

- Expressive phenomenology and critical approaches: processes and risks in the teaching of health policy

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Overview

- What is the problem?
 - Social science reliant on critique-what of education of the heart?
- A possible solution
 - Expressive phenomenology
 - Critical theory
- The problem with the problem
 - Specific to the distance education classroom

Background to the problem

- Large classes in the teaching social sciences
- Multi disciplinary group
- Placed early in curriculum before students have experience in profession
- Management of topics through lecture/tutorial mode

The problem of critique

- Critique is central to health social sciences
- Runs the risk of alienating students
 - Important to provide critical analysis of the system, but
 - The risk is that it confronts student's career choice
- Balance between critique and nurturing career choice.
- How to deal with this issue pedagogically???

Theoretical background

- Combining phenomenological approaches with critical theory
- Expressive Phenomenology – evocative knowledge- knowledge of the heart
 - Origins in Macdonald's critique of Tyler's failure to take account of ideology
 - Macdonald identifies: the controllers, the emancipators, and the humanist (mythpoetic)

Mythopoesis

- Education of the imagination
- Curriculum assumes individuals inspired by major cultural myths
- Myths are found in shared stories, films, etc

Theoretical origins

- **Philosophical and sociological origins**
 - *Phenomenological attempts to 'go back to the things themselves'*

Hilman's concept of imaginal knowing

- *Refers to the human capacity to imagine oneself in a role, to daydream about it, and to construct a narrative about one's self in this role.*

Limitations

- Advertising
- Proselytizing
- MacDonald- Influenced by Habermas' critical theory (Holland & Garman 2008)
- Third form of knowledge
 - Evidence-based knowledge

Pedagogical process

- Lectures – narrative, critique and EBM
- Tutorial – 2 hours- student run
 - 1st hour
 - evocative portrayal of the lived experience of the illness: carer or cared for
 - Focus on what is it like?
 - What does it feel like to have cancer/aids/bulimia/an STD/alcohol addiction?
 - What does it feel like to care for someone with.....
 - Dwell on the experience of illness or experience of caring.

Step 1

- The evocative presentation- seeking the suspension of explanatory analysis or bracketing out the societal or cultural understandings:
- Create the orientation- get the class focused on the film. Activities need to be done in small groups for comfortable discussion.
- i) Invite students to reflect on their attitudes to this topic. eg. 'what do I feel about people with a sexually transmitted disease?'
- Show the film/narrative - insist on attention, no distractions and outline clearly what reflective activity will be used following the film
- ii) Portray the drama (use of film or could be poem/story/ play)
- Move to reflection without distraction
- iii) Here a range of activities are possible. Students could be asked to
 - a) Write a series of evocative words that come to their mind as they reflect back on the film and then share them within their group.
 - b) Interview each other in pairs about the narrative, one student is the interviewer, one takes the role of the subject. The questions from the interviewer probe asking 'What was it like? What did it feel like? What was happening during this time for you?' 'What was the mood like?'
 - c) Have a general class discussion with a series of questions.

Step 2: *Transitioning from evocation to critical analysis*

- 2nd hour- tutor lead
- Provide opportunity for small group discussion that requires students to examine evidence-based research that explores the lived experience of patients and carers;
- Incorporate into this discussion reflection on the lived experience and factual knowledge presented by the lecturer;
- Ensure at some point that students search out the evidence. This can be part of required reading for the tutorial, or as an assessment exercise.

Step 3/4 Integration of critical with express

- Tutor-lead discussion
 - invites reflection and comment on what is possible in practice.

Step 4. Repeated through out the semester.

The importance of the cycle is that imaginal knowing is in dialogue with the rationality of evidence and critique.

The importance of fostering the imaginal is to ensure that critical analysis does not strangle the student's idealistic professional vocation, or lead the student to cynicism.

The obvious importance of integrating the imaginal with the rational, the critical and the evidence based knowledge, is to expose the student to the boundaries of practice.

Doing it through distance education

- Synchronising evocative with critical for all students
- Students select different films-myths are not shared
- Choice of films is not controlled- violence to other student's myths

Concluding comments

- Align the personal narrative with the profession
 - Reality based- critical, and EBM
 - Integrate the rational (critical and EBM) with the imaginal – rather than binary opposites
 - Professional practice is neither rational and technical nor solely romantic and heroic.