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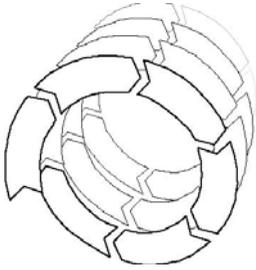
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# Editorial

## Susan Goff

The language of “transformational change” has been rising into the action research and action-learning field for some time. Perhaps you share my history that it was Gregory Bateson’s levels of learning in his book, “Steps Towards an Ecology of Mind” that provided an early entry point for me into this idea.

In his text Bateson lays out a meticulous analysis of five levels of learning, from a baseline of Zero Learning where learning is reactive and not subject to correction, to a Level 4, which in his view at the time was unlikely to ever be achievable. It was theoretically possible through a combination of “phylogenesis with ontogenesis” (1972, p.298).

I confess that in refreshing my memory about this seminal text to write this editorial I was seriously challenged by the required exertion of logic and language – but simply Level 4 is achieved when the evolution of physical forms takes place with the evolution of maturational processes. Biologically, this takes eons, but sociologically and in the context of the Anthropocene, where-in human thought is changing the form of the planet, Bateson’s theories provide an early understanding of transformative change.

In this issue of ALARj our field has produced some riveting and practical contributions to discussions about transformative change.

We begin with a contribution from Ortrun Zuber-Skerritt who paces us through an interweaving of a text on emergent learning (Taylor, 2011) in the context of transformational community development. Zuber-Skerritt recognises that we need a new mindset of people power which in the traditions of participatory action research draw on local traditions, circumstances and resources to improve their conditions of life through consciousness

of learning. The shift that this paper makes is the type of learning being focussed on that makes the form of change transformational.

The emergent learning experience typically progresses through stages of stability and instability, which in this paper are in turn, reflected upon by a group of life long action learners working with the author in a Samoan community in Queensland. Zuber-Skerritt provides clear evidence of how people can indeed experience a change in the set of their minds together, which in turn changes how they act in the world (together) – in this case with regard to a specific community’s development approaches and needs. In her own words:

...we have arrived at sustainability. This means we – the community development professionals – can retreat. Members of the community are now confident in their ability to solve their community problems themselves, to proceed to new cycles in the spiral of emergent learning, as and when they believe necessary, and to help other communities on the same lifelong action learning journey.

Such a progress requires leadership, and our second paper by Shankar Sankaran is an account of how to strengthen new forms of leadership in this case, appropriate to the not-for-profit sector.

The paper records deliberations about this question through two cycles of reflections at ALARA conference workshops in the context of an ARC funded research project. Four forms of leadership are introduced to the reader and the participants – authentic, servant, spiritual and relational. The two cycles of reflections produce the author’s concluding insights. There is a need for greater familiarity with different forms of leadership, not only in theory but also in everyday practices in our organisations. The issue of whether an organisation is for profit or otherwise was raised as a key determinant of the kinds of leadership used.

Our third paper is an example of how transformational change and particular qualities of leadership combine to produce material benefits in our everyday worlds.

The claim to a different kind of leadership is immediately evident in the collaborative nature of the authorship of the paper. Bronwyn Fredericks, Robyn Clark, Mick Adams, John Atherton, Stella Taylor-Johnson, Jo Wu, Jill Esquivel, Kathy Dracup and Natahlia Buitendyk are each the co-authors of our next article. This collaboration describes a participatory action research project to develop and trial an “app” for use on i-pads to monitor fluid levels of Indigenous Australian sufferers of heart disease. The intention of the project was to use the app to both educate users about heart health and heart care, and to assess the extent to which the system was user-friendly.

The article describes the particular needs of good PAR practice – where progress can be slow as the everyday context of the inquiry is an actor in the research activities. This can sometimes mean that priorities change, cultural values are as important as research values if not more so, that process can be more important than outcomes.

The paper presents a balance between reflections on methodology, working with virtual technologies in the context of indigenous health, and the urgencies of making material differences in the lives of marginalised peoples through culturally informed transformative learning and inquiry practices.

Our last item for this issue is a book review. The book is to be released in early 2014: its title is “The human capacity for transformational change: the future of the Collective Mind” by Valerie A. Brown and John A. Harris. This text is entirely in keeping with the focus of our issue, providing significant conceptual development about the nature of transformational change in the Anthropogenic Age.

## **Author Biography**

Susan Goff is a facilitator of participatory knowledge production methods in the interests of inter-generational social and ecological health and wellbeing. As principal of CultureShift Pty Ltd she works with a Collective of Indigenous and non-indigenous action researchers to deliver management services that promote collective self-determination as the source of sustainability in organisational, community and scholarly settings.

## **Bibliography**

- Bateson, G. (1972) Steps towards and ecology of mind: collected essays in anthropology, evolution, and epistemology. Jason Aronson Inc, Northvale.
- Taylor, M. M. (2011) Emergent Learning for Wisdom, New York, Palgrave Macmillan.

# Transformational Community Development through Emergent Learning

Ortrun Zuber-Skerritt

## *Abstract*

*This article applies the concept of 'emergent learning' (Taylor, 2011) to action learning and action research (ALAR) in general, and to lifelong action learning (LAL) in particular. It discusses Taylor's conceptual framework of leadership development in the new context of community development, aiming for community development that is transformational and sustainable, through and with learning that can be cascaded to others. The article illustrates this theoretical model in practice with a community-university partnership program in Australia where participants were cognisant of action learning but not of the theory of emergent learning. The program data shows alignments and linkages with the model of emergent learning which suggests that it is relevant to transformational learning personally, professionally and in the community. Our research also suggests that readers may usefully apply this model not only to community development, but also to ALAR projects or programs in other areas such as education, higher education, health, and professional and leadership development in government and industry. By analyzing the new theoretical model of emergent learning and validating it through data collected for a different purpose, this study helps to extend the emergent paradigm and methodology of both ALAR and LAL.*

## **Keywords**

Emergent learning, lifelong action learning, action research, community development

## Introduction

Recent literature abounds on action learning and action research (ALAR). It has inspired literature on related concepts in this emergent paradigm and methodology, such as lifelong action learning or LAL (Zuber-Skerritt and Teare, 2013), critical participatory action research or PAR (Kemmis et al., 2014), participatory action learning and action research or PALAR (Zuber-Skerritt, 2011, 2012), and so forth. The challenge for scholars and practitioners is to select or adapt the approach most appropriate to their own value system/worldview and to the purpose and aims of their projects or programs. This is certainly true when trying to change or improve our practice and to facilitate organizational or community development. This article therefore introduces a new concept of ‘emergent learning’ developed by Taylor (2011) and relates it to ALAR in general, to LAL in particular, and to transformational, sustainable community development specifically. The third concept is explained by Zuber-Skerritt and Teare (2013: 230):

Transformational, sustainable community development means engaging with the people at grassroots level, understanding their cultures, traditions and oppression and empowering them to find their own solutions to problems of poverty, health and learning to learn by developing their confidence and skills in LAL and action leadership. In the present times when most of us live ‘connected’ lives in a global community, we need a new mindset of people power and self-directed, collective behaviour towards a better world with a just and equal global society. Instead of rationality, control, technical efficiency (rather than effectiveness), neo-liberal managerialism and national competition (sometimes leading not just to conflict but to war), we need a better and more sustainable world for the common good of all people for present and future generations.

In May 2013 I had the opportunity to meet Marilyn Taylor at the Royal Roads University in Canada, author of the book entitled *Emergent Learning for Wisdom* (2011). We had never met before and

were amazed at the similarities in our thinking and writing, developed independently at opposite sides of the world. Although we have been influenced by many of the same theorists, such as Dewey (1938), Kelly (1963), Freire (1972), Argyris and Schön (1974), Schön (1983) and Kolb (1984), we have contributed to different literatures and used slightly different terminologies. For example, ALAR includes Taylor's 'Emergent Learning' as one of its characteristics, for both wisdom and a better world. Although Marilyn contributes mainly to the literature on 'Leadership Development,' her concept of emergent learning is also relevant and applicable to 'Transformational Community Learning and Development'. Both fields need new ideas about how to create a shift in ways of thinking as a change process, a transformational consciousness, and a new perspective/approach to action in this 21<sup>st</sup> century world. As Taylor (2011: 3) defines:

Emergent learning arises from our direct experience of the practical world; it is triggered by an unpredicted event. The process that follows has the possibility to create not only knowledge but also wisdom we need to engage productively and effectively in a world of uncertainty. Learning that leads to wisdom involves the whole person and new dimensions that have been banished from public life in the modern era. It requires attention to our right-brain processes – sensing, feeling, imagination, metaphor, and context – as well as left-brain processes – analysis, logic, strategy, and application.

In other words, wisdom gained through emergent learning provides both experiential richness and logical cohesion, as well as conscious and unconscious processes. Taylor (2011: 31-32) argues that:

*Emergent learning means more than acquiring knowledge over a lifetime; it means that we create new knowledge continuously as we encounter new conditions and challenges. This implies two other qualities of the new learning. Learning emerges in relation to a specific context; so what we come to know is embedded, and its meaning and value are linked to a particular time and place. (original emphasis)*

In this sense, Lifelong Action Learning (LAL) is also emergent, creating new knowledge continuously, and embedded in a particular context. In addition, LAL is developed collaboratively with others in groups, communities or organizations, in an intentional and systematic way, and is then cascaded to others. Taylor's generic model of emergent learning can also be applied usefully beyond its original application to leadership development, for example to community development as well as organizational development in industry and government, health, education and higher education. This is because of its utility for learning through experiences that challenge us with double- and triple-loop learning (Argyris and Schön, 1974).

In brief, single-loop learning means that the learner has changed action strategies, but has not identified or digested the principles of the process for application elsewhere. Double-loop learning involves changes in goals, assumptions, values and/or standards for performance through mindful appreciation of the change process. Triple-loop learning or 'third-order learning' (Bateson, 2000) is the deepest kind of learning through triple-loop feedback generating a transformation in one's awareness of self and life purpose or 'autobiographical awareness' (Torbert, 1972). In other words, single-loop learning takes a mechanical, technical or surface approach to learning, whereas double- and triple-loop learning take a deeper and transformational approach that enables positive personal, professional and organizational change. In the context of twenty-first century accelerated or exponential change, learning must be more than technical and superficial; it needs to be transformational, emergent and lifelong through critical reflection and meta-reflection on action and experience registered at a deeper level. This requires a shift of mind or consciousness, a self-transforming mind, and a new perspective/approach to acting in this world. We are reminded of Albert Einstein's frequently quoted statement: "No problem can be solved from the same level of consciousness that created it".

My process of inquiry in this article starts with Taylor's (2011) theory, then applies the theoretical principles of each phase and

stage of the conceptual model of emergent learning to practice in community development through my experiences and insights gained from a LAL program for my own new and emergent learning. This process validates theoretical and practical statements with comments from participants in this LAL program in Australia, through their feedback on their actual experiences, learning and insights gained. This program was a Griffith University Community Partnership program with a community organization called the 'Voice of Samoan People (VOSP), which is a disadvantaged community group in Logan City, adjacent to Brisbane in Southeast Queensland. The article's conclusion includes questions for critical reflection and possible action readers might consider.

## **Taylor's Model of Emergent Learning Applied to Transformational Community Development**

In this section I briefly outline the process model that consists of four transitions and four phases, each of which I then apply to **transformational community development (in bold)**. To exemplify Taylor's conceptual model, I have included illustrative commentary (*in italics*) from ten participants (P1-P10, in bullet points) in an Australian community development program with and for VOSP. Participants' comments refer to their GULL projects because in this LAL program we used a learning process and system developed by the Global University for Lifelong Learning (GULL - [www.gullonline.org](http://www.gullonline.org)). These participants' comments are indicative of how participants' thinking develops and discourse changes throughout the process of an effective action-learning program. The data used are based on Kearney and Zuber-Skerritt (2011, 2012) who had obtained permission to use the Samoan voices for publication purposes. Taylor's model is reprinted here as Figure 1 with the author's permission (©Taylor, 2011).

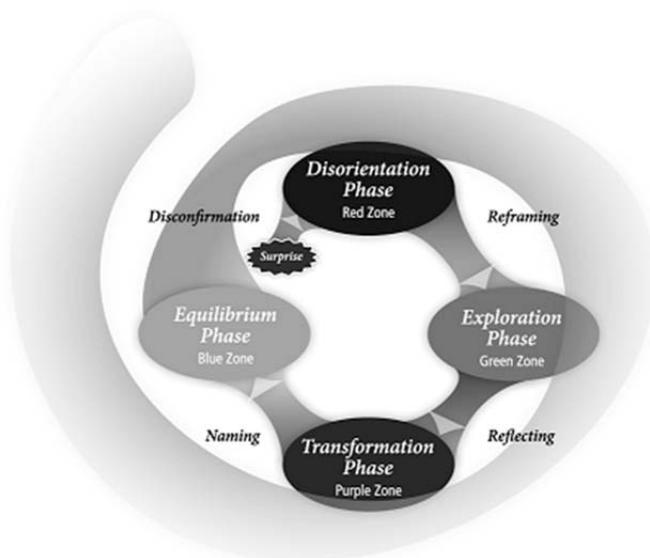


Figure 1: Emergent learning process overview (source: Taylor, 2011: 60)

Following the process model, we start with Taylor's Equilibrium Phase, that is, the well-balanced condition of mind and heart/feeling in which we can anticipate events and navigate our experience by using our existing constructs (Kelly, 1963) and mental models (Senge, 2006) of the world. The blue zone stands for conservatism, stability, consistency and unchanging, stable conditions.

### ***First Transition: Disconfirmation***

Double-loop learning begins with disconfirmation of our set of beliefs and basic assumptions of reality and with a challenging surprise, such as a breakup or loss of relationship or a sudden loss of employment. Triggered by such an unexpected event, the shock or unease comes to us as an intuitive sense that something is

deeply wrong or has been altered in a damaging way. As one of the Australian participants put it:

Inequality of learning experiences and insufficient attention to ethnic differences continue to blight the Queensland education system. But there is at least some awakening to the nature of these issues, brought about by participants in Griffith's community development program with the Samoan community, and this is surely encouraging. (P10)

In **Transformational Community Development**, this sense is the opener of dialogue, negotiation and identification of issues and concerns. These issues provide the basis for planning a LAL program that is urgently needed and wanted by the community, because it is relevant to and focused on the community's particular problem(s) and enables the community members themselves to address these problems in an inclusive and sustainable way.

#### *First Phase: Disorientation (Red Zone)*

Disorientation or mental confusion can be caused by a significant, unexpected and challenging event and evidenced by a crisis of self-confidence, a sense of inadequacy and anxiety or even anger and aggressive behaviour. The red zone symbolizes a strain in relationships, defensiveness, and negatively focused alliances that create solidarity in complaints and reinforce a culture of blaming. Red stands for an ability to see in the dark, a tendency toward negativity and destructiveness. It often signifies 'stop' or 'danger'. It is interesting to note that the Chinese character for crisis means both 'danger' and 'opportunity'. For example, one of the Australian participants realized this when reflecting:

I have learnt that I am not as good as I thought I was. In fact I have come to discover how little I know and how much I need to learn. I have also come to learn that no man is an island and the world does not revolve around me. So this is really a self-discovery and the beginning of a new era in my self- development. (P2)

In **Transformational Community Development** we must try to turn a negative situation into an opportunity for positive change,

and anger, blame or aggression into creative thinking, hope and vision for a better future. How can this be done?

### ***Second Transition: Reframing***

We may easily become stuck in the red zone by failing to recognize or opting out of the emergent learning process and being locked into hopelessness in a culture of fear and suspicion. In a global context, the implications of this negative pattern of attitude and behaviour are enormous. Therefore, it is important to find a way out of the red zone by reframing the distressing experience as a process of learning and addressing the challenge in a positive way. Taylor (2011: 69–70) observes:

This moment in the sequence is the watershed between being stuck in psychic discomfort and moving forward into the domain of new possibilities. The decision to move forward changes the landscape radically from the glass half empty to the glass half full.

Two Australian participants expressed this transition as follows:

- *I am sure that action learning is the way forward for our community. It liberates people, since at the outset participants might have relatively low self-esteem and as they journey with this, they can move forward and strengthen their self-image and self-worth. I think action learning also offers the prospect of liberation from poverty, because it facilitates a change in mindset. I believe that unless and until people are liberated from what holds them back, they will not develop and progress and I have discovered that the GULL action learning process does liberate us from what holds us back. (P2)*
  
- *I have re-learnt the value of not giving up and the importance of stepping out into the unknown – however daunting that may be! My involvement in the GULL project has motivated me to pursue harder than ever the goals we set for our business to teach second language learners. I know there is a huge need in this community and I am excited by the avenues that are starting to open up in schools and churches to teach English to parents/adults. Each bridge crossed and obstacle tackled has produced a new phase in my learning. (P5)*

Our openness to affirmation from a significant person of credibility and recognition can help us in the reframing. As observed by one of the Australian participants, a senior academic at Griffith University who was simultaneously being coached and being a personal coach to other participants:

I have learnt about learners through my coaching of GULL participants. Each had distinctive circumstances and learning goals, requiring different forms of support. In some cases it was to capture their ideas in writing. In others it was to shift from a descriptive to a reflective style of writing. I found questioning to be effective with all participants. They always had information, but needed me as their coach to ask the right questions to help them express this information. (P4)

In **Transformational Community Development** we encourage the use of a personal coach selected by each participant and of a mentor selected by the program leader for each action learning team. Coaches and mentors are respected within and beyond the community for their knowledge, skills, wisdom and personal influence. Therefore, they are well positioned to help in the reframing as a learning process.

### *Second Phase: Exploration (Green Zone)*

Stepping into the green zone of the Exploration Phase shifts our mind from the known to the unknown and to being relaxed with uncertainty – and without resolution. Green signifies ‘go’ or moving forward. Taylor (2011: 70) explains:

The Green Zone represents the shift from an analytical, deductive mind to an intuitive, inductive mind, from an emphasis on left-brain thinking to an emphasis on right-brain thinking. We begin with our experience, primary knowledge, knowledge from experience ...

The journey in this phase is guided by intuition and starts with step-by-step emergent learning, building a rational bridge from the known to the unknown and using analogies and metaphors. In this phase, people tend to find like-minded others with whom to pursue mutual interests and questions through collaborative

inquiry. These like-minded people can be found in print, film or online articles and online discussions. 'Insight episodes' they experience through these connections are like previews of the next phase and are embedded in ongoing exploration. "Insight episodes occur when we are able to connect our experiences to ideas that explain or help us understand them." (Taylor, 2011: 74) They then lead to growing self-confidence and personal satisfaction, as we create primary knowledge on the basis of concrete experience and accumulated insights. This emergent learning was confirmed by Australian participants:

- *The sharing of ideas and points of view has provided us so much learning and has built and strengthened teamwork. It is like having new eyes to see and to analyze issues and events in life... Many hands make light work and that is certainly our experience of teamwork. Sharing ideas and responsibilities really consolidated teamwork, and it resulted in great achievements. (P2)*
- *I have been blessed and privileged to be part of this great experience. Since I was introduced to the GULL program, I have met and worked together with great people. I have learned from them how to reflect on my past experiences, to develop a positive outlook not only for myself but for other people as well. My involvement in the GULL program has given me the courage and the urge to help others, especially our young Samoan people, through mentoring and counseling, so that they can become great leaders for the future. (P1)*
- *We have discovered that the power of the learning process lies in our self-directed journeying, together with the wider team of participants and supporters. When we come together as a team, we feel empowered to sort out our own issues and we have learnt to work and learn together as a team. ... The progress of our projects and the bonding we have formed between us have empowered me to tackle future challenges confidently. Our collective sharing and the chance to hear from these university-educated people about their passion and commitment and to have their knowledge to help us Samoans made me so humble to*

*be in their midst. (P7)*

**In Transformational Community Development**, this Exploration Phase is most important, because participants need to learn that knowledge is not definitive, given and static, but continuously developing and emergent, and that they themselves can create knowledge collaboratively through trial and error, reflection and exploring the unknown. To reach this state of mind (relaxed with uncertainty) and to develop the ability to collaborate with others, it is also extremely important at the very beginning of a community development program to introduce activities (e.g., relationship building) that develop in participants the values and principles of lifelong action learning (LAL), including openness, trust, honesty and clear communication.

### ***Third Transition: Reflecting***

This transition is a shift from exploring interaction with others to more intensive reflection. This reflection is a retrospective review of the learning journey – and an introspective appraisal of the accumulated insights we develop on this journey, and the connections we make among these insights. The type of reflection we speak about here may be unfamiliar to some people. It is not simply recalling or thinking back. It is also thinking through, thinking over, thinking critically, unpacking – questioning how, why, by and for whom, and what are the connections among people, events, decisions, outcomes and other parts of the picture that weren't clear to us earlier. And what is the significance of all of this? The reflection process is something like drawing and mentally reconstructing the small picture/s and coming to see the big picture by recognizing how/why/for whom these small pictures fit, or don't fit, together. Some Australian participants expressed the importance of strategic reflection:

- *The activity of reflecting daily, weekly and monthly deepened and broadened my knowledge and understanding of an issue, and in turn, expanded my learning ability. I have learnt the importance of writing and recording events or daily happenings as part of my ongoing learning and for future reference. (P2)*

- *I am aware from colleagues that often, in an “aha” moment, we come to appreciate that the process of reflection is not just incremental but in fact integral to the whole structure of understanding. (P10)*
- *Regular reflection on these interactions has advanced my learning. I have needed to think strategically about the most effective and efficient means of achieving outcomes and then sustaining these outcomes. In particular, my coach has modeled and encouraged strategic behaviour. (P4)*
- *I have gained an understanding about the importance of strategic daily reflections. Using the GULL concept of action learning, and using it with passion and strength, has built my self-esteem and confidence. Reflection has helped me to be aware of priorities. ... Once the concept is clear and your mind is set in an appropriate way, honest and personal daily reflections begin to make sense. Thereafter, the weekly summary is easier to compile and the process of reflection becomes a habit. (P7)*

In **Transformational Community Development** reflection is essential for lifelong action learning, and for the personal development and growth that transforms into community development. How to reflect effectively can be learnt by keeping a daily, weekly and monthly reflection diary and through discussions with peers and a personal learning coach.

### ***Third Phase: Transformation (Purple Zone)***

“This phase is characterized by a heightened consciousness, hyperalertness, and an awakening” (Taylor, 2011: 76). We participate in and simultaneously observe the present moment. Focusing on values, purpose and ideals, we gain a new perspective. We are transformed (double-loop learning) in a significant aspect of our life and we gain a new understanding of ourselves and our life purpose (triple-loop learning). This learning is based on a synthesis of our experiences and insights to this point in the process and leads to a new perspective. Purple signifies power, richness, abundance and strong emotions.

- *I feel passionate about my role, responsibilities and duties while making a difference in people's lives within our community. (P9)*
- *I have now regained the passion I had for many years to work with second language learners here in Logan City. I have re-learned the value of patience as well as the qualities of perseverance and persistence. I have been encouraged to continue this type of work. (P6)*
- *Now I have a strong will to do better and this gives me the power to help Pacific Island youth not just in Logan but even more widely in Queensland. My GULL work has equipped me to help my people and has added value to my life. It has extended my horizons in education and will help me to definitely reach my goals. (P3)*
- *We are using action learning to address the main challenges our community is experiencing, in particular the under-performance of our youngsters in educational attainment. It won't be easy and it will require a sustained effort by many people, with the active participation of our community leaders. But we are determined to mobilize our community so that we can advance and improve together. (P8)*
- *GULL has been like an open door inviting me to build my confidence and restart my studies. I had said to myself, "You have no more chances to study". ... I am now a better person with improved communication. It is like having a light to show me the way in my journey and to give me the hope to do better. What is happening for me now is exceeding my expectations. (P3)*

**In Transformational Community Development** this feeling of elevation, joy and heightened consciousness is usually expressed at the end of an action learning program on the occasion of the 'Presentation and Celebration Day', and evidenced by feedback as written commentary or in video recordings (e.g., Zuber-Skerritt and Teare, 2013, Chapter 6).

#### ***Fourth Transition: Naming***

This transition is characterized by communicating (naming) the synthesis of our experiences and insights to relevant others in a way that is intelligible and meaningful to them. We own and want to share our perspective and its significance in a social context of shared understanding with others, “but also in our own memories as a turning point [in our life]. The conceptualization becomes a framework to which earlier insights and later refinements can be meaningfully integrated” (Taylor, 2011: 78). Like reflection, conceptualization is not easy to learn and needs to be facilitated. *Naming* in its wider sense means communicating not only in written but also in oral form, especially in indigenous communities where written form has weaker or no tradition. We also use the term *cascading* for passing on our learning, experience and insights to others. Here I include the voices of two action leaders recorded on video by Richard Teare at the end of the Griffith University community partnership program (Kearney and Zuber-Skerritt, 2011: 33–34).

- *GULL has enabled me to re-connect with my training as a theologian and this helps me to reflect on the question ‘Who am I?’ – as a father, a husband and a leader of the community. I have realized that if my answers are the same today and tomorrow, it means that I am not progressing on my action learning journey. The journey to greater self-awareness and improvement drives me onwards and it is my hope that by trying to do better and discovering more about myself that I’ll be able to help others by sharing my experience of this process. For me, GULL is a vehicle and a light to help illuminate my journey. I have spoken with so many people about my experience – even those from our community who are in jail. I have been telling them that jail is not the end of the road for them; when you come out, the GULL program will be waiting for you. President of VOSP – the Voice of Samoan People.*
- *The GULL concept is a revolutionary idea. I always want to learn and this model for active or action learning will help us to think differently and explore new aspects of community*

*development. I know that by re-discovering myself, I can do a better job and find new ways to learn. In terms of my community and a proposal that I should like to make to the President, Voice of Samoan People, I plan to involve the Ministers of all the Christian churches in Logan in an action learning group and thereafter to cascade our experience to the members and congregations of these churches. A notable celebrity in Samoa, who is now a radio presenter and prominent senior pastor living in Logan City.*

In **Transformational Community Development** we ensure from the very beginning that participants record their project activities and reflections on these activities throughout the LAL program, so that in the end (on Presentation and Celebration Day) they are able to present the results and learning outcomes publicly to an audience of all participants and stakeholders, community representatives and members, as well as invited colleagues, family, friends and sometimes the media. I am always astonished at the amount of time and effort that participants spend on their presentations, making them rich in ideas about project and learning outcomes, and clear in meaning, message and language – and usually also very creative. We often use video self-confrontation in workshops as participants practise their presentation style to improve their ability for reflection and conceptualization.

#### ***Fourth Phase: Equilibrium (Blue Zone)***

This phase is less intense than the Transformation Phase. Participants find it more detached and peaceful because they have developed a certain confidence about their new perspective and the beliefs, assumptions, and expectations related to it. The focus now is on elaborating, refining and applying the new conceptual framework, using logical analysis rather than analogical thinking and generating new concepts, as before. Taylor (2011: 79) explains:

More structured logical thinking now plays a role in elaborating, generalizing and applying the new perspective. The beginning of the Equilibrium Phase is marked by a shift from insight to concept, from interpretation to definition

with a centre of gravity moving from direct experience to conceptualization.

Blue represents calm and coolness and, as mentioned before, conservatism, sophistication, consistency, and unchanging, stable conditions. Participants further increase their self-confidence to feelings of personal strength and independence. Involvement with others is determined only by mutual interest and purpose.

Comments from the two VOSP action leaders mentioned above illustrate this fourth transition well. Since LAL is concerned with all participants, I also present comments from other participants in that same LAL project in Logan City to illustrate the diversity and richness of personal experience and finally wisdom through this typical LAL program.

- *I am wiser now. In my view, wisdom is a special form of understanding that underpins strategic behaviour. Wisdom is acquired through experience and reflection, especially when seeking answers to challenging questions in collaboration with others. Wisdom becomes the foundation for strategic behaviour. (P4)*
- *I have learnt how to communicate better with others, especially in English. I learnt new words every time we had our meetings and I can now relate to others easily, regardless of their cultural background. I also learnt to deliver the truth to people and how to stay away from corruption and political interference. I am now very confident that I can work in any environment, especially ones with problems, and this is why I am not afraid to voice my concern when we have community meetings or meetings with local government leaders. (P8)*

**In Transformational Community Development** we have arrived at sustainability. This means we – the community development professionals – can retreat. Members of the community are now confident in their ability to solve their community problems themselves, to proceed to new cycles in the spiral of emergent learning, as and when they believe necessary, and to help other communities on the same lifelong action learning journey. Figure 2

models the features of the emergent learning process in this discussion, and it is reprinted here with the author's permission (©Taylor, 2011).

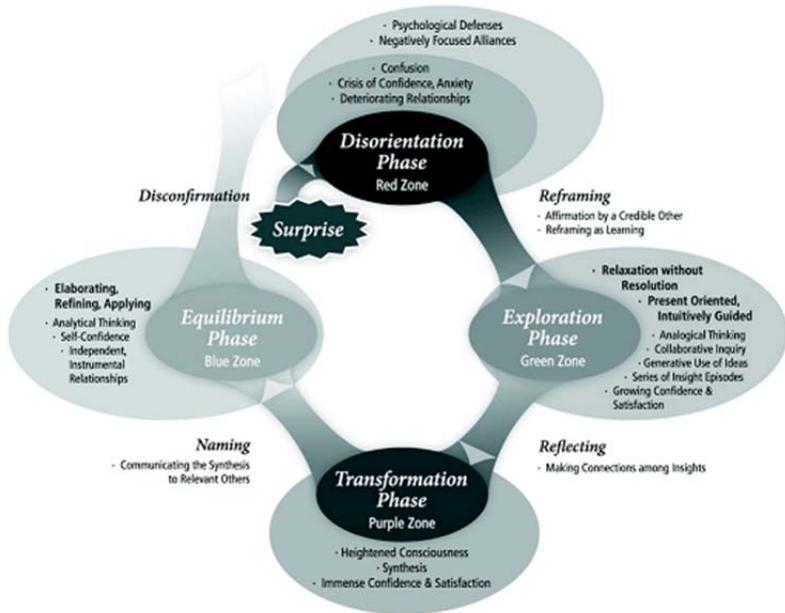


Figure 2: Summary of emergent learning process features (source: Taylor, 2011: 81)

I refer readers seeking further detailed explanation to the source: *Emergent Learning for Wisdom* (Taylor, 2011).

## Conclusion

This article has presented a new conceptual model of emergent learning that is consistent with the theory and practice of action learning and action research generally and of lifelong action learning (LAL) in particular. To illustrate this model in action I have presented commentary provided by participants after their experience in a community–university partnership program

conducted in Australia using LAL methodology. The participants' recorded observations of their experiences, reflections and insights exemplify this process model at work for enabling, promoting and sustaining community development and show clear alignment with each of the four transitions and four colour phases of the model of emergent learning. At the time the program was conducted, neither the participants nor the facilitators (of whom I am one) were aware of this model.

My reflection on the community development program and insights formed while preparing this paper has generated the following questions. I conclude by encouraging readers to critically reflect on these questions for possible action:

1. What have you found intriguing or significant in this article?
2. What have you learned from this research and what would you like to inquire about further?
3. What implications can you see for your own research and development activities?
4. What would be your action plan for the next ALAR project you are part of, meaning: What is your focal question? Why is it important/significant? Who will be your co-researchers and participants? Why would they be interested in your issue, concern or focal problem? What would you anticipate your mutual vision/dream to be? How do you plan to achieve your goals? And by when? What is your timeline?

By answering these questions, you have just set the stage for action for your next 'Transformational Community Development' program!

## Acknowledgements

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## References

- Argyris, C. & Schön, D. A. (1974) *Theory in Practice: Increasing Professional Effectiveness*, San Francisco, Jossey-Bass.
- Batson, G. (2000) *Steps to an Ecology of the Mind*, Chicago, Chicago University Press (reprint from original published by Ballentine, 1972).
- Dewey, J. (1938) *Experience and Education*, New York, Collier Macmillan.
- Freire, P. (1972) *Pedagogy of the Oppressed*, Harmondsworth, UK, Penguin.
- Kearney, J. & Zuber-Skerritt, O. (2011) *Actioning Change and Lifelong Learning in Community Development*, Melbourne, Action Learning and Action Research Association.  
<http://www.alara.net.au/files/ALARA%20Monograph%20No%201%20Jkearney%20&%20ZuberSkerritt%20201106s.pdf>.
- Kearney, J. & Zuber-Skerritt, O. (2012) From learning organization to learning community: Sustainability through lifelong learning. *The Learning Organization*, 19, 400–413.
- Kelly, G. A. (1963) *A Theory of Personality*, New York, Norton.

- Kemmis, S., McTaggart, R. & Nixon, R. (2014) *The Action Research Planner: Doing Critical Participatory Action Research*, London, Springer.
- Kolb, D. (1984) *Experiential Learning: Experience as the Source of Learning and Development*, New Jersey, Prentice Hall.
- Schön, D. A. (1983) *The Reflective Practitioner: How Professionals Think in Action*, London, Temple Smith.
- Senge, P. (2006) *The Fifth Discipline: The Art and Practice of the Learning Organization*, New York, Doubleday.
- Taylor, M. M. (2011) *Emergent Learning for Wisdom*, New York, Palgrave Macmillan.
- Torbert, W. (1972) *Learning From Experience Toward Consciousness*, New York, Columbia University Press.
- Zuber-Skerritt, O. (2011) *Action Leadership: Towards a Participatory Paradigm*, Dordrecht, Springer International.
- Zuber-Skerritt, O. (Ed.) (2012) *Action Research for Sustainable Development in a Turbulent World*, Bingley, UK, Emerald Group Publishing Limited.
- Zuber-Skerritt, O. & Teare, R. (2013) *Lifelong Action Learning for Community Development: Learning and Development for a Better World*, Rotterdam, Sense Publishers.

# **Strengthening Leadership Capability of Not-for-profit Organizations in Australia: An Open-Space Exploration in the ALARA Community**

**Shankar Sankaran**

## ***Abstract***

*This paper is based on reflections from two ALARA conferences that explored whether four new leadership theories have a role in developing leaders of not-for-profit (NFP) organizations in Australia. The author first invited the attendees at ALARA's national conference held in Brisbane in 2011 to participate in an interactive workshop to explore four new leadership theories – authentic, servant, spiritual and relational leadership for their applicability to NFP faith-based organizations providing health and community care in Australia. The workshop was facilitated by the author along with an experienced facilitator who was attending the conference using an Open Space Technology (OST) meeting format to facilitate dialogue between participants utilizing a theme proposed for the meeting. At the start of the meeting the two facilitators briefly introduced the four leadership theories to be discussed. They then described the OST process. Next, participants were asked to announce discussion topics at the village marketplace that was created for the workshop. Groups of participants interested in a particular topic joined the discussion and the person who proposed the topic led the discussion. Summaries of the discussions were collected and posted by the group leaders. A final reflection took place in the open space (a circle of chairs with a space within) at which all the different groups were present. The reflections recorded at the workshop in the 2011 ALARA conference were analyzed and presented at the 2012 ALARA national conference held in Sydney and further discussed with two groups at this conference. The feedback from*

*these two discussions formed the basis for action research cycles with the ALARA community that led to this the paper.*

### **Keywords**

Leadership Development, Not-for-profit organizations, Open Space Technology Meeting, Action Research

### **Background**

In 2010, one of the authors of this paper took on the role of a Chief Investigator in an Australian Research Council Linkage grant investigating leadership development in not-for-profit (NFP) organizations involved in providing health and community care. The research is a three-year collaborative project between investigators from three Australian universities and two faith-based organizations. Some managers who participated in a survey conducted as part of this research indicated that some newer leadership theories were more relevant to non-for-profit organizations.

The theories that seemed relevant were authentic leadership (George 2003; Gardner et al. 2005 and servant leadership (Greenleaf 1977; Sendjaya and Sorros 2002). The research team was also interested to explore aspects of spiritual leadership (Fry 2003) and relational leadership (Uhl-Bien 2006) due to the values adopted by the two organizations in their vision.

A shortened version of an Open Space Technology (OST) (Owen 1997) meeting format was proposed for the ALARA conference held in Brisbane in 2011 (due to availability of time) as a quick and efficient way of holding a self-organized meeting to collect rich data on a topic that participants were passionate about. OST meetings generate vigorous debate as participants get passionate about the issues close to their heart. After a brief welcome and introduction to the day's theme and process, the participants were invited to pose a question they would like to explore in connection with the theme in groups. Each volunteer "question owner" then presented his/her question and participants then formed groups to explore the topics further according to their interest.

OST uses four principles: 1) whoever comes is the right person; 2) whatever happens is the only thing that could have happened; 3) whenever it starts is the right time; and 4) when it is over it is over. It also has one law which states that when anyone finds that they are not learning or contributing they can use their two feet and walk to a more productive place. The metaphor of a butterfly pollinating is used to describe participants who move from one location to another to transfer knowledge. Dialogue takes place whenever the participants assemble at the open space created for the meeting.

Each group was also asked to nominate a scribe to take notes of the discussions, which would be available to the other groups. At the end of the discussion the key points were displayed on the wall to start a dialogue.

The OST meeting was planned to have six steps

1. Welcome and focus the group
2. State the theme
3. Describe the process
4. Present the individual questions
5. Self-select the topic of most interest
6. Share conclusions in the Open Space.

## **Emerging Leadership Theories**

The four theories are described briefly in this section. The focus of this article is the processes that were used from which lessons were learnt about the applicability of the four theories. Therefore the four leadership theories have not been discussed in more detail but the references cited can provide further information on the theories and models used to test them for interested readers.

### *Authentic Leadership*

According to George (2003: 12) "Authentic leaders genuinely desire to serve others through their leadership. They are more interested in empowering the people they lead to make a

difference than they are in power, money or prestige for themselves. They are as guided by qualities of the heart by passion and compassion, as they are by qualities of the mind”.

### *Servant Leadership*

The term “servant leadership” has been made popular by the book published by the retired AT&T executive Robert Greenleaf in 1977. According to Greenleaf (1977: 27) “The servant leader is a servant first ... Then conscious choice brings one to aspire to lead”.

### *Spiritual Leadership*

Fry (2003: 711) defines spiritual leadership as “comprising of values, attitudes and behaviours that are necessary to intrinsically motivate one’s self and others so that they have a sense of spiritual survival through calling and membership”.

### *Relational Leadership*

The concept of relational leadership has its origins in leader member exchange theory (“LMX”), which focuses on relationship between a leader and his/her follower, and servant leadership, which posits that the leader is there to serve his/her followers.

Wright (2009: 8) states “leadership is a relationship – a relationship in which one person seeks to influence the thoughts, behaviours, beliefs, or values of another person.”

The four leadership theories described are not mutually exclusive and have several common features. The authors who proposed these theories have also acknowledged these inter-relationships.

## **AR Cycle 1 - Conversations at the Open Space Technology Meeting at Brisbane**

The Open Space process was explained to participants after which they were asked to suggest topics for consideration with a brief explanation.

The participants were asked to join groups who were interested in the same topic. Prior to the selection some topics were combined, with the agreement of the participants, so that the explorations

could be completed in the allotted time. This is normal at an OST meeting and the negotiations take place at the marketplace. Finally four groups were formed.

Group 1 started exploring the following questions:

- What is successful leadership?
- Why should one lead?
- Who is the leader?
- Size/Type/Structure of NFP.
- How to be a leader who is inspirational who others would want to follow?

Group 2 started the discussion with the question:

How to encourage new leaders to emerge to carry on the great work of a really vibrant original happening community group?

Group 3 had a simple theme:

Explore the role of servant leadership in NFPs.

Group 4 took on a theme covering the following questions:

- How to improve the quality of a manager?
- Critical thinking skills.
- What is the aim/scope of leadership?
- Leadership essence is leadership action.
- Bridging human values with business acumen.

It was surprising that only one group, Group 3, decided to explore one of the new theories of leadership. Groups 1 and 2 included the organizational context, NFPs, in their discussions. Group 4 went on to have a general discussion on both management and leadership. OST meetings are democratic processes where the

participants can select what they want to discuss even if the facilitator proposes a theme.

### **Group 1**

Group 1's discussion included two aspects – The group started discussing 'Engagement' as the essence of organizations, followed by the mission vs. market dilemma faced by NFPs. The interesting points that came out of the discussion on engagement were – co-creating how things were organized in organizations; clear buy-in of vision and values by employees; sustainability of services and effectiveness. The discussions about NFPs explored the diversity in NFPs; the issues of compromising values to maintain profitability or financial stability and the need for conversations necessary in the organization to integrate the core purpose and philosophy.

A useful output from Group 1 was a model shown in Figure 1 for processes used/issues faced by NFPs that need attention from the perspective of leadership.



Figure 1 – Model proposed by Group 1

## ***Group 2***

Group 2 had three rounds of discussions about NFPs. The first round focused on issues of organizational structure, questioning whether important positions in NFPs are often difficult to fill as they are not considered prestigious compared with other sectors. The group members also questioned what volunteers working for NFPs get in return for their participation.

The second conversation went deeper and discussed issues faced by NFPs such as remunerating directors, appointing executives in specialized positions supported by payments and the availability of good quality managers to work in these sectors.

This was followed up by some detailed discussions about how to use a roster system to find “time off” in which to develop skills, including how to deal with people who say “no” to development as they have no time, the importance of succession planning, and the need to focus on leadership development.

Group 3, which discussed servant leadership, had two conversations. The first was about the role of the servant leader in an NFP, and the second was about introducing servant leadership.

The characteristics of a servant leader were summarized as:

- Building a supportive culture
- Living organizational values
- Creating space for people to engage and emerge
- Releasing people for developing people and relationships
- Appreciating what people bring to the organization
- Sharing power and status
- Providing authentic, supportive feedback.

Outputs from the second conversation were useful for the main ARC funded project on leadership development. It discussed ways to introduce servant leadership. The following ideas were suggested:

- Encourage aspirational conversations
- Focus on organizational values
- Schedule regular and focused conversation
- Allow things to happen by giving permission
- Set up educational programs on leadership and mentor others.

#### *Group 4*

The discussion by group 4 focused on the qualities of managers and leaders. Some of the ideas on what managers needed to know were:

- To know self and others
- Ability to think critically
- Recruit and select well
- Need to appreciate multiple perspectives and world views.
- A mechanistic view of the world is unhelpful.
- They have to be keen.

The group also reported a couple of other points about organizations and management development:

- While management development is well researched it seems to miss the point in practice
- We often do not bother to learn from what went well
- We want success to be neat, simple, attainable and replicable.

## **AR Cycle 2 – Participatory Discussions at ALARA 2012 conference**

The reflections that were recorded at ALARA 2011 conference were then presented at the ALARA Sydney 2012 conference by the author. At this session OST format was not used and the participants were divided into two groups to reflect on the following topics of interest to the research team of the ARC funded project. The reason for focusing on these two questions was because the ARC funded research project had progressed further between the two conferences. The following questions were the recent concerns of the ARC funded research project:

- What are the capabilities required of leaders in NFPs?
- What strategies can NFPs use to develop their leaders?

The outputs from the two group discussions were summarized as:

### ***Group 1: Capabilities required of leaders***

- Open culture (trust, communication and approachability)
- Use a team approach
- Invert the hierarchy – frontline staff are also leaders
- Ability to distribute (communicate?) vision, goals and strategies
- Reflective practitioners
- Understanding the complexity of NFPs and context (both internal and external)
- Enable a bottom-up vision
- First among equals
- Working with passion and spreading it
- Fostering an environment for change.

### ***Group 2: Strategies to develop leaders***

- As contextual factors impact choice, develop in-house solutions rather than outsourced ones
- Volunteers and managers need (discipline-related) skills and relationship. But top management should have technical (contextual and operational) skills to govern
- Use action learning and corporate wisdom techniques
- Coach and mentor to develop tacit skills that are already there
- Recruit on values first. Make values explicit to staff
- Use organizational structure to share leadership
- Develop a caring attitude – profit is not the most important success factor
- Share leadership skills strategies across the organization.

### **Reflections from the two AR cycles**

In the time between the two conferences the ARC funded research project had progressed a large multistage Delphi study which had been carried out with a sample of managers from the two partner NFPs to identify the key capabilities needed for good leadership. These were:

- Communication
- Clear vision
- Honesty and integrity
- Team management
- Strategic thinking.

There were similarities between the outputs from the ALARA 2012 discussions and the Delphi study carried out by the research team in the ARC funded research project. These were:

- Communication
- Honesty and integrity and their relationship to trust
- Having a clear vision and disseminating it
- Importance of teamwork and team management.

Thus the ALARA workshop helped confirm some of the findings of the ARC funded research project using a different process.

The conclusions from the Delphi study that provided strategies to develop leadership capabilities (in fact recruit, develop and retain) were:

- Proper **recruitment and selection** seems to be a key factor as several capabilities are judged as being innate
- **Education and training** has been ticked in several categories which is not surprising.

Three interesting conclusions were - the need for more **on the job training** or **assignments, developing self-reflection** and development and nurturing of **interpersonal relationships**.

The category of '**Statements**' that was discussed points to what top management should be doing in terms of deploying the organisational vision and values through their actions

There were similarities here as well. Reflective practice and self-reflection were both considered important. Disseminating the organizational vision was considered to be critical. There was a suggestion to take contextual factors into account when developing leaders.

The outputs from the OST meeting held at ALARA 2011 were useful in other ways. First of all, except for servant leadership, the other theories were not taken up for discussion. There could be two reasons for this. The first is that the participants were not so familiar with these theories. The group leader who took up servant leadership was familiar with it. The second was that the participants felt that leadership theories cannot be isolated as they

are interrelated. It may be more important to discuss the context as well as issues faced by leaders in general.

The author of this paper reflected on his own experience from the two interventions and found that they might be useful for the research project as well:

- There is a gap between the models of leadership theory and the understanding of these theories in practice
- There is a gap in the models of leadership theory and how one would attain or develop these qualities in others
- Therefore there is a need for people to have the opportunity to gain skills and knowledge in practice of 1 and 2 above
- The importance of framing the question or the topic for conversation when gathering data at a workshop facilitated at a conference.

The groups overlapped in their conversations of these leadership styles in organizations for-profit as well as not-for-profit organizations, thus indicating common tensions in both types of organization. The tension between making a profit and having the qualities of the four leadership styles was discussed, the assumption being that the goal of making a profit is at odds with these leadership qualities. The application of these different styles of leadership in for-profit organizations would therefore be interesting to test this assumption.

However, the author holds that the qualities of these four different leadership styles are also present in for-profit organizations that stand out as leaders in business and the community.

## Conclusions

The OST served its purpose. It facilitated engaging a community in a topic of common concern – the performance of NFPs as well as their leadership. It generated a lot of rich data within a short time. Initially, the discussions at the OST were slow but they picked up as the participants became more engaged. The participants needed reminding that they could walk away and join other discussions,

which they eventually did. This did not affect the discussions that were going on very much as reflected by the participants at the end. A surprising finding was that the four leadership theories did not become the focus of the discussions but the leadership and management of NFP organizations did.

As an action research initiative the activities that contributed to this paper covered all three practices of action research (Reason and Bradbury 2008). First person - as it allowed the first author to reflect on his own contribution in the leadership research project that triggered this initiative; second person - as it enabled passionate discussions with engaged groups at both conferences; and third person - through dissemination via this paper that would be available, when published, to a wide variety of communities who might be interested in the effectiveness of OST, the issues faced by NFPs, and in leadership capability and development.

## **Acknowledgements**

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It is also acknowledged that this paper is a result of an ARC funded research project in which Southern Cross University, University of Technology, University of Southern Queensland were partners. The research project was also funded by the two industry partners Lutheran Community Care, Queensland and Baptist Community Services, NSW & ACT.

The ARC funded research project has been successfully completed in 2013 and the author would like to thank members of ALARA and participated at the two workshops for their contribution towards the successful completion of the ARC funded research project.

The author would also like to thank the two anonymous reviewers who provided valuable comments to finally shape this revised article.

## Author biography

Shankar Sankaran PhD is a Professor of Organisational Project Management at the School of the Built Environment at the University of Technology Sydney (UTS). He is a member of the Centre for Management and Organisation Studies at UTS where he is a Chief Investigator in two Australian Research Council Grants one investigating Project Governance and the other Leadership of Not-for-Profit Organisations which have now been completed. Shankar is a Distinguished Scholar of the Action Research Centre at the University of Cincinnati and the Founding Chair of the Action Research SIG at the International Society for the Systems Sciences where he is also the Vice President of Research and Publications in 2013-14. Shankar has been an active member of ALARPM and ALARA since 1992 when he lived and worked in Singapore and has served on the ALARA board as a Vice President. Shankar has edited a book titled “Effective Change Management Using Action Learning and Action Research: Concepts, Frameworks, Processes and Applications” and is an Associate Editor of the first Sage Encyclopaedia of Action Research being published in 2014. He teaches in the Master of Project Management Program at UTS and his research interests are organisational project management, systems thinking and action research.

## References

- Fry, L.W. (2003). Toward a theory of spiritual leadership, *Leadership Quarterly*, 1 (4), 693-727.
- Gardner, W.L., Avolio, B.J., Luthans, F. May, D.R. & Walumbwa, F. O. (2005). Can you see the real me? A self-based model of authentic leader and follower development, *Leadership Quarterly*, 16, 343-372.
- George, B. (2003). *Authentic Leadership: Rediscovering the Secrets of Creating and Lasting Value*, Jossey Bass: San Francisco.

- Greenleaf, R.K. (1977). *Servant Leadership: A Journey into the Nature of Legitimate Power and Greatness*, Paulist Press; New Jersey.
- Owen, H. (1997) *Open Space Technology: A User's Guide*, 2<sup>nd</sup> edn. Berrett Koehler: San Francisco.
- Reason, P. & Bradbury, H. (2008). *The SAGE Handbook of Action research*, 2<sup>nd</sup>. Edn., Sage: London.
- Sendjaya, S. & Sorros, J.C. (2002). Servant leadership: Its origin, development, and application in organizations. *Journal of Leadership and Organizational Studies*, 9 (2), 57-64.
- Uhl-Bien, U. (2006). Relational leadership theory: Exploring the social processes of leadership and organizing, *Leadership Quarterly*, 17, 654-676.
- Wright, W.C. (2009), *Relational Leadership: A Biblical Model for Influence and Service*, Paternoster: Colorado Springs.

# **Using Participatory Action Research to Assist Heart Failure Self-Care amongst Indigenous Australians: A Pilot Study**

Bronwyn Fredericks, Robyn A. Clark, Mick Adams, John Atherton, Stella Taylor-Johnson, Jo Wu, Jill Howie Esquivel, Kathy Dracup, Natahlia Buitendyk

## *Abstract*

*This paper describes the initial phases of the Fluid Watchers Pacific Rim project: a participatory action research project that involves developing and trialling an iPad app to provide monitoring and self-care for Indigenous Australians with heart failure. The development phase involved working with health experts, an IT team and Indigenous heart-failure patients through three cycles of development and critical reflection. This was followed by a small pilot study to examine the app's effectiveness. In this paper, the researchers explain why IT-supported health education can be successful in decreasing re-hospitalisation and improving self-management skills. They describe the steps they took to ensure community participation and ownership of the project and present the findings of their pilot study. This pilot project suggests that an iPad app may be a practical and successful way to provide health-care support for Indigenous Australian heart-failure patients.*

### **Keywords**

Heart failure, Fluid Watchers, iPad, app, self-care, wellbeing, Indigenous, Australia, participatory action research

### **Introduction**

Indigenous people have the poorest health status of any population in Australia (AIHW, 2011). The statistics describe a life expectancy that is less than that of other Australians, coupled with increased levels of cardiovascular disease, cancer, diabetes, respiratory disease and kidney disease (AIHW, 2011). For example, Indigenous women are 11 times more likely to get coronary heart disease, and 13 times more likely to get rheumatic fever (AIHW, 2011, p. 49).

Australian estimates suggest that heart failure is experienced by 2% of the Australian population, with 13% of patients aged over 65 years. Heart failure is the leading cause of hospitalisation and a significant burden on the health care system. The stories of heart failure are similar in Australia, the USA and New Zealand (Clark, McLennan, Dawson, & Wilkinson, 2004; Massie & Shah, 1997; Riddell, 2005). In New Zealand, Maori people experience a greater burden of heart disease than non-Maori (Kerr, Penney, Barnes, & McCreanor, 2009).

In Australia, Indigenous Australians with heart failure experience a death rate that is three times higher than the non-Indigenous population (AIHW, 2003). Some of these deaths are due to poor monitoring and some deaths could be delayed with effective self-care and support. We developed the Fluid Watchers Pacific Rim project to explore ways to address this disparity within heart failure and keep people alive. We used a participatory action research method to work towards this goal. This paper describes the first phase of the action research project.

Fluid Watchers Pacific Rim involves the design and testing of an iPad application (app) designed to teach self-management strategies about heart failure. The app is focused on fluid-level monitoring, and is designed to specifically meet the needs of Indigenous people with heart failure. The first phase of Fluid

Watchers Pacific Rim had two aims: (1) to involve Indigenous patients and community health workers in developing the app, and (2) to evaluate the app's effectiveness. We were interested in two aspects of the app's effectiveness: (1) its ability to teach heart-failure knowledge and self-care behaviours (such as fluid-level monitoring), and (2) users' satisfaction with the app and opinions about its user-friendliness. The project team included researchers, clinicians and community health workers. The researchers were drawn from Queensland University of Technology (QUT), Flinders University, Ipswich Hospital, Royal Brisbane Hospital, Central Queensland University and Kambu Aboriginal Medical Service in Ipswich.

Throughout this paper, we use the term 'Indigenous Australians' to refer to both Aboriginal and Torres Strait Islander people unless we use a direct quote where Aboriginal and /or Torres Strait Islander people are mentioned.

## **Understanding heart-failure and fluid-level monitoring**

The evidence demonstrates that people with heart failure who effectively manage their symptoms will experience fewer hospitalisations (Jaarsma et al., 1999). The most appropriate management includes lifestyle modification such as careful diet, regular exercise and minimising stress, along with adherence to medicine regimens. Despite this, approximately 50% of all patients experience minimal benefit from self-care interventions (Smedley, Stith, & Nelson, 2003). There is little available evidence discussing the efficacy of self-management support. Even less is known about the efficacy of self-management support relevant for Indigenous Australian populations, despite them carrying a larger burden of the disease proportionate to population (AIHW, 2011).

Managing fluid levels is an important aspect of self-management for people with heart failure. Fluid levels are a key symptom of heart failure, so ongoing monitoring and management of fluid levels is a critical part of ongoing care (HFSA, 2006; Krum at al., 2011). There is evidence that fluid monitoring can prevent the life-

threatening consequences of emergency hospital admission for acute decompensated heart failure and pulmonary oedema (Caldwell, Peters, & Dracup, 2005; Jaarsma et al., 1999; Spaeder et al., 2006). The current guidelines for heart-failure treatment recommend that fluid levels are monitored by daily weight checks (Heart Foundation Australia, 2008). The guidelines provide advice and suggestions on what to do if the patient experiences symptoms. For example, if a patient gains two kilograms or more over two days, with associated ankle, hand and/or abdominal swelling, then the patient is advised to activate their fluid action plan and/or seek medical advice (Heart Foundation Australia, 2008).

Unfortunately, the evidence suggests that fluid monitoring is not widespread. A study with heart-failure patients in Australia revealed that less than half reported having bathroom scales. They were unable to weigh themselves, despite being advised to do so daily. Moreover, many patients in the study (especially women) were hesitant to weigh themselves daily because of the social stigma associated with being overweight and obese (Clark, Yallop et al., 2007). This suggests that social stigma is influencing the ability of patients to monitor symptoms that might save their lives.

The project being discussed in this paper, Fluid Watchers Pacific Rim, is based on a successful fluid monitoring program from the USA called Fluid Watchers©. Some of the researchers involved in the Australian project were involved in the original Fluid Watchers program. Fluid Watchers was developed with rural heart-failure patients, and demonstrated improvements in heart-failure knowledge and self-care behaviour, plus fewer re-hospitalisations and reduced mortality (Caldwell, Peters, & Dracup, 2005; Dracup & Zegre, 2009). The program is based on self-care and adult learning theories (Knowles, 1980; Jaarsma et al., 1999). It focuses on the signs, symptoms, causes and consequences of decompensated heart failure and the importance of self-management. The program involves three main strategies: (1) teaching patients to keep a diary of daily weight and develop a fluid-retention action plan, (2) addressing perceived barriers to implementing the action plan, and (3) providing a script to use when calling a health-care provider if

symptoms worsen (Caldwell, Peters, & Dracup, 2005). After viewing the evidence from this program and after much discussion, we wanted to develop a project with Indigenous Australians with heart failure in an attempt to gain health improvements and make a difference in people's lives. The aim of Fluid Watchers Pacific Rim is to adapt the original Fluid Watchers program through a participatory action research project. We want to ensure that Indigenous Australians with heart failure become more confident in differentiating between fluid and adipose weight gain during daily self-monitoring, and encourage them to respond with early action.

### *Why an app?*

The evidence suggests that self-management programs assisted by information technology are often successful. In addition, research suggests that telephone follow-up can be highly effective on outcomes such as heart-failure knowledge, medication use, reduced hospitalisation and mortality, and cost effectiveness (Clark, Inglis, McCalister, Cleland, & Stewart, 2007). Interventions using technology are able to demonstrate improvements in quality of life, reduced costs and good levels of patient acceptability. They also show improvements in patient knowledge and self care (Clark, Inglis et al., 2007).

Of course, not all information technology will be useful to heart-failure patients, and any program needs to be carefully designed and tested. Research indicates that programs with user-friendly interfaces that include simulation, animation, image and voice can be efficient ways of educating patients and improving self-management skills. Other approaches may not be as effective (Clark, Inglis et al., 2007). Clark, Inglis, et al. (2007), show that patients who receive technology-based education tend to engage and learn effectively, because they experience a sense of empowerment as self-directed learners who are taking control of their own health condition and self care. As a result, patient involvement in self care and decision making tends to increase. Our goal with Fluid Watchers Pacific Rim is to develop a form of technology that will engage heart-failure patients in self-directed

learning about their condition, thereby increasing the uptake of self care.

We decided to develop an iPad app that would be a fun and convenient IT tool. The app combines the standard characteristics of computer-based teaching tools (simulation, animation, image and voice) with the capability to create an individual avatar and use the touch-screen interface. In this case, the avatar is a visual image that represents the patient. We use a figure that in other programs might be able to be animated. We also wanted the app to collect and evaluate statistical evidence of learning and outcomes. We felt that the portability of iPads would be a great benefit to health-care workers in communities and in clinics. Our aim was to produce education and self-monitoring materials that would be engaging, interactive, easy to navigate and usable (for patients, carers and health-care workers within both hospital and Indigenous community settings).

## Methodology

We developed a participatory action research approach for the project. The research process involved a repeated cycle of developing the technology, negotiating what the device could do, and testing the technology with experts and potential users. We wanted to be able to dream and work with Indigenous heart-failure patients as part of the research process.

Drawing on the work of Reason and Bradbury (2006), Kerr et.al. (2009) identify that action research works in empowering and participatory ways 'to generate research-based solutions to problems that impact on well-being of the people and communities' (p. 2). As a process, it allows researchers to incorporate a family of research methodologies as they work with community members, groups and organisations in an attempt to seek answers and solutions to real and complex problems. The complexities involved in treating and monitoring heart failure make the topic ideally suited to participatory action research. This approach has also been extensively used in education settings to develop effective technology-based teaching strategies.

Participatory action research has been used as an appropriate research methodology with marginalised and vulnerable populations – not just in Australia, but also in other parts of the world (Giachello et al., 2003; Nelson, Ochocka, Griffin, & Lord, 1998). It is increasingly being used with Indigenous populations (Cochran, 2008; Kerr et al., 2009; Mooney-Somers & Maher, 2009). In Australia, participatory action research is often cited as a suitable approach for researchers who are seeking to work with Indigenous Australian organisations and communities (Fredericks et al., 2011; Mooney-Somers & Maher, 2009). In some cases, it is specifically chosen as an approach to bring about change (Fredericks et al., 2011; Walker, Fredericks, & Anderson, 2012).

Evidence also suggests that participatory action research used within health contexts can increase the likelihood that the developed interventions will be used and bring health benefits to the community (Leykum, Pugh, Lanham, Harmon, & McDaniel, 2009; Giachello et al., 2003; Kidd & Kral, 2005; Stringer & Genat, 2004; Viswanathan et al., 2004). Action research has successfully been used to develop interventions within Indigenous health contexts (Brough et al., 2006; Erick, Mooney-Somers, Akee, & Maher, 2008; Fredericks et al., 2011; Tsey, Patterson, Whiteside, Baird, & Baird, 2004). While there are a growing number of participatory action research studies involving Indigenous Australians, few are focused on the field of heart disease. However, the work of Kerr et al. (2009) in developing an action research project in New Zealand with Maori people experiencing heart disease is particularly relevant to this project. Heart disease amongst Maori populations is of significant concern, and its pattern is broadly similar to the experiences amongst Indigenous Australian populations (AIHW, 2011; Kerr et al., 2009).

The benefits of using action research within health contexts is best summed up by Israel et al. (1995). They explain that action research involves people from the community in all aspects of the research. The project is a co-learning process where the researchers and community members learn from each other's knowledge and expertise. Action research includes a reflective process that involves critical consciousness. It is enabling to the communities

participating in the study and works through a process that balances the goals of research, action and evaluation. The work of researchers such as Israel et al. (1995) and Reason and Bradbury (2006) highlights the benefits of action research and the need for the action research process itself to be evaluated.

The Fluid Watchers Pacific Rim project is informed by the understanding that cultural sensitivity is essential for effective heart-failure management across different populations (NHMRC, 2005). Interventions need to be adapted to suit the cultural backgrounds, socioeconomic circumstances and health literacy of the families and communities involved (NHMRC, 2005). A participatory action research approach allows us to work in a culturally appropriate and sensitive way, and to be responsive to the community's needs. We aimed to ensure that all aspects of the project involved cultural sensitivity, and demonstrated respect for history, cultural beliefs and the social determinants of health (such as inadequate resources, varying levels of education and poverty) (Anderson, Baum, & Bentley, 2007; Boyle, Fredericks, & Tweede, 2013; NHMRC, 2003).

The action research process was not easy. Developing the app took much consideration and extensive consultation. At times, we needed to challenge our decisions to make sure that we were not taking the easy option instead of thinking first about what was best for heart-failure patients, health organisations and the community while balancing what community members and patients were articulating with regards to themselves. Generally, after some discussion we would realise that we were all wanting the same thing it was in how we were talking about it that revealed the difference.

Participatory action research tends to be slow. It requires considerable reflection and more time, money and personal commitment than other approaches to research. For example, Fluid Watchers Pacific Rim involved multiple visits to the site, with time spent talking with people, reflecting on the progress, listening to feedback, and then making the changes – all before undertaking the process again.

Participatory action research involves respecting the needs of the project's various participants. For us, this meant that at times during the project, organisational and community priorities needed to take precedence. We were mindful that participatory research approaches can sometimes create tensions between individuals and groups, particularly around balancing the needs of the participants against the needs of funding bodies, the requirement to publish in academic journals, and project timelines (Kendall, Sutherland, Barnett, Nalder, & Matthews, 2011). There are examples of participants withdrawing from the research altogether because of moral distress (Kendall et al., 2011, p. 6).

Some of these issues did surface for us, and at times we struggled to balance the differing needs. We took guidance from Smith (1999), who argues that the *process* is more important than the *outcome*, and from Stringer (1999), who suggests that the quality of relationships can affect people's experiences of the project. We prioritised the developing relationships and the process itself, and this helped to direct all of our decision making. We did this by regular communication, open dialogue and always checking how everyone was travelling in the project. We sought honesty in communication and understood the privileged position we were afforded by having access to people who had such a condition. If there were issues we positioned the participants first and the organisation first and our needs as researchers second. We understood that all of the participating patients were not very well and we sought not to add to their issues in a negative way but in a positive way. Patients saw that they could not just be helping themselves, but others who came after them who had the same condition.

The project was developed according to the National Health and Medical Research Council guidelines for research with Indigenous Australians (NHMRC, 2003). On our project team, 40% of the Chief Investigators (CIs) and Associate Investigators (AIs) are Indigenous people, with the remaining members being heart-failure experts. Ethics approval was received from the Queensland University of Technology (QUT) Human Research Ethics Committee, which confirmed that our project met the requirements

of the National Statement on Ethical Conduct in Human Research (NHMRC, 2007).

This first phase of the Fluid Watchers Pacific Rim project had two key objectives:

1. To involve Indigenous patients and community health-care workers in the development of a heart-failure self-care iPad app
2. To evaluate the effectiveness of the iPad app on (1) heart-failure knowledge, (2) self-care behaviours and (3) satisfaction and user friendliness of the software.

### *Study site and size*

The Fluid Watchers Pacific Rim project is based in the city of Ipswich, west of Brisbane, in Queensland, Australia. In 2006, Ipswich had a population of just over 162,000, with 34.3% of the population in the most socioeconomically disadvantaged quintile (ABS, 2011). Compared to the wider Queensland population, Ipswich has higher rates of physical inactivity, obesity, type 2 diabetes, mental and behavioural disorders, and deaths from coronary heart disease and stroke (ABS, 2011).

The project is focused on Indigenous people with heart failure who attend either one or all of the Kambu Medical Centre in Ipswich, Ipswich Community Health Heart Failure Centre and West Moreton Health Service District. Focusing on the Ipswich site gave us a fairly defined, stable group for the trial, which helped to make the developmental stages manageable.

In the initial stages of the project, we spent time talking with staff and the Board of the Kambu Medical Centre. We needed to develop a strong working relationship with them, ensure that all stakeholders were fully informed about what was required to commence the project, and ensure they understood the process that the work would involve. We consulted with local Elders and presented education seminars relevant to our work. We wanted to develop trust and engagement between the research team and the local community. We sought to develop a relationship with Kambu Medical Centre that would provide a solid, ethical and trusting

foundation for the trial and for the subsequent large-scale project. We allowed this process to flow and extended the timeline as required. We began without a rigid timelines so we were able to extend the project with reasonable ease. We additionally worked from a basis of wait and see and develop, rather than a strict 'this is the way' process which enabled us to develop and shape the project through the input of stakeholders. This worked for us and this was the way that the Indigenous researchers had advised the non-Indigenous researchers we should best work on this project. We were able to do this since we were not governed by a grant or external agency that expected us to also stick to a timeline that was unworkable for the project.

## Developing the project

The development component of the project involved three cycles of action and reflection. Within each action research cycle, we sought feedback from three participating groups:

- Medical and clinical reviewers
- IT reviewers
- Heart-failure patient reviewers.

We sought feedback about the app's design, images, language and health content, and the level of health literacy required to use it. The app was refined and developed through each research phase. For example, the avatar's design changed to become more acceptable to our target community (Figure 1 shows one example of the IT team's work on developing the avatar). The avatar of the woman changed to be more reflective of the women in the target community who were more likely to wear dresses and have shorter hair. This image is one of a handful of images that was discussed and trialled with the participating patients and the health workers. This was a reflection of the patients themselves and not a reflection of how workers, service providers or the researchers saw the patients. This might be different in other communities. We look forward to a time when the app might be

developed to such an extent that it might allow individual patients to best reflect their individual self through the avatar.

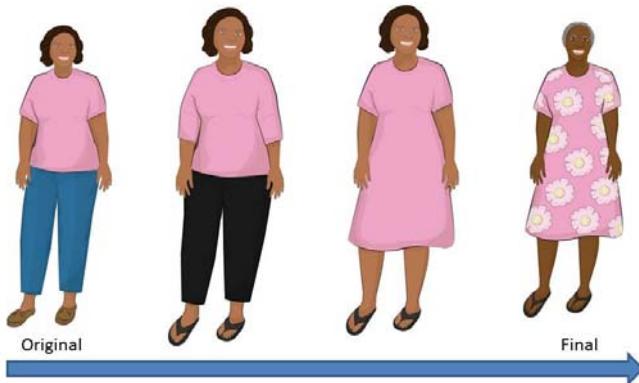


Figure 1: An example of the evolution of the app's avatar.

The third cycle of development resulted in the final version of the app that was used in the trial. Our cyclical development process was similar to the approach used by other health organisations undertaking action research projects (Fredericks et al., 2011).

#### *Input from medical and clinical reviewers*

The app was reviewed during each cycle by a medical and clinical panel that included a cardiologist, heart-failure nurse practitioner, heart-failure research academic, and cardiac nurse. The medical and clinical review panel focused on:

1. Integrity of the heart-failure messages according to evidence-based guidelines
2. Applicability of psychometric tools

3. Appropriate language and images
4. Appropriate interactivity.

#### ***Input from IT reviewers***

The IT team reviewed the app during each cycle to assess its workability and reliability.

#### ***Input from heart failure patient reviewers***

The app was reviewed by five Indigenous heart-failure patients and their carers for usability and ease of navigation. The same patients reviewed the app during each cycle. The participants for this phase were chosen as a purposeful sample based on criteria developed by the Kambu chronic disease nurse who works within a culturally safe environment and where culture is taken into account in decision making and a patients care options. Only people with heart failure who were clinically stable were approached to participate in the study. This was a group decision involving Aboriginal people, including health qualified Aboriginal people.

#### ***Trial component of the project***

Following the app's development, we undertook a small trial to assess the app's usability. We recruited five Indigenous people with heart failure who had not participated in the app's development to participate in the trial. The participants were chosen as a purposeful sample based on the same criteria as the people involved in the development phase. Only Indigenous people with heart failure who were clinically stable were approached to participate. Stability was required to minimise any clinical intervention variables during the study.

The trial phase aimed to evaluate:

1. Heart-failure knowledge
2. Self-care behaviours
3. User-friendliness of the software.

To conduct the evaluation, we used before and after validated questionnaires. Each questionnaire has been previously validated with other populations, but not with Indigenous people.

1. **Heart-failure knowledge:** We used the Heart Failure Knowledge Scale – a multiple-choice and yes/no, self-administered questionnaire (Simons-Morton, Haynie, Crump, Eitel, & Saylor, 2001). The scale consists of six items on heart failure, symptom recognition, diet, fluid restriction, medication and exercise. It provides a score of between 0 and 15 to measure heart-failure knowledge.
2. **Self-care behaviour:** We used the Self-Care of Heart Failure Index Scale (Jaarsma et al., 1999) to measure self-care behaviour, including fluid and weight management.
3. **User-friendliness of software:** We used a previously validated IT Satisfaction Survey (Clark et al., 2007), which we adapted to measure the usability and ease-of-navigation of the app, and to determine participants' level of engagement, views about the app's applicability, and satisfaction.

## Results of the trial phase

The five patients involved in the trial phase included three men and two women, with a mean age of 61.2 years. Of these patients, three were NYHA (New York Heart Assessment) Class III (an international standard that implies a high level of care is required). Four of the participants were married.

Overall, heart-failure knowledge amongst participants improved by 13%, self-care behaviours improved by 3.2%, and satisfaction with the iPad app was 86.2%. Participants said that they enjoyed participating in the project.

The outcomes of this pilot are encouraging. We are now working on how we can develop this project for a larger pilot.

## Discussion

Fluid Watchers Pacific Rim has demonstrated that the iPad app can deliver positive outcomes for Indigenous heart-failure patients. The teaching applications developed through this project can be immediately used by hospital and health-care workers who care for heart-failure patients. They can also be used by patients themselves.

The tools and materials developed in the project continue to be used by the Ipswich community, as part of our efforts to achieve sustainability and reciprocity in the project. It enabled people with heart failure to have direct input into the care of themselves. While our initial trial suggests that the app provides a valuable tool for self care and monitoring for heart-failure patients in Indigenous communities, we need to fully test the app with a larger group of patients with heart failure for reliability and validity. We believe that the PAR will offer more patients with heart failure to have a greater say in their care. Some of the issues will be the same due to the condition as it presents itself. Using PAR will add depth to what is known about Aboriginal and Torres Strait Islander people with heart failure. Even if there is some variations in future work it is adding to the evidence in so far as there is minimal evidence available. Over time with increased numbers of people participating in such work we believe we will start seeing a greater dominant themes and trends. We are planning a future trial in Ipswich which will build on the work undertaken with Kambu to date.

## Conclusion

This pilot study of the Fluid Watchers Pacific Rim project involved developing an iPad app to support self-care and monitoring for Indigenous people with heart failure. The people who participated in developing and trialling the app enjoyed their involvement in the project. They all showed improvement in knowledge and self-care (this improvement was shown by those in the development phase and those in the trial phase).

This pilot confirms that participatory action research can be used successfully in the development and trialling of an app intended for clinical interventions. The methodology was a useful way to bring together health experts, an IT team and Indigenous heart-failure patients. Together, they worked through three cycles of development and critical reflection. Through this project, we have come to believe that this approach can be used for future clinical trials that approach health care from a cultural perspective. In doing so, this offers another mechanism for working towards achievable and effective health gains for Indigenous Australians, beyond the life of the project.

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Dr John Atherton is the Director of Cardiology at the Royal Brisbane and Women's Hospital and Associate Professor, Department of Medicine, University of Queensland. His clinical and research interests include heart failure pathophysiology, quality of care in patients with acute coronary syndromes and heart failure, cardiac genetics and cardiac rehabilitation.

Ms Stella Taylor-Johnson is the CEO of the Kambu Medical Centre which provides comprehensive medical and specialist services to the Ipswich and surrounding areas and is committed to the delivery of comprehensive primary health care to Aboriginal and Torres Strait Islander peoples and supports the effective integration of services with the broader mainstream health system. Stella has been a Director of a number of organisations, including the Institute of Urban Indigenous Health (UIIH), Health Workforce Queensland and the Queensland Aboriginal & Islander Health Council (QAIHC).

Dr C-J (Jo) Wu is a Lecturer with the Queensland University of Technology (QUT). Her research interests evolved from over 16 years of clinical experience in the Coronary Care Unit where she observed differences in the progress of cardiac patients with diabetes. She is an Honorary Research Fellow with the Mater Medical Research Institute, Mater Health Services, and the Royal Brisbane and Women's Hospital.

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## References

- ABS (Australian Bureau of Statistics). (2011). *Census 2011*. Canberra: Australian Government Publishing Service.
- Anderson, I., Baum, F., & Bentley, M. (Eds). (2007). *Beyond bandaids: Exploring the underlying social determinants of Aboriginal health*. Casuarina: Cooperative Research Centre for Aboriginal Health.
- AIHW (Australian Institute of Health and Welfare). (2003). *Rural, regional and remote health: A study on mortality* (AIHW Cat. No. PHE 45. Rural Health Series No. 2). Canberra: Author.
- AIHW (Australian Institute of Health and Welfare). (2011). *The health and welfare of Australia's Aboriginal and Torres Strait Islander people: An overview*. Canberra: Author.
- Boyle, J., Fredericks, B., & Tweede, H. (2013). Aboriginal and Torres Strait Islander people in Australia: Education and Health Literacy. In J. Pavel (Ed.). *Education in Australia: cultural influences, global perspectives and social challenges* (pp. 1-15). New York: NOVA Science Publishers Inc.
- Brough, M., Bond, C., Hunt, J., Jenkins, D., Shannon, C., & Schubert, L. (2006). Social capital meets identity: Aboriginality in an urban setting. *Journal of Sociology*, 42(4), 396-411.
- Caldwell, M. A., Peters, K. J., & Dracup, K. A. (2005). A simplified education program improves knowledge, self-care behavior, and disease severity in heart-failure patients in rural settings. *American Heart Journal*, 150(5), 983.
- Clark, R. A., Inglis, S., McAlister, F. A., Cleland, J. G. J., & Stewart, S. (2007). Telemonitoring or structured telephone support programmes for patients with heart failure: A systematic review and meta-analysis. *British Medical Journal*, 334(7600), 942.
- Clark, R. A., McLennan, S., Dawson, A., & Wilkinson, D. S. S. (2004). Uncovering a hidden epidemic: A study of the current burden of heart failure in Australia. *Heart, Lung and Circulation*, 13(3), 266-273.
- Clark, R. A., Yallop, J. J., Piterman, L., Croucher, J., Tonkin, A., Stewart, S., & Krum, H. (2007). Adherence, adaptation and acceptance of elderly chronic heart failure patients to receiving healthcare via telemonitoring. *European Journal of Heart Failure*, 9(11), 1104-1111.

Cochran, P. A., Marshall, C. A., Garcia-Downing, C., Kendall, E. Cook, D., McGubbin, L., & Gover, R. M. (2008). Indigenous ways of knowing: implications for participatory research and community. *American Journal of Public Health, 98*(1), 22-27.

Dracup, K. L., & Zegre, J. (2013). *Educational program to improve heart failure outcomes in adults living in rural areas (REMOTE-HF)* (Clinicaltrials.gov identifier: NCT00415545). Retrieved from <http://clinicaltrials.gov/show/NCT00415545> 2009

[\(Accessed 16 January 2013\).](#)

Erick, W., Mooney-Somers, J., Akee, A., & Maher, L. (2008). Resilience to blood borne and sexually transmitted infections: The development of a participatory action research project with young Aboriginal and Torres Strait Islander people in Townsville. *Aboriginal and Islander Health Worker Journal, 32*(6), 5-8.

Fredericks, B., Adams, K., Finlay, S., Fletcher, G., Andy, S., Briggs, Lyn, Briggs, Lisa, & Hall, R. (2011). Engaging the practices of yarning in action research. *ALAR Journal, 17*(2), 7-19.

Giachello, A. L., Arrom, J. O., Davis, M., Sayad, J. V., Ramirez, D., Nandi, C., & Ramos, C. (2003). Reducing diabetes health disparities through community-based participatory action research: The Chicago Southeast Diabetes Action Coalition. *Public Health Reports, 118*(4), 309-323.

Heart Foundation Australia. (2008). *Living well with chronic heart failure: a guide for patients and their families*. Retrieved from

<http://www.heartfoundation.org.au/SiteCollectionDocuments/Living-well-with-chronic-heart-failure.pdf> (Accessed 1 February 2012).

Israel, B. A., Cummings, K. M., Dignan, M. B., Heaney, C. A., Perales, D. P., Simons-Morton, B. G., & Zimmerman, M. A. (1995). Evaluation of health education programs: Current assessment and future directions. *Health Education Quarterly, 22*(3), 364-389.

Jaarsma, T., Halfens, R., Huijter Abu-Saad, H., Dracup, K., Gorgels, T., van Ree, J., & Stappers, J. (1999). Effects of education and support on self-care and resource utilisation in patients with heart failure. *European Journal of Heart Failure, 20*(9), 673-682.

Kerr, S., Penney, L., Barnes, H. M., & McCreanor, T. (2009). Kaupapa Maori action research to improve heart disease services in Aotearoa, New Zealand. *Ethnicity & Health, 2009*, 1-17 (First Published 16 December 2009, iFirst).

- Kendall, E., Sutherland, N., Barnett, L., Nalder, G., & Matthews, C. (2011). Beyond the Rhetoric of Participatory Research in Indigenous Communities: Advances in Australia Over the Last Decade. *Qualitative Health Research, 21*(12), 1719-1728.
- Kidd, S. A., & Kral, M. J. (2005). Practicing participatory action research. *Journal of Counseling Psychology, 52*(2), 187-195.
- Knowles, M. S. (1980). *The modern practice of adult education: From andragogy to pedagogy*. Englewood Cliffs, NJ: Prentice Hall/Cambridge.
- Krum, H., Jelinek, M. V., Stewart, S., Sindone, A., & Atherton, J. J. (2011). Update to National Heart Foundation of Australia and Cardiac Society of Australia and New Zealand Guidelines for the prevention, detection and management of chronic heart failure in Australia, 2006. *Medical Journal of Australia, 194*(8), 405-409.
- Leykum, L. K., Pugh, J. A., Lanham, H. J., Harmon, J., & McDaniel, R. R. (2009). Implementation research design: integrating participatory action research into randomized controlled trials. *Implementation Science, 4*, 69.
- Massie, B. M. & Shah, N. B. (1997). Evolving trends in the epidemiological factors of heart failure: Rationale for prevention strategies and comprehensive disease management. *American Heart Journal, 133*(6), 703-712.
- Mooney-Somers, J., & Maher, L. (2009). The Indigenous Resiliency Project: A worked example of community-based participatory research. *New South Wales Public Health Bulletin, 20*(8), 112-118.
- Nelson, G., Ochocka, J. Griffin, K., & Lord, J. (1998). 'Nothing about me, without me': Participatory action research with self-help/mutual aid organizations for psychiatric consumers/ survivors. *American Journal of Community Psychology, 26*(6), 881-912.
- NHMRC (National Health and Medical Research Council). (2007). *National statement on ethical conduct in human research*. Canberra: Author.
- NHMRC (National Health and Medical Research Council). (2005). *Cultural competency in health: A guide for policy, partnerships and participation*. Canberra: Author. Retrieved from [http://www.nhmrc.gov.au/\\_files\\_nhmrc/file/publications/synopses/hp19.pdf](http://www.nhmrc.gov.au/_files_nhmrc/file/publications/synopses/hp19.pdf). 2005 (Accessed 16 June 2013).
- NHMRC (National Health and Medical Research Council). (2003). *Values and ethics: Guidelines for ethical conduct in Aboriginal and Torres Strait Islander Health*. Canberra: Author. Retrieved from

- [http://www.nhmrc.gov.au/\\_files\\_nhmrc/file/health\\_ethics/human\\_conduct/guidelines/e52.pdf](http://www.nhmrc.gov.au/_files_nhmrc/file/health_ethics/human_conduct/guidelines/e52.pdf). 2003 (Accessed 16 June 2013).
- Reason, P. & Bradbury, H. (Eds). (2006). *Handbook of action research*. London: Sage.
- Riddell, T. (2005). Heart failure hospitalisations and deaths in New Zealand: Patterns by deprivation and ethnicity. *New Zealand Medical Journal*, 118(1208), U1254.
- Simons-Morton, B., Haynie, D. L., Crump, A. D., Eitel, P., & Saylor, K. (2001). Peer and parent influences on smoking and drinking among early adolescents. *Health Education & Behaviour*, 28(1), 95-107.
- Smedley, B. D., Stith, A. Y., & Nelson, A. R. (Eds.). (2003). *Unequal treatment: Confronting racial and ethnic disparities in health care*. Washington DC: National Academies Press & Institute of Medicine.
- Smith, L. T. (1999). *Decolonising methodologies: Research and Indigenous peoples*. London: Zed Books Ltd.
- Spaeder, J., Najjar, S., Gerstenblith, G., Hefter, G., Kern, L., Palmer, J.G., Gottlieb, S.H., & Kasper, E.K. (2006). Rapid titration of carvedilol in patients with congestive heart failure: A randomized control trial of automated telemedicine versus frequent out-patient clinic visits. *American Heart Journal*, 151(4), 844.e1-10.
- Stringer, E. (1999). *Action research* (2<sup>nd</sup> ed). Thousand Oaks, CA: Sage.
- Stringer, E.T., & Genat, W. J. (2004). *Action research in health*. Upper Saddle River, NJ: Pearson Education Inc.
- Tsey, K., Patterson, D., Whiteside, M., Baird, L., & Baird, B. (2004). A microanalysis of a participatory action research process with a rural Aboriginal men's group. *Australian Journal of Primary Health*, 10(1), 64-71.
- Viswanathan, M., Ammerman, A., Eng, E., Garlehner, G., Lohr, K., Griffith, D., & Whitener, L. (2004). *Community-based participatory research: Assessing the evidence*. Rockville, MD: Agency for Healthcare Research and Quality.
- Walker, M., Fredericks, B., & Anderson, D. (2012). Improving Indigenous Women's Wellness Through Action Research. *ALAR Journal*, 18(2), 79-101.



## Creative Life Matters: a creative development workshop

Are you looking to bring more creativity into your personal and professional world? Dr Cathryn Lloyd creative development coach and Director of Maverick Minds invites you to a creative workshop.

Do find yourself asking these questions?

- What is my life's creative purpose?
- What is my connection to creativity and work?
- How can I give more creative energy to my projects?

The invitation is to spend time working individually and collectively to explore what creativity means to you. It is an opportunity to find ways to take control over how, when, what and where you will create. The focus is to tap into your creative potential - regardless of the work you do. A range of creative processes designed to access individual creativity will be used. This is an opportunity for you to see your creative self and your projects through another lens.

Cathryn is the Director of Maverick Minds a consultancy that designs, facilitates, and coaches powerful and flexible learning experiences for a range of people and purposes. She holds a research doctorate in Creative Industries and knows the joys and challenges of living a creative life. Cathryn works from the premise that everyone is intrinsically creative and we all have a need to express that in different ways. Creativity is a human capacity that can be applied to many different situations and challenges and for creating opportunities.

Some comments from previous participants: Insightful, energising, positive, affirming, thought provoking, great balance of structure and experiential, fantastic, fun, body mind connection

What to bring:

An open heart and mind – your curiosity

A camera, journal and pen

Comfortable/very casual clothes and a cushion/sarong/blanket

Workshop materials are provided. You are also encouraged to bring along any materials you currently work with along with any materials you would like to experiment with.

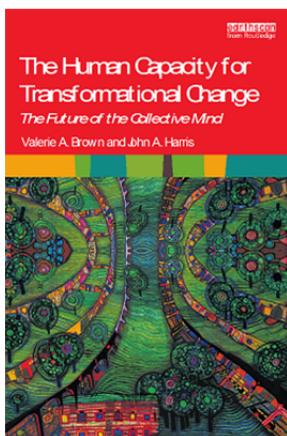
Please contact Cathryn for more information:

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# **Book review: “The Human Capacity for Transformational Change: the Future of the Collective Mind” by Valerie A. Brown and John A. Harris. Earthscan, Routledge, 2014.**

Susan Goff



This book is significant on several accounts, any of which may relate to a participatory inquiry. As a first observation, it draws on a continuum of its authors’ life works, presented in convincing, broad and succinct terms. For participatory inquirers the theories of practice that it proposes are both flexible and firm, providing practitioners with robust conceptual resources to guide our reflection and practices in the change environments in which we work.

But let me list four observations about this book that both validate the claim for its significance while also introduce you, the reader, to its content.

First, the authors accept that there *is* such an entity as a scale of change that transforms the reality in which we live – that is: “transformational change”. The text clearly describes the nature of this scale of change, now including change that originates in human thought rather than non-human phenomena (such as plate tectonics, for example). It is these human originations of

transformational scale change that are Brown and Harris' subject. The authors provide evidence of this form of change with a) comprehensive research, b) summarised indicators of its presence, and c) a compelling rationale.

In literary terms, their medium is their message, explicitly and implicitly deploying their theoretical propositions about transformation in the structure, semantics and preoccupations of the text. As participatory practitioners we frequently hear and perhaps use the language of "transformation". The value of this text is that it prevents the danger of this concept being overused to the point of losing meaning, providing evidence of its reality without defaulting to prescriptive and narrow definitions.

In documenting the evidence, the authors trace the work of many transformative thinkers and the patterns of thought leadership that their conceptual genius or "wizardry" produced. They go on to include current examples of the contemporary experience of such wizardry, which they refer to as "the Collective Mind". These examples of global transformation originating in human thought manifest in social and material expressions such as participatory governance, the gift economy and life-long learning arenas. These scenarios are judiciously chosen for their ability to provide existing platforms of growth for ongoing ethical, anthropogenic change. They also give the reader a *cultural* sense of belonging to transformational worlds, which as Brown and Harris say are intentionally un-utopian, and also far from fearfully dystopian.

My second observation regarding the significance of this book, is its timing. The authors point to the multiple, complex and unpredictable dynamics that are reshaping realities to our eyes – and minds. In recognising the reality of transformational scales of change in the Anthropocene they propose a new *science* of transformation fitting with the Age.

Consistent with its purpose, and of keen interest to participatory knowledge producers, this proposed science is *also* in transformation; the knowable reality (ontology) that its use can create remains an open-ended question. Depending on the feedback that develops through its use, this is a characteristic that

may or may not continue as an innate feature of this theory in practice. By contrast, the authors assert that its epistemology, or the relationship between the knower and that which is knowable, is predictable and generalizable while also being necessarily inter-subjective. That is – they avoid objectivism and as some would see, its risks particularly with regard to matters human, without losing the utility of a generic, robust theory.

The authors propose specific questions, dimensions and systems that can facilitate the emergence of an epistemology of the “Collective Mind”. These pointers are drawn from their framework of seven inter-dependent dimensions: the introspective, physical, social, ethical, aesthetic, sympathetic and the reflective domains. This framework is the communicative and cognitive medium that is their message. It provides a pathway through categorical, oppositional and paradoxical thinking to invite integrated, synthesising and systemic thinking. These are useful resources for participatory practitioners.

As stated, intrinsic to the Collective Mind’s ways of knowing is that what can be known (ontology) by means of its epistemology cannot be prescribed. This is another unique moment in time for human and planetary development. In previous western knowledge systems at least, what can be known from a particular epistemology could be controlled through religious doctrine as in pre-enlightenment knowledge systems, its discipline base as in the case of enlightenment systems, or the existentialism of critical approaches to knowing as in the case of post-modernist knowledge systems.

It appears that the Collective Mind refuses to be contained within such strictures, given the scale of unpredictability that the Anthropocene manifests. For example, who can possibly know what realities emerging from a stabilisation of climate change and human engagement with it will look like? In this sense, the science of Collective Mind is uniquely lacking in orthodoxy. This makes possible a complex of heterodoxies and power relationships associated with them, the likes of which we do not as yet have a

sociology to inform. The Collective Mind provides a starting point for inquiring into such vital sociological thicket.

Our third significant account, and related to our second of timeliness, is the kinetic nature of the thought leadership gifted by the authors through this text.

A science of transformation can make us conscious of the presence of socio-environmental, transformation-scale change. In facing its uncontrollability it brings human actors (and other non-human participants such as natural systems) confidently into a choice point of responsible relationship with each other and the moment, in the interests of future generations of life. This publication is essential to navigating such moments. The text contains clear tables, models and exemplars which if actually engaged with in decision-making and behaviours the actor can take the opportunity to transform within themselves. In some ways this is unremarkable - the world is full of texts that would guide personal development; what is remarkable is that this text provides a kinetic theory of personal development that is recognising of the Anthropocene and embodies a science that fits this reality.

This point leads to a fourth and last synthesis for this review. With this identified scale of change, the timing of its science, and the kinetic nature of its theory at our fingertips, Brown and Harris place before us the choices and subsequent responsibilities for evolving *with* the transformational experiences of the world. They are offering an opportunity to do this in an informed, ethical and aesthetically sensitive manner.

We can do this by consciously *becoming* "collective mind": an inter-cultural, cognitive, experiential entity, unrestrained by time or place, characterised by values associated with diverse understandings of existence, new forms of power extended through information technologies and hybrids of social exchange. It is by being collective minds together that we are rapidly producing a diversity of global commons in the face of planetary change originating in human thought. What these ways of being can become is an unfolding story, which this text gives us one means to tell.

## **ALARA membership information and article submissions**

### **ALARA membership categories**

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#### ***ALARA individual membership***

The ALAR Journal is available to members of the Action Learning, Action Research Association Inc (ALARA). Members obtain access to two issues of the ALAR Journal per year.

ALARA membership also provides information on special interest email and web based networks, discounts on conference/seminar registrations, and an on-line membership directory. The directory gives details of members around the world with information about interests as well as the ability to contact them.

#### ***ALARA organisational membership***

ALARA is keen to make connections between people and activities in all the strands, streams and variants associated with our paradigm. Areas include action learning, action research, process management, collaborative inquiry facilitation, systems thinking, indigenous research and organisational learning and development. ALARA may appeal to people working in any kind of organisational, community, workplace or other practice setting; and at all levels.

ALARA invites organisational memberships with university schools, public sector units, corporate and Medium to Small Business, and community organisations. Such memberships include Affiliates. Details are on our membership link on our website

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### **Journal submissions criteria and review process**

The Action Learning and Action Research Journal (ALARj) contains substantial articles, project reports, information about activities, creative works from the action research and action learning field, reflections on seminars and conferences, short articles related to the theory and practice of action learning, action research and process management, and reviews of recent publications. ALARj also advertises practitioners' services for a fee.

The journal aims to be of the highest standard of writing from the field in order to extend the boundaries of theorisation of the practice as well as the boundaries of its application. *This purpose represents a recent change in policy.*

The journal aims to be accessible for both readers and contributors while not compromising the need for sophistication that complex situations require. Where previously our commitment was to publish new practitioners as a way of developing the field, while also introducing novice practitioners presenting creative and insightful work we now encourage experienced practitioners and scholars to contribute.

Accordingly, our rate of rejection has increased. We will only receive articles that have been proof read, comply with the submission guidelines as identified on the journal's website, and that also meet the criteria that the reviewers use, also available on the journal website. We are unlikely to publish an article that describes a project simply because its methodology is drawn from our field.

The intention of the journal is to provide high quality works for practitioners and funding bodies to refer to in the commissioning of works, and the progression of and inclusion of action research and action learning concepts and practices in policy and operations.

ALARj has a substantial international panel of experienced action research and action learning scholars and practitioners who offer both double blind and transparent reviews at the request of the author.

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Please send all contributions in Microsoft Word format to our Open Journal Systems access portal: <http://journal.alara.net.au>

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For the full details of submitting to the ALAR Journal, please see the submission guidelines on ALARA's web site [www.alarassociation.org/pages/publications/submission-guidelines](http://www.alarassociation.org/pages/publications/submission-guidelines).

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The journal is devoted to the communication of the theory and practice of action research and related methodologies generally. As with all ALARA activities, all streams of work across all disciplines are welcome. These areas include action research, action learning, participatory action research, systems thinking, inquiry process-facilitation, and process management and all the associated post-modern epistemologies and methods such as rural self-appraisal, auto-ethnography, appreciative inquiry, most significant change, open space technology, etc.

Our reviewers use the following criteria, which are important for authors to consider:

- Criteria 1: How well are the paper and its focus both aimed at and/or grounded in the world of practice?
- Criteria 2: How well are the paper and/or its subject explicitly and actively participative: research with, for and by people rather than on people?
- Criteria 3: How well do the paper and/or its subject draw on a wide range of ways of knowing (including intuitive, experiential, presentational as well as conceptual) and link these appropriately to form theory of and in practices (praxis)?
- Criteria 4: How well does the paper address questions that are of significance to the flourishing of human community and the more-than-human world as related to the foreseeable future?
- Criteria 5: How well does the paper and/or its subject aim to leave some lasting capacity amongst those involved, encompassing first, second and third person perspectives?
- Criteria 6: How well do the paper and its subject offer critical insights into and critical reflections on the research and inquiry process?
- Criteria 7: How well do the paper and/or its subject progress AR and AL in the field (research, community, business, education or otherwise)?
- Criteria 8: How well is the paper written?

### *Article preparation*

Journal submissions must be original and unpublished work suitable for an international audience and not under review by any other publisher or journal. No payment is associated with submissions. Copyright of published works remains with the author(s) shared with ALARA Inc.

While ALARj promotes established practice and related discourse ALARj also encourages unconventional approaches to reflecting on practice including poetry, artworks and other forms of creative expression that can in some instances progress the field more appropriately than academic forms of writing.

Submissions are uploaded to our Open Journal System (OJS) editing and publication site.

The reviewers use the OJS system to send you feedback within a 2-3 month period. You will receive emails at each stage of the process with feedback, and if needed, instructions included in the email about how to make revisions and resubmit.

### *Access to the journal*

The journal is published electronically on the OJS website.

EBSCO and InformIT also publish the journal commercially for worldwide access, and pdf or printed versions can be purchased from Sydney University Press at

<http://fmx01.ucc.usyd.edu.au/jspcart/cart/Category.jsp?nParentID=42>

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Country Code	Telephone Number	Country Code    Mobile Number
<b>Email</b>		<b>Experience</b> (Please tick most relevant)
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*ALARA is a strategic network of people interested or involved in using action learning or action research to generate collaborative learning, research and action to transform workplaces, schools, colleges, universities, communities, voluntary organisations, governments and businesses.*

*ALARA's vision is that action learning and action research will be widely used and publicly shared by individuals and groups creating local and global change for the achievement of a more equitable, just, joyful, productive, peaceful and sustainable society.*