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RESEARCH ARTICLE

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Phronesis: Recognising a neglected dimension of knowledge within occupational therapy research

Aileen Bergström[a], Margarita Mondaca[a,b], Ingeborg Nilsson[b,c], Susanne Guidetti[a,d] and Lena Rosenberg[a,e]

[a]Department of Neurobiology, Care Sciences and Society, Division of Occupational Therapy, Karolinska Institute, Huddinge, Sweden; [b]Division of Occupational Therapy, Department of Community Medicine and Rehabilitation, Umeå University, Umeå, Sweden; [c]School of Health and Welfare, Halmstad, Sweden; [d]Medical Unit Occupational Therapy and Physiotherapy, and Theme Women's Health and Allied Health Professionals, Karolinska University Hospital, Stockholm, Sweden; [e]Department of Rehabilitation, School of Health and Welfare, Jönköping University, Jönköping, Sweden

ABSTRACT

Background: Phronesis is a way of knowing, implying wisdom, experiences, and reflections that guide our judgements. Phronesis, important for learning, is a neglected form of knowledge when applied to research.

Aim: To examine how phronesis is conceptualised and practiced in three research projects.

Method: Data from eight interviews with researchers involved in three research projects was generated. The interview material was analysed. A theoretical matrix of contemporary understanding of phronesis was applied to the material.

Result: Examples of phronesis from three research projects in occupational therapy are presented according to categories of contemporary phronesis; acknowledging embodiment, embracing humility, using perceptiveness, and practicing reflexivity.

Significance: This unique approach of analysing research projects contributes to the understanding of phronesis and its implications for research, providing valuable insights into the researchers' praxis in their respective projects

Conclusion: There is a need for a greater recognition of phronesis as a dimension of knowledge within all types of research, and within the discipline. By not recognising phronesis as a legitimate form of knowledge, the discipline perpetuates a superiority of knowledge from episteme that dominates our ways of learning about the world around us and where the type of knowledge gleaned from phronesis is consequently marginalised.

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Introduction

Within both occupational therapy and science, we generate, develop and challenge knowledge regarding people as occupational beings [1]. This includes viewing human doing [2] or actions through different theoretical lenses. Human doing involves elements of change. Change and learning are often experienced in conjunction with doing, where one learns in practice [3,4]. Within occupational therapy, teaching and learning are critical in diverse interactions and key components in the occupational therapy process [5].

Learning and understanding are also tightly entwined with knowledge creation *via* research. The research questions we ask regarding what we investigate and our reasoning as to why we need to investigate influences our actions, that in turn impact on how knowledge is generated and utilised. Researchers make decisions in planning and carrying out research projects based on various factors, such as study objectives, theoretical frameworks, previous research, and resources but also on their fundamental beliefs, values, and ideas. In other words, the choices we make in our research steer scientific inquiry regarding human occupations and impacts what and how we learn about the world around us [6,7].

Historically, when the discipline entered the research field, the field was dominated by the biomedical paradigm [8]. Occupational therapists and

CONTACT Aileen Bergström aileen.bergstrom@ki.se Department of Neurobiology, Care Sciences and Society, Division of Occupational Therapy, Karolinska Institute, Huddinge, Sweden.

scientists worked to position themselves so that their research balanced on a "medical/social fault line" with plural epistemologies [9]. In research, epistemological stances that deal with meaning interpretations have gained acceptance over time but have also met obstacles in establishing credence within the research field. The dominating epistemological stances gives legitimacy to certain types of knowledge while marginalising others [8]. This is manifest in the amount of literature regarding evidence-based practice regarding episteme as opposed to reflective or reflexive practices [9]. Research was, and continues to be, a tool for developing science [10] and knowledge gleaned from scientific inquiry is considered by the greater scientific community to constitute a gold-standard [10,11], ignoring other forms of knowledge creation.

Research within occupational therapy and occupational science has been influenced by traditional quantitative research designs as well as qualitative research designs from both biomedical research and social science traditions [7,12]. These different research traditions should be seen as complementary as opposed to being conflicting, as both are needed for development in a research field [8]. Discussions regarding methodological choices are of great importance for learning and advancing knowledge within the discipline [12]. However, these discussions are often absent [13]. This paper seeks to contribute to the discussion in a unique manner.

Dimensions of knowledge

One could refer to researchers as members of an epistemic community, producing knowledge about occupation and applying "*standards of credibility*" to their choices within research [13]. Learning from the choices of the researchers and which foundations guide those choices could help in understanding the implications of the methods adopted and in turn help to ensure that the knowledge produced is adequate and legitimate [13]. A connection to philosophical foundations is important [14] when considering the choices that are made within the epistemic community [13] and a starting point in three of Aristotle's dimensions of knowledge [15] is suggested. These dimensions of knowledge incorporate knowledge areas relevant for further scrutiny in this discourse, namely episteme and its relation to practical knowledge, what Aristotle referred to as techne, as well as the concept of phronesis [16,17].

The first concept *episteme*, considered the corner stone in the foundation of research [18], is knowledge that is characterised as scientific, universal, and invariable [19]. Epistemology is the theory of knowledge that seeks to answer the question of "How do we know what we know" [20].

The second concept, *techne* has to do with knowing how to do things right [20], and is explained with the terms technical or technology, but also refers to practical knowledge. Techne relates to production of a product and is considered to have goal-directed knowledge adjacent to actual actions. Therefore, technical knowledge can be seen as that written in manuals, handbooks, directions, and the like. Techne has also been translated to art or crafts, meaning that one creates or produces something that cannot be found in nature [16]. Techne is characterised as context-dependent and oriented towards practical, rational, conscious goals [21].

The third concept, and the one that will receive the most attention in this paper is that of *phronesis*. Phronesis has been described as prudence, practical knowledge, and wisdom, [16,22–24] and is highly reliant on experiential learning [22]. Practical wisdom has to do with how one experiences a situation and makes judgements regarding the appropriateness of one's actions, as to what is fair and just [25]. Phronesis is a quality that has an ethical element, where considerations regarding the achievement of a good life reflects the wider community [23]. Phronesis comes from engagement in one's practice, or "a *way of knowing in which skill and understanding co-operate; a knowing in which experience and critical reflection work in concert; a knowing in which disciplined improvisation, against a backdrop of reflective wisdom, marks the virtuosity of the competent practitioner*" (page 1320) [22]. Thus, phronesis has to do with both reasoning and knowledge [25] and has implications for the judgement of those working in health care professions, including moral judgements in practice.

Jenkins et al. (2019) presents Aristotle's five traditional foci of phronesis (eudaimonia, virtues, deliberation, judgement, praxis/morally informed action) as well as four contemporary views of phronesis. Since these contemporary views are worthy for consideration in health care practices and for the sake of brevity and simplicity, this study will use Jenkins and others' four contemporary views of phronesis: embodiment, open-mindedness, perceptiveness, and reflexivity [25]. Embodiment refers to understanding and making sense of a situation through bodily engagement, *via* sensing and through bodily perceptions. Open-mindedness is described as humility or a commitment to understanding a situation in different ways, being aware of what one knows and the temporality of knowledge, demanding an openness with

respect to continual learning. Perceptiveness is described as having, intuition of knowing what to do, insights about the particularities of situations and seeing one's own involvement in the situation, bringing together underlying meanings and all possible perspectives, or a knowing of what one needs to know or discover. Lastly, reflexivity has to do with critical questioning concerning how knowledge is produced and used, continually examining one's own assumptions and pre-understandings, values, and beliefs [25]. Since these contemporary views of phronesis appear to be applicable to health care practices, they could conceivably be applied to making judgements within research within occupational therapy and science as well.

In addition to the three aforementioned dimensions of knowledge, the concept of *praxis* can also be relevant for this discourse. Praxis *"denotes action which is value-directed, value-laden and profoundly saturated with meaning"* (page 1320) [22]. Praxis can be exemplified in how individuals perform their jobs, using wise judgement [14] and involving theory and reflection [22].

The dimensions of knowledge areas in relation to one another

The three knowledge areas of episteme, techne and phronesis are considered different ways of knowing [22] however interacting with one another. Phronesis, as a difference to episteme, requires experience of an area as well as reflection on experiences. This means that the knowledge is embodied and cannot be learnt through reading books or manuals. Techne, on the other hand, can be learnt through a manual and has to do with a product whereas phronesis has to do with emerging situations. However, with experience, phronesis does not only stay with a certain situation, but can inform other situations as well. Techne is considered the know "how" and episteme the know "why". Phronesis, however, involves both, as well as including moral decisions, guiding actions or praxis [16,25] and is, within social science research, seen as a balance to both episteme and techne [26].

The concepts of episteme and techne, despite their Aristotelian origins can be recognised in the present English language (e.g. epistemology and technology), however the concept of phronesis is relatively obscure, which could be indicative of the values in today's society. [20]. Society may place more value on scientific knowledge and practical skills that involve the use of tools to create something concrete, rather than on practical wisdom to make ethical judgements in everyday life. Further, we may not recognise phronesis since it is difficult to measure or change to a measurable goal outside of a situation.

These three forms of knowledge: episteme, techne and phronesis can be exemplified by looking at the measures we use within occupational therapy practice and research. Measures are often derived and tested with the help of *episteme*, and for a measure to be standardised there needs to be a manual to follow, which would fall under the realm of *techne*. However, the way of knowing described as phronesis could be exemplified by the knowledge and reflections of the therapist or researcher. This "knowing" leads to deliberations and judgements, often combined with a degree of experience, that inform the therapists' or researchers' actions regarding how, when, why, where, and with whom, they use a measure. Nonetheless, phronesis regarding measures may result in new perspectives as exemplified in Bergström et al. (2022). In their meta-synthesis, the authors discussed that aspects such as self-efficacy or a sense of security while doing everyday activities are not captured in traditional measures focused on occupational performance and do not measure "what truly matters" to the individual. Episteme combined with phronesis contributed to the realisation that common measures failed to describe the changes experienced by the clients and tend to focus primarily on the execution of tasks [27].

The research projects

Three research projects are used as the resources for this paper. These projects seek to contribute to the development of knowledge-based services for older adults' participation in everyday life with the purpose to improve opportunities for participation and social inclusion. The three projects are named Assist, Shared Spaces and Stay-in-Touch. All three research projects originated, were designed, and actualised by researchers well versed in occupational therapy and occupational science and involved staff working to improve older persons lives and situations. Assist and Stay-in-Touch involved home care staff working with older persons living in the community whereas Shared Spaces involved staff working with older persons in nursing homes. All three projects used learning in practice as an approach for change, to support and facilitate conditions and methods used in working with older persons.

Furthermore, these three projects originate in different methodological foundations. The Assist project originates in a feasibility study and has a quantitative

approach whereas Shared Spaces and Stay-in-Touch are based on participatory action principals and have a qualitative approach. Thus, these three projects represent a hybrid of scientific inquiry [20] and will be described in more detail.

Motivation and aim

Aristotle articulated the dimensions of knowledge, episteme, techne and phronesis more than 2000 years ago. In todays' world these three dimensions are recognised to different degrees, creating a possible imbalance in our ways of knowing. Phronesis is important for adult learning, as well as for learning in practice [22,23], and has been coupled to both nursing [10] and occupational therapy [13]. Since phronesis is a unique, but neglected way of knowing, there is a need to understand and learn about phronesis, as this can have possible profound implications for research, education, and practice [24,28]. However, the exploration of phronesis is lacking within research [29]. One published paper within Occupational Science was found, proposing the use of phronesis to advance knowledge regarding the interrelationship of human occupation and health in the context of South Africa [30]. Thus, a closer examination of phronesis within research in the discipline may be justified. Since praxis interacts and aligns with phronesis regarding the use of judgement in action [14,22] one could conceivably examine researchers' praxis through the lens of phronesis.

Therefore, the overall aim of this paper is to examine how phronesis is conceptualised and practiced in three research projects.

Importantly, the purpose of this paper is not to evaluate the three research projects, but to examine the plans and learning activities found in each of the projects, with a focus on phronesis.

Methods

This paper is based on an examination of phronesis in research and inspired by Teghe (2012) [26]. The three research projects; Assist, Shared Spaces and Stay-in-Touch, involved researchers, staff, and other stakeholders where learning was reciprocal between and among the groups. As such, the researchers' praxis of planning and realising learning activities used in their research projects, their understandings, perspectives, and choices, based on their epistemological and theoretical foundations are used as the basis for the examination of phronesis. We strive to illuminate the following question: How do the researchers exemplify, and articulate plans, actions, and descriptions of learning activities from their research projects, described through the lens of phronesis?

The descriptions of the three projects that follows has been achieved by reviewing written documents (e.g. study protocols, midterm reports and plans) contributed by the researchers as well as through interview material and were prepared by the first author. The involved researchers reviewed and revised the descriptions of their projects for accuracy.

Participants and interviews

The participants for the interviews were chosen as a convenient sample from the three research projects. To best discern phronesis, each of the three projects researchers' (three persons in the Assist project, 3 persons in the Shared Spaces project and 2 persons in the Stay-in-Touch project) were chosen as informants and interviewed. All interviews were performed by the first author, who is well versed in qualitative analysis. The interviews were done after the start of all three projects. Initially, one interview was undertaken with each separate research group. Separate follow up interviews were conducted with two study participants in the Stay-in-touch project, and one of the study participants, chosen for their level of involvement by the first author, in the Assist and the Shared Spaces projects. A third interview was conducted with the same single study participant in both the Assist and Shared Spaces projects to follow-up on points of interest. Thus, a total of eight interviews, conducted online and lasting approximately one hour each, were undertaken from September 2020 through the spring of 2021.

The questions posed during the interviews were open questions, asking the study participants to talk about their projects related to the overall aim, the theoretical base, pedagogical theories as well as the planned and realised activities and their experiences related to learning in practice, and the knowledge generated by the project. Finally, the study participants were asked to reflect upon if they were surprised about any aspects or outcomes of their projects and if they could do it all over again, what would they do differently.

Interviews were recorded, reviewed several times, and extensive notes were taken while listening to the recordings by the first author. The reviewed sections of the interviews, deemed to be important, were transcribed verbatim to capture direct citations of importance. The parts of the interviews deemed not to be relevant were noted, but not transcribed verbatim.

Analysis

Based on the collected texts as well as the interview material, an analysis of the material inspired by reflective thematic analysis [31] was initially done by the first author. All text were read, and interview notes reviewed, going back to the original recordings when clarification was needed in an iterative process. An initial open coding of all material was conducted by the first author and the codes were discussed with the last author early in the analysis process to get a grasp of the material. With inspiration from Jenkin's [25], the analysis turned from an inductive approach to a more deductive approach, by using Jenkin's contemporary concepts of phronesis (i.e. embodiment, open-mindedness, perceptiveness, and reflexivity) as a matrix to search for examples in the material. The first author then presented the preliminary findings to the study participants in February 2022, giving the group an opportunity to come with questions, reflections, as well as other examples of learning activities from the projects. Minor changes were made, and revised categories discussed. Because of this iterative movement from an inductive/deductive stance, the analysis method could be considered inspired by an abductive approach [32]. An abductive approach was utilised in the analysis, incorporating both inductive data, exemplified in the interviews, and deductive data concerning the concepts of phronesis. For example, the analysis might have started with a description of an event where the phronesis concepts were used to interpret the data or conversely, starting with phronesis concepts to describe and understand the data. Consequently, the results are based on both inductive and deductive data, with findings originating in either the empirical examples or the theoretical concepts. The study participants concurred with the findings.

Descriptions of the three projects

To situate the reader, a description of the three projects; Assist, Shared Spaces, and Stay-in-Touch, follows. Each of these projects include individual studies with different aims and methods. The descriptions below depict a composite of the ideas, usually focusing on the main or first study that has been superordinate for the project. These descriptions are presented for the sake of simplicity and brevity but with the hopes of conveying the foundational stances and learning activities for each project.

Assist 1.0

Background. The intervention in the Assist project was based on the concept of reablement [33,34]. Reablement is a home-based intervention to support older persons to manage their everyday lives so they can live as independently as possible. The intervention provided guidance by occupational therapists (OT) and encouraged the active engagement of the older persons. In reablement, home care staff should 'do with' the older persons rather than 'do for' or 'do to' them [34]. The project was designed with the aim to empower the older person to do what they wanted and needed to do, and in turn, increase their self-efficacy, perceived health, and well-being. The intervention, led by an OT, was directed towards the home care staff with the idea that there would be a trickledown effect impacting the involved older persons.

Project activities and learning theories. The study's intervention consisted of an introduction to the home care staff regarding the reablement approach and was planned to be facilitated with both "hands-on" coaching and weekly workshops. The intervention was based on learning theories; "*situated learning, where knowledge is seen as integral to doing and where knowledge and practice are inseparable*" [35] and theories regarding what one does in practice being tacit and the need to reflect to become aware of ones' actions [3].

The actual project was initiated with a group of home care staff in a supported discharge service, where home care staff facilitated the older persons process of returning to their home environment after a hospital stay. The original plan was that a researcher (an OT) would introduce and support the use of reablement principals such as introducing and grading activities that the older person needed and wanted to do. The OT's decision to prioritise workshops instead of working hands-on with home care staff was influenced by the realisation that the home care staff worked in a sufficient manner. The OT wanted to have an open approach and be flexible as to the needs of the homecare staff to facilitate reflection on-action [21]. The content of the workshops was to be of relevance for the staff and were planned to take place at their regular staff meetings during one hour at the end of the day. However, when the staff had difficulties presenting their own needs regarding the reablement approach, the OT decided to show short film sequences depicting reablement cases and use them as a basis for a discussion. This part of the intervention

was, as the OT explained, plagued with shortages and inconsistencies of staff, technical difficulties, and time concerns. During the first six months of the study, two-thirds of the planned meetings were conducted.

Shared spaces

Background. The project, re-thinking shared spaces in nursing home environments (Shared Spaces) focused on how nursing home environments could instil a sense of home and a pleasant everyday life for nursing home residents. The project was grounded in the knowledge that complexity characterises everyday life in nursing homes. The project was built on an ethnographic approach with a participatory design and utilised participatory methods [36]. The origin for the research inquiry came from the researchers' previous research findings at the involved nursing home. The study's overall design was planned together with the management of the nursing home. The researchers later refined the design when running it with staff. The long-term aim of the project was to make minor changes in the environment, within a relatively tight budget.

Project activities and learning theories. The researchers were situated in a nursing home together with the staff. The staff, in groups, participated in workshops with activities that were relevant to achieve the aim of the study. Initially, the staff had the opinion that they were there to provide services and care for the older persons and that being aware of the environment was not part of their job.

In this project, learning was understood as acquiring new knowledge through one's own action in a continual process and was a foundation for the workshops. The contents of the workshops were inspired by Schön (1991) with the ideas of reflection-in-action [37]. The field of design contributed with theories from Salama (2015) and the conceptualisation of four different ways of processing knowledge; learning through doing (interpretation), learning through experience (practice), learning through thinking (abstract conceptualisation) and learning through reflection (reflective experimentation) [38]. Paulo Freire's (1993) theories regarding raising consciousness levels of the staff and realising possibilities for change also influenced the learning activities [39]. The pedagogical approach was seen as a balancing act that needed to be based on mutual trust, as neither the researchers nor the staff had all the answers.

Workshops spanned over a period of one and a half years, a conscious decision by the researchers to work with a sustainable learning approach and diverse learning phases. The researchers highlighted the significance of being present and conducting workshops in the nursing home, where staff members were employed. The researchers had two different groups with weekly workshops (less often towards the end of the study) for a total of two hours. There were approximately six to ten participants (nurses, assistant nurses, and auxiliary nurses) participating in each workshop. The learning activities were planned by the researchers and consciously included diverse pedagogical activities. Weekly workshops informed the design of the following one. The workshop sessions started with warm-up activities, playful in nature and used to stimulate the group's creativity. An example of such an activity was when everyone responded to the question, "*if I were a certain spice today, which one would I be?*" Those initial activities often lead to laughter and a feeling of relaxation, leading the staffs' thoughts away from their daily chores in the nursing home. Building on this, the researchers presented the aim and activities for the workshop. The workshops continued with planned pedagogical activities that were aimed at the overall goals of the project, increasing the staffs' consciousness of the environment at the nursing home. Each workshop ended with the opportunity for the participants to sum up their thoughts and ideas, often with the help of a chosen picture or object. The researchers, after every workshop had de-briefing sessions, often including other members of a larger research group, to discuss the current events and progression of future workshops.

Stay-in-touch

Background. The Stay-in-Touch research project focused on preventing loneliness in community dwelling older adults living with support from homecare services, through the promotion of social participation. The project, built on previous research [40–42], sought to work with both older adults and home care staff to design, test and evaluate a working model for home care staff. The working model was the basis for an educational package, aiming to conceptualise how loneliness can be discovered and dealt with.

Project activities and learning theories. The learning activities were inspired by group dynamics [43] and group work in Occupational Therapy [44] as well as structures for exploring a problem area, developing a process, and forming a vision [45,46] https://www.iffs.se/en/. The project used a Participatory Action approach (PAR) [47,48] and involved workshops with

four different groups of homecare staff involved in a series of four workshops each, making a total of sixteen workshops, situated in two geographical locations. Workshops with homecare staff were built on the idea that there were two groups of experts present: the expertise of the homecare staff as well as the expertise of the researchers. The researchers worked hard to convey to the participants that they "owned the process and the product".

The workshops involved different pedagogical exercises that were tailored to the actual groups needs and with consideration to where the group was in the process. The researchers always started by presenting the aim and the intended goal of the workshop. They planned each workshop so it would include a warm-up activity and a short lecture regarding the subject area e.g. older persons and loneliness or introducing the design of a working model. Every workshop always had a social activity involving a coffee break and the researchers also organised celebrations when milestones were reached. The workshops always ended with discussions regarding goal achievement and a reflection that the participants could bring with them. Even though workshops and the activities were planned in detail, the researchers realised the need to be flexible and meet the needs of the actual group. They discussed the contents and happenings after each workshop, adjusted and planned accordingly. The researchers wanted to convey a professional organised approach to the workshops, so the participants realised and respected the time invested.

Findings

The analysis is presented in themes consistent with the framework for contemporary phronesis presented by Jenkins et al. (2019). These four themes are: (1) acknowledging embodiment (2) embracing humility (3) using perceptiveness (4) practicing reflexivity. Thus, these four themes are used to illustrate how phronesis is conceptualised and practiced in the three research projects. Examples from the projects are given and quotes from the interviews are provided to illuminate the themes.

1. Acknowledging Embodiment

Acknowledging embodiment has to do with a deeper understanding or knowing *via* bodily interpretations leading to the right actions to take [25,49]. This requires a perceptiveness and a commitment to check interpretations and assumptions to learn and offers a means of discerning valuable information. Embodied practical wisdom involves the senses; vision, auditory, tactile etc. Even language embodies thought that gives us ways of being in the world and when language is embodied the understanding of others is facilitated [49]. Embodied capacities rely on a feeling of what is right which may diverge from the protocol or "techne" [25].

In the Shared Spaces project the possibilities of embodying different situations were planned by the researchers and presented to the workshop participants through various activities that were performed. An example of this was when the researchers wanted to discuss various perspectives about the nursing home environment. The participating nursing home staff were asked to try different furniture at the nursing home such as chairs, sofas, and other various places to sit when imagining the role of a close relative or friend to the older person living in the nursing home, or as the older person themselves.

> "The staff had to sit in the environment…and feel with their own body".

Discussions following the activity stimulated embodied capacities in the participants as the researchers' encouraged narratives regarding their experiences.

The researchers also designed an exercise that invited the workshop participants to be aware of different materials used in the environment by going out and touching, the stone, wood, plastic, metal, and other materials used in the nursing home environment. This activity stimulated and challenged the participants' senses in a way that was unique for them. Even though the researchers had planned the activities they appeared to be perceptive of when to employ the right activity, and what was needed as a pre-requisite to make the most impact. By incorporating activities with the staff that involved embodiment, the researchers facilitated a goal of creating a common language. In using their own sense of phronesis, the researchers could enable the staffs' capabilities of embodying a phenomenon to gain a deeper understanding in learning about the environment in the nursing home.

Another example of embodiment is taken from the Stay-in-Touch project, in which the researchers made conscious efforts to involve the participants senses *via* different activities. The researchers incorporated an exercise where the participants did a "process walk", walking two together and at the same time discussing their work process.

The researchers described another activity to stimulate the participants brainstorming about their own needs regarding social inclusion.

> "We had a large mind-map on the wall. All the participants had to get up from their chairs and move around….and write (on the mind-map)…It was a creative assignment, to warm-up."

This embodiment exercise was found to be important for the participants to reflect and orient themselves about these issues. This was then done in relation to what the participants felt the older persons had for needs and problems. The physical activities encouraged movement and engagement and helped in the formulation of the problems regarding loneliness for the older person.

2. Embracing Humility

Humility has been theoretically described as attributes of low self-focus, balanced and non-distorted awareness of one's strengths and limitations as well as lack of entitlement and self-superiority [50]. Humility is openness including being prepared to understand a situation from different perspectives (e.g. as a researcher, educator, or a person committed to social justice). This includes being aware of the temporality of one's knowledge, that what one knows at this time may be insufficient at another time, and that data becomes inadequate or outdated [25]. Being humble and open have been considered to be an "educational ideal" [51].

The researchers in the Shared Spaces project exhibited humility in their way of being towards the workshop participants. An example of this is when the researchers planned a study visit to another elder care facility together with the participating staff. The researchers considered using a photo-voice method where the workshop participants could take pictures while on the study visit to then reflect on what they documented *via* the photos at a later workshop. In their planning discussions they felt uncertain as to how this method would be perceived by the participants and felt that they needed the perspectives of the others, which is reflected in this quote.

> I'd say we were careful, and presented a suggestion, that there was this method to better capture……and what do you think about that? Or do you think it is uncomfortable to take pictures?

The researchers realised that the participants had valuable reflections in their comparisons of the facilities, and that it was important to acknowledge this in their mutual reflections. This exemplifies the researchers' values of "…*the possibilities to reflect with others, who may have another perspective, a different knowledge, and then to reassess ideas and knowledge*".

Another example from the project Stay-in-Touch reflected the researchers' aptitude of being committed to the cause yet at the same time being receptive to the construction of knowledge in the group, as in the following quote:

> "Interlaced, responsive learning…. where we have learned from the participants….and tried to summarize and re-package to present to them, so they can build upon this….and we listen and try to be in the process and summarise, and support again, to be able to continue to build…."

The statement reflects a temporality of the knowledge as changing over time in a process of construction of new knowledge.

3. Using Perceptiveness

Perceptiveness, according to Jenkins et al. (2019) has to do with having insights generated in response to the particularity of situations. Perceptiveness involves the ability to see the nuances in a situation as well as one's own involvement in it. This type of knowing reflects a sensitivity for many underlying meanings with situations and the examination of perspectives to understand, an intuition or knowing how to act, to react to certain cues and know how to respond, to what is right, even in an uncertain situation, where things are not known [25]. Perceptiveness has to do with the ability to realise what one needs to know or to discover to do what is right and good [51].

The researchers articulated examples regarding perceptiveness and their ways of knowing how to act depending on the situation. In the Stay-in-Touch project, the researchers spent time reflecting together regarding the outcomes after each workshop. However, this was put to the test when the researchers started working with two different groups in separate geographical locations, and where the second group did not understand the information developed by the first group. A re-appraisal of strategies was undertaken by the researchers, and a new plan was derived based on the researchers' prior experiences. The Stay-in-Touch study was built on the ideals of Participatory Action Research (PAR) [52,53], where the participants were involved in creating a product (in this case an educational model) and where the group was considered to own both the process and the product. It appeared that if PAR should work optimally, a certain level of perceptiveness regarding knowledge production was a necessity.

Another example comes from the Assist project, where the researchers abandoned the original design

of hands-on coaching, involving the staff and the older person, since the researchers discovered that the situation was different than originally planned. Since the foundation for Assist was a published study protocol, to follow the protocol and for the study's validity, a certain degree of rigidity was needed in the planned intervention. However, the researcher responsible for the sessions with the participants, demonstrated perceptiveness to the situation regarding the groups knowledge and ability when realising the original plan needed to be changed because the participants practiced with a greater degree of proficiency than was expected. The researcher, while being committed to the cause and objective of the study, changed the plans to meet the participants needs, without, at the same time, breaching the protocol.

4. Practicing Reflexivity

Reflexivity, which ranges from individual to social, has to do with the continual examining of "interpretive systems" outcomes of social constructions and translational procedures and "one's own assumptions and pre-understandings, recognising meaning as being created in social arenas in dialogue with others" [13]. Reflexivity becomes apparent when one experiences confrontations and needs to deliberate and then act, while continually examining assumptions, values, and beliefs in relation to power structures within organisations [25].

Following are examples of how learning was conceptualised and practiced in accordance with the description of reflexivity. Both in Shared Spaces and Stay-in-touch the researchers had ways to stimulate reflexivity during and after the workshops. This was done with the participants during the workshops and in the discussions between the researchers after the workshops.

The researchers became aware of possible relations of power in the Stay-in-Touch project. The researchers made a conscious effort to balance their roles and possible positions of power by how they placed themselves in the room. At times, they sat in positions that signalled that they were participants, instead of leaders in the group, while at other times the researchers consciously took positions of "being an expert" when relevant. They intentionally worked on giving support and being available without taking over. They designed activities where they could leave the room for a certain period, encouraging the participants to work on their own. In realising the expertise of the study participants, the researchers were cognisant of their ability to create a trusted space with a consideration of the power imbalance that could occur.

In the Shared Spaces project, the researchers also discussed the diverse levels of power that exist at a managerial level. One of the researchers described this in the following quote:

> "The participants/staff in the beginning were angry, they felt that both they as workers and the environment were unfairly treated …They were angry with the management. But with the process, we could expose different levels, areas of responsibility. This was liberating for the staff to realize, and they could direct their criticism and realize what they, themselves could do."

Yet another example from the same project regarded the negotiations for staff to participate in the workshops. The staff felt that to fully engage in the workshops they would have to be away from working with the older persons. The researchers anticipated it wasn't right for the older persons to receive reduced services when the staff were not present, and thus negotiated replacements with the management. This was important to create favourable conditions for the staff to participate at the workshops.

Discussion

This paper has focused on the concept of phronesis as a dimension of knowledge and was used to explore three different research projects by using the researchers' descriptions of plans, actions and learning activities from their projects. The findings illuminate examples of phronesis in the three research projects that had both qualitative and quantitative approaches. These examples are positioned in themes of contemporary phronesis, inspired by Jenkins [25], acknowledging embodiment, embracing humility, using perceptiveness, and practicing reflexivity. The findings of this study contribute to the unique recognition of phronesis within research.

To elucidate, this discussion starts with a description of the findings of the present study in relation to other studies, a presentation of phronesis in relation to similar concepts, and ends with arguments to uphold the stance of phronesis as an unrecognised and marginalised but important form of knowledge.

Discussion of the findings

The examples described in the findings incorporated different aspects of phronesis in four themes and can be coupled to research regarding learning and knowledge production. The first theme, acknowledging

embodiment, has to do with a sensing body [54] with a capacity for perception [49]. This is coupled to the educational philosophy of Dewey with emphasis placed in meaningful, real-world contexts [55] and has been exemplified in learning activities used in the Shared Spaces project such as experiencing different materials used in the environment.

The next theme refers to embracing humility. Plamondon (2021), in a recent commentary has argued for researchers' humility in their knowing, challenging objectivity, and expertise, in a greater collective drive to support health and well-being in society. Humility is seen as a way of knowing, putting the emphasis on learning as opposed to knowing [56]. Embracing humility is exemplified in the Stay-in-Touch project, through the researchers' stance regarding the complexities of knowing and learning from the participants.

The third theme, using perceptiveness, has to do with refined insight or thinking attentiveness while acting as a help to make sense of complex realities but needing the correct learning environment to focus on situations, facilitating development of this capacity [57]. An example of this can be seen in the Assist project, when the researcher, realising the expertise of the study participants, changed the activities to meet their needs.

The fourth theme is practicing reflexivity. Practicing reflexivity in research has to do with a process of self-awareness, exposing one's knowledge claims to scrutiny but reflexivity is seldom documented within practice in health care [9]. Examples of practicing reflexivity were seen in the researchers' engagement with the activities presented in the workshops in the Shared Spaces and Stay-in-Touch projects and their awareness of possible power structures. With these categories of phronesis, the authors want to exemplify the researchers' stances, recognising the importance of learning while performing research.

Furthermore, each of the three projects were situated in the community giving access to settings and situations that facilitated activities promoting teaching and learning and where the recognition of phronesis could be realised. Being in the community requires a back-and-forth learning between researchers and the people in the community [29] and could thus stimulate phronesis being recognised. Besides the situatedness of the research projects, the design of research activities could further stimulate the recognition of phronesis.

The concept of phronesis related to other concepts

Other contemporary concepts are akin to the meaning of phronesis, one of them being *subjugated knowledge*. Subjugated knowledge was coined by Foucault (1980) and is described as 'a whole set of knowledge that have been disqualified as inadequate to their task or insufficiently elaborated" [58]. This concept is closely related with the notion of power and the hierarchies of knowledge, positioning some types of knowledge (or the creation of knowledge) lower in the hierarchy, and even disqualifying others. A similar notion was developed by Bourdieu (1998), *practical sense*, referring to the perception of a given situation in a specific context, anticipating what is going to happen in an "intuitive" way. These pre-perceptive anticipations are a sort of practical induction based on previous experiences, often disqualified in formal contexts as a valid mode of knowledge. According to Phillips (2011) collaboration in research could be operationalised as an instrument of dominance, maintaining the power of dominant groups and elitist knowledges over subordinate, marginalised groups, and subjugated knowledges [59]. Positioning phronesis juxtaposed other concepts and in relation to the three projects may facilitate a broader understanding of the relevancy of recognising phronesis.

Recognising phronesis in research

Like other disciplines such as social science and nursing [10,18], researchers within occupational therapy and science may not be sufficiently informed nor consider phronesis as a dimension of knowledge. Not considering phronesis may contribute to a deficiency regarding learning from professional judgements within research. Despite the clear connection research has to *episteme,* research is also connected to the concept of techne. Even though techne has to do with performing an action, that action has more to do with *making* [10] or rote learning, as in following instructions in a manual without having to reflect. One could surmise that techne within research is to follow a plan, like a study protocol, often found in quantitative research. However, *making* as opposed to *doing* are two different things [10]. *Doing* requires praxis and is thus connected with phronesis, involving the deliberation of one's actions and the ethical and social implications, that one takes the right steps to the right goal. Only following instructions as espoused in techne, which could technically happen when following a research plan, does not recognise phronesis and risks the marginalisation of this important form of knowledge. Despite this, the findings of the present study recognised phronesis even in the Assist study, a

quantitative study, that followed a study protocol. However, the actions in the study constituting phronesis may be somewhat clandestine and contingent on the researchers' foundational values of e.g. humility, reflexivity, and perceptiveness. The authors of this paper would like to point out the need for a greater recognition of phronesis within all types of studies.

Two of the projects, Shared Spaces and Stay-in-Touch were based in a qualitative approach, where participatory research methodologies and co-creation processes were used. Even studies that focus on actively involving research participants could be impacted by not recognising phronesis. Research participants (i.e. the staff involved in these two studies) empowerment in realising the worth of their perspectives could be thwarted by their realisation that their contributions are not worth as much as "hard evidence" from clinical trials. If a hierarchal stance, which could be understood as a colonialist view of knowledge is perpetuated, premiering knowledge without recognising phronesis will be realised by researchers and may inadvertently impact those persons that participate in our research. This may send the message that certain knowledge is more valuable, and knowledge gained from phronesis is neglected or made invisible.

Hierarchies are present in episteme concerning what constitutes evidence and what is considered "best evidence". Certain types of evidence coming from technical/rational or deductive knowledge paradigms are granted a higher status than evidence coming from interpretive, experiential, or inductive knowledge paradigms [13]. This may perpetuate an intellectual superiority of research conducted in colonial fashions [60], which could be understood as the dominance of certain forms of knowledge. The promotion of evidence-based practice within occupational therapy [9,14] has helped support this hierarchy but has also triggered critique [9,13]. To reflect this perspective of the domination of certain types of knowledge, we have opted to use the term "colonization of an area of knowledge". Occupational therapists and scientists should consider reflecting on research's a priori superiority [9,10]. Evidence that values a form of knowledge such as phronesis on an equal basis with the other forms of knowledge could potentially help bridge the gap between research and practice [61].

Praxis, or action derived from the epistemology of phronesis, has to do with wise and prudent judgements [14]. Like practitioners and educators, researchers must also develop skills in praxis [13] and thus in phronesis. This is aligned with epistemic reflexivity, which refers to a process of self-reflection and critical examination of one's own knowledge, beliefs, and assumptions [7]. This paper responds to Kinsella and Whiteford's (2009) call to embrace diverse ways of knowing and apply phronesis to research practice [13]. The authors argue that recognising, respecting, and learning from phronesis, as well as understanding it in relation to other forms of knowledge, can bring new dimensions to the occupation of research, facilitate a continuous exploration of and reflection over values, and provide a source of learning. By doing so, the discipline will be able to count phronesis as a valuable form of knowledge.

Possible questions

There are several possible questions to pose regarding phronesis without necessarily having concise answers. During an interview, a researcher asked whether research funders prioritise researchers' learning over producing research results. This may be a hypothetical question and somewhat hard to answer, however the question may reflect the situated position of researchers and the challenges they face in introducing actions recognising phronesis in research. However, to advance the unexposed knowledge of the researchers as well as the persons that are involved in our research then "*….an intentional commitment to approaching research from a position of learning rather than knowing*" (page 86) [56] may be the way forward. This in turn could lead to positive changes for citizens in our communities.

Another legitimate question may be "What is the value in recognising phronesis?" However, we may need to re-frame the question and ask, "What do we miss if we do not recognise phronesis?" The response to this question could be given from different perspectives. As researchers, by acknowledging phronesis, we may facilitate reflexive practices and help ensure important decision-making skills when conducting research [29]. We might also miss a unique way of knowing from the participants of our research projects, imposing a dominate paradigm, not recognising phronesis and undermining participants' expertise. This stance could destabilise participatory research approaches. Lastly, to reiterate our stance presented in the beginning of this discussion, by not recognising phronesis, the discipline perpetuates a dominance of knowledge from episteme and consequently marginalises knowledge gleaned from phronesis.

Methodological considerations

The study participants were involved in member checks, discussing other possible interpretations of the examples. Additionally, examples of phronesis are supported by

citations from the interviews in the findings. Both measures aimed to ensure trustworthiness of the findings.

The analysis used the contemporary views of phronesis presented by Jenkins et al. (2019) as a matrix and the findings constitute examples inspired by these concepts. The authors emphasise that the results analysed in this respect illustrate phronesis but do not give a complete picture of the concept since important traditional core aspects were not recognised in the analysis. To facilitate understanding and for the sake of relevance and manageability, only the contemporary dimensions were chosen. Since this study may be one of the first studies to analyse aspects of phronesis in research within occupational therapy or science, the authors welcome future studies and discussions using the complete framework.

Conclusion

Our actions or doing are central for the study of occupation and give credence to the further study of phronesis. A broader epistemological stance regarding ways of knowing addressing phronesis may contribute new knowledge to occupational therapy and science. The examples of the research activities used in these studies and their relation to phronesis provides a unique contribution to our knowledge base.

Research based practice as well as evidence-based research appears to have dominated ways of thinking and doing, making certain types of knowledge privileged, marginalising the type of knowledge presented by phronesis. Moreover, phronesis is not given the status of a legitimate dimension of knowledge and therefore cannot contribute as a dimension of evidence. Because of this, the value of phronesis has not been recognised to the extent needed within the discipline. By recognising the knowledge contributed by phronesis, researchers can help to reverse a hierarchy of epistemological values. To recognise phronesis in one's own work, a reflexive approach may be the way forward, as exemplified in this paper. Further, this paper hopes to act by initiating discussions within the discipline's research community and to inform future discourses. The authors of this paper would like to encourage other research groups to share their well-grounded insights into their own work, in hopes to spread discourses regarding epistemological and methodological choices, giving us the opportunity to learn from each other and to recognise the type of knowledge represented by phronesis.

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ORCID

Aileen Bergström http://orcid.org/0000-0002-7091-7514
Margarita Mondaca http://orcid.org/0000-0003-1575-2582
Ingeborg Nilsson http://orcid.org/0000-0002-8265-5769
Susanne Guidetti http://orcid.org/0000-0001-6878-6394
Lena Rosenberge http://orcid.org/0000-0003-1727-369X

References

[1] Wilcock AA. Occupational science: bridging occupation and health. Can J Occup Ther. 2005;72(1):1–15. doi:10.1177/000841740507200105.
[2] Njelesani J, Tang A, Jonsson H, et al. Articulating an occupational perspective. Journal of Occupational Science. 2012;21(2):226–235. doi:10.1080/14427591.2012.717500.
[3] Lauvås P, Handal G. Handledning och praktisk yrkesteori. 3rd ed. Lund: Studentlitteratur; 2015.
[4] Law M. Learning by doing: creating knowledge for occupational therapy. WFOT Bulletin. 2010;62(1):12–18. doi:10.1179/otb.2010.62.1.004.
[5] Brekland R, Flinn N. Therapy as learning, in occupational therapy: performance, participation, and well-being. Thorofare, NJ: Slack Incoporated; 2005. p. 420–448.
[6] Brinkmann S. Philosophies of qualitative research. Understanding qualitative research. New York (NY): Oxford University Press; 2018.
[7] Kinsella EA. Knowledge paradigms in occupational science: pluralistic perspectives. In: Whiteford GE, Hocking C, editors. Occupational Science: Society, Inclusion, Participation. 1st ed. Chichester (UK): Blackwell Publishing; 2012. p. 69–84.
[8] Karlsson G, Tham K. Correlating facts or interpreting meaning: two different epistemological projects within

medical research. Scand J Occup Ther. 2006;13(2):68–75. doi:10.1080/11038120600772965.

[9] Blair SEE, Robertson LJ. Hard complexities – soft complexities: an exploration of philosophical positions related to evidence in occupational therapy. Bri J Occup Ther. 2005;68(6):269–276. doi:10.1177/030802260506800605.

[10] Flaming D. Using phronesis instead of 'research-based practice' as the guiding light for nursing practice. Nursing Philosophy. 2001;2(3):251–258. doi:10.1046/j.1466-769X.2000.00066.x.

[11] Christ TW. Scientific-Based research and randomized controlled trials, the "gold" standard? Alternative paradigms and mixed methodologies. Qualitative Inquiry. 2014;20(1):72–80. doi:10.1177/1077800413508523.

[12] Borell L, Nygård L, Asaba E, et al. Qualitative approaches in occupational therapy research. Scand J Occup Ther. 2014;21(Suppl 1):80–88. doi:10.3109/11038128.2014.95291.

[13] Kinsella EA, Whiteford GE. Knowledge generation and utilisation in occupational therapy: towards epistemic reflexivity. Aust Occup Ther J. 2009;56(4):249–258. doi:10.1111/j.1440-1630.2007.00726.x.

[14] Wilding C, Whiteford G. *From practice to praxis: reconnecting moral vision with philosophical underpinnings*. The British Journal of Occupational Therapy. 2009;72(10):434–441. doi:10.1177/030802260907201004.

[15] Aristotle. Aristotle: nicomachean ethics. In: Crisp R, editor. Cambridge, United Kingdom: Cambridge University Press; 2014.

[16] Bornemark J. Horisonten finns alltid kvar – om det bortglmda omdömet. Stockholm, Sweden: Volante; 2020.

[17] Massingham P. An aristotelian interpretation of practical wisdom: the case of retirees. Palgrave Commun. 2019;5(1):123. doi:10.1057/s41599-019-0331-9.

[18] Lukka K, Suomala P. Relevant interventionist research: balancing three intellectual virtues. Accounting and Business Research. 2014;44(2):204–220. doi:10.1080/00014788.2013.872554.

[19] Kinsella EA, Pitman A. Engaging phronesis in professional practice and education, in phronesis as professional knowledge: practical wisdom in the professions. In: Kinsella EA, Pitman A, editors. Sense: Rotterdam; 2012. p. 1–11.

[20] Davidoff F. Systems of service: reflections on the moral foundations of improvement. BMJ Qual Saf. 2011;20(Suppl_1):i5–10. doi:10.1136/bmjqs.2010.046177.

[21] Kinsella EA. The art of reflective practice in health and social care: reflections on the legacy of donald schön. Reflective Practice. 2010;11(4):565–575. doi:10.1080/14623943.2010.506260.

[22] Leathard HL, Cook MJ. Learning for holistic care: addressing practical wisdom (phronesis) and the spiritual sphere. J Adv Nurs. 2009;65(6):1318–1327. doi:10.1111/j.1365-2648.2008.04949.x.

[23] Breier M, Ralphs A. In search of phronesis: recognizing practical wisdom in the recognition (assessment) of prior learning. Br J Sociol Edu. 2009;30(4):479–493. doi:10.1080/01425690902954646.

[24] Kinsella EA, Pitman A. Phronesis as professional knowledge: implications for education and practice. In: Kinsella EA, Pitman A, editors. Phronesis as professional knowledge: practical wisdom in the professions. Rotterdam (The Netherlands): Sense Publishers; 2012. p. 163–172.

[25] Jenkins K, Kinsella EA, DeLuca S. Perspectives on phronesis in professional nursing practice. Nurs Philos. 2019;20(1):e12231. doi:10.1111/nup.12231.

[26] Teghe D. *Using applied phronesis to explore productivism in elderly care policy*. Qualitative Research Journal. 2012;12(2):173–182. doi:10.1108/14439881211248329.

[27] Bergstrom A, et al. The jigsaw puzzle of activities for mastering daily life; service recipients and professionals' perceptions of gains and changes attributed to reablement-A qualitative meta-synthesis. Scand J Occup Ther. 2022;30(5):604–615. doi: 10.1080/11038128.2022.2081603.

[28] McCorquodale L, Kinsella EA. Critical reflexivity in client-centred therapeutic relationships. Scand J Occup Ther. 2015;22(4):311–317. doi:10.3109/11038128.2015.1018319.

[29] Greeff M, Rennie S. Phronesis:beyond the research ethics committee—A crucial decision-making skill for health researchers During community research. J Empir Res Hum Res Ethics. 2016;11(2):170–179. doi:10.1177/1556264616650070.

[30] Kronenberg F, Kathard H, Laliberte Rudman D, et al. Can post-apartheid South Africa be enabled to humanise and heal itself? S Afr j Occup Ther. 2015;45(1):20–27. doi:10.17159/2310-3833/2015/v45no1a4.

[31] Braun V, et al. Thematic analysis. In: Liamputtong P, editor. Handbook of research methods in health social sciences. Singapore: Springer; 2019, p. 843–860.

[32] Timmermans S, Tavory I. Theory construction in qualitative research. Sociological Theory. 2012;30(3):167–186. doi:10.1177/0735275112457914.

[33] Assander S, Bergström A, Eriksson C, et al. ASSIST: a reablement program for older adults in Sweden – a feasibility study. BMC Geriatr. 2022;22(1):618. doi:10.1186/s12877-022-03185-2.

[34] Bergström A, Borell L, Meijer S, et al. Evaluation of an intervention addressing a reablement programme for older, community-dwelling persons in Sweden (ASSIST 1.0): a protocol for a feasibility study. BMJ Open. 2019;9(7):e025870. doi:10.1136/bmjopen-2018-025870.

[35] Lave J, Wenger E. Situated learning legitimate peripheral participation. Cambridge CB2 2RU, UK: Cambridge University Press; 1998.

[36] Reason P, Bradbury H. The SAGE handbook of action research. 2nd ed. Los Angeles: SAGE; 2008.

[37] Schön DA. The reflective practitioner: how professionals think in action. Aldershot: Arena; 1995.

[38] Salama AM. Spatial design education: new directions for pedagogy in architecture and beyond. Surrey/London (UK): Ashgate Publishing, Ltd; 2015.

[39] Freire P. Pedagogy of the oppressed. New York: Continuum; 1993.
[40] Lundgren AS, Atler K, Nilsson I. Negotiating occupation: how older people make sense of the concept of occupation. J Occup Sci. 2020;27(2):236–250. doi:10.1080/14427591.2020.1731845.
[41] Nilsson I, Luborsky M, Rosenberg L, et al. Perpetuating harms from isolation among older adults with cognitive impairment: observed discrepancies in homecare service documentation, assessment and approval practices. BMC Health Serv Res. 2018;18(1):800–800. doi:10.1186/s12913-018-3616-6.
[42] Nilsson I, Häggström Lundevaller E, Fisher AG. The reationship between engagement in leisure activities and self-Rated health in later life. Activities, Adaptation, & Aging. 2017;41(2):175–190. doi:10.1080/01924788.2017.1306384.
[43] Cole MB. Group dynamics in occupational therapy: the theoretical basis and practice application of group intervention. 5th ed. Thorofare, NJ.: SLACK incorporated; 2017.
[44] Finlay L. Groupwork in occupational therapy. Cheltenham/UK: Nelson Thomes Ltd; 1997.
[45] Lauttamäki, V. P. Practical guide for facilitating a futures workshop. Turku (Finland): Finlands Futures Research Center, Turku School of Economics, University of Turku; 2014.
[46] Apel H. The futures workshop. Deutsches Institut für Erwachsenenbildung; 2004. http://www.die-bonn.de/esprid/dokumente/doc-2004/apel04_02.pdf.
[47] Nordin T, Coe AB, Nilsson I. Teaming up to traverse loneliness: a co-creative journey toward a home care work model for supporting social participation among older adults. BMC Health Serv Res. 2022;22(1):1159. doi:10.1186/s12913-022-08524-y.
[48] McIntyre, A. Participatory action research. Los Angeles, Calif; 2008.
[49] Benner P. The roles of embodiment, emotion and lifeworld for rationality and agency in nursing practice. Nursing Philosophy. 2000;1(1):5–19. doi:10.1046/j.1466-769x.2000.00014.x.
[50] Kruse E, Chancellor J, Lyubomirsky S. State humility: measurement, conceptual validation, and intrapersonal processes. Self and Identity. 2017;16(4):399–438. doi:10.1080/15298868.2016.1267662.
[51] Sellman D. Open-mindedness: a virtue for professional practice. Nurs Philos. 2003;4(1):17–24. doi:10.1046/j.1466-769x.2003.00113.x.
[52] Kidd SA, Kral MJ. Practicing participatory action research. J Couns Psychol. 2005;52(2):187–195. doi:10.1037/0022-0167.52.2.187.
[53] Socialstyrelsen. *Statistik om socialtjänstinsatser till äldre och personer med funktionsnedsättning efter regiform 2020*. 2021. Available from: https://www.socialstyrelsen.se/globalassets/sharepoint-dokument/artikelkatalog/statistik/2021-3-7266.pdf.
[54] Merleau-Ponty M. The phenomenology of perception. New York, NY: Routledge; 2002.
[55] Townsend E, Hocking C. Relaunching teaching occupation. J Occup Sci. 2019;26(1):140–144. doi:10.1080/14427591.2018.1541698.
[56] Plamondon KM. Reimagining researchers in health research comment on "experience of health leadership in partnering with University-Based researchers in Canada: a call to 'Re-Imagine' research". Int J Health Policy Manag. 2021;10(2):86–89. doi:10.15171/ijhpm.2020.05.
[57] Schei E, Fuks A, Boudreau JD. *Reflection in medical education: intellectual humility, discovery, and know-how*. Med Health Care Philos. 2018;22(2):167–178. doi:10.1007/s11019-018-9878-2.
[58] Foucault M. Power/knowledge: Selected interviews & other writings 1972–1977. New York: Pantheon; 1980.
[59] Phillips L. The promise of dialogue: the dialogic turn in the production and communication of knowledge. Amsterdam: John Benjamins Publishing; 2011.
[60] Gibson C, Farias L. Deepening our collective understanding of decolonising education: a commentary on simaan's learning activity based on a global South community. Journal of Occupational Science. 2020;27(3):445–448. doi:10.1080/14427591.2020.1790408.
[61] Vaughan-Graham J, Cott C. Phronesis: practical wisdom the role of professional practice knowledge in the clinical reasoning of bobath instructors. J Eval Clin Pract. 2017;23(5):935–948. doi:10.1111/jep.12641.