The Constructionist Model of Informed and Reasoned Action (COMOIRA)

By

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Introduction

This chapter will:

1. introduce and describe the structure and basic processes underpinning the Constructionist Model of Informed and Reasoned Action (COMOIRA);
2. explain some background and contextual issues relating to the construction of COMOIRA;
3. summarise the core principles, concepts and theories which underpin all aspects of COMOIRA and describe the main functions, processes and practice issues relating to its core;
4. describe the main functions, processes and practice issues relating to the eight key decision points;
5. provide a brief overview of the variety of ways in which COMOIRA has been used; and
6. explore some of the perceived strengths, potential benefits, potential weaknesses and challenges of COMOIRA for trainees, educational psychologists (EPs) working in the field, training programmes for EPs and other practitioners who choose to use the model in practice or in training.

Within the context of this relatively short chapter, it will not be possible to cover in depth all of the issues listed above or to provide a comprehensive ‘user guide’. Readers who are interested in a more detailed exploration of COMOIRA and the issues associated with it might wish to read this chapter in conjunction with three other publications (Gameson et al. 2003; Gameson et al. 2005; Rhydderch and Gameson in...
preparation). Those publications discuss, in more depth, some conceptual and theoretical issues underpinning the model; some process and practice issues relating to the model; and some illustrations of the model in use.

1. **The Structure and Basic Processes Underpinning COMOIRA**

Figure 1 - Visual Representation of COMOIRA

Figure 1 shows the main structure of COMOIRA, comprising a ‘core’ set of principles, concepts and theories and eight key decision points, each of which has a specific set of functions that the authors consider to be helpful when working with people to promote change. The core and all key decision points are supported by a series of reflective and
reflexive questions (Gameson et al. 2003), which are designed to help practitioners think carefully about complex process issues associated with change. Those questions encourage practitioners to be reflective and reflexive by using psychology explicitly to ‘make sense of’ and guide:

a. their own behaviours as well as the behaviours of service users and other practitioners involved in the process;

b. their own practice; and

c. the process of change itself.

The arrows in Figure 1 indicate that movement between key decision points is always through the core and this helps to reinforce the idea that the core elements underpin all aspects of the process. However, the order in which key decision points are used is essentially flexible because the sequence can: start anywhere; follow any path; include any number of key decision points; and/or repeat key decision points as often as required. Flexibility is essential because it enables practitioners and service users to choose how they use the model in relation to a potentially infinite diversity of issues and needs within their local, specific, unique and constantly changing circumstances. The flexibility of COMOIRA also ensures that the model is suitable for work across different contexts, at different levels and with individuals, groups and/or organisations.

It follows that the number and sequence of key decision points which practitioners and service users choose to use will vary in relation to their specific needs and circumstances. It also follows that there are no prescribed or absolute right/wrong, good/bad or better/worse ways to use COMOIRA. The relative extent to which the model is considered to be helpful and effective on any occasion will depend on relevant
people’s constructions of how far it helped them make sense of and manage the chosen process of change in relation to their particular needs and circumstances.

At one level, the model is intended to provide individuals, groups and organisations with a coherent structure and a clear set of interrelated functions and processes to guide what people think about ‘issues’ and what they choose to do to promote change(s). However, COMOIRA is more than a set of procedures, signposts or decision points and a major function of the ‘core’ is to ensure that practitioners and service users remain alert to the many different theories, as well as the rationale and/or ‘evidence’, underpinning the process at any given time. In addition, the model promotes iterative or recursive processes similar to those underpinning action research (Forward 1989) but COMOIRA is more flexible because its processes are not necessarily linear or directional, although they can be, if required. Furthermore, COMOIRA focuses explicitly on the process and language of change and, within this context, it attempts to integrate concepts such as ‘identification’ and ‘treatment’ (Wedell 1970); ‘assessment’ and ‘intervention’ (DECP 1998 and 1999); and ‘problem definition’, ‘problem clarification’ and ‘solutions’ (Miller et al. 1992), all of which are reframed and reconstructed within COMOIRA as aspects of the change process. This idea of focusing directly on the process and language of change is consistent with approaches developed by Burden (1997), Carr (2004), O’Hanlon (2006) and Prochaska (1999, cited in Carr 2004). It makes sense to focus directly and explicitly on the language and concepts of change because there are likely to be reciprocal influences between the ways in which practitioners and service users choose to construct and talk about issues and what they assume and/or expect should be done about those issues.
It is helpful to think of COMOIRA as a heuristic rather than as an algorithmic set of procedures for solving problems. The term ‘heuristic’ is associated with encouraging and enabling people to discover solutions to problems for themselves. This is consistent with the idea of using and adapting a flexible, iterative process involving trial and error rather than a set of rules. The Oxford Reference Online defines the term ‘heuristic’ as:

A rough-and-ready procedure or rule of thumb for making a decision, forming a judgement, or solving a problem without the application of an algorithm or an exhaustive comparison of all available options, and hence without any guarantee of obtaining a correct or optimal result. (Oxford Reference Online 2007)

By contrast, an algorithm usually involves a sequential, routine, prescriptive and often repetitive set of instructions or basic operations, sometimes with branching pathways and a finite number of steps for solving problems (Oxford Reference Online 2007). Unlike algorithms, heuristics cannot have proven procedures that promise success because they are flexible, open-ended and responsive to unpredictable and changing situations. Heuristic approaches are, therefore, likely to be more helpful than prescribed algorithmic procedures when working with service users in their local, specific, unique and unpredictable social contexts and psychological territories (Gillham 1999).

2. **Background and Contextual Issues Relating to the Construction of COMOIRA**

The foundations for COMOIRA were laid in the late 1990s within the context of the MSc Professional Training Programme for educational psychologists at Cardiff University’s School of Psychology. At that time, members of the programme team were becoming increasingly interested in encouraging trainees to understand and to explore
the complex and important conceptual, theoretical and process issues associated with professional practice, particularly those associated with promoting and managing change. Until that time, trainees at Cardiff (and previously at Swansea University’s Department of Education) were expected to use ‘The Iterative Model of Fieldwork Enquiry’ to inform their fieldwork. That model had been adopted as a consequence of the British Psychological Society’s (BPS’s) expectation that training programmes for EPs should encourage trainees to use sequential problem-solving models and systematic, hypothesis testing approaches to inform and guide their professional practice. The programme team also expected trainees to write process accounts on selected pieces of work which demonstrated that they had:

a. engaged in on going, in depth work over time;

b. used the sequential stages of the model to inform the process in which they had engaged;

c. explored relevant problems and facilitated appropriate solutions;

d. monitored and evaluated outcomes;

e. applied psychological and other relevant theories to the work they had done;

f. reflected on the process and their role within it;

g. considered the critical/salient aspects of learning which had emerged for them; and

h. identified what they might have done differently with hindsight.

The Iterative Model of Fieldwork Enquiry was fundamentally a sequential, problem-solving model and was influenced by the approach to training educational psychologists at Exeter University (Phillips 1987) and also by Herbert (1987) and other problem-solving approaches that emerged during the late 1980s and early 1990s (Miller et al. 1992).
Also at that time, the programme team at Cardiff was interested in numerous tensions relating to the ways in which trainees seemed to be constructing their own roles and needs, the roles and needs of EPs in local authority settings, the role of the profession, and the role of the training programme. These gave rise to the following observations.

a. Trainees often seemed to experience a mismatch between what they were expected to do in order to meet the requirements of the university based training programme and what they thought their fieldwork supervisors expected of them in their placement locations.

b. As the amount of time spent on fieldwork placements increased, some trainees seemed to develop the view that university based expectations and requirements appeared to become less relevant to their needs within the context of their fieldwork placements; and increasingly irrelevant to the every day work of EPs in the ‘real world’.

c. Some trainees appeared to expect the training programme to provide them with a collection of discrete practical techniques that they could use in the field. During their fieldwork activities they frequently used specific approaches or interventions (e.g. Social Skills Training, Anger Management or Circle Time) that were predetermined at the start of the process without careful exploration of needs and contextual issues.

d. On the whole, fieldwork supervisors seemed keen to enable trainees to engage in on going, in depth work that focused on the explicit application of psychology to promote, monitor and evaluate change. Many fieldwork supervisors reported that they wanted to work in such ways themselves but often felt constrained by
established procedures (e.g., the statutory assessment process) and the expectations of their service uses (e.g., local authorities, schools and parents). Consequently, they generally engaged ‘reluctantly’ in short term, expedient work, which appeared to be driven by pragmatic and/or administrative processes and which seemed to have little to do with the explicit application of psychology or with engaging service users in change. However, this work was often valued by local authorities, schools and parents and was partly maintained in some services by evaluation criteria that emphasised the need for EPs to cover a large number of ‘cases’. Some fieldwork supervisors considered that such approaches did little to reinforce the unique contributions that EPs could make as applied psychologists because much of that work could probably be carried out by other professionals (e.g. advisory teachers, classroom assistants and administrators).

e. The Iterative Model of Fieldwork Enquiry and other problem-solving models seemed to be limited by their linear, algorithmic, sequential ‘procedures’, which did not promote the explicit application of psychology and were not themselves explicitly informed by psychological theories.

f. During recent decades the practice of EPs in local authority contexts appears to have been dominated by fashionable, sometimes polarised or competing approaches and techniques. For example, during the 1980s behavioural psychology seemed to be most popular as a means of understanding and managing behaviour. More recently, numerous other specific trends have emerged: for example, Models of Consultation (Wagner 2000; Watkins 2000); Solution Focused/Oriented Approaches (Lines 2002; Rhodes and Ajmal 1995); Circle Time (Lown 2002); Circle of Friends
In addition, the programme team at Cardiff came to believe that encouraging trainees to use COMOIRA would help them address some of the tensions outlined above, and would prepare them for entry into the profession in ways which would: challenge the status quo; promote innovative and creative approaches to professional practice; and consolidate and expand the unique role of the EP as an applied psychologist.

3. The Core of COMOIRA: theories, functions, processes and practice issues

Social Constructionism, Systemic Thinking, Enabling Dialogue and Informed Reasoned Action are placed at the core of COMOIRA because they underpin and influence all aspects of the process, including what and how practitioners and service users think about issues and what they choose to do at each of the key decision points. It is extremely unlikely that practitioners can engage in any activities which are not influenced by one or more of the core principles, concepts and theories. These are fundamental to COMOIRA and, as such, cannot be avoided. Although Gameson et al. (2003 and 2005) have already addressed these issues in more detail, it is appropriate to consider some selected aspects here as well.

Social Constructionism is an essential feature of COMOIRA because it has major implications for all aspects of professional practice. It holds that all knowledge and views of the world are socially constructed through language within cultural and historical contexts (Burr 2003). This ‘view of events’ asserts that it is simply not possible to identify objective facts, truths and realities because all knowledge and views
of the world are subjective and phenomenological. “All knowledge is derived from looking at the world from some perspective or other, and is in the service of some interests rather than others.” (Burr 2003, p.6). It follows that individuals, groups, organisations and societies are likely to construct many different, sometimes conflicting, but equally convincing ‘truths’ and ‘realities’, all of which might be accepted as appropriate, relevant and valid within their own cultural contexts. However, some might acquire a privileged status and come to be accepted as the best, correct or most appropriate versions of events, sometimes to the extent that they devalue others. For example, positivist, empiricist discourses have tended to dominate constructions of evidence-based practice (Nieboer Moss and Partridge 2000).

Social constructionism emphasises that different theoretical approaches simply provide different frames of reference or conceptual frameworks that lead to different constructions of practice, all of which are supported and validated by their own ‘persuasive’ or ‘convincing’ discourses. Consequently, all knowledge, evidence and models of practice (including COMOIRA), no matter how convincing, rigorous and scientific they appear, are socially constructed and supported by powerful discourses and rhetorical devices (Gergen 1999). These ideas clearly have significant implications for the ‘privileged’ concept of ‘evidence-based’ practice that espouses universal and generalisable facts, truths and realities. They imply that outcomes should be carefully monitored and rigorously evaluated in relation to the local, specific, unique and changing contexts in which practitioners and service users work together to facilitate change(s). In order to avoid the danger of charlatanism, practitioners obviously need to substantiate and verify their approaches to professional practice. However, the concept
of ‘evidence’ clearly needs to be treated with considerable caution. It might even be helpful to reconstruct ‘evidence-based’ practice as ‘informed and reasoned’ practice, given that the latter seems to be a more inclusive concept.

Some selected implications for professional practice are considered below.

a. Different practitioners and service users are likely to construct their own ‘convincing’ and ‘powerful’ versions of events, which they might consider to be more accurate and more appropriate than those of other people.

b. When practitioners and/or service users convince themselves that their versions of events are the most appropriate, they are likely to find it difficult to accept that other people might have constructed different truths and realities which, to them, are equally powerful and convincing.

c. The powerful and convincing truths and realities which practitioners and service users construct will have implications for the process of change and might become strong obstacles to change.

d. Social constructionism implies that practitioners need to focus on engaging with individuals, groups and organisations in ways that help all relevant people to accept, validate, explore and make sense of one another’s unique constructions of events.

e. Change issues, ways of working together at the different decision points and the effectiveness or relative value of outcomes will all need to be constructed jointly between practitioners and service users within their unique, phenomenological contexts.
f. ‘Evidence’ might mean different things within different discourses or constructions and practitioners and service users will need to work closely together to construct and jointly agree what worked for them, at that time and in that context.

g. The extent of knowledge and the nature of evidence used to promote certain approaches (for example, cognitive behaviour therapy) are what happen to be available at any given time. Both are subject to a dynamic process of change.

**Systemic Thinking** is informed by *Systems Theory* and is included within the core of COMOIRA for the following main reasons.

a. People are themselves complex organisms/systems who live and work within complex systemic contexts (e.g., families, schools and psychology services).

b. Systemic thinking asserts that it is unhelpful and artificial to adopt reductionist approaches because there are unavoidable, complex and reciprocal interactions between systems and subsystems relating to individuals, groups and organisations.

c. It is helpful to maintain a holistic frame of reference and a systemic approach that takes account of complex systems and subsystems, namely: intrapersonal (e.g., people’s theories, beliefs, mindsets and psychobiological factors); interpersonal (e.g., roles, positions, relationships and methods of communication); and/or contextual/organisational (e.g., policies, procedures, methods of service delivery, politics and codes of conduct).

d. There are circular patterns of relationships or influences between different aspects of systems and subsystems. For example, the way an EP decides to respond to a request for help from a service user is likely to influence how that service user behaves and vice versa. Practitioners need to remain alert to these interactionist
principles in order to monitor and manage the unavoidable impact that practitioners have on others and also to avoid deluding themselves into believing that they can be completely ‘objective’ or ‘detached’.

e. Systemic approaches and systemic thinking should not be confused with approaches that focus only on systematic work with groups and organisations. Systemic approaches need to be informed and guided by ideas and key concepts from systems theory (Frederickson 1990a). These might include, for example: hard and soft systems; open and closed systems; boundaries and levels of engagement; punctuation or the ways in which people choose to frame issues and information; equifinality or the idea of getting to the same point by different routes; circular relationships and feedback loops; homeostasis or equilibrium; and symptomatic and fundamental solutions. Further information about these and other aspects of systems theory are described by Campbell Coldicott and Kinsella (1994) and Dowling and Osborne (1994).

f. Systemic thinking aims to promote lasting strategic change(s) as opposed to reactive, symptomatic change(s) or ‘quick fixes’.

**Enabling Dialogue** is a term proposed by Gameson *et al.* (2003). It is included as an important core concept because all professional practice takes place within interactive social contexts and the impact of professional practice depends to a large extent on the nature and quality of relationships between key people. The fundamental importance of this idea is illustrated by the following assumptions/assertions.
a. The nature and quality of outcomes will be influenced by the nature and quality of relationships between the practitioner and the service user(s) (Green 1996 and 2006).

b. Positive partnerships and collaborative or joint working will have a beneficial influence on the process and the outcomes.

c. It is important to ensure that all service users give informed consent to engage voluntarily in positive partnerships and, in order to do so, they will need to know as much as possible about other relevant people’s roles and the process to be followed.

d. Positive outcomes and long term changes are more likely to occur when service users feel engaged, empowered and enabled to make sense of and to manage their own change issues.

e. Positive partnerships, engagement and empowerment aim to promote self efficacy, confidence and independence, as opposed to dependence.

f. It is important for practitioners and service users to maintain appropriate relationships and boundaries so that each can decide what to take from the collaborative work and can retain full ownership of what to do next.

These ideas are not original and many practitioners will recognise the influence of Glasser (1999), Miller and Rollnick (2002) and Rogers (1957), all of whom emphasise the central importance of ‘people factors’, especially people’s perceptions of the nature and quality of relationships between practitioners and service users. However, few models or frameworks for practice seem to make explicit reference to these ‘essential’ factors.
Informed and Reasoned Action is included as an essential aspect of the core for the following reasons.

a. All practice based decisions are influenced by theoretical and philosophical assumptions or perspectives, even when these are not made explicit and may not even be consciously considered by the practitioner(s) making the decisions. It simply is not possible to avoid the influence of theoretical and philosophical assumptions (Bigge and Shermis 1992).

b. It follows that all practice based decisions are likely to vary in relation to the particular theoretical and philosophical positions that have been chosen, intentionally or otherwise, at any given time. For example, Attachment Theory (Bowlby 1988), Choice Theory (Glasser 1999) and Systems Theory (Campbell et al. 1994) are likely to generate different responses and choices of action.

c. As applied psychologists, EPs have a duty to choose very carefully and to make explicit the theories and the rationale (including ‘evidence’) they use to make sense of issues and to promote and manage change. This is particularly important when EPs are being challenged to demonstrate that they have unique and valuable psychological contributions to make across the education community.

d. Within the context of COMOIRA it would not be helpful to ‘judge’ different theories, philosophies and rationales as being good/bad, right/wrong or better/worse in any absolute sense. Rather, it would be important to accept that they might all be valid and helpful but that their relative value will depend on how practitioners and service users perceive or construct them within their unique phenomenological circumstances or contexts.
e. This aspect of COMOIRA is intended to maintain relevant people’s awareness of the complexity of choices, the importance of choosing carefully and the need to make the application of psychology explicit.

The authors take the view that trainee EPs, qualified EPs, other professionals and service users cannot escape the impact of the core concepts and theories. Gameson et al. (2005) have discussed some practical implications of the many different theories, models and belief systems that might influence practice decisions.

The core principles, concepts and theories have two main sets of functions. Firstly, they can be used to make sense of what is going on and the ways in which practitioners and service users are choosing to think, feel and act within their local, specific and unique contexts. Secondly, they can be used to guide how practitioners and service users choose to engage with one another; how they think about issues; what they choose to do at any given time; and what process they choose to follow to address their ‘issues’. The two sets of functions are interrelated and clearly have major implications for practice decisions. Some examples of relevant questions and issues are suggested below, all of which apply to practitioners as well as to service users.

a. How are practitioners and service users choosing to construct their views of events and what are the implications of their constructed truths and realities for the role of the EP or other practitioner, and for engaging service users in the process of change? What discourses are they choosing to use and what impact do these appear to have? Are they empowering or disempowering? For example, models associated with identifying conditions such as ADHD and Oppositional Defiant Disorder might
cause teachers, parents and pupils to feel disabled and disempowered if they believe that change will not be possible or that specialist expertise is required to understand and manage these ‘disorders’.

b. What other constructions of the same issues might be possible or relevant and what would be the likely implications of these? What other discourses might be more helpful and empowering? What can the practitioner do to construct jointly with service users some alternative discourses (shared ways of thinking and talking) which might set the scene for appropriate change(s)? Practitioners and service users are more likely to work together to change, and to maintain those changes, when their actions are based on shared views of events.

c. What systems, subsystems and contextual issues (these might include intrapersonal, interpersonal and organisational systems or subsystems) seem to be particularly relevant to these participants in this specific and unique situation? What concepts and processes from Systems Theory will be helpful in making sense of the current situation/context and in deciding how to proceed? This aspect of COMOIRA reflects the principles underpinning the Interactive Factors Framework (Frederickson and Cline 2002).

d. Which individuals and/or groups are engaged at this stage in the process? At what level are they engaged? What is the nature of the relationships between all those people involved in the process? Which other individuals or groups would it be helpful for the practitioner to engage with at this stage in the process and at what level? What does the practitioner need to do in order to facilitate collaborative relationships, engagement and enabling dialogue that will promote empowerment and set the scene for service users to make appropriate change(s)? Miller and
Rollnick (2002) emphasise that real and lasting change often depends on the quality of relationships, which need to be harmonious or concordant rather than discordant or adversarial. Facilitating engagement might include, for example, using some of the fundamental relationship skills described by Rogers (1957). Effective collaboration might be enhanced if the practitioner explains the model to services users and negotiates/agrees how to use it in relation to their local, specific and unique circumstances/needs.

e. What psychological and/or other theories or other rationale/evidence seem to be implied in the ways that practitioners and service users are constructing their versions of events and the discourses they are choosing to use? What psychological and/or other theories or other rationale/evidence might the practitioner use or find out about to help make sense of the current situation? What psychological and/or other theories or other rationale/evidence might the practitioner share with service users in order to inform decisions about what to do next?

4. **Main Functions, Processes and Practice Issues relating to the eight Key Decision Points**

COMOIRA is based on the idea that some or all of the key decision points are likely to be relevant and helpful when working with service users to facilitate desired change(s). They are designed to complement one another and to be used in conjunction with the core because they are all informed by the core. Movement between the decision points is always through the core for reasons described in section one above. Like the core, the eight key decision points also have two main interrelated sets of functions, namely, to
help practitioners and service users make sense of what is going on and to guide how they choose to work together to promote desired changes.

The main functions of each decision point are identified in the text contained in relevant parts of the model shown in Figure 1 and these have been explored in more detail by Gameson et al. (2005). However, some selected functions of each point are considered briefly below. Although, inevitably, the decision points are presented within this chapter in a sequential manner, the order has been randomised in order to reinforce the following two key characteristics of the model. Firstly, that it can be used in a flexible way and secondly, that the process of using it can start anywhere, follow any path, include any number of key decision points and/or repeat key decision points as often as required.

Furthermore, although each key decision point is presented as a discrete stage in the model, the points are not mutually exclusive and there is likely to be some overlap between them. For example, a change issue may also be constructed as a hypothesis and vice versa. The reflective/reflexive questions presented by Gameson et al. (2003) provide further insights into the functions of each point. Like the issues relating to the core, those relating to the key decision points apply to practitioners as well to service users. Also, there are clearly many different practical approaches that practitioners and service users might choose to adapt and to use in order to carry out the functions at each key decision point and at the core.
Reflect, Reframe and Reconstruct prompts practitioners and service users to stop and think in order:

a. to reflect carefully together on issues emerging from the four main aspects of the core as well as those emerging from the request for help and from other key decision points;

b. to consider and to explore jointly some possible alternative ways to reframe and/or reconstruct these issues in order to promote the process of change; and

c. to consider together what needs to be done next and which part of the model might help to promote and maintain relevant and appropriate change(s).

Issues that emerge might include service users’ constructions and discourses relating to the request for help; assumptions and expectations about the positions and roles of practitioners, especially in relation to ownership, empowerment and dependency; practitioners’ and service users’ belief systems and hypotheses in relation to what is causing and maintaining the issues, as well as what action needs to be taken, when, how and by whom; the construction of change issues; theories and concepts underpinning what seems to be happening; systems and subsystems considered to be relevant at the time; what practitioners and service users think about the quality of relationships and levels of engagement; what they think about the process so far; who should implement the desired changes; how those changes should be monitored and evaluated; and who should monitor and evaluate the changes. These issues are likely to be relevant at every key decision point.

Review the Process helps practitioners and service users to stop and think in order:
a. to consider together what has happened and how the process has gone so far;
b. to consider, and if necessary to reconsider, their roles in the process so far;
c. to take account of how COMOIRA has been used so far;
d. to check what other options might be relevant at this point; and
e. to decide what needs to be done next and by whom in order to maintain the change process (for example, to decide whether to continue with the process by moving to another key decision point or to disengage – and if so, how).

Construct and Explore Relevant Hypotheses enables practitioners and service users to explore together the belief systems, assumptions and expectations that are likely to impact on the process. These might include their chosen constructions of factors believed to be causing and maintaining the issues of concern as well as their beliefs about desired changes or outcomes. These are important because people’s hypotheses about causes are likely to be related to what they believe needs to be done to bring about the desired change(s). If practitioners and service users have different, potentially competing hypotheses, it might be difficult for them to engage in collaborative work to facilitate the desired change(s). COMOIRA is based on the assumption that it will be helpful to share and explore the implications of different hypotheses in order jointly to reconstruct and to choose which ones to explore.

Evaluate the Change(s) enables practitioners and service users to monitor and to evaluate together the outcomes in relation to the desired or intended change(s). At this point, they need to consider:
a. how jointly to construct and to establish the criteria for success;

b. how to evaluate their constructions of success in relation to the desired or intended changes within their local, specific and unique contexts and in relation to the original request for help;

c. who will do what to monitor and evaluate the desired changes;

d. how far all relevant people have engaged in the process and changed what they agreed to change; and

e. whether service users feel empowered to maintain and manage the desired or intended changes without over dependence on the practitioner.

Explore Constructions of Intention to Change helps practitioners and service users to explore together how far each:

a. maintains ownership of relevant issues and processes;

b. intends to do something different in order to promote the chosen changes;

c. is ready and willing to change; and

d. is committed to investing time and energy in making the desired or intended change(s).

The Theory of Planned Behaviour (Armitage and Connor 2001) suggests that intention to change is a strong predictor of actual behavioural change but, of course, intentions will need to be explored in relation to the specific service users and other participants concerned and the context in which they find themselves.
**Facilitate Change(s)** prompts practitioners and service users to decide together who will make the desired or intended changes. The main function of activities at this point is to facilitate changes in ways that empower and enable service users to maintain and to manage those changes independently. Clearly, a wide range of approaches might be relevant at the point, including, for example: motivational interviewing (Miller and Rollnick 2002), cognitive therapy (Leahy 2003), solution oriented work (Selekman 1997) and soft systems methodology (Frederickson 1990b). These approaches may focus on facilitating change(s) with individuals, groups and/or organisations and might include considering, for example: aspects of school/classroom ethos; approaches used to motivate/engage pupils and staff; the school/classroom behaviour management plan; school/classroom rules/expectations; procedures for communicating about and dealing with problems; procedures for communicating with parents; the use of support services; teaching methods and the delivery of the curriculum; adults’ and other children’s perceptions of the issue and the language/discourses that practitioners and service users choose to use to think/talk about it; the knowledge and skills of the adults and other children and the ways in which these are used; the child’s own perceptions of the issue and the language/discourses s/he chooses to use to think/talk about it; and the knowledge and skills of the child concerned and the ways s/he uses these.

**Explore Constructions of Ability to Change** enables practitioners and service users to explore together how far they:

a. consider that they have the skills required to make the desired or intended changes;

b. believe they have the right to make those changes; and
c. feel confident in their ability to make and maintain those changes.

*Construct and Clarify Key Change Issues* helps practitioners and service users to explore together how they are choosing to construct:

a. exactly what they would like to be different;

b. who they think should make those changes; and

c. when, where and how they should make the change(s).

One important aim is to share and to explore together the different change issues that they have constructed. If, for example, practitioners and service users have constructed conflicting or competing change issues it is likely that they will have different, potentially conflicting ideas about the desired or intended changes, as well as who should do what to make the changes. Unless they can jointly construct, clarify and agree relevant change issues, they will probably continue to pull in different directions with little understanding of one another’s perspectives. In such a situation it may be difficult to facilitate appropriate changes (Gameson *et al.* 2005). Reaching consensus and/or enabling practitioners and service users to clarify or modify their views will probably constitute important aspects of the change process.

5. *Ways in which COMOIRA has been used*

Many trainees at Cardiff have used COMOIRA very effectively to guide a wide range of collaborative fieldwork activities in relation to work with individuals and groups. These fieldwork activities have covered a variety of issues, including concerns about learning and about social, emotional and behavioural issues. The authors of this chapter
also use COMOIRA to guide their own generic fieldwork activities with individuals, groups and organisations within their respective psychology services.

Although COMOIRA was first developed as a learning model for trainee EPs, the authors originally considered that it would be relevant to qualified and experienced EPs as well as a much wider range of practitioners in other professions, in order to help them understand and manage the work they do with service users – especially in relation to the process of change. More recently, however, the authors have realised that the original construction of COMOIRA as a model of professional practice was too narrow and that the model can be relevant and useful within much wider contexts. It can be used, for example, with individuals, groups and organisations to guide flexible approaches to case studies and action research. It has already been used: to plan and deliver personal and professional development or training sessions; to elicit and evaluate structured feedback on training and development sessions; to understand, facilitate and manage change within the context of professional supervision; to structure university-based sessions; and to enhance structured reflection and professional development within teams and organisations. It has also been used by individuals who wish to engage in personal reflection to promote their own personal and professional development and change. Because there is potentially an infinite range of possible ways in which COMOIRA might be used to engage service users in the process of change, it would not be possible within the context of this chapter to provide a helpful range of worked examples of the model in use. The authors consider that it would be unhelpful and inappropriate to select just one such example, which might be misinterpreted as an example of ‘best’ practice and might in turn undermine the essential open-ended,
flexible and creative aspects of COMOIRA. When introducing COMOIRA to trainees and colleagues, the authors aim to empower and enable potential users of COMOIRA to come to terms with the model and to use it in ways which meet their own personal and professional needs. Although this is a challenging process, especially in the early stages of learning about and using COMOIRA, it seems important to emphasise that worked examples of the model in use might be interesting but they are not necessary and may even be disempowering and counter productive if they lead trainees and practitioners to emulate those examples. The authors are very keen to encourage people to experiment with innovative ways of using COMOIRA.

6. **Strengths, Potential Benefits, Potential Weaknesses and Challenges of COMOIRA**

COMOIRA was initially constructed as a learning model to help trainee educational psychologists make sense of and manage their own professional practice, particularly in relation to understanding and managing the dynamic process of change. In this sense, it provides a flexible, adaptable but coherent framework within which trainees can learn about, explore and use a very wide range of theories, models and psychological approaches, all of which might be relevant throughout different stages of the change process. The authors consider that these flexible, inclusive and integrated aspects of COMOIRA are major strengths of the model because they help to avoid the danger of introducing trainees to an ad hoc, out of context, disconnected or fashionable collection of theories and approaches. Within COMOIRA all theories and approaches are linked explicitly to the process of engaging service users in change.
Previous sections of this chapter have already highlighted some other strengths of COMOIRA. For example: it enables trainees and practitioners to maintain an interactive, collaborative approach; it emphasises the need to enable and to empower service users; it is a meta model because it can integrate and accommodate an infinite variety of theories and approaches within the same structure and process; it focuses directly on promoting, monitoring and evaluating change; it encourages the skilful application of many complex and sophisticated psychological theories at many different levels; it encourages those who use it to be reflective and reflexive; it promotes rigorous, accountable, ethical and reasoned action; it helps to promote and reinforce the unique contributions that EPs can make across the education community; it is suitable for collaborative work at many different levels with individuals, groups and organisations; it encourages EPs to work as informed but creative psychological practitioners; and it encourages practitioners to make explicit the theories and rationale underpinning their practice.

Some trainees and practitioners think of COMOIRA as a model of consultation and it certainly includes some of the theories, attributes and processes outlined by Wagner (2000) and Watkins (2000). However, the authors consider that COMOIRA is inclusive, flexible and adaptable enough to accommodate many of the ideas, components and processes underpinning a wide range of other models and frameworks, including, for example: the Interpersonal Problem Solving Approach (Thacker 1983); a range of sequential problem-solving approaches (Miller et al. 1992); the Spare Wheel Model (Burden, 1997); the Problem Analysis Process (Monsen et al. 1998); the Framework for Psychological Assessment (DECP 1998 and 1999); the Interactive Factors Framework
(Frederickson and Cline 2002); the Integrated Framework to Guide Educational Psychologist Practice (Woolfson 2003); frameworks associated with Activity Theory (Leadbetter 2005); Appreciative Inquiry (Passmore and Hain 2005); and Research and Development in Organisations: RADIO (Timmins et al. 2006).

Although COMOIRA is clearly a flexible, inclusive and integrated model of professional practice, it can also be used in many other ways, some of which are described in section 5 above. Within the context of the professional training programme at Cardiff, the model has helped to address, and has certainly had a positive impact upon, many of the tensions outlined briefly in section 2 above. Furthermore, although the model is clearly suitable for addressing complex issues and concerns, it can also be used with relatively ‘uncomplicated’ issues and, whilst it is not intended to be prescriptive or directional, it can be used directionally, if desired. Finally, in addition to the reflective and reflexive questions (Gameson et al. 2003), COMOIRA is supported by a comprehensive set of forms, which serve as aide memos and provide opportunities for recording information and ideas relevant to the core and to each key decision point. Copies of these can be obtained from the authors.

At the time of writing, COMOIRA is included as a fundamental and central aspect of the DEdPsy professional training programme at the School of Psychology, Cardiff University. For example, trainees are expected to use the model to inform and to guide selected fieldwork experiences, as well as the process accounts they write. Trainees, fieldwork supervisors and university based practical work tutors are encouraged to use the model to structure their formal supervision meetings. Tutors also use COMOIRA to
structure and inform some university based sessions. However, because the model is flexible, inclusive and integrated, it encourages and allows trainees to use an eclectic range of theories, models and approaches with the aspiration that they will be empowered and enabled to choose for themselves how they want to work in future and what sort of applied psychologists they want to be. Although COMOIRA is structured and detailed, it is not prescriptive.

Within the spirit of COMOIRA, however, every strength or potential benefit might also be constructed as a weakness, a limitation or a challenge, depending on how people choose to construct and/or reconstruct these. For example, when introduced to COMOIRA, some trainees and practitioners tend to construct its integrated, flexible, adaptable and creative attributes as weaknesses or threats. Trainees and practitioners sometimes report that they feel overwhelmed and confused initially because the model, together with its reflective and reflexive questions, and its forms, appears complex, confusing and time consuming to understand and to use. These kinds of responses might be expected because new and unfamiliar ideas often feel very challenging, especially when they cause trainees and practitioners to reflect on the possibility of changing their own well established and often very comfortable practices.

Getting to grips with new ideas, skills and competencies often involves an uncomfortable personal journey through the stages of unconscious incompetence, conscious incompetence, conscious competence and unconscious competence, where the conscious incompetence stage can feel particularly threatening (businessballs.com 2007). It is interesting that some trainees and practitioners construct this challenging
journey as a positive, exciting and liberating process, which might open the door to new ways of working. As expected, however, others construct the journey as an uncomfortable, painful and unnecessary process.

When such strong feelings occur, some trainees and practitioners behave in ways which might be interpreted as fight or flight responses (Neimark 2007). Fight behaviours might be apparent when people attack COMOIRA or try to chase it away, often with hostile rather than constructive criticism. Flight behaviours might be apparent when people actively avoid COMOIRA and state explicitly that they want nothing more to do with it, occasionally even before they have taken the time to make sense of it. Sometimes trainees and practitioners actively seem to encourage others to engage in fight or flight responses to the model. Often they justify and rationalise their behaviours or responses with comments indicating that the model is too complex or irrelevant, that it is incompatible with established practices or that it does not offer anything new. Sometimes, their views of COMOIRA and the complexities and skills associated with the psychology of change seem to suggest that they view the EP as someone who mainly engages in short term, expedient work and who, therefore, needs only quick, pragmatic approaches.

At this point, it seems important to bear in mind that most models are likely to appear complex and unwieldy when they are new and unfamiliar. See, for example, the flow chart produced by Wedell (1970), the sequential problem-solving flow charts presented by Miller et al. (1992) and the Framework for Psychological Assessment (DECP 1998 and 1999). It is interesting also to consider that flow charts showing an overview of the
different components and processes underpinning solution oriented work, the statutory assessment process, playing a musical instrument, swimming or driving a car would all appear very complex. However, people who are able to engage in these at a level of unconscious competence are not daunted by their relative complexities. On the contrary they appreciate those complexities and they understand that all aspects of the ‘models’ or approaches are necessary but that they are never used all at the same time. In addition, when trainees and practitioners respond negatively to COMOIRA, they frequently seem to attribute the causes of their feelings and responses to the model itself, rather than to their own interactions with it. At those times, they do not seem to appreciate that the model is inert and has no life of its own. The impact it has on people can only ever be a product of their construction of it and the way they choose to interact with it.

Of course, the above ‘views of events’ have been selectively constructed on the basis of certain theories and assumptions chosen by the authors. Within the spirit of COMOIRA, it would be possible to reframe or reconstruct all of these ‘views of events’ in other ways. For example, they could be taken to indicate that some trainees and practitioners have not been engaged readily, willingly and actively in the process of exploring the model and reviewing their existing approaches. In this sense, it would be appropriate to use COMOIRA to explore, for example: how relevant people are constructing their views of the model; who has been engaged in the process so far and how; what hypotheses they have constructed about the model and other related issues; and what needs to change, who needs to make those changes and how the changes should be
made in order to engage trainees and practitioners more positively in the process of beginning to use COMOIRA.

Within the context of the Cardiff training programme, most trainees seem to embrace COMOIRA with enthusiasm and use the model to apply their extensive knowledge of psychology in very skilful and creative ways. By contrast, some trainees appear to engage in fight or flight responses, perhaps because the model highlights feelings associated with conscious incompetence when it challenges their willingness and ability to draw upon and apply their knowledge of psychology; perhaps also because it challenges their preconceived views of the EP as someone who engages in pragmatic, expedient activities. Some trainees tend to be ambivalent about COMOIRA and appear to pay ‘lip service’ to the model because it is a ‘programme requirement’. The challenge for the programme team is to explore ways of using COMOIRA to engage all trainees, plus more practising EPs and other practitioners, actively and positively in the process of beginning/continuing to use the model.

7. **Concluding Comments**

This relatively short chapter has provided an outline of the structure of COMOIRA and some contextual issues relating to the initial phases of its development. It has also considered some theoretical, conceptual, functional and process issues associated with the model; some ways in which it has been used; and some of its perceived strengths, benefits, weaknesses, disadvantages and challenging aspects. This chapter is not intended to be a ‘user guide’ and, for the reasons outlined in the above sections, the authors have intentionally not included concrete examples of the model in use.
Many trainees, qualified EPs and some colleagues associated with other EP training programmes have provided encouraging and positive feedback about COMOIRA as well as some helpful and constructive critical observations. However, there are clearly many challenges and tensions still to address and the authors are planning that the next phases of development will include:

a. eliciting more structured feedback and ideas from present and past trainees as well as from fieldwork supervisors about the development of COMOIRA as a learning model within the professional training context;

b. engaging in research with past trainees and other qualified EPs to explore the relevance and usefulness of COMOIRA to EPs and other practitioners working in the field;

c. eliciting more structured feedback from service users about aspects of the model and its usefulness;

d. engaging in research to explore the relationship between COMOIRA, other models of service delivery and the wider contexts in which they are used;

e. using COMOIRA to engage in new ways of carrying out research, for example, exploring the extent to which other models of service delivery within local authority services focus on the process of change and the explicit application of psychology;

f. encouraging the programme team, trainees and other colleagues to experiment with a wider range of new and creative uses of COMOIRA;

g. developing further the use of COMOIRA for consultations with teams and organisations;
h. developing further the use of COMOIRA to guide the process of supervision; and

i. extending the use of COMOIRA to structure and inform more aspects of the Cardiff training programme within the university and in fieldwork contexts.
References


