The compassion gap in UK universities

Waddington, K.

This is a copy of the final published version of an article published in the International Practice Development Journal, 6 (1) [10]. It is available online from the publisher at:

http://dx.doi.org/10.19043/ipdj.61.010

This article is licensed under a Creative Commons Attribution Non-Commercial 3.0 License.

The WestminsterResearch online digital archive at the University of Westminster aims to make the research output of the University available to a wider audience. Copyright and Moral Rights remain with the authors and/or copyright owners.

Whilst further distribution of specific materials from within this archive is forbidden, you may freely distribute the URL of WestminsterResearch: (http://westminsterresearch.wmin.ac.uk/).

In case of abuse or copyright appearing without permission e-mail repository@westminster.ac.uk
CRITICAL REFLECTION ON PRACTICE DEVELOPMENT

The compassion gap in UK universities

Kathryn Waddington

University of Westminster, London, UK
Email: k.waddington@westminster.ac.uk

Submitted for publication: 2nd February 2016
Accepted for publication: 30th March 2016
Published: 18th May 2016
doi: 10.19043/ipdj.61.010

Abstract

Context: This critical reflection is set in the context of increasing marketisation in UK higher education, where students are seen as consumers, rather than learners with power. The paper explores the dark side of academic work and the compassion gap in universities, in order to make recommendations for practice development in higher education and the human services.

Aims: The paper aims to show how reflexive dialogue can be used to enable the development of compassionate academic practice.

Conclusions and implications for practice: Toxic environments and organisational cultures in higher education have compounded the crisis in compassionate care in the NHS. Implications for practice are:

• Narrative approaches and critical appreciative inquiry are useful methods with which to reveal, and rectify, failures of compassion
• Courageous conversations are required to challenge dysfunctional organisational systems and processes
• Leadership development programmes should include the application of skills of compassion in organisational settings

Keywords: Compassion, narratives, emotion, higher education, reflexive inquiry

Be kind, for everyone you meet is fighting a harder battle
Attributed to Plato

Introduction

This paper came about after I attended the workshop ‘Closing the Compassion Gap in the NHS’, organised in response to recent failures of compassion in the NHS (addressed, for example, in Francis, 2010; Ballatt and Campling, 2011; Francis, 2013). I’m head of a psychology department, with a professional background in nursing and healthcare, and I don’t often get angry. Yet I have rarely felt so incensed and impassioned as I did at a critical moment in the Q and A session, when I asked: ‘But what are we doing about the compassion gap in universities that educate the people who go on to be the professionals who work in the NHS? The nurses, doctors, social workers and psychologists? If they don’t experience a compassionate learning environment in universities it’s no surprise that there is a compassion gap in practice!’ I got an unexpected round of applause. I had touched on something in myself – and something that resonated with others.
This paper is a reflection on a ‘critical moment’ that I think resonates widely across higher education, and across health and social care landscapes. It is intended to encourage debate about the role of compassionate practice development in academia, and the extent to which universities should be compassionate organisations. It argues that there is an almost parallel process between healthcare practice and higher education in terms of failure to prioritise compassion. The former has been amply identified in the ‘post-Francis landscape’ and tackled in numerous other reports – for example the recent Mazars report into the deaths of people with a learning disability or mental health problem in Southern Health NHS Foundation Trust (Mazars, 2015). However, the ‘compassion gap’ in universities is much subtler and less obvious.

The paper is written as a reflexive dialogue. Italicised text represents my own feelings/thoughts/actions, and composites of conversations/moments I have experienced, anonymised to preserve the confidentiality of interlocutors. I use Creede’s (2014, pp 89-90) five ‘enabling practices’ of compassion to structure my reflections (Box 1).

Box 1: Creede’s five ‘enabling practices’ of compassion

Taken from Catherine Creede’s *Elevating generative identity stories as a practice of compassion* (2014)

1. Reflect on, map and notice your most cherished or desired stories of self and how you use them
2. Notice the stories that the people you interact with are most trying to live into
3. Notice the conversational patterns that illuminate critical moments
4. Make choices in critical moments to reinforce others’ cherished stories of self
5. Notice new generative stories of self that are emerging through the process of reflexive inquiry

The rationale for using Creed’s work is to introduce a theoretical framework for compassionate practice development based on Pearce’s (2007, pp 11-12) communication perspective and notion of critical moments:

‘Critical moments occur wherever people make meaning and coordinate actions with each other. [They] occur everywhere: at dinner tables, in conference halls and boardrooms... when responding to emergencies, in classrooms and consultations, during political campaigns and public hearings.’

Practice development that adopts this perspective occurs when we enhance our ability to discern those critical moments and act wisely in them.

Initial reflections

I am interested in exploring emotions associated with compassion at individual and organisational levels of analysis and reflection. A working definition of compassion reflects feelings of deep sympathy and concern for individuals who are troubled by misfortune, accompanied by a strong desire to alleviate their distress.

Atkins and Parker (2012) note that compassion involves both feelings and a response; the inclusion of response differentiates it from related concepts like empathy. Thus compassion can be understood as an individual response and an organisational process involving emotions and actions. Reflection on my feelings of anger led me to Goleman’s (2015) book *A Force for Good: The Dalai Lama’s Vision for Our World*, which explains the occasional need for well-guided anger. Without constructive anger the suffragette movement would not have happened; perhaps the time has come for a compassionate movement in our universities? Academic practice development, which I argue includes leadership and management practice as well as practices of teaching and learning, should be infused with compassion. This is not to say that academics and staff who work in universities are not compassionate. However,
higher education institutional environments do not always foster a culture where compassion is honoured, as the next section illustrates.

**Conversation patterns in universities**
The conversational patterns illuminating the critical moment in the workshop were formed of multiple reflective fragments from emails, meetings and conversations with colleagues over a number of years. ‘Student numbers’, ‘the bottom line’, ‘viability’; words like ‘terminated’ ‘excluded’ and ‘obsolete’ used to describe students, courses and modules. These reflective fragments coalesced, casting a shadow and illustrating the dark side and difficult realities facing universities, their leaders, managers and academics who educate health and care professionals in toxic environments (Frost, 1999; 2003; Gallos, 2008; Watson, 2009). This paper points to a parallel organisational process between healthcare practice and higher education; by this I mean that compassion is stifled in environments where instrumental relations have dominance – ‘where people are used as a means to an end, as commodities rather than respected citizens’ (Ballatt and Campling, 2011, p 139). In healthcare, such instrumental attitudes, combined with relentless regulation, create toxic environments and persecutory and overwhelming cultures that can fatally undermine staff morale.

**Creating conditions for compassion in toxic environments**
Universities are, or should be, ‘caregiving organisations’ (Kahn, 2005) in regard to their role – and primary task – of helping students to learn. Watson’s (2009) exploration of morale in UK universities found ‘at their best they can achieve remarkable things; at their worst they can be petty, corrosive, even dangerous’ (p 141, emphasis added). Gallos reflects (more extensively than I can here) on her experience of how academic leaders act as ‘toxin handlers’ (2008, p 359). She argues that organisations can lessen wear and tear on toxin handlers through policies, structures and cultures that promote attention to the human side of organisations. Frost (1999) reflects on how his experience of compassionate nursing care when receiving treatment for cancer led to his rethinking the role of compassion in organisations:

> ‘To act with compassion requires a degree of courage – one must go beyond the technical, the imperative, the rules of organisations and beyond past practice – to invent new practices that have within them empathy and love and a readiness to connect to others’ (p 129).

Acting with compassion requires courage, honesty and truth telling – attributes that I value in myself.

**Cherished stories of self**
I see myself as a role model for compassionate, evidence-based practice, a view that is grounded in my previous practice in nursing. I remind myself that I was once a member of the Radical Nurses Group, and am what Meyerson (2008, pxii) would call a ‘tempered radical’. But in the critical moment around which this reflection is based, I was more of a bad-tempered radical! Tempered radicals ‘walk a fine line between challenging established norms and upholding them’ (Meyerson, 2008, p xii). They are able to balance conformity and deviation, compliance and experimentation, smooth sailing and rocking the boat. Thinking about being a tempered radical and boat rocker, I reflect further on the sailing metaphor – something I did with Sally Hardy when we worked with colleagues weathering the turbulence of NHS reform (Waddington and Hardy, 2014). The metaphor of navigating a storm enabled us to hold together what might have been a disparate collection of reflections, and promote resilience in unstable work environments.

I am also a boat rocker in my academic writing, and have used visual imagery to reflect theoretical constructs. For example, I have used Tacita Dean’s work to illustrate a framework for theorising organisational gossip and for reflecting on the environmental conditions in which gossip occurs (Waddington 2014; Figure 1).
Figure 1: The Roaring Forties: Seven Boards in Seven Days


The Roaring Forties was created on chalkboard and shows seven sailors bent over a mast gathering in the sails, with diagrammatic arrows and notes that illustrate the atmospheric conditions. Imagery such as that presented in Figure 1 can also be used to reflect further on teamwork, connectedness, care and compassion in turbulent conditions:

‘The primary task of a caregiving organization is, ideally, the meeting of the needs of those who seek its services, such as students... When members and leaders hold fast to that task, in the way that sailors hold fast to the topmast in the midst of roiling seas, they create the possibility for conversations, interpretations, conflicts and mutual engagements that are in [the students’] best interest’ (Kahn, 2005, p 231).

Stories in universities
Universities can be turbulent and toxic environments. A Times Higher Education workplace satisfaction survey (2014) found that:
- There is notable concern among many academics about the performance of university leaders, with almost half expressing dissatisfaction
More than a quarter of academics are not content with their salary
A third of academics feel their subject area is not valued by their university
One in three respondents felt their job was not secure
There are concerns among some staff about bullying in the workplace and about the sector’s use of zero-hour and fixed-term contracts
Almost half of academics feel unable to make their voices heard in their higher education institution

The survey revealed that although most university staff find their job rewarding and the majority said they felt proud to work for their institution, many also felt overworked, undervalued and sometimes exploited. Similarly, stories circulating in universities are not always happy ones, as exemplified by Watson (2009, p 1):

‘There is a comforting tale that vice-chancellors of UK higher education institutions like to tell each other. Go around your university or college, they say, and ask the first 10 people who you meet how their morale is. The response will always be “rock bottom”. Then ask them what they are working on. The responses will always be full of life, of optimism and of enthusiasm for the task in hand.’

Stories from universities are contradictory but suggest morale is often poor, and students are seen as consumers rather than learners with power. In the UK, universities now need to comply with consumer law when dealing with students (Competition and Markets Authority, 2015). I have reflected on the notion of ‘students as consumers’ with colleagues in a variety of universities and contexts. We have wondered whether managing high student expectations might entail a risk of ‘false compassion’, and a reluctance to give an honest appraisal of achievements and aspirations. Sometimes, to use the popular idiom, you have to be ‘cruel to be kind’ – and the fact that this compassionate honesty may not be an option for staff can only worsen morale.

The organisational structures and processes that operate in universities with regard to the relentless political drive on standards, results and student satisfaction, while laudable in principle, can also erode morale. Watson (2009, p 139) identified ineffective management systems as one of the ‘pathologies’ that also undermine positive morale, and which are a source of ‘institutional crisis’. This is similar to some of Hawkins and Shohet’s (2012, p 229) patterns of ‘dysfunctional organisational cultural dynamics’, which are manifest in the following ways:

- Driven by crisis – where there is little time for reflection, thinking and the development of sustainable relationships between different parts of the organisation
- An over-vigilant and bureaucratic culture – which is high on task orientation but low on personal relatedness, and driven by fear of complaints

Universities, then, can be peculiar places, especially in the ways that people relate to each other. Reflecting on my own research (Waddington and Lister, 2013) and experience, the stories I have heard are often of the ‘ain’t it awful’ eye-rolling variety. Of the ‘us and them’ sort where ‘we’ are academics and ‘they’ are either senior management and/or professional services such as finance or human resources.

It appears that there is an inherent dissonance, discord and a dark side to life inside universities, often related to stressful restructuring, which Gabriel (2012, p 1137) theorises as ‘miasma’ – a term defined by the Merriam-Webster dictionary as ‘a heavy cloud of something unpleasant or unhealthy’. Gabriel does not use miasma as a metaphor but rather as a concept, to describe a contagious state of pollution – material, psychological and spiritual – that afflicts all who work in organisations undergoing traumatic transformations, for example restructuring, departmental reorganisation and course closures. I often share Gabriel’s paper with academic colleagues and I am struck by the way that this concept of miasma
readily applies to their experience in universities. The critical question now is, how do we change these stories of corrosion into stories of compassion?

Reinforcing cherished stories in others
The Merriam-Webster dictionary defines ‘cherish’ as to ‘hold dear’ and to ‘cultivate with care’. Universities are sites of learning and education – storied worlds where narratives of care and compassion can be surfaced by appreciative inquiry: ‘co-constructed practice informed by all those who work on creating the conditions for growth and change based on seeking the positive core’ (Cockell and McArthur-Blair, 2012, p 2). As a tempered radical and boat rocker, I consider there are at least three ways forward:

• Challenge the ‘objectification and measurement’ of students and staff, which reduces people to faceless resources to be manipulated and managed
• ‘Walk the line’ between challenging established norms and upholding them, by walking in the company of colleagues and students who share the values and practice of appreciative inquiry
• Be more attentive to the language and representations of compassion in everyday experience – to notice new stories

Noticing new stories
The philosophy and principles of critical appreciative inquiry offer an approach by which to notice, and generate, new stories. The lens of critical appreciative inquiry recognises the impact of difference, power and diversity, bringing together the principles of appreciative inquiry, social constructionism, and critical theory. I am now left with yet more questions: is it possible to create new stories about the benchmarks of quality and compassion? Financial targets, the bottom line and key performance indicators will not go away. University leaders and managers need to be ‘ruthless with compassion’ – for example, when speaking to an underperforming student – in the same way as healthcare professionals when they have to break bad news to patients or make difficult clinical decisions about treatment. How can we create ethical benchmarks and practices that will close the compassion gap in our universities?

Conclusion and implications for practice
I began by reflecting on a critical moment at a workshop exploring the compassion gap in the NHS, which highlighted for me a lack of compassion in university cultures and ways of working. The relentless, market-driven reforms in the NHS and higher education need to be counterbalanced by a deeper understanding of how to promote and preserve compassionate practice in both sectors. Ballatt and Campling (2011) argue that this is embodied in notions of kindness and kinship, and expressed in compassionate relationships. Compassionate relationships are also core to the management of the emotionally toxic and pathological environments described by Gallos (2008) and Watson (2009). It is also important to extend compassion upwards to university leaders steering their institutions through stormy seas (see Figure 1, above).

I have drawn on a number of tools that can be applied more widely in a practice development context, such as Creede’s (2014) enabling practices (see Box 1, above). The International Practice Development Journal bears testimony to the strength of practice development in health and social care, but the concept of compassionate practice development in academia is arguably less well recognised, and needs to be amplified. Critical appreciative inquiry and narrative approaches to research and practice offer a way forward to surfacing, and closing the compassion gap in universities. It is also heartening to see growth in the field of organisational compassion initiated by Frost’s (1999) seminal work. I will conclude with a final reflection about the silent H – the concept of humanity.

The Silent H
Looking back over this paper, I have used two words from the English language that do (literally) have a silent H, when discussing the need for ‘honesty’, and the need to ‘honour’ compassion – by which I mean knowing and doing what is morally right. However, an undercurrent running through this critical reflection is that the concept of humanity is all too often silent. Figure 2 is a cartoon from the consultancy and visual communications agency Gapingvoid®. Its message is simple. Nobody...
remembers their experience of healthcare or higher education simply because of new equipment and
new technology. Yes these are important, but what makes the experience exceptional for patients/
students and staff is our humanity and compassion.

Figure 2: Humanity is our Ultimate Competitive Advantage

© Gapingvoid. Reproduced with permission.

Finally, Peter Frost was known to use the Cherokee proverb ‘Feeding the wolf of compassion’ as a
reminder that we all suffer, and that we all have the capacity to meet suffering with compassion.

‘He said to them, “A fight is going on inside me... it is a terrible fight and it is between two
wolves. One wolf represents fear, anger, envy, sorrow, regret, greed, arrogance, self-pity, guilt,
resentment, inferiority, lies, false pride, superiority, and ego. The other wolf stands for joy, peace,
love, hope, sharing, serenity, humility, kindness, benevolence, friendship, empathy, generosity,
truth, compassion, and faith. The same fight is going on inside you, and inside every other person,
too.”’ They thought about it for a minute and then one child asked his grandfather: “Which wolf
will win?” The old Cherokee simply replied: “The one you feed”’ (Compassion Lab, 2013).
The two wolves in this proverb can be found fighting it out in universities and health and social care organisations. The first is the wolf that lives in the organisational miasma and the dark side of universities and human services. The second is the wolf of compassion, characterised by humanity and virtue, which should not be left to starve.

References


Acknowledgements: I would like to thank the reviewer, and the many colleagues and friends whose conversations and feedback have informed my reflections in this paper. The views expressed are my own.

Kathryn Waddington (Chartered Psychologist, Associate Fellow of the British Psychological Society), Head of Department of Psychology University of Westminster, London, UK.