits-Archives/2002/Wearing-Four-Pairs-of-Shoes> Accessed 2 April 2016.
- HOUSE OF COMMONS (2010) *Science and technology committee - fourth report - evidence check 2: Homeopathy*. 2010. Science and technology committee publications.
- HOUSE OF LORDS (2000) *Science and technology - sixth report - complementary and alternative medicine*. 2014. Science and technology committee publications.
- HOWITT, D. & CRAMER, D. (2008) *Introduction to research methods in psychology* (2nd edition) Prentice Hall: Pearson.
- HSIUNG, P.C. (2008) Teaching reflexivity in qualitative interviewing. *Teaching Sociology*, 36, pp. 211-226.
- HUANG, H-M., (2002) Toward constructivism for adult learners in online learning environments. *British Journal of Educational Technology*, Vol 33(1), pp27-37
- IBARRA, H. (1999) Provisional selves: Experimenting with image and identity in professional adaptation. Harvard Business School Working Knowledge Archive. Available at: <http://hbswk.hbs.edu/archive/1275.html> Accessed 20 July 2014
- ILLERIS, K. (2003) Transformative Learning - from a perspective of a comprehensive (adult) learning theory, *Fifth International Transformative Learning Conference*, October 23-25, 2003, pp. 245-250.
- ILLERIS, K. (ed.) (2009) *Contemporary theories of learning*. Abingdon: Routledge.
- ILLERIS, K. (2014a) *Transformative learning and identity*. Abingdon: Routledge.

ILLERIS, K. (2014b) Transformative Learning re-defined: As changes in elements of identity. *International Journal of Lifelong Education*, 33(5), pp. 573-586.

ILLERIS, K. (2015) Transformative Learning in Higher Education. *Journal of Transformative Learning*, 3(1), pp. 46-51.

ISAKSEN, J.V. (2013) The looking-glass self: How our self-image is shaped by society. Popular Social Science. Available at: <http://www.popularsocialscience.com/2013/05/27/the-looking-glass-self-how-our-self-image-is-shaped-by-society/> Accessed 16 April 2016.

JACKSON, S. (2010) Self, time and narrative: Re-thinking the contribution of G.H. Mead. *Life Writing*, 7(2), pp. 123-136.

JAMES, W. (1890/2004) The principles of psychology. Classics in the history of psychology: An internet resource developed by Christopher D. Green. Available at: <http://psychclassics.asu.edu/James/Principles/prin10.htm> Accessed 17 April 2016.

JANDT, F.E. (2013) *Introduction to intercultural communication: Identities in a global community* (7th edition) London: Sage.

JOFFE, H. & YARDLEY, L. (2003) Content and thematic analysis. In: MARKS, D.F. & YARDELY, L. (eds.) *Research methods for clinical and health psychology*. London: Sage.

KAISER, K. (2009) Protecting respondent confidentiality in qualitative research. *Qualitative Health Research*, November, 19(111), pp. 1632-1641.

KAPTCHUK, T.J. (2002) The placebo effect in alternative medicine: Can the performance of a healing ritual have clinical significance? *Annals of Internal Medicine*, 136, pp. 817-825.

KIEGELMANN, M. (2009) Making oneself vulnerable to discovery. Carol Gilligan in conversation with Mechthild Kiegelmann. *Qualitative Social Research*, 10(2).

KNIGHT, P.T. & TROWLER, P.R. (2001) *Departmental leadership in higher education*. Buckingham: SHRE and Open University Press.

KNOWLES, M. (1996) Andragogy: an emerging technology for adult learning. In: EDWARDS, R.; HANSON, A.; RAGGATT, P. (Eds). *Boundaries of adult learning*. Abingdon: Routledge

KOK, S., DOUGAS, A., MCCLELLAND, B. & BRYDE, D. (2010). The move towards managerialism: perceptions of staff in 'traditional' and 'new' universities. *Tertiary Education and Management*, 16(2), pp. 99-113.

- KUHN, T.S. (1962) *The structure of scientific revolutions*. Chicago: University of Chicago Press.
- KROGSTAD, U., HOFLOSS, D. & HJORTDAHL, P. (2004) Doctors' and nurses' perceptions of inter-professional co-operation in hospitals. *International Journal for Quality in Healthcare*, November.
- KVALE, S. (2007) *Doing interviews*. London: Sage.
- LAURILLARD, D. (2004) E-learning in Higher Education. In: ASWIN, P. (ed.) *Changing Higher Education: the development of teaching and learning*. Abingdon: Routledge Falmer.
- LAURILLARD, D. (2013) Foreword to the second edition. In: BEETHAM, H. & SHARPE, R. (eds.) *Rethinking pedagogy for a digital age: Designing for 21st century learning*. Abingdon: Routledge
- LAVE, J. & WENGER, E. (1991) *Situated learning: legitimate peripheral participation*. Cambridge: Cambridge University Press.
- LAVE, J. & WENGER, E. (1999) Learning and pedagogy in communities of practice. In: LEACH, J. & MOON, B. (eds.) *Learners and pedagogy*. London: Paul Chapman Publishing Limited in association with the Open University, pp21-33
- LAWLER, S. (2014) *Identity: sociological perspectives* (2nd edition.) Cambridge: Polity Press.
- LECOMPTE, M.D. & GOETZ, J.P. (1982) Problems of reliability and validity in ethnographic research. *Review of Educational Research* 52 (1) pp31-60
- LINCOLN, Y.S. & GUBA, E.G. (1985) *Naturalistic inquiry*. London: Sage.
- LINCOLN, Y.S. & GUBA, E.G. (2000) The only generalisation is there is no generalisation. In: GOMM, R., HAMMERSLEY, M. & FOSTER, P. (eds.) *Case Study Method: key issues, key texts*. London: Sage.
- LINCOLN, Y.S., LYNHAM, S.A. & GUBA, E.G. (2011) Paradigmatic controversies, contradictions, and emerging confluences, revisited. In: DENZIN, N.K. & LINCOLN, Y.S. (eds.) *The Sage Handbook of Qualitative Research*. (4th edition) London: Sage, pp. 97-125.
- LIPSKY, M. (2010) *Street-level bureaucracy: dilemmas of the individual in public service*. (30th Anniversary Kindle Edition) New York: Russell Sage Foundation.

LOMBAERTS, C. (2010) The pitfalls in teaching the sensation methods: a case of threshold concepts? *Similia: The Australian Journal of Homeopathic Medicine*, 22(2), pp. 29-31.

MACARTNEY, J.I. & WAHLBERG, A. (2014) The problem of complementary and alternative medicine use today: Eyes half closed? *Qualitative Health Research*, 24, pp. 114-123.

MARSHALL, C. & ROSSMAN, G.B. (1999) *Designing qualitative research* (3rd edition) London: Sage.

MATTHEWS, D. (2017) 'Academics fail to change teaching due to fear of looking stupid'. *THES* July 4 2017 Available from: <https://www.timeshighereducation.com/news/academics-fail-change-teaching-due-fear-looking-stupid> Accessed 8.7.2017

MAUTHNER, N.S. & DOUCET, A. (1998) Reflections on a voice-centred relational method of data analysis: Analysing maternal and domestic voices. In: RIBBENS, J. and EDWARDS, R. (eds.) *Feminist dilemmas in qualitative research: Private lives and public texts*. London: Sage, pp. 119-144.

MAXWELL, J.A. (1992) Understanding and validity in qualitative research. *Harvard Educational Review*, 62(3), pp. 279-300.

MAY, T. (2002) *Qualitative research in action*. London: Sage.

MCHALE, J. (2015) Legal frameworks, professional regulation and CAM practice in England: Is CAM "the special one"? In: GALE, N.K. & MCHALE, J. (eds.) (2015) *Routledge Handbook of Complementary and Alternative Medicine*. Abingdon: Routledge.

MCKIMM, J., JOLLIE, C. & CANTILLON, P. (2003) ABC of learning and teaching: Web based learning. *BMJ*, 326, pp. 870-873.

MEAD, G.H., 1934 (2013). *Mind, Self & Society: from the Standpoint of a Social Behaviourist*. (Kindle edition). Berlin: Heptagon.

MEYER, J.H.F. & LAND, R. (2005) Threshold concepts and troublesome knowledge (2): Epistemological considerations and a conceptual framework for teaching and learning. *Higher Education*, 49(3), pp. 373-388.

MEYER, J.H.F., LAND, R. & BAILLIE, C. (eds.) (2010) *Threshold concepts and transformational learning*. Rotterdam: Sense Publishers

- MEYER, J.W. & ROWAN, B. (1977) Institutionalized organizations: Formal structure as myth and ceremony. *American Journal of Sociology*, 83(2), pp. 340-363.
- MEYERS, S.A. (2008) Using transformative pedagogy when teaching online. *College Teaching*, 56(4), pp. 219-224.
- MEZIROW, J. (1978) *Education for perspective transformation: Women's re-entry programs in community colleges*. New York: Centre for Adult Education, Teachers College, Columbia University.
- MEZIROW, J. (2000) Learning to think like an adult. In: MEZIROW, J. & ASSOCIATES (2000) *Learning as transformation: Critical perspectives on a theory in progress*. San Francisco: Jossey- Bass, pp.3-33.
- MEZIROW, J. & ASSOCIATES (2000) *Learning as transformation: Critical perspectives on a theory in progress*. San Francisco: Jossey- Bass.
- MEZIROW, J. (2009) An overview on transformative learning. In: ILLERIS, K. (ed.) *Contemporary theories of learning: Learning theorists ... in their own words*. Abingdon: Routledge, pp. 90-105.
- MEZIROW, J., TAYLOR, E.W. & ASSOCIATES (2009) *Transformative learning in practice: Insights from community, workplace, and higher education*. San Francisco: Jossey-Bass
- MILLIGAN, E. & WOODLEY, E. (2010) *Confessions: Confounding narrative and ethics*. Cambridge: Cambridge Scholars Publishing.
- MINISTRY OF AYUSH (no date) Welcome to the Ministry of Ayush. National Health Portal India. Available at : http://www.nhp.gov.in/ayush_ms Accessed 1 April 2016.
- MITCHELL, D. (2004) *Cloud atlas*. London: Hodder and Stoughton.
- MORGAN, D.L. (1997) *Focus Groups as qualitative research*. London: Sage.
- MOULE, P., WARD, R. & LOCKYER, L. (2010) Nursing and healthcare students' experiences and use of e-learning in higher education. *Journal of Advanced Nursing*, pp. 2785-2795.
- MOYNIHAN, R. (2012) Assaulting alternative medicine: Worthwhile or witch-hunt? *BMJ*, 344(e1075).
- NESBIT, T.; LEACH, L.; FOLEY, G. (2004) Teaching adults. In: FOLEY, G. (ed.) *Dimensions of adult learning: Adult education and training in a global era*. Maidenhead: Open University

- NEUHAUSER, C. (2002) Learning style and effectiveness of online and face-to-face instruction. *The American Journal of Distance Education* 16 (2) pp99-113
- NEWMAN, M. (2012a) Calling transformative learning into question: Some mutinous thoughts. *Adult Education Quarterly*, 62(1), pp. 36-55.
- NEWMAN, M. (2012b) Michael Newman's final comments in the forum on this article "Calling transformative learning into question: Some mutinous thoughts". *Adult Education Quarterly*, 62 (4), pp. 406-411
- NGUYAN, T. (2015) The effectiveness of online learning: Beyond no significant difference and future horizons. *MERLOT Journal of Online Learning* 11(2) pp309-319
- NHS CHOICES (2015) Homeopathy: introduction. NHS. Available at: <http://www.nhs.uk/conditions/homeopathy/Pages/Introduction.aspx> Accessed 2 April 2016.
- NICHOLS, M. (2008) *Institutional perspectives: The challenges of e-learning diffusion*. Oxford: Wiley. Available at: <http://onlinelibrary.wiley.com/doi/10.1111/j.1467-8535.2007.00761.x/pdf> Accessed: 3 September 2015.
- NISSEN, N. (2011) Challenging perspectives: Women, complementary and alternative medicine and social change. *Interface: A journal for and about social movements*, 3(2), pp. 187-212.
- NOHL, A-M. (2009) Spontaneous action and transformative learning: Empirical investigations and pragmatist reflections. *Educational Philosophy and Theory*, 4 (3), pp.287-307.
- OLIVER, C. (1991) Strategic responses to institutional processes. *Academy of Management Review*, 16(1), pp. 145-179.
- OPIE, C. (2004) *Doing educational research*. London: Sage.
- OSTROUCH-KAMINSKA, J. & VIEIRA, C.C. (2015) *Private worlds: Gender and informal learning of adults*. The Netherlands: Sense Publishers, Springer.
- OYSERMAN, D., ELMORE, K. & SMITH, G. (2012) Self, self-concept, and identity. In: LEARY, M.R. & TANGNEY, J.P (eds.) *Handbook of self and identity* (2nd edition) London: The Guildford Press, pp. 69-104.
- PARTINGTON, H. (2003) *A study of factors that affect entry into and development of a homeopathic practice after graduation*. MSc dissertation, John Moores University, Liverpool.

- PARTINGTON, H. & FOULKES, L. (2004) Developing a research culture. *Society of Homeopaths Newsletter*.
- PAUL, R.W. (1994) Teaching critical thinking in the strong sense. In: WALTERS, K.S. (ed.) *Re-thinking reason: new perspectives in critical thinking*. Albany: State University of New York Press.
- PETIT DIT DARIEL, O., WHARRAD, H. & WINDLE, R. (2013) Exploring underlying factors influencing e-learning adoption in nurse education. *Journal of Advanced Nursing*, 69(6), pp. 1289-1300.
- PORTER, R. (2005) Quackery. In: LEE-TREWEEK, G., HELLER, T., SPURR, S., MACQUEEN H. & KATZ, J. (eds.) *Perspectives on complementary and alternative medicine: A reader*. Abingdon: Routledge, pp. 215-219.
- PREECE, J. (2000) *Online communities: Designing usability, supporting sociability*. New York: Wiley.
- PREISSLE, J. (2006) Envisioning qualitative inquiry: A view across four decades. *International Journal of Qualitative Studies in Education*, 19(6), pp. 685-695.
- QAA (2008) *The framework for higher education qualifications in England, Wales and Northern Ireland August 2008*. Quality Assurance Agency for Higher Education.
- RAGIN, C.C. & BECKER, H.S. (eds.) (1992) *What is a case? Exploring the foundations of social inquiry*. Cambridge: Cambridge University Press.
- RAIDER-ROTH, M. (2014) Listening guide. In: COGHLAN, D. & BRYDON MILLER, M. (eds.) *The Sage Encyclopedia of Action Research*. London: Sage, pp. 510-512.
- RACE, P. (2014) *Making learning happen: A guide for post-compulsory education*. London: Sage
- RACE, P. (2015) *The lecturer's toolkit*. Abingdon: Routledge
- REED, V. (2007). Homeopathy and mental health care. MSc dissertation: University of Central Lancashire
- REEVES, J. (ed.) (1953) *Selected poems of Gerard Manley Hopkins*. London: Heinemann Educational Books.
- RELTON, C., CHATFIELD, K., PARTINGTON, H., & FOULKES, L. (2007). Patients treated by homeopaths registered with the Society of Homeopaths: A pilot study. *Homeopathy*, 96, pp87-89.

RIBBENS, J. & EDWARDS, R. (eds.) (1998) *Feminist dilemmas in qualitative research: Public knowledge and private lives*. London: Sage.

ROBBINS, M. (2011) Andrew Lansley and 'the art of regulating without regulating' *The Guardian. Science: The Lay Scientist*. 21 February 2011.

ROBINSON, N. & LEWIS, G. (2011) *The RCCM 2009 Survey: Mapping doctoral and postdoctoral CAM research in the United Kingdom*. Hindawi.com. Available at: <https://www.hindawi.com/journals/ecam/2011/457480/> Accessed 19 June 2015.

ROGERS, A. (2002) *Teaching adults* (3rd edition) Maidenhead: Open University Press

ROGERS, C. (1961) *On becoming a person*. London: Constable & Robinson.

ROLFE, G. (2006) Validity, trustworthiness and rigour: Quality and the idea of qualitative research. *Methodological Issues in Nursing Research*, 2006 Journal compilation, pp. 304-310.

SACKETT, D.L., ROSENBERG, W.M.C., GRAY, J.A.M., HAYNES, R.B. & RICHARDSON, W.S. (1996) Evidence based medicine: What it is and what it isn't *BMJ*, (312), pp. 71.

SAKS, M. (2002) *Orthodox and alternative medicine: Politics, professionalisation and health care*. London: Sage.

SAKS, M. (2005) Political and historical perspectives. In: HELLER, T., LEE-TREWEEK, G., KATZ, J., STONE, J. & SPURR, S. (eds.) *Perspectives on complementary and alternative medicine*. Abingdon: Routledge, pp. 59-82.

SAKS, M. (2015) Power and professionalisation in CAM: a sociological approach. In: GALE, N.K. & MCHALE, J. (eds.) *Routledge Handbook of Complementary and Alternative Medicine*. Abingdon: Routledge, pp. 30-38.

SALMON, G. (2003). *E-moderating: The key to teaching and learning online* (2nd edition.) Abingdon: Routledge Falmer.

SANDERS, P. & WILKINS, P. (2010) *First steps in practitioner research: A guide to understanding and doing research in counselling and health and social care*. Ross-On-Wye: PCCS Books.

SATCHWELL, C., PARTINGTON, H., BARNES, L., GURJEE, R., RAMSDALE, S., DODDING, J., & DRURY, K. (2015) 'Our breadcrumb trail through the woods': Reflections on the use of a secret Facebook group as a strategy for surviving and thriving on the doctoral journey. *International Journal of Doctoral Studies*, 10, pp.465-482.

- SAVIN-BADEN, M. & WILKIE, K. (2006). *Problem-based learning online*. Maidenhead: Open University
- SCALES, P. (2008) *Teaching in the lifelong learning sector*. Maidenhead: Open University Press
- SCHUTZ, A. (1973) *Collected Papers 1: The Problem of Social Reality*. The Hague: Martinus Nijhoff.
- SCHWANDT, T. (1994) Constructivist, interpretivist approaches in human inquiry. In: DENZIN, N.K., and LINCOLN, Y.S. (eds.) *Handbook of Qualitative Research*. London: Sage.
- SCOTT, W.R. (2008) Approaching adulthood: The maturing of institutional theory. *Theory and Society*, 37(5), pp. 427-442.
- SELWYN, N. (2014) *Distrusting educational technology: critical questions for changing times*. Abingdon: Routledge
- SENSE ABOUT SCIENCE (2016) Sense about science - about us. Sense about science. Available at: <http://www.senseaboutscience.org/pages/about-us.html> Accessed 23 May 2016.
- SERDYUKOV, P. (2015) Does online education need a special pedagogy? *Journal of Computing and Information Technology*. 23 (1) 61-74
- SHARMA, U. (1991) *Complementary medicine today: Practitioners and patients*. London: Routledge.
- SHOR, I. (2002) Paulo Freire's critical pedagogy. In: LEONARD, P. & MCLAREN, P. (Eds.) *Paulo Freire: a critical encounter*. Abingdon: Routledge
- SIAHPUSH, M. (2000) A Critical Review of the Sociology of Alternative Medicine: Research on Users, Practitioners and the Orthodoxy. 4(2), pp 159-178 Issue published: April 1, 2000
- SIEMENS, G. (2005) Connectivism: a learning theory for the digital age. *International Journal of Instructional Technology and Distance Learning*. 2 (1). Available at: http://www.itdl.org/journal/jan_05/index.htm Accessed: 13.5.17
- SIKES, P.J., MEASOR, L. & WOODS, P. (1985) *Teacher careers: Crises and continuities*. Lewes: The Falmer Press.
- SIMONS, H. (2009) *Case study research in practice*. London: Sage.

- SINGH, S. & ERNST, E. (2008) *Trick or treatment? Alternative medicine on trial*. London: W.W. Norton and Company.
- SLAY, H.S. & SMITH, D.A. (2011) Professional identity construction: Using narrative to understand the negotiation of professional and stigmatized cultural identities. *Human relations*, (64), pp. 85-107.
- SMITH, C., MARTIN, K. & WACHE, D. (2006). Evolving professional demands facing practitioners of complementary and alternative therapies: An educational opportunity. *Focus on Health Professional Education: A Multi-Disciplinary Journal*, 7(3, March 2006), pp. 34-39.
- SMITH, M. K. (1997, 2002) 'Paulo Freire and informal education', *the encyclopaedia of informal education*. [<http://infed.org/mobi/paulo-freire-dialogue-praxis-and-education/>]. Accessed 21/5/17
- SMITH, M.K. (2009) Jean Lave, Etienne Wenger and communities of practice. infed.org. Available at: <http://infed.org/mobi/jean-lave-etienne-wenger-and-communities-of-practice/> Accessed 22 May 2016.
- SMUTS, J.C. (1926) *Holism and evolution*. London: MacMillan and Co.
- SOCIETY OF HOMEOPATHS (2016) Accreditation: Society of Homeopaths accredited by Professional Standards Authority. The Society of Homeopaths. Available: <http://www.homeopathy-soh.org/about-the-society/accreditation> Access 28 March 2016.
- SOMEKH, B. & LEWIN, C. (eds.) (2011) *Theory and Methods in Social Research* (2nd edition) London: Sage.
- STAINES, R. (2008) Nursing to become a degree-only profession. *Nursing Times*. 4 September 2008. Available at : <https://www.nursingtimes.net/nursing-to-become-degree-only-profession/1832902.article> Accessed 19 July 2015.
- STAHL, G. (2000) Artifact-mediated cognition Vygotsky's theory of mind as the result of activity with artifacts: Notes on Vygotsky and Engestrom. Gerry Stahl. Available at: <http://gerrystahl.net/readings/simrocket/vygotsky.html> Accessed 5 June 2016.
- STAKE, R.E. (1995) *The Art of Case Study Research*. London: Sage.
- STONE, J. (2015) Aspirations, integration and the politics of regulation in the UK, past and future. In: GALE, N.K. & MCHALE, J. (eds.) *Routledge Handbook of Complementary and Alternative Medicine*. Abingdon: Routledge, pp.255-268

STRAUSS, A.L. & CORBIN, J. (1998) *Basics of qualitative research: Techniques and procedures for developing grounded theory* (3rd edition) London: Sage.

STRYKER, S. (2008) From Mead to a Structural Symbolic Interactionism and Beyond. *Annual Review of Sociology* (Kindle edition).

STRYKER, S. and BURKE, P.J. (2000) The past, present, and future of an identity theory. *Social Psychology Quarterly*, 63(4), pp. 284-297.

SWISS INFO.CH (2016) Swiss to recognise homeopathy as legitimate medicine SWI Swiss Info.ch. Available at: http://www.swissinfo.ch/eng/complementary-therapies_swiss-to-recognise-homeopathy-as-legitimate-medicine/42053830 Accessed 1 April 2016.

TAYLOR, E.W. (1998) *The theory and practice of transformative learning: A critical review*. Columbus, Ohio: ERIC Clearinghouse on Adult, Career and Vocational Employment.

TAYLOR, E.W. (2008) Transformative learning theory. *New Directions for Adult and Continuing Education*, 119, pp. 5-15.

TAYLOR, E.W. & CRANTON, P. (2012) *The handbook of transformative learning: Theory, research and practice*. San Francisco: Wiley.

TAYLOR, E.W. & CRANTON, P. (2013). A theory in progress? Issues in transformative learning theory. *European Journal for Research on the Education and Learning of Adults*, 4(1), pp. 33-47.

TENNANT, M. (2009). Lifelong learning as a technology of the self. In: ILLERIS, K. (ed.) *Contemporary theories of learning*. Abingdon: Routledge, pp. 147-158.

TENNANT, M. (2012) *The learning self: Understanding the potential for transformation*. San Francisco: Josey-Bass.

TENNANT, M. (2005) Transforming selves. *Journal of Transformative Education*, 3(2), pp. 102-115.

TEUSCHER, U. (2010). Change and persistence of personal identities after the transition to retirement. *The International Journal of Aging and Human Development*, 70(1), pp. 89-106.

THODY, A. (2006). *Writing and presenting research*. London: Sage.

THOMAS, G. (2013) *How to do your research project: A guide for students in education and applied social sciences*. London: Sage.

- THOMAS, G. (2016) *How to do your case study* (2nd edition) London: Sage.
- THOMAS, G. & JAMES, D. (2006) Reinventing grounded theory: Some questions about theory, ground and discovery. *British Educational Research Journal*, 32(6), pp. 767-795.
- THOMPSON, T. & WEISS, M. (2006) 'Homeopathy - what are the active ingredients? An exploratory study using the UK Medical Research Council's framework for the evaluation of complex interventions'. *BMC Complementary and Alternative Medicine*, 6(37), pp. 1-16.
- TUCKER, B. (2012) The flipped classroom. *Education Next*, 12(1) Available from: <https://search.proquest.com/docview/1237826701?accountid=17233> Accessed 22.5.17
- WAHLBERG, A. (2007) A quackery with a difference – new medical pluralism and the problem of 'dangerous practitioners' in the United Kingdom. *Social Science and Medicine*, 65, pp.2307-2316.
- WAHLBERG, A. (2015) Making CAM auditable: technologies of assurance in CAM practice today. In: GALE, N.K. & MCHALE, J. (eds.) *Routledge Handbook of Complementary and Alternative Medicine*. Abingdon: Routledge, pp 129-143.
- WALTERS, K.S. (Ed.) (1994) *Re-thinking reason: New perspectives in critical thinking*. Albany: State University of New York Press.
- WATERMAN, A.S. (2004) Finding someone to be: Studies on the role of intrinsic motivation in identity formation. *Identity: An International Journal of Theory and Research* 4(3) pp209-228
- WATKINS, C. & MORTIMORE, P. (1999). Pedagogy: what do we know? In: MORTIMORE, P, *Understanding pedagogy: and its impact on learning*. London: Sage pp1-19
- WENGER, E. (1998) *Communities of practice: Learning, meaning, and identity*. Cambridge: Cambridge University Press.
- WENGER, E. (2000) Communities of practice and social learning systems. *Organization*, 7(2), pp. 225-245.
- WENGER, E. (2009) A social theory of learning. In: ILLERIS, K. (ed.) *Contemporary theories of learning: learning theorists... in their own words*. Abingdon: Routledge, pp. 209-218.

WENGER-TRAYNER, E. (2016) *Is learning in crisis? Why social learning is vital for our future*. Seminar, University of Central Lancashire, 28 September 2016.

WENGER, E., MCDERMOTT, R. & SNYDER, W.M. (2002) *Cultivating Communities of Practice*. Boston: Harvard Business School Press.

WENGER-TRAYNER, E. & WENGER-TRAYNER, B. (2015) Communities of practice a brief introduction. Wenger-Trayner. Available at: <http://wenger-trayner.com/introduction-to-communities-of-practice/> Accessed 23 May 2016.

WIEVIORKA, M. (1992) Case studies: History or sociology? In: RAGIN, C.C. & BECKER, H.S. (eds.) *What is a case? Exploring the foundations of social inquiry*. Cambridge: Cambridge University Press, pp. 159-227.

WILKINSON, J. (2008) Professional identities. London Deanery. Available at: <http://www.faculty.londondeanery.ac.uk/e-learning/interprofessional-education/professional-identities> Accessed 4 November 2013.

WILLIAMS, K.F. (2009) 'Guilty knowledge': Ethical *aporia* emergent in the research practice of educational development practitioners. *London Review of Education*, 7(3), pp. 211-221.

WILSON, B. G.; LUDWIG-HARMAN, S.; THORNAM C.L.; DUNLAP, J.C. (2004) Bounded Community: Designing and Facilitating Learning Communities in Formal Courses. *The International Review of Research in Open and Distributed Learning*, [S.l.], v. 5, n. 3, nov. 2004. ISSN 1492-3831. Available at: <http://www.irrodl.org/index.php/irrodl/article/view/204/286>. Accessed: 21/5/17. doi:<http://dx.doi.org/10.19173/irrodl.v5i3.204>.

WISEMAN, E. (2015) Homeopathy won't cure you unless you have a little faith. *The Guardian Health and Fitness* 6 December 2015 <http://www.theguardian.com/lifeandstyle/2015/dec/06/homeopathy-wont-cure-you-unless-you-have-a-little-faith> Accessed 6 December 2015

WISKER, G. (2008) *The Postgraduate Research Handbook* (2nd edition.) London: Palgrave Macmillan.

YIN, R.K. (2003) *Case study research* (3rd edition.) London: Sage.

ZOLLMAN, C. & VICKERS, A. (1999) What is complementary medicine? *BMJ*, 319, pp. 693-696.

Appendices

Appendix 1: Documentation

Appendix 2: Instrumentation

Appendix 3: Publications

Appendix 4: Staff 'We-poems'

Appendix 5: List of student and graduate publications

Appendix 6: MSc Integrated Healthcare learning outcomes

Appendix 1: Documentation

1.1 Letter of ethical approval from BAHSS Ethics Committee



21st June 2013

Paul Doherty & Hazel Partington
School of Education & Social Science
University of Central Lancashire

Dear Paul & Hazel

Re: BAHSS Ethics Committee Application

Unique Reference Number: BAHSS 125

The BAHSS ethics committee has granted approval of your proposal application 'A case study of the influence of online masters level study on an international group of complementary and alternative medicine practitioners'.

Please note that approval is granted up to the end of project date or for 5 years, whichever is the longer. This is on the assumption that the project does not significantly change, in which case, you should check whether further ethical clearance is required

We shall e-mail you a copy of the end-of-project report form to complete within a month of the anticipated date of project completion you specified on your application form. This should be completed, within 3 months, to complete the ethics governance procedures or, alternatively, an amended end-of-project date forwarded to roffice@uclan.ac.uk quoting your unique reference number.

Additionally, BAHSS ethics committee has listed the following recommendation(s) which it would prefer to be addressed. Please note, however, that the above decision will not be affected should you decide not to address any of these recommendation(s).

Should you decide to make any of these recommended amendments, please forward the amended documentation to roffice@uclan.ac.uk for its records and indicate, by completing the attached grid, which recommendations you have adopted. Please do not resubmit any documentation which you have **not** amended.

Yours sincerely

Colin Murrell

Deputy Vice Chair

BAHSS Ethics Committee

NB - Ethical approval is contingent on any health and safety checklists having been completed, and necessary approvals as a result of gained.

Response to BaHSS Application

Reference No (125)

Version No (2)

Recommendation	Applicant Response
1. If, at the later stage of identifying precise line(s) of questioning, the agenda has been substantially reformulated so as to bring into question any currently non-existing ethical issues – or if there is any uncertainty regarding this matter – amendments should be sent to the Ethics Committee for prospective Chair’s Approval.	

<p>2. Add to the first paragraph of all Information Sheets, words to the effect of: 'If you respond, you will be signifying that you consent to your answers being used in the study'. However, maintain all existing statements about withdrawing at will and securely deleting information, if necessitated.</p>	
--	--

1.2 Participants' information sheets

1.2.1 Focus group information sheet and consent form



A case study of the influence of online masters level study on an international group of complementary and alternative medicine practitioners

Focus group information sheet

You are being invited to take part in a research study but your participation is completely voluntary, before you decide, it is important for you to understand why the research is being done and what it will involve. Please take some time to read the following information and feel free to discuss it with others if you wish. Please ask if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

What is the purpose of the study?

This study is part of the researcher's doctorate in education and the research will be summarised in a report that will be submitted to the University of Central Lancashire (UCLan) as a thesis as part of this qualification and inform possible future publications or conference presentations .

What is the aim of this study?

The aim of the project is to explore the effects that online MSc courses in Homeopathy, Herbal Medicine and Integrated Health Care have on an individual's

practice, their professional identity and on their community (of practice e.g. homeopathy).

The research aims will be addressed through a series of research questions examining whether students' learning and experience of the courses affects:

- their individual practice of their therapeutic modality
- their professional identity
- their community (of practice e.g. homeopathy)

Who will be taking part in this study?

- Lecturers who teach or have taught on the online MSc courses in Homeopathy, Herbal Medicine and Integrated Health at UCLan
- Graduates of the above courses

Do I have to take part?

No you do not have to; it is up to you to decide whether or not to take part.

What will I be asked to do if I agree to take part?

As a lecturer or former lecturer on the courses you will be invited to take part in a focus group discussion.

The focus group discussion will be recorded, transcribed and analysed by the researcher. If you wish to review the transcript at any time, you may do so by asking Hazel Partington (hpartington@uclan.ac.uk).

If you are happy to take part, please complete the attached proforma.

Are there any disadvantages or risks of taking part?

There are no identifiable risks associated with participation; you would be required to contribute some of your time to participate in a focus group with other lecturers and the researcher. Care will be taken to ensure confidentiality and your anonymity throughout.

What are the possible benefits of taking part?

The study may provide new insights and perspectives that may be of interest to you and to the wider Complementary and Alternative Medicine (CAM) community. You may request a summary of the findings at the end of the study.

What if I wish to withdraw from the study?

You are free to withdraw from the study at any time without giving a reason and if required your responses will be securely destroyed.

Confidentiality and anonymity

If you consent to take part in the research you are assured that all the information that you provide will be anonymised and kept strictly confidential. While identification of respondents may in some instances be possible from their responses, all efforts will be made to preserve confidentiality and anonymity and any direct quotes selected for use in the final thesis or articles or presentations will have any identifying material removed and will not be attributable to you. The data collected will be stored electronically in password protected computers used only by the researcher and supervisor and in locked cabinets in a secure place. After completion of the project all data will be stored at the University in encrypted zip files. The tapes and transcripts of the interviews will be kept for 5 years and then destroyed in accordance with university policy.

The School of Education and Social Sciences Ethics Committee, University of Central

Lancashire has given approval that the study meets ethical requirements.

What will happen to the results of the research study?

The study will be read by course supervisors and thesis examiners. It is anticipated that the results of this project may be used to inform possible future publications or conference presentations (for example, CAM journals and other suitable publications). Any quotations you make which are included in the presentation of findings will not be attributable to you.

Who may I contact for further information?

If you have any questions about the project please contact Hazel Partington on hpartington@uclan.ac.uk

Thank you for your interest in this research. If you would like to take part please complete and return the form below (by email to the above address).

Focus group consent form

Title of Project: A case study of the influence of online master's level study on an international group of complementary and alternative medicine practitioners

Name of Researcher: Hazel Partington (University of Central Lancashire)

Please initial box

1. I confirm that I have read and understood the participant information sheet for the above study and have had the opportunity to ask questions.

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason and without my professional work or legal rights being affected.

3. I give permission for the focus group to be recorded and to be used in publications from the research study, and I understand that they will not be used for any other purposes.

4. I understand that any transcriptions or recordings will be securely and anonymously stored according to the requirements of the Data Protection Act.



5. I agree to take part in the above study.

Name of Participant

Date

Signature

Name of Researcher

Date

Signature

1.2.2 Interview participants' information sheet and consent form



A case study of the influence of online master's level study on an international group of complementary and alternative medicine practitioners

Interviews information sheet

You are being invited to take part in a research study but your participation is completely voluntary, before you decide, it is important for you to understand why the research is being done and what it will involve. Please take some time to read the following information and feel free to discuss it with others if you wish. Please ask if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

What is the purpose of the study?

This study is part of the researcher's doctorate in education and the research will be summarised in a report that will be submitted to the University of Central Lancashire (UCLan) as a thesis as part of this qualification and inform possible future publications or conference presentations.

What is the aim of this study?

The aim of the project is to explore the effects that online MSc courses in Homeopathy, Herbal Medicine and Integrated Health Care have on the professional lives of Complementary and Alternative medicine practitioners; for example in individual practice, professional identity, or community (of practice e.g. homeopathy).

The research aims will be addressed through a series of research questions examining whether students' learning and experience of the courses affects:

- their individual practice of their therapeutic modality
- their professional identity
- their community (of practice e.g. homeopathy)

Who will be taking part in this study?

- Lecturers who teach or have taught on the online MSc courses in Homeopathy, Herbal Medicine and Integrated Health at UCLan
- Graduates of the above courses

Do I have to take part?

No you do not have to, it is up to you to decide whether or not to take part.

What will I be asked to do if I agree to take part?

As a graduate from the courses you will be invited to take part in an initial semi-structured interview with Hazel lasting about 30-45 minutes, and at a later date (within approximately 3 months) a brief follow-up interview lasting about 15-20 minutes.

The purpose of the follow-up interview is to allow me to check my understanding and analysis of the first interview and to give you an opportunity to expand on any further thoughts you may have had after the initial interview.

Interviews will be recorded, transcribed and analysed by the researcher. If you wish to review the transcript at any time, you may do so on request (hpartington@uclan.ac.uk).

If you are happy to take part, please complete the attached proforma.

Are there any disadvantages or risks of taking part?

There are no identifiable risks associated with participation, you would be required to contribute some of your time to participate in an interview with the researcher. Care will be taken to ensure confidentiality and your anonymity throughout.

What are the possible benefits of taking part?

The study may provide new insights and perspectives that may be of interest to you and to the wider Complementary and Alternative Medicine (CAM) community. You may request a summary of the findings at the end of the study.

What if I wish to withdraw from the study?

You are free to withdraw from the study at any time without giving a reason and if required your responses will be securely destroyed.

Confidentiality and anonymity

If you consent to take part in the research you are assured that all the information that you provide will be anonymised and kept strictly confidential. While identification of respondents may in some instances be possible from their responses, all efforts will be made to preserve confidentiality and anonymity and any direct quotes selected for use in the final thesis or articles or presentations will have any identifying material removed and will not be attributable to you. The data collected will be stored electronically in password protected computers used only by the researcher and supervisor and in locked cabinets in a secure place. After completion of the project all data will be stored at the University in encrypted zip files. The tapes and transcripts of the interviews will be kept for 5 years and then destroyed in accordance with university policy.

The School of Education and Social Sciences Ethics Committee, University of Central Lancashire has given approval that the study meets ethical requirements.

What will happen to the results of the research study?

The study will be read by course supervisors and thesis examiners. It is anticipated that the results of this project may be used to inform possible future publications or conference presentations (for example, CAM journals and other suitable publications). Any quotations you make which are included in the presentation of findings will not be attributable to you.

Who may I contact for further information?

If you have any questions about the project please contact Hazel Partington on hpartington@uclan.ac.uk

Thank you for your interest in this research. If you would like to take part please complete and return the form below (by email to the above address).

Interviews Consent form

Title of Project: A case study of the influence of online master's level study on an international group of complementary and alternative medicine practitioners

Name of Researcher: Hazel Partington (University of Central Lancashire)

Please initial box

6. I confirm that I have read and understood the participant information sheet for the above study and have had the opportunity to ask questions.

7. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason and without my professional work or legal rights being affected.

8. I give permission for my interviews to be recorded and to be used in publications from the research study, and I understand that they will not be used for any other purposes.

9. I understand that any transcriptions or recordings will be securely and anonymously stored according to the requirements of the Data Protection Act.

10. I agree to take part in the above study.

Name of Participant

Date

Signature

Name of Researcher

Date

Signature

Hazel Partington

Appendix 2: Instrumentation

2.1 Focus group schedule

Hazel Partington Indicative Focus Group Schedule

The focus group is intended to gather the current lecturing team on MSc Homeopathy, MSc Herbal Medicine and MSc Integrated Healthcare plus a retired member of staff to explore their perceptions of the influence that online study on the MSc courses within an international group has upon alumni Complementary and Alternative Medicine (CAM) practitioners in three main areas:

- Their individual practice of their therapeutic modality (e.g. homeopathy)
- Their sense of professional identity
- The wider community of practice of CAM practitioners

It is expected that discussion will consider the definitions of and concepts involved in these three areas as well as examples of alumni where change has been observed or reported to lecturers.

Likely areas for questioning include:

- How did you envision the course when you first started to plan the course?
- What purposes did you feel the course would serve?
- Have you seen changes in individuals' practice of their therapeutic modality?
- What changes have you seen?
- Do you feel that study on these courses influences how practitioners see themselves professionally?
- Have you been aware of graduates/students whose identification with their therapeutic group has changed in any way?
- Have you observed changes within the wider CAM community of practice or within specific practitioner groups that you feel may have been influenced by students learning on and experience of online MSc study?

- Are there any other areas where you have identified influences from graduates' learning on and experience of their MSc course?

The focus group is intended to last 1 hour and will be held and recorded electronically in either a face-to-face situation or in an Adobe Connect Breezeroom. All prospective participants are familiar with the use of this technology.

2.2 Indicative interview schedule

The following indicative schedule was printed out on PowerPoint slides for easy reference during the interviews. Questions were amended during the interviews in response to the flow of the conversation.

As you know from the information sheet I am exploring how studying at master's level in an international, online group influences the professional lives of Complementary and Alternative Medicine practitioners.

In the first part of the interview I will be asking about the story of your MSc journey from the beginning and what has emerged out of it. Later I will ask some questions relating to some further aspects of your experience. In a similar way to a homeopathic/holistic consultation, the interview is loosely structured so we will follow where it takes us

1. I know that you studied MSc xxxx with us from xxxx to xxxxx. Please tell me about the beginnings of your MSc journey and your decision to take this course.

Prompts:

- What led to your decision to take this course?
- Purposes – what purposes did you see it fulfilling?

Expectations – how did you expect it to be? What did you expect to come out of it?

3. Please tell me about your experience of studying on this course

4. What aspects of the course had a significant impact on you?

- Why was this?
- How did they do this?

What was it like for you to study via e-learning?

6. What was it like for you to study within an international cohort?

7. On reflection, have there been any changes in your professional life that you consider may have resulted from your MSc studies?

- In what ways has it changed?
- How did your MSc studies affect this?

What do you understand by the term 'professional identity'?

- What meaning does this have to you in terms of your own professional life?

9. How do you describe what you do when people ask about your occupation?

- Has how you describe your occupation changed at all since your MSc studies?
- How did you used to describe your occupation prior to your studies?

Please tell me about your practice of xxxxx

- Were you practising xxxx at the start of your MSc studies?
- Are you in practice now?

11. How have your MSc studies and experiences influenced your practice as a homeopath/herbalist/etc at all?

- In what ways?
- How has it done this?

. How do you see your role in the wider homeopathy community?

- Have your MSc studies had any influence on your role in the community?
- Have your MSc studies had any influence upon the wider homeopathy community?

13. Are there any other areas in your professional life that you feel have been influenced by your studies with us?

- In what ways?
- How has it done this?

14. Is there anything else that we haven't covered that you would like to add?

Thank you very much for your time, my contact details are on the information sheet should you need to get in touch. I will be in touch within the next 3 months to arrange a follow-up interview after I have completed this phase of interviews.

2.3 Interview follow up template proforma

Points and quotes from the original interview were inserted into the interview summary column for each participant.

Interview summary	Please add any additional comments or reflections into the column below
The decision to take the MSc course	
What having an MSc means to you	
Expectations	
The experience of studying on the course	
Aspects of the course that had a significant impact on you	
Studying by e-learning	
Studying with an international cohort	
Changes in your professional life that you consider may have resulted from your MSc studies	
Professional identity	
Describing your occupation	
What it means to be xxx	
Practice	
Role in the wider xxx community	

Other areas of professional life that may have been influenced by MSc studies	
Anything else	
<p>Additional question:</p> <p>If you are filling out an official form which asks for your occupation, how do you answer?</p> <ul style="list-style-type: none">• Is this different to your response when speaking to people about what you do?• If it is different, why is this?• How would you have answered before your MSc studies?	

Appendix 3: Publications:

3.1 Abstract for poster presentation, Homeopathy Research Institute, Rome, 2015

HRI 2rd International Homeopathy Research Conference

Poster presentation - abstract submission for publication

There has been little research into the post qualification education of Complementary and Alternative Medicine (CAM) practitioners; however, this is a contentious topic, especially in relation to the delivery of CAM practitioners' education within a university setting. A programme of Master of Science (MSc) courses in Homeopathy, Herbal Medicine and Integrated Healthcare delivered to an international group of practitioners via e-learning by the University of Central Lancashire (UCLan) offers a unique opportunity to explore how masters level education influences their professional lives. A case study exploration using focus group and interviews with lecturing staff and graduates of these courses provides insights into how post qualification education impacts on key aspects of their professional lives such as practice, professional identity and the wider community of practice (for example in the homeopathy community). This presentation will explore preliminary findings from this research project which has been undertaken in partial fulfillment of a doctorate in education qualification (EdD).

3.2 UKCGE 2015 Abstract for group presentation at UKCGE, Glasgow 2015

Facilitating peer support through social media: Reflections on finding a way through the doctoral maze

Jacqueline Dodding, Hazel Partington, Susan Ramsdale

Socialisation, peer support and the building of communities of practice are accepted as having positive effects on students' experiences of study. (Mason and Rennie, 2008)) A group of doctoral candidates studying for a Doctorate in Education (EdD) at the University of Central Lancashire (UCLan) set up a Facebook group to facilitate peer support within their cohort. This presentation will offer their reflections on their use and perceived benefits of the Facebook group as they navigate their way through the doctoral maze, and of the impact on their individual and communal developing identities as doctoral candidates and researchers (Fenge, 2010).

To co-construct this presentation, 3 members of the group have each reflected on their own use and perceptions of the Facebook group, and have examined postings on the page to code interactions. This project has been undertaken with the permission of the whole group.

Themes emerging from member's reflections and from posting and interactions within the group, which include: seeking and giving support, sharing triumphs and disasters, exchanging resources, checking details, exchanging banter, building a cohort identity, and developing individual scholarly identity.

References:

Fenge, L., 2010. Sense and sensibility: making sense of a Professional Doctorate. *Reflective Practice*, **11**(5), pp. 645--656.

Mason, R. & Rennie, F. (2008) *E-learning and Social Networking Handbook: Resources for Higher Education*, Abingdon: Routledge

3.3 Collaborative article published in International Journal of Doctoral Studies

Volume 10, 2015

‘Our Breadcrumb Trail through the Woods’: Reflections on the Use of a Secret Facebook Group as a Strategy for Surviving and Thriving on the Doctoral Journey

Candice Satchwell, Hazel Partington, Lynne Barnes,
Ridwanah Gurjee and Susan Ramsdale
University of Central Lancashire, Preston, UK

csatchwell@uclan.ac.uk HPartington@uclan.ac.uk lbarnes@uclan.ac.uk
RGurjee@uclan.ac.uk SLRamsdale@uclan.ac.uk

Jacqueline Dodding
University Centre Blackburn College, Blackburn, UK

j.dodding@blackburn.ac.uk

Kathryn Drury
Edge Hill University, Ormskirk, UK

Kathryn.Drury@edgehill.ac.uk

Abstract

This article explores the value of attending to the emotional side of the doctoral journey by focusing on the use of a ‘secret’ Facebook group amongst a cohort of EdD

Material published as part of this publication, either on-line or in print, is copyrighted by the Informing Science Institute.

Permission to make digital or paper copy of part or all of these works for personal or classroom use is granted without fee provided that the copies are not made or distributed for profit or commercial advantage AND that copies 1) bear this notice in full and 2) give the full citation on the first page. It is permissible to abstract these works so long as credit is given.

(Professional Doctorate in Education) students at one English university. Presented as a piece of action research in which the participants created an intervention to address a

perceived problem and then reflected on its effectiveness, it is co-authored by the cohort of six students and their tutor. The stresses and loneliness of the doctoral journey have been well documented and constitute the 'problem' addressed by this cohort of students. Their inception and use of a Facebook group was a response to challenges experienced in their studies, with the expectation of facilitating peer support. As will be shown this aim was successfully met with enhancements in academic, social, and emotional support. However, unexpected benefits arose from the interactions within the group including a normalization of the challenges of the doctoral quest and the advantage of being able to follow the 'breadcrumb trail' found in the group postings as group journal and aid to reflection. Further, both tutors and students have noted the development of a strong sense of 'cohortness' and inclination to work collaboratively. Through a process of individual and group reflection on experiences of the intervention, combined with analysis of the content of the postings, this article examines the characteristics of the Facebook intervention and considers some ethical implications. We suggest that key characteristics that have contributed to its success include the student ownership, the protection of the secret format, and the combination of emotionally supportive, academic, and irreverent exchanges between group members. It is hoped that these insights may be useful to future doctoral candidates and their tutors as they negotiate their own way through the doctoral woods.

Keywords: Reflection, cohort, emotion, social, Facebook, support, secret

Introduction and Review of the Literature

This article explores the value of attending to the emotional side of the doctoral journey by focusing on the use of a 'secret' Facebook group (Khare, 2011) amongst a full year cohort of six EdD students at one university in the North-West of England. The Doctorate in Education (EdD) at this university is a taught programme, using a closed-cohort model (Bista & Cox, 2014). There are currently around 40 students enrolled on the programme, with an intake of approximately eight students per year. The participants in each year's cohort come into the university once a month, with occasional additional weekend meetings or workshops and some opportunities for cross-cohort interaction at joint workshops and conferences. The students study

taught modules alongside reflective participant-led modules facilitated by tutors, at the same time as working on individual research and developing the final thesis with support from a supervisory team. This means that each group comes together relatively infrequently, and the opportunity for peer support is therefore also relatively infrequent, and the loneliness of the long-distance researcher (Gannon-Leary, Fontainha, & Bent, 2011) can be inescapable.

This article is co-authored by one complete cohort of six students who have instigated the Facebook group and their tutor in an attempt at performing the collaborative nature of the topic we discuss. The students and tutor in this instance are all female, and although half the teaching team is male, there is a predominance of female students on the programme as a whole. While we do not address the factor of gender at length here, it is likely to have had an impact. Indeed, in keeping with this paper, there is 'a growing literature on female students' experiences of doctoral study which portrays emotion as an integral part of the process' (Aitchison & Mowbray, 2013, p. 860). All authors have agreed to the use of first names and are aware that they are clearly identifiable as simultaneously authors of this article, EdD students, professionals, and contributors to a Facebook page. One member classified herself as predominantly an 'Observer' rather than a 'Sharer', but her reflection in the section on 'cohortness' makes clear that she is firmly established and fully accepted as a group member.

This absence of anonymity may appear ironic in the face of our assertion that the 'secret' nature of the group is paramount. However, this secrecy relates to the fact that the Facebook 'group' is closed and only members of it can contribute or view posts. Indeed, the tutor amongst the present authors has still not accessed the Facebook postings and feels that this would be a significant breach of the boundaries that have been especially constructed. This issue of 'identifiability' or 'anonymity' is also highly relevant to the topic of this article, in that the authors are all lecturers and aspiring academics as well as doctoral candidates. They, therefore, have conflicting identities as both students and professionals, and each of these identities has different needs and expectations. While research participants and students are entitled to confidentiality, academics have an increasing need to exhibit a public

profile and to be named on publications. Exploring a way of fulfilling the requirements for both personal safety and academic endeavour is largely the subject of this article.

Isolation of post-graduate students is commonly commented on (Ali & Kohun, 2006; Pauley, 2004; Trujillo, 2007), although there is limited literature available examining the experiences of doctoral students. However, that which is available suggests that doctoral students frequently assume that they will become a part of a vibrant, supportive research scene, when in fact they are often disappointed in this belief and may even feel isolated in their studies (Janta, Lugosi, Brown & Ladkin, 2012). A review of the literature also shows an acknowledgement that different kinds of support are required for doctoral education. For example Brooks and Fyffe (2004) examine the use of online resources, Dabbagh and Kitsantas (2011) focus on the use of 'personal learning environments' to blend social and academic elements of the course, and Gannon-Leary et al. (2011) consider the benefits of a 'Community of Writers' in the context of lonely researchers engaged in academic writing. While these interventions touch on the social and emotional side of learning, they tend to be provided by institutions rather than led by students.

Hadjioannou, Shelton, Rankie, and Danling (2007), however, describe how student-led doctoral groups can create a dynamic supportive community, which provides its members with essential emotional sustenance (cited in Janta et al., 2012). The use and benefit of social networking sites to provide such learning spaces is also acknowledged (see for example Ellison, Steinfield, & Lampe, 2007; Gray, Annabell, & Kennedy, 2010; Selwyn, 2009). Derks, Fischer, and Bos (2007) reviewed studies of the communication of emotion in computer-mediated communication and concluded that 'social sharing' (p.5) can be just as successful on-line as face-to-face. The importance of socialisation in building on-line learning communities or 'communities of inquiry' is reinforced by Garrison (2011) and Preece (2000) who suggest that socialisation of learners can be a significant factor in both student retention and ultimately successful outcomes of their studies.

All of this supports the present authors' own experiences; however, here we explore the creation of a 'secret' space instigated by the students themselves *outside* of the

institution, which seems to give the intervention its special identity. We consider the importance of the various strands of support that can be provided – and that seem to be needed by part-time doctoral students in particular.

Within the course, as exemplified by the learning outcomes, relationships between personal, academic, and practitioner aspects of self are frequently referred to as part of the EdD journey. The journey metaphor is well-worn (see for example, Batchelor & Di Napoli, 2006; Fenge, 2012; Rockinson-Szapkiw, 2011). Its pertinence is partly because, for those who have completed a doctorate, there is a significant difference between the start and end-points with numerous obstacles to be negotiated along the way. This difference is not just in terms of qualification or status; it is also a deeply personal and emotional change. The experience of sharing with others these changes and this growth is in itself an expression of change and growth. This article will contribute to understanding how the social side of doctoral study can improve the quality of that journey in terms of personal, practitioner, and academic development. Recognising the different facets of ourselves and our various needs can help us to meet those needs. Recognising them in others can be reassuring and liberating in that we feel less alone, more connected, and therefore more able to continue on the journey.

Methodology

The literature and our own reflections have covered notions of individual and group identity, including student, academic, and practitioner identities. We have also addressed different kinds of support and uses of technology. A discussion about how to nominalise the topic of our paper highlighted methodological considerations. Are we most interested in the participants, the technology, or the function? While all of these aspects are relevant, we find the notion of an ‘intervention’ the most useful, carrying as it does an intimation of a methodology of action research. The students – who as it happens are all also lecturers – identified a problem (feelings of isolation on their doctoral course) and then devised an innovation to help them overcome the problem (a secret Facebook group) and to reach their goal (achieving a doctorate). The students then both individually and collectively reflected on the effectiveness of the innovation, which in turn both revealed and inspired further reflection in and on

their postings on Facebook. As Newby (2014) explains, action research is particularly popular with educators because, “Action research embeds reflective practice in its processes. Reflective practice raises the question for action research to answer and may even determine the nature of the action” (p.630). Further, action research “is designed to improve outcomes and/or processes while, at the same time, enabling personal and professional development” (Newby, 2014, p.631). The EdD course is clearly designed to do just these things, and both the intervention and the writing of this article have contributed further to improving outcomes of the students’ own educational development. While the authors have addressed a problem identified by themselves as students, the fact that these students are also lecturers, and the inclusion of their own tutor in the writing of this article, means that the ‘usefulness’ of the research is that it has implications for curriculum development both for the authors in their various contexts and for the readers of the article.

An initial group analysis of written and spoken reflections on the value of the intervention provided the themes of Support, Humour, Affection, Reflection, and Emotion, which conveniently made up the acronym SHARE. Further analysis of and reflections on the postings subsequently produced the headings presented here. A collaborative (sharing) process of re-writing, editing, and revision was then undertaken to such an extent that different reflective headings emerged, and the article became fully ‘co-authored’. Our article is mainly reflective, synthesising perspectives from each writer, but using the framework of action research we first present ‘the problem’ and ‘the intervention’.

The Problem

The production of a doctoral thesis is often referred to as a lonely affair (e.g. Janta, Lugosi, & Brown, 2014). It requires concentration, focus, representation of one’s self as a trustworthy researcher and academic, and also – when it is for a professional doctorate – practitioner. It means extensive periods of time grappling with concepts, complex texts, collecting data from the field, writing, and re-writing. By definition, most of these activities are done by oneself. For the students in this study, the research is usually carried out alongside holding down a full-time job in Higher Education.

This cohort of six began studying together on the EdD course in January 2013. Originally there were seven, but the one male member of the cohort moved to a professional doctorate programme within his own discipline. In some respects this event was a catalyst for the remaining students experiencing feelings of unease. Although they remained (and still remain) in contact with this member, the loss of one of the group appeared to both expose insecurities and encourage bonds to form. Several months into the doctorate, the group began to experience difficult times: some were still in the process of refining research proposals or applying for ethical approval, others had tentatively begun their research fieldwork, and all were working to complete assignments and trying to balance the demands of doctoral studies with work and personal lives. Classes were once a month and, whilst the cohort apparently worked well together and were beginning to get to know one another, it seemed that it was easy to lose touch in between sessions, leading to feelings of isolation and struggle.

Doctoral study is intense by its very nature and the doctoral candidate often runs the whole gamut of emotions during the process due to the personal investment in the research (Burgess, Siemenski, & Arthur, 2006). During the professional doctorate this is further intensified as professionals are investigating their own professional practice, ensuring that feedback from the course team on submitted work is sometimes met with an inordinate amount of dismay (Aitchison & Mowbray, 2013). Doctoral candidates often feel that feedback is a very personal criticism of their abilities, and this, once more, can create feelings of isolation and questioning of knowledge and skill (Cox, Carr, & Hall, 2014)

The group members have professional identities; between them they hold senior or principal lecturing positions, teach undergraduate and postgraduate students, support and guide students through dissertation and Master's level study, give conference papers, and undertake national and international consultancy work. It is therefore not easy to admit to feelings of inadequacy, of an inability to write or to understand, of frustration at course materials and assignment briefs, or of marking criteria and deadlines, especially where the doctoral supervisors are university colleagues. The group felt the need for a safe space in which to offset the emotions that could not

comfortably be displayed in class; somewhere for the students to feel comfortable and confident enough to share their lack of confidence.

The Intervention: Evolution of the Facebook Group

As a senior lecturer who worked with e-learning students, one of the group had previously looked into the use of social media as an aid to socialisation and knew of the potential advantages of a Facebook group, including the familiarity and ease of use for many students, the scope for creativity, and the ability to foster a sense of belonging and exploration of identity (Mason & Rennie, 2008).

She felt that a Facebook group might offer the students a way to enhance their social processes and to facilitate and strengthen peer support (Brooks & Fyffe, 2004). There were also potential drawbacks, however, for example with issues of boundaries and confidentiality and the realization that not everybody might be keen to join such a group (Beninger et al., 2014; Lupton, 2014; Mason & Rennie 2008). As professional people it felt essential to set the group up as secret; nobody but members could see the group's existence or any of the postings. The initial implicit agreement of confidentiality within the group enabled a sense of trust and security to develop, but the secret nature of the group was also a significant factor in the way the students regarded it as a safe space, ensuring that its members knew where they could turn to for support in any circumstance.

The original purpose was to offer a space in which to “vent, sympathise, and share our triumphs and disasters” (Hazel on 25.10.13). However none of the group at the outset foresaw the additional benefits that it would afford the cohort as use of the group evolved over time. As Hazel reflected later:

“Scrolling through the posts provides a group journal – it reminds us of the triumphs and disasters, the story of our journey – it’s like our breadcrumb trail through the woods. I didn’t expect that messing around on Facebook would provide an aid to reflexivity, I didn’t see that one coming!”

The importance of reflection and professional learning is examined in the next section, followed by the group’s reflections collected together under four broad headings.

Academic Reflection and Professional Learning

For all members of the group, reflection is a vital and purposeful activity, giving momentum to their learning and their continuing evolution as educators and doctoral candidates (K. Williams, Wooliams, & Spiro, 2012). Brookfield (1995), writing of the importance of critical reflection for educators, identifies four interconnected lenses which may facilitate or trigger reflective processes: the autobiographical lens, the lens of students' perspectives, the lens of colleagues' perspectives, and the lens provided by perspectives drawn from the literature.

According to King (2011), "An individual's use of social media as professional learning spans understanding, networking, professional identity development and transformative learning" (p.40). While each individual might use social media for different ends, both as professionals and in their personal lives, one of the unpredicted benefits of the secret EdD Facebook group was that it could function as an aid to reflection on the collective and individual doctoral experiences. Further, when reviewing the postings, each person engages with both collective and individual autobiographical lenses. The various and seemingly random musings, cries for help, jokes, requests for information, and expressions of triumph not only provide a breadcrumb trail through the woods, but also provide an opportunity to reflect on that journey.

The facility for reflection within the group appears to work on two main levels: on-the-spot, surface reflection, often taking form as ironic, self-affirming, or self-deprecating declarations (or sometimes a combination thereof); and the deeper more considered reflections arising from reviewing and revisiting the trail of postings which engages with the autobiographical lens (Brookfield, 1995).

Shades of the ironic may be found in Susan's posts referring to reflection, where she plays with the concept of reflection and in doing so reflects on her own reflective processes and the resulting impact on her evolving and multiple identities:

"On reflection, I have lost the will to live" (Susan, 12.1.14)

or

"I have done so much reflecting on professional, academic and personal self, I no longer know who I am!" (Susan, 11.3.14)

A further example combining irony and self-deprecation can be found in Hazel's 'rant' prior to preparing for a critical discussion to be presented in class, in which she expresses frustration with the difficulties of balancing assignments and fieldwork, and reveals feelings of inadequacy when assessing progress so far.

"So I started looking at what we have to do for the critical discourse on 25th and it seems that my talk will be very short and will consist of 'I have hardly done any research because I am busy doing assignments. I don't have a clue about impact, significant contributions to practitioner knowledge or change theory because I am too busy doing assignments. I don't know what the foundations and rationale behind my research are anymore because I have been too busy doing assignments and have forgotten what I said in the first place.' Can you base some good questions on that Lynne?"

It's a good job we didn't do this in June; I'd have had even less to say then!"
(Hazel, 31.8.14)

However, being able to address feelings of inadequacy in a safe space and receiving 'mirroring' comments from peers allowed Hazel both to reflect on her achievements to date and also to realize that she could address feelings about the assignment load within her presentation.

Lynne's post a few days later about the same critical discussion assignment also demonstrates self-deprecation: by describing her draft discussion as 'Jackanory' (a children's television storytelling programme) she is reflecting on her sense of not having anything important to say at this stage in her journey.

"I've started the critical discussion - but am at a loss. Is anyone using theory here and how? In 7 minutes?"

I am trying to answer the Learning Outcomes but my discussion is looking like Jackanory ... i.e. just a story of where I am up to - and the fact that I don't have anything significant yet to say. Any advice?" (Lynne, 17.9.14)

The response from the group here showed a resonance for many: the term 'Jackanory' provided a commonly agreed metaphor for the discussion scripts, but also, engaging with the lens of colleagues' perceptions, helped the group members to see that their position in the research process was appropriate and acceptable.

Self-affirming postings within the group are often simple declarations of achievement, as in "I've got data" or "I've submitted my assignment", not necessarily including reflection; however, on occasions a reflective tone can be detected as in Susan's post about her first forays into thematic analysis where her postscript expresses her enjoyment of the process and her surprise at that enjoyment:

"Wow just applied a little thematic analysis (I think) to first interview in readiness for next assignment! Would have been nice just to be able to do more analysis rather than consider the essay. However, the weekend calls so everything shelved. There's always next week. Have a good week end x

PS actually enjoyed it but don't tell anyone!" (Susan, 15.8.14)

As can be seen, within these postings reflection has been with a light touch. However when three of the group decided to collaborate on a poster presentation about the benefits of the Facebook intervention in facilitating peer support, they discovered that sifting back through the posts in order to code them became a reflective and reflexive process in which they were able to see their identities as doctoral candidates and researchers evolving and growing. For example, Hazel was surprised to realise that when she wrote:

"Tying myself up in Foucauldian knots - why do I keep going deeper and deeper when I was nearly finished?" (Hazel, 22.2.14),

although using a joking tone she was also establishing her scholarly identity. The sub-text was "I am a scholar and a researcher who is trying to engage with difficult

concepts.” Looking back at another post reveals uncertainty about the significance and value of individual research:

“Anyone else suffer from project envy? I was talking to two people today who are doing doctorates, one was doing the temporal perceptions of online students, and the other was looking at the assessment of competences in social workers. They both sounded much more important and interesting than mine.”
(Hazel, 10.12.13)

Yet, a year on from this, it is clear that progress has been made with fieldwork, and Hazel is feeling more confident of her own contribution.

As the concepts of personal and professional identity feature strongly in professional doctoral research, the facility to review postings within this group and to compare them to entries in reflective journals has provided the students with an invaluable – and unpredicted - tool with which to monitor and track their own multiple and evolving identities as educators, doctoral candidates and researchers (Fenge, 2010). An important aspect of the reflective and reflexive process for practitioner researchers is to understand one’s professional self in relation to one’s personal self (Costley, Elliot, & Gibbs, 2010); collectively examining the postings in the Facebook group has given the group a further tool for understanding themselves and each other and for forging a strong group identity. This, in turn, strengthens all of their individual identities as doctoral candidates and researchers.

Reflection 1: Bonding of the Group – The Value of ‘Cohortness’

Although many prospective doctoral students look forward to engaging with a supportive academic community, this group appeared to have few such expectations. As Susan wrote:

“When I began my doctoral journey, I really didn’t see a breadcrumb trail through the woods. It seemed to me more like being parachuted into a jungle with only a penknife to cut through the tangle of vegetation. I saw a dark and lonely path ahead, filled with obstacles and setbacks; a perception fuelled by

doctoral folklore and backed up by colleagues undergoing or recently ending their own doctoral journeys”.

Therefore the group’s experience has been ‘surprising’, an epithet each member has applied in their reflection on the success of the group. Jacqueline, for example, states:

“It was a surprise, therefore, from the outset, how the cohort became a cohesive, supportive whole, and the introduction of the Facebook group, during a difficult time for the students, only cemented this and allowed our group to become ever more supportive of each other”;

and Susan concludes:

“So how is it that two years into this cold and lonely journey I am actually really enjoying it and have completely banished these dark images and replaced them with scenes of pleasure and laughter? The obstacles are still there but I view them as challenges that I will overcome, not as a single combatant, but as part of an eager band bound by commitment, a sense of community and not least through laughter.”

Their experience concurs with Fenge (2012) and Bista and Cox (2014) that ‘cohortness’ is key to a successful professional doctorate journey. We suggest that the support offered among the doctoral colleagues in this Facebook group has enhanced the cohort identity (Fenge, 2012): each knows what is happening in others’ lives external to the doctoral process, and such knowledge allows the group to be caring on both an academic and a personal level. Whatever one of the members is undergoing, the others are party to it if they post on Facebook and therefore can be supportive in many ways, whether it is a good or bad experience. This type of behaviour is typically described as ‘mutually empowering’ (Fletcher, 1995), where members of the group are “keen to demonstrate genuine care for others and proactively avoid conflict” (Devenish et al., 2009).

It is significant that the relative non-user of the group also considers herself to have benefited from the group membership. Her own perspective on Facebook generally is that it is unwieldy and overwhelming, and her limited experience fuels her lack of

engagement. Regarding herself as an ‘Observer’ (with some ‘Sharer’ characteristics) (as defined by Benninger et al., 2014), Ridwanah (known as Riz) has made only seven posts, mainly to demonstrate support or to share information, for example:

“Just catching up on all your comments, ha ha, u guys r ace!x” (6.12.13)

“I am teaching [...] 2moz and I will miss the session. Will c u all afta 4pm”
(22.1.14)

However, Riz describes an experience in a face-to-face meeting, which demonstrates the far-reaching beneficial effect of the Facebook group:

“I feel that my lack of engagement with the site has not made me feel isolated from my peers in any way. We are a very close-knit team with the shared experience of completing a doctorate and there are many times when I have received advice and felt extremely supported by my colleagues; for example, a recent revision of a data analysis paper was completed through the support and encouragement of my doctoral peers. They picked up on my low levels of enthusiasm and kindly stayed behind past 6pm after a long day’s workshop to give me direction on how best to make improvements and boosted my motivational levels. I was very much overlooking the positive feedback that I had received and my peers were central in helping me recognise the many good comments on my work. This would not have been possible if we did not have this sharing and caring ethos cultivated by the Facebook group.”

Benninger et al.’s (2014) finding that social media helps facilitate rather than replace in-person contact appears to be borne out by this experience. The bonding that has occurred through the use of Facebook is reflected both within facilitated workshops and in social interactions outside of the academic environment.

Reflection 2: The Benefits of Peer Support

If we accept the definition of support as “to bear all or part of the weight of; to hold up” (“Support,” 2015), we can see by reflecting on the posts in the Facebook group that members have employed different means of “holding each other up” and

preventing each other from falling – frequently through humour and by showing affection. Support has been provided for different ends: to support academic endeavour or emotional unease, to provide practical assistance, or to empathise as a peer. Although the initial intention may have been to provide emotional, practical, academic, or peer support, the posts usually transformed into humorous expressions of encouragement and empathy, signalling that the problem could be overcome:

Jacqueline: Well here goes... One day to write my presentation... Done the reading now just need to sort it out in my head – Could get messy!

Hazel: You can do it Jacqueline! May the force be with you.

Susan: Go Jacqueline You'll ace it!

Hazel: [X] will be missing such a treat listening to our ramblings, sorry erudite discourse in policy.

[Later]

Jacqueline: We are all exhausted –post traumatic presentation disorder!

Lynne: That's what I'm feeling ... Post traumatic presentation disorder! Like it... Will wine remove the symptoms?

(April 2014)

Within this example can be seen something of the difference between the support offered from the course team and that from peers. The students, in this safe Facebook environment, are able to express emotions which they know will be shared by their peers. Jacqueline explains:

“Personally, it was a relief for me to know that other people were experiencing difficulties with ethical procedures, assignments, time limitations, data collection, and more, but I believe we *all* were relieved when we began to understand that we were all undergoing a collective experience and could empathise and support one another throughout.”

The Facebook group offered and continues to offer a safe, informal, non-competitive space. This stands in contrast to other alternatives, such as formal discussion boards available on the university's virtual learning environment where students often feel there is a sense of rivalry among their cohort as they endeavour to intelligently answer posed questions and comment in a competitive way since they are in the public domain (Aitchison & Mowbray, 2013).

The Facebook intervention has had the effect of diluting negative feelings for this cohort, as they are able to vent feelings, thoughts, and worries to the group, without fear of reprisal or sarcasm. In fact, the opposite is true: although members may feel upset or angry at times with the doctoral process, the other group members' supportive insistence that "we are all in this together and will all pull each other through" is both impressive and very reassuring. No one will sink, because the other members will be there to prevent it. As Devenish et al. (2009) explain, a study group encourages its members to "keep going, to reinforce that the studies are worthwhile and that completion is an attainable goal" (p.61). One of the ways this group has kept such encouragement going is through emotional support, with a specific emphasis on humour.

Reflection 3: The Value of Emotional Support and the Importance of Humour

Whilst there are multitudinous theories of emotion (see, for example, Denzin, 2009; Strongman, 2003), the concept most relevant to the emotional journey we describe is that of emotional labour. This was first defined by Hochschild in 1983 in relation to service workers who need to maintain emotional responses appropriate to the service users with whom they are interacting and is later encapsulated by Aitchison and Mowbray (2013) in their research into emotional management amongst female doctoral students. Emotional labour can be defined as when one disguises and suppresses one's true feelings and puts on a 'public face' that all is well. In reflecting upon this female cohort journey through the doctorate via social media, it is possible to see that the Facebook site is frequently used to express emotions that remain hidden during taught – or even facilitated – classes.

The emotional themes coming from the posts can be classified in many ways, but largely they fall into the following categories:

- *frustration* at things not going right, at an inability to write, to understand, to get on with it
- *fear* that others are doing better, collecting more data, beginning transcription; of being left behind
- *guilt* at not spending enough time studying, undertaking fieldwork and writing juxtaposed with the ever-present conflict with work pressure, the changing, unsettling HE climate and general family life of birthdays, births, deaths, and holidays
- *anger* at tutor feedback, a perceived lack of direction, a lack of clarity
- *confusion* at not knowing what was supposed to be done, by when, and how
- *joy* and (a shared) celebration at getting the work completed, the data collected, the transcription finished, the essay passed
- *affection*; a sharing of 'likes', smiley emoticons, photographs, and metaphorical pats on the back.

Lynne readily admits to using the Facebook group as “a huge emotional crutch”. A typical comment from Lynne reflects a number of the above themes: a fear of being left behind, that others know what they are doing, a plea for moral and literal support:

‘Ok guys, now I’m panicking! No idea what I am meant to be doing or for when :- (Seriously behind on all things EdD. Can we meet up?’ (Lynne, 7.1.14)

On reflection Lynne realises that many of her comments reveal similar doubts: despair at not being able to submit work on time, inability to engage with an assessment, needing reassurance. In return came encouragement, motivation, and a vindication of her ability to complete the task. This resonates well with research undertaken by Selwyn (2009) with 909 students using Facebook for educational use. He discusses supplication and the seeking of moral support as being a major theme:

“Students would often present themselves as rendered helpless in the face of their university work in the expectation that their peers would offer them support and comfort.” (p.167)

Whether or not this was the subconscious strategy, it appears to have worked, for Lynne and for the rest of the cohort. Clearly, they share emotions as a means of motivation. This might be all the more meaningful and significant because they see each other only once a month and need not only encouragement to keep them on track, but congratulations and a recognition that they have managed to do doctoral study in the midst of competing demands:

“Well done Hazel! Just going to shout this, NOT STARTED YET!! .. Enjoy your feeling of satisfaction, I will take inspiration from you” (Susan, 17.7.14).

The development of the Facebook group enabled the cohort to communicate with each other and engage in banter “as though we were actually talking to each other” (Susan). This is an interesting perception as a positive characteristic, as often online forums are seen as beneficial for some students precisely because they avoid face-to-face contact (e.g., Cox et al, 2004) and provide an ‘anonymous’ space for students to contribute to a discussion.

When considering academic views on building resilience it is evident that humour is seen as a key component. Humour is defined as a general positive attribute and is one of the character strengths that contribute most strongly to life satisfaction (Peterson, Ruch, Beermann, Park, & Seligman, 2007). Looking at a small selection of the group’s posts we can see how, by the use of what Kuiper (2012) describes as affiliative humour, a warm, witty but respectful banter, the use of Facebook has enhanced this group’s cohesiveness and morale and has itself developed into a positive presence within the group. A typical post would involve cries of panic about feeling unable to grasp the learning outcomes for an assignment or even feeling unable to begin to write. This is an excerpt from a post concerning the writing of a literature review:

Susan: “Hi Gang, finally made a start on lit review! 375 words – not that I am counting – and already, on reflection, have lost the will to live! It’s going to be a long day x”

Lynne: “Just realised that in order to write a literature review, you should first have read something? Oh God!!! xxx”

Hazel: “You gonna reflect on that Lynne? How is the literature affecting you? It’s making me read...I think that would go down well don’t you?” (05.07.14)

What at first seems like just a few words of banter can in fact be seen to be a very supportive discussion; the humour in ‘not that I am counting’ and ‘lost the will to live’ acknowledge the stress of trying to even begin an essay and imply a request for sympathy. The supportive response, with the comforting implication, “You are not

alone”, and the joke about reflection bring everything into perspective – it is an essay, not the end of the world.

As the group began to prepare their assignments relating to methodology, Hazel posted a semi-serious question:

“When discussing methodological choices is it acceptable to say I decided not to do this because it looks too hard?”

Kathryn: *“I think that would be OK as long as you made it sound reflective lol.”*

Jacqueline: *“I’d definitely say yes 😊”*

Susan: *“Yes. Definitely! I’m thinking along the same lines! X”*

Hazel: *“Not that I’m writing you understand, just thinking about it 😊”*

(05.07.14)

Again the posts begin with a request for help, and again the responses work in a light-hearted fashion to normalise the situation, i.e., all the group are in the same position and therefore it is ‘OK’. Reference is made to general feelings of inadequacy and hesitancy in embarking on assignments, and again encouraging responses appear that help to put this into perspective. The use of humour within the group’s postings clearly confirms Kuiper’s (2012) findings that affiliative humour supports the development of group cohesion and support. As Windle (2011) suggests, a sense of humour is one of the most important facets of personal resiliency that an individual can draw on when confronted with stress.

So, reflecting on the use of humour within the Facebook group it is clear that it has played a major part in sustaining and developing the cohort. It has enabled the creation of a distinct and vibrant identity within the doctoral programme, a group that is now renowned to be enthusiastic and happy and who will laugh and work together to find a solution rather than cry and withdraw in isolation.

“It has seen us through some quite dark times but more than that, it has banished those dark times to a distant memory and for me, the forest is now full of opportunity and good natured company.” (Susan)

Reflection 4: Academic Endeavour and Social Support

A Balance

A need for support is most clearly evident in the Facebook group when individuals have received feedback on assignments and presentations. Academic feedback is not always perceived as positive, and the Facebook group is seen as a place to vent frustration and receive emotional support. While a positive supportive response is evident in the interactions, there is also a realistic engagement with the feedback received and its potential to assist development. Rather than a universal rejection of the feedback, there is encouragement to engage with it and offers of help from other members of the group who have fared better. Kathryn reflects:

“I have found this particularly useful, as confirmation of my initial negative feelings would only have limited my engagement with the feedback and further prevented me from valuing comments aimed at my development. The responses from the group recognise the effect of the feedback and the resulting expression of emotion but avoid the establishment of a reversal of the ‘halo effect’ where individuals receive only confirmation of their own frustrations.”

The affectionate yet challenging support that is evident in the Facebook group is what distinguishes the use of social media to support academic study from the use of social media in general and, also, from a more conventional academic online forum. A typical comment, which incorporates encouragement, advice and offer of further support, is:

Susan: “Of course you can do it but I think there is some good advice on the earlier comments. Try to look at it in bite size chunks and do a bit at a time. Want to meet up soon?”

There is a need in academic study for analysis and reflection that results in interactions that engage emotions differently from within purely social interaction. When expressing disappointment within a social environment there is the expectation that other participants will concur and confirm individual experiences; whereas within an academic support group there will be critique and analysis. The key to continued engagement in this Facebook group appears to be that useful critique is given but within an affectionate, supportive framework. Yet the participants also appreciate the 'mirroring' comments they receive which have the function of reassurance.

A highly positive aspect of the Facebook group is being able to celebrate academic success, where, especially following disappointment, an emotional response is warranted:

Kathryn: *"Passed my resubmitted lit review Yayyyy. So back on track. Now need to get my head around what I am supposed to do next!!!!"*

Hazel: *"Hooray!"*

Jacqueline: *"Well done! X"*

Lynne: *"Well done. Not done mine yet ..."*

Lynne's admission of inadequacy in this context both contributes to the group cohesion and offers up a request for confirmation that she too might need emotional support.

It is this realistic, grounded, 'we are all in this together' approach that has cemented the group together and kept each individual using it as they have pulled and pushed each other along the doctoral pathway.

Discussion

As we have said, a great deal of the literature detailing doctoral education uses the metaphor of a journey. In re-reading the Facebook posts from 2013, in a linear and chronological sequence, it is very much evident that this is indeed a journey. It is easy to chart the emotional experience of the doctoral process along a series of outpourings largely related to anxieties surrounding assignments and confusion

compounded by academic discourses and unfamiliar literature. In reviewing the past eighteen months via a frozen capture of questions, expressions of despair, congratulations on a job well-done, pleas for help and the ever-present ‘thumbs up’ emoticon, it is apparent how emotional the journey has been so far, and how the social media space has become a sanctuary for emotional expression and, perhaps more importantly, emotional support.

In this piece of action research the students have addressed “a felt need ... to initiate change” (Elliott, 1991, p.53) by creating a space in which to communicate with one another on a regular basis in a different context and space from the academic/work-based setting. It is a collaborative space, rather than an individual writing space, and it allows conversation on a variety of themes. While the individuals are brought together by their academic ambition, the virtual space enables a combination of academic, social, and personal issues to be discussed, shared, offloaded, and explored. The eclectic nature of the posts highlights the multiple identities of the participants – as academics, teachers, nurses, practitioners, students, etc. – but also as parents, friends, and individuals with their own complex lives. We suggest that this specific ‘secret society’ use of Facebook allows these aspects of self to intermingle and inform one another, but in a different way from more usual uses of Facebook. The social space enables communication on different levels, while also contributing to the original purpose of the group, i.e., completing their doctorate.

We have identified several characteristics of this intervention that contribute to its success. One of these is the ‘secret group’ setting. While some (e.g., Barnes, 2006) have identified a fear of intrusion into one’s private life due to the public nature of social media platforms and the potential risk of sharing online content, some professionals are using social networking in educational contexts and consider it to be important for student development (Davis, 2010). The choice to make the EdD group secret obviates these risks but also differentiates the group from other uses of Facebook, either academic or social.

The spontaneity of the group’s development as such suggests that it is a true requirement of the students and one that they have defined themselves. We suggest

that the student-initiation element is crucial to its success, in that it is truly 'student-centred' and exclusive. As the participants have pointed out, there is no competitive element to the posts; there is also no surveillance from tutors. Attempts have been made at institutional level to introduce VLE spaces to encourage social interaction on this course as well as many others. However, the scenario of the unpopulated discussion forum is familiar to many tutors, and the forum provided by tutors for students on this EdD programme is little different. B. Williams (2013) explains that "digital media, by themselves, do not make the contemporary university a more participatory and creative educational space" and further makes the point that, conversely, VLE systems actually work "to reinforce traditional conceptions of the university as hierarchical, controlling, print-based, and obsessed with assessment" (p.182). The characteristics of the Facebook intervention are the opposite of these; and unlike a formal academic forum, continued use and engagement in this group is dependent on the usefulness it has for them as individuals.

We are also given insight into the impact of Facebook interactions on face-to-face relationships. It is clear that the group works as an extension of a face-to-face group; it is doubtful that it could be effective as the only means of communication, but it is rather a supplementary resource. These part-time professional doctoral candidates might be considered to have a particular need for this supplement, in that they are not full-time students located in departments or faculties with other PhD students with access to research groups and their facilities. However, it also seems that this use of social media has impacted positively on how they interact as a group, to the extent that the relative 'non-user' of the group also benefits from the inclusivity it engenders. Terms that are repeated in these students' descriptions of the Facebook group include safety, empathy, and familiarity, along with the original headings of Support, Humour, Affection, Reflection, and Emotion. Ultimately the acronym SHARE sums up the value both in terms of its constituent elements and the notion of 'sharing' in its own right. It seems to be the egalitarian, non-judgmental, giving, and receiving in equal measure that contributes to the success of the group. The use of 'we' in some of the posts, such as "We are all exhausted" and "We are a great group" is truly inclusive, rather than the pseudo-inclusive 'we' as often employed by teachers. The tutors for these

students can never genuinely include themselves in synchronous reflection on the experience of the doctoral journey. The inclusivity and equality that arise from using this medium to share the lived experience of the group is what lends the Facebook group its effectiveness as an emotional tool. The sharing can only really be undertaken by members of the group who are experiencing the same journey at the same time, with comparable reactions to the demands and challenges of that journey.

Conclusion

The Facebook intervention introduced in order to address the problems of isolation, loneliness, and academic challenges has been successful in overcoming these negative phenomena. All six of the students are currently writing up their theses and comprise the first cohort to have completed all assignments without recourse to extensions on deadlines. They continue to communicate as a group using their Facebook intervention for support during the potentially isolating phase of individual writing-up.

As a piece of action research the project has had the benefit of providing insight for the participants that, as practitioners in education, it is crucial to pay attention to the emotional aspects of learning. To celebrate the success of the intervention, the EdD programme provides the opportunity for existing candidates to inform new recruits of strategies that have helped them. This has inspired other groups to design and implement their own interventions, the outcomes of which are yet to be seen.

Perhaps the significance of this Facebook intervention is most relevant for other students on similar programmes, i.e., part-time, professional doctorates. All the same, there are implications here for the value of student-led networking, and some indications of what might make it successful. One of our conclusions must be that the group ought not to be tutor-led, nor even tutor-influenced. Its secret, irreverent nature, which excludes outsiders, itself gives rise to the inclusivity within the group that has been so productive. While the posts quoted here might appear trivial and inconsequential, the writers have been surprised by the value of the group, surprised by its usefulness as a reflective tool, and surprised by how much they have enjoyed being a part of it and how this has been reflected in their academic engagement. The relevance of irreverence should not be underrated. As one participant said, “The

doctorate is really serious. This isn't", and yet the humour and affection expressed has had an effect of normalisation, providing a safe place of hidden depths. The knowledge that there is recourse to this safe space has been enabling in that no-one has given up or fallen down: they have all supported one another over and around the obstacles, laying down for one another the breadcrumb trail that will eventually lead them out of the woods. The production of this article has been an extension and manifestation of the characteristics of the group, albeit with the concession of allowing a tutor to collaborate.

References

- Aitchison, C., & Mowbray, S. (2013). Doctoral women: Managing emotions, managing doctoral studies. *Teaching in Higher Education*, 18(8), 859-870.
- Ali, A. & Kohun, F. (2006). Dealing with isolation feelings in IS doctoral programs. *International Journal of Doctoral Studies*, 1, 21-33. Retrieved from <http://www.ijds.org/Volume1/IJDSv1p021-033Ali13.pdf>
- Barnes, S. B. (2006). A privacy paradox: Social networking in the United States. *First Monday*, 11(9), 20.9.15.
- Batchelor, D., & Di Napoli, R. (2006). The doctoral journey: Perspectives. *Educate*, 6(1), 13-24.
- Beninger, K., Fry, A., Jago, N., Lepps, H., Nass, L., & Silvester, H. (2014). *Research using social media; Users' views*. London: NatCen Social Research.
- Bista, K., & Cox, D. (2014). Cohort-based doctoral programs: What we have learned over the last 18 years. *International Journal of Doctoral Studies*, 9, 1-20. Retrieved from <http://ijds.org/Volume9/IJDSv9p001-020Bista0425.pdf>
- Brookfield, S. D. (1995). *Becoming a critically reflective teacher*. San Francisco: Jossey-Bass Higher and Adult Education.
- Brooks, C., & Fyffe, J. (2004). Are we comfortable yet? Developing a community of practice with PhD students at the University of Melbourne. *Beyond the Comfort Zone: Proceedings of the 21st ASCILITE Conference*, 163--169.
- Burgess, H., Sieminski, S., & Arthur, L. (2006). *Achieving your doctorate in education*. London: Sage.
- Costley, C., Elliott, G., & Gibbs, P. (2010). *Doing work based research: Approaches to enquiry for insider-researchers*. London: Sage.
- Cox, G., Carr, T., & Hall, M. (2004). Evaluating the use of synchronous communication in two blended courses. *Journal of Computer Assisted Learning*, 20, 183-193.
- Dabbagh, N., & Kitsantas, A. (2011). Personal learning environments, social media and self-regulated learning: A natural formula for connecting formal and informal learning. *Internet for Higher Education*. Doi: 10.1016/j.iheduc.2011.06.002
- Davis, M. R. (2010). Social networking goes to school. *Education Digest*, 76(3), 14-19.
- Denzin, N. K. (2009). *On understanding emotion*. (2nd ed.). New Jersey: Transaction Publishers.
- Derks, D., Fischer, A., & Bos, A. (2007). The role of emotion in computer-mediated communication: A review. *Computers in Human Behaviour*. DOI: 10.1016/j.chb.2007.04.004
- Devenish, R., Dyer, S., Jefferson, T., Lord, L., Van Leeuwen, S., & Fazakerley, V. (2009). Peer to peer support: The disappearing work in the doctoral student experience. *Higher Education Research and Development*, 28(1), 59-70.
- Elliott, J. (1991). *Action research for educational change*. Milton Keynes: Open University Press.

- Ellison, N. B., Steinfield, C., & Lampe, C. (2007). The benefit of Facebook 'friends': Social capital and students' use of online social network sites. *Journal of Computer-Mediated Communications*, 12(4), 1143-1168.
- Fenge, L. (2010). Sense and sensibility: Making sense of a professional doctorate. *Reflective Practice*, 11(5), 645-656.
- Fenge, L. (2012). Enhancing the doctoral journey: The role of group supervision in supporting collaborative learning and creativity. *Studies in Higher Education*, 37(4), 401-414.
- Fletcher, J. K. (1995). Radically transforming work for the 21st century: A feminist reconstruction of 'real' work. *Academy of Management Journal*, (Best Paper Proceedings), 448-452.
- Gannon-Leary, P., Fontainha, E., & Bent, M. (2011). The loneliness of the long-distance researcher. *Library HiTech*, 29(3), 455-469.
- Gardner, S. (2007). 'I heard it through the grapevine': Doctoral student socialisation in chemistry and history. *Higher Education*, 54(5), 723-740.
- Garrison, D. R. (2011). *E-learning in the 21st century: A framework for research and practice*. London: Routledge Falmer.
- Gray, K., Annabell, L., & Kennedy, G. (2010). Medical students' use of Facebook to support learning: Insights from four case studies. *Medical Teacher*, 32, 971-976.
- Hadjoannou, X., Shelton, N., Rankie, R., & Danling, D. (2007). The road to a doctoral degree: Co-travellers through a perilous passage. *College Student Journal*, 41(1), 160-177.
- Hoschild, A. R. (1983). *The managed heart: Commercialization of human feeling*. Berkeley CA: University of California Press.
- Janta, H., Lugosi, P., & Brown, L. (2014). Coping with loneliness: A netnographic study of doctoral students. *Journal of further and Higher Education*, 38(4), 553-571.
- Janta, H., Lugosi, P., Brown, L., & Ladkin, A. (2012). Migrant networks, language, learning and tourism employment. *Tourism Management*, 33(2), 431-439.
- Khare, P. (2011). *How to use secret Facebook groups to enhance your business*. Retrieved 22 September 2015 from <http://www.socialmediaexaminer.com/how-to-use-secret-facebook-groups-to-enhance-your-business/>
- King, K. (2011). Professional learning in unlikely spaces: Social media and virtual communities as professional development. *International Journal of Emerging Technologies in Learning (iJET)*, 6(4), 40-46.
- Kuiper, N. (2012). Humor and resiliency: Towards a process model of coping and growth. *Europe's Journal of Psychology*, 8(3), 475-491.
- Lupton, D. (2014). *'Feeling better connected': Academics' use of social media*. Canberra: News & Media Research Centre, University of Canberra.
- Mason, R., & Rennie, F. (2008). *E-learning and social networking handbook: Resources for higher education*. New York: Routledge.
- Newby, P. T. (2014). *Research methods for education* (2nd ed.). London: Routledge.
- Pauley, D. (2004). Group therapy for dissertation-writers: The right modality for a struggling population. *Journal of College Student Psychotherapy*, 1, 25-43.
- Peterson, C., Ruch, W., Beermann, U., Park, N., & Seligman, M. E. P. (2007). Strengths of character, orientations to happiness and life satisfaction. *The Journal of Positive Psychology*, 2, 149-156.
- Preece, J. (2000). *Online communities: Designing usability, supporting sociability*. New York: Wiley.
- Rockinson-Szapkiw, A. J. (2011). Improving doctoral candidates' persistence in the online dissertation process. *Proceedings of Global Learn Asia Pacific*, 1162-1166.
- Selwyn, N. (2009). Faceworking: Exploring students' educated-related use of Facebook. *Learning, Media and Technology*, 34(2), 157-174.
- Support. (2015). In *Oxford English Dictionary*. Oxford: Oxford University Press.
- Strongman, K. T. (2003). *The psychology of emotion: From everyday life to theory* (5th ed.) West Sussex: John Wiley & Sons.

- Trujillo, C. A. (2007). Building internal strength, sustainable self-esteem and inner motivation as a researcher. *Journal of Research Practice* 3(1), 1-9.
- Williams, B. (2013). Control and the classroom in the digital university: The effect of course management systems on pedagogy. In R. Goodfellow, & M. Lea (Eds.), *Literacy in the digital university* (pp. 173-183). London: Routledge.
- Williams, K., Wooliams, M., & Spiro, J. (2012). *Reflective writing*. Hampshire: Palgrave MacMillan.
- Windle, G. (2011). What is resilience? A review and concept analysis. *Reviews in Clinical Gerontology*, 21, 152-169.

3.4 UKCGE abstract presentation UKCGE conference Liverpool 2016

A programme of online MSc courses for Complementary and Alternative Medicine (CAM) practitioners delivered by the University of Central Lancashire (UCLan) offered an opportunity to explore how masters level education influences CAM practitioners' professional lives; for example in their individual practice of their therapeutic modality, their professional identity and the wider CAM community of practice. Use of a case study methodology facilitated the generation of rich, thick data describing how CAM practitioners' professional lives are influenced by their studies and their experience of the courses.

Analysis of the data suggests that for most graduate participants the experience of their MSc studies has been a transformative learning experience which goes beyond both the expected learning outcomes for the courses, and the graduates' intentions in taking the courses. The concept of transformative learning (TL) was developed by Mezirow in 1978 and has been further expanded upon by Illeris (2014). Mezirow(2000) defines TL as learning which transforms the meaning perspectives and frames of reference by which we understand the world, while Illeris proposes that TL also has an impact on personal and thereby professional identity.

Although e-learning delivery of courses is increasingly offered within Higher Education (HE) there is still sometimes a sense of its inferiority to traditional face to face delivery of learning. This research adds to the call for an appreciation of the potential of e-learning to deliver a profound and meaningful learning experience.

References:

Illeris, K. (2014) Transformative learning and identity. Abingdon: Routledge.

Mezirow, J. & associates (2000) Learning as transformation: critical perspectives on a theory in progress. San Francisco: Jossey-Bass.

Appendix 4: Staff 'We-poems'

This appendix presents two 'we-poems' which are constructed from data extracted from the staff focus group. The 'we-poem' format is an adaptation of Gilligan's I-poem method as discussed in Chapter Four: Data analysis (Brown and Gilligan, 1992; Kiegelmann, 2009; Gilligan, 2015).

In the first poem staff voices are interwoven to describe the development of the MSc Homeopathy. This poem reflects the determination and creativity of the team, as they battled to bring their vision to fruition.

We were so determined

We were belligerent

We were just, just determined to do it

We looked at our own experience

We wanted to create

We were awarded a grant

We shared the development

We spent hours and hours

We didn't want to copy

We really developed everything from scratch

We learned how

We just did it didn't we?

We were so determined

Evidence of the staff process of adjustment to their salient identities may be discerned in the second poem which is composed of five interwoven I-poems (Brown and Gilligan, 1992; Gilligan, 2015) constructed from extracts from the transcript of the staff focus group. All focus group participants were qualified in a CAM discipline before entering academic life, with some still in practice and others no longer practising. Extracts are presented in chronological order and arise from a discussion about staff members' own sense of professional identity. Different fonts have been used to denote the different voices.

When someone asks you 'What do you do?'

When I first came

I would never ever call myself an academic

I didn't feel that I was an academic

I think the master's course and perhaps studying for the PhD has made that transition for me into being a teacher to being an academic

I am a University Lecturer

I teach nurses, I teach medical law and ethics and I teach CAM practitioners

I say I work at university

I teach mainly research methods, ethics

I never mention anything about homeopathy or CAM anymore

I feel like my skills are

I don't teach anything to do with homeopathy or CAM, nothing

I only teach broad-based stuff now

I teach CAM practitioners

I don't teach CAM

I don't teach CAM specific

Nothing that I teach is CAM specific

I might say I supervise CAM students in their research

I am an academic you know

A senior lecturer I introduce myself as

Then it'll come onto herbal medicine and I am very much there

You know as far as I'm concerned

my own sort of career trajectory is still serving my ultimate point

opening up the foundations

you know the whole thing is trying to limit what we can possibly do

my battle is against that

all my professional life we've been waiting for regulation

I will go outlaw

I'm pushing that agenda

I actually introduce myself as a herbalist

then I go onto say I lecture

My first duty is to answer my students' emails

I hadn't realised the extent to which my identity had changed until

I was trying to think how do you spend your time?

I would still introduce myself as a homeopath

that's how I make most of my income

But then in other circles

I would introduce myself as a university lecturer

and talk about working with CAM practitioners, homeopaths

The University bit takes up a lot more time than the practice most weeks

I think I just stopped calling myself a homeopath when I stopped practising

I am not a homeopath

I'm not in practice you know, that's when it went for me

Appendix 5: List of student and graduate publications:

- BHATIA, M.; MARRS, I.; WICHMANN, J. (2012): The Sacred Cows of Homeopathy *Homeopathic Links* 25.4. 2012
- BJØRNDAL, A. N. (2007): Unlocking the Case with One Key 1 *Homeopathic Links* 20.3 2007
- BJØRNDAL, A. N.:(2008) Unlocking the Case with One Key 3. *Homeopathic Links* 21.3. 2008
- BJØRNDAL, A. N. (2008): Unlocking the Case with One Key 2 *Homeopathic Links* 21.1 2008
- BJØRNDAL, A. N.: Towards a New Hierarchy of “Signs and Symptoms” *Links* 25.4. 2012
- CECCHETTO, E. (2015): Homeoprophylaxis—Can You Believe It? *Homeopathic Links* 28.04 2015
- DECANDIA, L., LOMBAERTS, C. & PROBERT, V. (2010) The fairer sex. *The Homeopath*, 29 (2)
- DANNHEISSER, I. (2014) The eclectic v classical debate: a personal perspective. *The Homeopath*, 33 (3)
- DUCKWORTH, J.E., ZADOROZHEVNA, A., LEONONV, S., PARTINGTON, H. (2014) The phenomenon of the initial aggravation of symptoms of diseases in homeopathy and other types of integrated medicine and adaptation reactions of the organism. *Russian Medical University*: January 2014
- DYMITR, Z. (2014) Is homeopathy a suitable model for patient-centred healthcare? *The Homeopath*, 33 (2)
- EDWARDS, P. (2015): Helios Pharmacy. *Homeopathic Links* 28.04 2015
- EDWARDS, S. (2009) Prescribing methodology: potencies in acute cases. *The Homeopath*, 28 (3)
- GADD, B. (2009) In search of the reliable repertory. *Homeopathy*, Vol. 98 (1), p60–64
- GRAY, A. (2015): Case-taking *Homeopathic Links* 26.4. 2013
- KESSLER, U. (2007) Back to Hahnemann. *The Homeopath*, 26(3)
- KESSLER, U. (2010): Clinical Training in Homeopathic Practice. *Homeopathic Links* 23.1. 2010
- KÜNNER, R. (2015) Hahnemann's Idea of the Vital Force: Fiction, Construct or Reality? *Homeopathic Links* 28.04 2015

- KÜNNE, R. (2017) Aiming at the unprejudiced observer. *Homeopathic Links* 30.01.17
- LOMBAERTS, C. (2007): Paradise lost: The unified theory on miasms. *Homeopathic Links* 20.4. 2007
- PARTINGTON, H. & DODDING, J. (2008) Instructions for patients taking homeopathic treatment. *The Homeopath* 26 (4)
- PRESCOTT-DOOLEY, J. (2010) Evolution of a clinic healing conflict. *The Homeopath*, 29 (2)
- STARKS-BROWNING, U. (2009) Fears in acute case-taking *The Homeopath*, 28.(3)
- VERVARCKE, A. & LOMBAERTS, C. (2014) The story of the walk for Homeopathy. *The Homeopath*, 33.1
- VIKSVEEN, P. & STEINSBEKK, A. (2011) Undergraduate homeopathy education in Europe and the influence of accreditation. *Homeopathy* Vol.100 (2)
- VIKSVEEN, P., STEINSBEKK, A. RISE, M. (2012) What is a competent homeopath and what do they need in their education? A qualitative study of educators' views. *Education for Health* 25 (3)
- WITTENBURG, C. (2013): Link & Learn *Homeopathic Links* 26.3. 2013
- WEST, V. & DENHAM, A. (2017) The clinical reasoning of Western herbal practitioners: A qualitative feasibility study. *Journal of Herbal Medicine*, April 2017

Appendix 6: MSc Integrated Healthcare Learning Outcomes

A. Knowledge and Understanding

Successful students will be able to:

A1: Critically evaluate tensions and challenge surrounding healthcare

A2: Demonstrate originality in the use of forms of knowledge to create new insights and solutions for problems in healthcare

A3: Critically debate contemporary themes within healthcare

A4: Critically discuss the methods, evidence base and outcomes

of research and scholarly activity

A5: Critically appraise own creativity, initiative and personal responsibility and action plan for continued educational and professional improvement

A6: Evaluate and justify different theoretical and practical approaches and their relevance in healthcare.

A7: Review and apply the techniques of research and scholarly enquiry in order to create and interpret new knowledge in the discipline.

B. Subject-specific skills

Successful students will be able to:

B1: Critically evaluate differing theoretical frameworks and explore their uses and relevance to healthcare

B2: Exercise initiative in searching for and critically utilising appropriate research materials and facilities including web based materials

B3: Effectively use systematic methods to critically evaluate and apply existing knowledge in practice and in the creation of new knowledge

to enhance future practice

B4: Function as an advanced, reflective, self-regulated and ethical researcher

B5: Demonstrate creative and innovative approaches utilising critical reflection in the application of specialised and new knowledge in integrated healthcare

B6: Skillfully utilise appropriate language and critical terms in verbal and written communication

B7: Actively contribute to the developing knowledge base in integrated healthcare and understand the skills required for scholarly dissemination.

C. Thinking Skills

Successful students will be able to:

C1: Be active autonomous learners, able to participate in student centred and student led activities throughout their period of study

C2: Demonstrate curiosity and creativity and be critical about challenges to contemporary knowledge and practice

C3: Effectively use professionally appropriate analytical skills

C4: Exhibit increased critical autonomy and conceptual and methodological sophistication in both oral and written work

C5: Be self-evaluative and demonstrate reflective skill in order to enhance practice

C6: Organise and articulate complex ideas through analysis, synthesis and evaluation in a coherent and creative style appropriate to postgraduate work.

D. Other skills relevant to employability and personal development

Graduate education builds on and extends current knowledge and skills and facilitates the delivery of improved health care and contribution to the wider debates in complementary medicine. This enhances the professional's ability to:

D1: Take responsibility for own professional development

D2: Achieve set objectives in the course

D3: Make positive contributions to team activities

D4: Develop advanced skills in information technology

D5: Reflect on learning and professional practice

D6: Facilitate innovative and good practice in research

D7: Design and deliver high quality services

D8: Demonstrate expertise and vision within their field through a piece of independent work

D9: Demonstrate a capacity to manage competing demands on time, including self-directed project work.