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Overview of this issue

Welcome to the Journal of the National Institute of Career Education and Counselling. In this edition established academics, new writers and practitioner researchers bring us useful insights into career learning and the interplay between theory, practice and research. The UK government's recent career strategy placed renewed emphasis on career learning in schools in England making it a highly topical subject for consideration. However, career covers all stages of life and needs to be supported by a life-long engagement with learning, hence the articles extend beyond the school setting. Our authors reflect on programme design, review the development and implementation of career learning frameworks and tools, and explore external and internal contextual factors that influence the career learning process. Whilst different in focus and context, at the core of all the articles is the theme of client and participant career learning leading to progression in career development.

A particular landmark for NICEC is the publication of an article by **Laura Walker** which was awarded the Bill Law Student Memorial Award 2019. In this opening piece, Laura explores the implications for career guidance practice of late career decision making, where she characterises the learning as a process of discovering more of themselves – 'more of me'. The findings are set out using a visual which is unique to the author and very helpful for use by practitioners. The image of 'dancing with fear' is powerful, and reminiscent of Bill Law's use of imagery in his concern to help practitioners to apply the lessons learned through research to practice.

In the two articles that follow, **Lis McGuire** and **John Gough** write from different perspectives about the process of designing learning experiences. Liz explores adopting a collaborative approach between the provider and the user of services. Although the article focuses on addressing the needs of persons with mental health problems, her findings and reflections are equally relevant to programme design for other user groups. Similarly, John's reflections on a collaborative process in training careers leaders in England highlights

the importance of engaging the voice of the learner in enabling them to develop this role effectively in complex and demanding educational environments.

The next three articles focus on specific aspects of working directly with clients, and present new career learning tools and a career framework. These developments, rooted in practice, include a mix of 'what works' along with reflection on what was less successful, and insights into why that might be. First, **Katie Dallison** describes the development and implementation of Plan: Me. Piloted within higher education, this tool takes a holistic approach to career decision making, integrating goal setting, and allowing clients to map out a process of how they can move themselves forward independently. Second, we have an article by **Keren Coney and Ben Simkins** in which they consider the potential of using 'screencasting' technology to support students' C.V. writing. Third, **Lewis Clark and Carolyn Parry** review their creation of the INSPIRED teenager framework designed to support collaborative career-based learning between parents/carers and their teenage child.

The final two articles are concerned with the wider context within which career learning takes place. **Szilvia Schmitsek** explores the educational experiences of young people in England, Denmark and Hungary who had been at risk of dropping out, but later gained a qualification at a second chance provision. In contrast, **Nikki Storey** is concerned with the influences on the career beliefs of students in an ethnically diverse state school in London. Using an adapted short version of the 'Careers Beliefs Patterns Scale', Nikki examines the interlinked impacts of ethnicity and socio-economic status, and draws out recommendations for practitioners.

Lyn Barham & Michelle Stewart, Editors

Evaluating the helpfulness of a co-construction approach to career learning and development programme design

Lis McGuire

My research explored the helpfulness of co-constructing a career learning and development (CLD) programme with and for adults with mental health challenges. Following a literature review, I adopted a participatory action research strategy, aiming to position a client of the charity where my research was based as a partner in programme design. Emerging themes from semi-structured interviews offered insights into client requirements and concerns, enabling draft programme creation and refinement. In this context, co-construction facilitated delivery of a client-focused, theory-based CLD programme, offering a valuable practitioner learning opportunity, and a vehicle to challenge power relations and pursue emancipatory practice.



Introduction

Today, the concept of ‘career’ is more inclusive than ever, deemed relevant to all, throughout life (Barnes, Bassot & Chant, 2011). While still encompassing paid roles on a linear trajectory, career now transcends once-restrictive definitions, embracing diverse interpretations and activities. As ‘career’ has evolved, becoming life-wide and life-long (Hooley, 2019), so now must career guidance, ensuring its accessibility to people of all ages and circumstances to support career development throughout lives (Andrews & Hooley, 2018; Bassot, 2017).

Relevant to all, career guidance is pivotal for clients whose access to opportunities and career development has been thwarted by circumstances beyond their control (Müller, 2014; Roberts, 1977).

Mental health challenges are one example of circumstances that can limit an individual’s chances in career. Even if mental health challenges are overcome, ‘social, environmental, and attitudinal barriers’ (Crow, 2010, p.125) can remain, making it difficult for affected individuals to enter and sustain employment. Such barriers deny affected individuals equal access to opportunities, leading to unequal outcomes. Access to career guidance is therefore especially important for individuals facing additional barriers to learning and work (DBIS, 2012; Sultana, 2014).

My emerging awareness and interest in inequalities in career development inspired me to seek Qualification in Career Guidance (QCG) placements in community-based organisations supporting vulnerable, marginalised groups. A charity based in Kent, which I will refer to as BT, supporting adults with mental health challenges, was one such organisation.

Auditing BT’s careers education, information, advice and guidance (CEIAG) provision for a QCG assignment offered insight into how CEIAG can form part of a multi-strand solution (Robertson, 2017) aimed at helping adults with mental health challenges rehabilitate and recover. The CEIAG audit revealed BT’s existing work-based training and support programme was based around a themed curriculum model (Donoghue, 2008) and discrete, client-centred, one-to-one support (Rogers, 1965). It also identified a gap in provision: BT did not appear to offer a group-based CLD programme, sparking my curiosity about whether I could help create one.

Commitment to client-centred practice motivated my desire to involve BT’s clients in programme planning, ensuring any emerging programme

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addressed their real, not perceived needs (Gatsby Charitable Foundation, 2014). I was also curious about Freire's (2005) view that learner requirements and interests can inform career learning programmes. However, I remained uncertain about how helpful a co-construction approach might be. My research therefore sought to explore the helpfulness of working in partnership with clients to co-construct a CLD programme for delivery within their current context and also to challenge this client group's powerlessness by sponsoring collaborative development of career guidance support (Thomsen, 2017; Young, 1990).

Supporting these aims, my research questions were:

- 1) How might involving clients in CLD programme design impact its perceived usefulness and value?
- 2) How should the principles and outcomes of an effective CLD programme be delivered to support adults with mental health challenges?
- 3) What can existing CLD frameworks offer this group in this context?

This article will narrate the processes and outcomes of this research.

Understanding CLD

CLD is defined as a group and activity-focused learning experience (Barnes et al., 2011). A key principle is that development of career management skills and knowledge occurs through 'active, problem-based experiential learning' (Bassot, 2017, p.15). This principle is invaluable to adults whose mental health challenges have frustrated their opportunities to gain experience, limiting their self-efficacy and cultural capital (Bandura, 1986; Bourdieu & Passeron, 1990).

A second key principle, that learning occurs through collaboration (Barnes et al., 2011), is equally vital because, by reframing career learning from an autonomous activity to a social process, it refutes the neoliberal perception of career as the individual's responsibility alone. Engaging with others encourages sharing of knowledge, feelings, and experiences, enabling learners to move forward with positivity

and support (Westergaard, 2010). This principle of collaboration is highly relevant for those whose confidence and resilience has been undermined by ill-health and its impact on career.

In terms of desired outcomes, CLD aims to develop career resilience and career happiness (Henderson, 2000). This is helpfully depicted by Bassot, Barnes and Chant (2014) as two stable, balanced anchorage blocks upholding a metaphorical bridge that facilitates CLD's third target outcome: career growth. Building career resilience and career happiness is essential for those whose mental health challenges have denied career development and thwarted or interrupted career growth. But how can these outcomes be achieved?

The literature revealed that developing self-awareness, opportunity awareness, decision learning, and transition learning skills (Law & Watts, 1977) can support adults with mental health challenges, and others, to strengthen career resilience, and to target and attain career happiness, thereby supporting career growth. It also highlighted CLD as a vehicle for career growth, providing purposeful learning opportunities (Hooley, Sultana & Thomsen, 2018) for developing knowledge and skills that facilitate next steps.

Career growth's sub-concepts, such as the Adlerian-inspired career narrative (Adler, 1956) and Vygotsky's (1978) zone of proximal development (ZPD), can also facilitate career growth. Savickas (2013) usefully describes how narrative approaches can help individuals create meaningful links between the past and the present to create future possibilities. Working in the ZPD with an experienced, empathic facilitator providing step-by-step support can help vulnerable individuals to achieve more than they could independently, with support gradually withdrawn to enable independent growth (Bassot, 2012).

A review of the literature clearly established CLD frameworks (e.g. CDI's 2018 Framework for careers, employability and enterprise education) as a vehicle to plan, deliver, evaluate, and evolve balanced, coherent career programmes. It also enabled me to theorise how CLD's principles and target outcomes could be delivered to support this client group, and see how available frameworks brought different qualities to support CLD programme planning and delivery,

with some appearing more suitable for this client group than others. Yet, it remained clear that planning a new programme without involving them could further disempower this vulnerable group. Client-centred practice advocates listening to clients' needs to inform service provision (Arulmani & Murthy, 2014). Therefore, I sought to involve clients in programme planning, ensuring CLD's principles and target outcomes, and proposed frameworks met their expressed needs and not their presumed needs (Westergaard, 2009). However, the literature did not reveal the practicalities or benefits of partnering with clients to design CLD programmes. Further research was needed to evaluate the helpfulness of a co-construction approach to CLD programme design.

Methodology

A constructivist perspective led me to adopt an interpretative ontology whereby I sought to understand clients' perceptions and priorities. Hence, selecting a qualitative methodology, I invited clients to tell their stories so I would be able to see the situation through their eyes (Biggam, 2015; Bryman, 1988).

Participatory action research (Costello, 2003) was chosen as an appropriate strategy to look, think, and act on a specific situation; namely BT's lack of a CLD programme. This was because it welcomes the involvement of individuals disempowered and marginalised by their situation (Sixsmith & Daniels, 2011). It also appeared to be a congruent approach for reframing potential perceptions of research from being the work of experts to a process that positioned clients as partners in the work, in this instance the CLD programme design (Denscombe, 2017; Greenwood & Levin, 1998).

I had adopted a convenience sampling strategy, inviting BT to select two research participants who were well enough, available, and willing to engage. Clients' availability and health challenges meant only one participant was found. The participant, Oscar (a pseudonym), was a 30 to 35-year-old client, whose mental health challenges had interrupted his school education and prevented him from working since. Having read the participant information, Oscar gave informed consent, and selected this pseudonym to protect his identity in published findings.

Data were collected via two semi-structured one-to-one interviews, a flexible technique chosen to embrace digression and optimise exploration of Oscar's experiences, viewpoints, and feelings (Denscombe, 2017). Insights gained through the first interview informed CLD programme design, while the second interview invited Oscar's feedback on the emerging programme draft. However, during the research, my positioning the client as partner was contested. Despite successfully developing a collaborative working partnership with the client in the first interview, positioning us as co-constructors in the work, this was quickly challenged. My follow-on meeting with BT's staff in the café where the client was working repositioned us respectively as management team guest and café staff. I felt incongruent and uncomfortable as a result. Happily, our rapport remained intact for the second interview, and our collaborative working partnership resumed.

The interviews were recorded and transcribed in complete, narrative format, with transcripts approved by Oscar before analysis. Thematic analysis followed an immersive approach and used West's proforma (Merrill & West, 2009) to identify themes and concepts. This process facilitated a thick description (Geertz, 1973) of Oscar's circumstances, concerns, and needs.

Findings

Analysis and interpretation of interview transcripts led me to identify several themes, while further scrutiny and synthesising of the thematic analysis with the literature review findings enabled me to produce a rationale for the proposed programme.

I now present a selection of amalgamated themes, drawing on Oscar's words where possible, and explain how they informed the programme draft. However, although the single case-study did not constrain interpretative research quality (Merrill & West, 2009), the findings cannot be considered to represent the whole population, specifically adults with mental health challenges, in this or other contexts.

The themes 'routine days' and 'a purpose' revealed previous and ongoing career learning experiences had positively impacted Oscar's health and well-being:

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helping his 'mindset', encouraging him to use his 'brain more', and preparing him to move 'forward in... career', indicating career growth. Oscar described how BT's existing work-based training and support programme offered him 'routine'. This contrasted with his description of life before, when he would 'hardly go out' making it 'hard to know what day of the week it was'. His words informed my recommendation to offer the programme at regular, well-communicated times. Oscar also described how programme participation had given him a purpose, leading him to consider himself a 'useful person'. This seemed to confirm that CLD programmes can provide psychological and social benefits associated with work (Ray, 2012; Robertson, 2017). I recommended communicating these benefits to clients in programme introductions.

Three themes ('the experience of doing something'; working 'in a group'; 'small steps' with 'gentle' support) illuminated how principles of an effective CLD programme should be delivered to support adults with mental health challenges.

Oscar spoke positively about past and ongoing career learning that reflected CLD's principles (experiential and community-based learning) and which offered opportunities to work in the ZPD, a concept central to career growth (Bassot et al., 2014). The fact that Oscar's previous and current career learning reflected CLD's principles surprised me as, to my knowledge, they were not consciously based on CLD theory. My initial defined problem, based on my assumption that BT did not have a group-based CLD programme, was challenged.

In particular, the experience of doing something highlighted the value of experiential learning (Bassot, 2017). Oscar's opportunities to develop career resilience, career happiness, and career growth had been limited by being housebound for 15 years, leading to a self-identified experience deficit, low self-efficacy, and skills shortfall. Conversely, 'doing something each day' at BT represented 'a step forward', giving Oscar 'experience and skills to rely on'. Gaining experience and skills appeared to be building his belief in his capability, developing his career resilience, preparing him for career growth, and potential career happiness. I proposed the CLD programme be based on experiential learning, using creative activities where

appropriate. In interview two, Oscar confirmed creative learning activities as suitable for this context.

Four themes ('realising what you've got'; the 'sort of place... I want to work at or feel like I can work at'; decision learning; 'not dropping off a cliff') illuminated how outcomes of an effective CLD programme should be delivered to support adults with mental health challenges.

Oscar's inferred positive progress (including self-awareness) and themes which emerged from the analysis of the transcript revealed his experience of and on-going alignment with the DOTS model (which supports the achievement of career resilience, career happiness, and career growth). Acknowledging his skills and achievements seemed to be helping him build a positive self-concept (Barnes et al., 2011), vital for career resilience, and making him 'optimistic for the future' suggesting a greater sense of self-efficacy (Bandura, 1986).

Oscar also inferred certain DOTS outcomes had not been achieved, including transition learning. The theme 'Not dropping off a cliff' revealed past programmes had ended without Oscar feeling 'prepared' or 'ready enough' to move on. He considered transition 'very difficult', and expressed his desire for additional learning, hoping it would assure him 'you're not dropping yourself off a cliff when something ends'. Oscar's ongoing need for transition learning, justifies creation of a CLD programme targeted at addressing these shortcomings.

My introduction of the DOTS model during the interviews as a possible framework for structuring CLD was driven by its easy-to-explain, easy-to-understand format. Despite my fear of overwhelming Oscar with detail, he responded enthusiastically towards the model, suggesting the programme should be structured around the four elements (self-awareness, opportunity awareness, decision learning, transition learning). However, although Oscar assessed DOTS to be a useful framework, analysing his expressed needs as communicated through the interviews later led me conclude that delivering DOTS in a single-cycle approach would be inadequate. There may be a need to revisit and build on the DOTS elements over time.

Ultimately, I used the CDI Framework and Blueprint for Careers (LSIS, 2012), selecting target outcomes and activities that echoed Oscar's expressed needs. Both frameworks reflect the DOTS elements, and allowed the programme to incorporate reflective writing and discussion. To assure Oscar I had listened to and accommodated his needs, I mapped DOTS outcomes against selected learning outcomes in the proposed programme draft, and talked it through with him outcome-by-outcome, explaining how they aligned.

Conclusion

My research aimed to explore the value of working with clients of a mental health charity to co-construct a CLD programme for delivery within their current context. It also aimed to challenge this client group's powerlessness by sponsoring collaborative development of career guidance support. I now present conclusions to my research questions, and discuss how findings illuminate my aims.

From a practitioner perspective, the co-construction process enhanced my perception of the programme's usefulness and value. Collaborating with a client from my target community provided important insights about his situation and needs, informing purposeful selection of CLD frameworks, processes, and learning outcomes. Although I later selected an alternative framework to DOTS, albeit reflecting the same four elements, involving Oscar provided an understanding that informed my selection and offered a chance to seek Oscar's feedback on the emerging draft. The resulting programme outline was theoretically sound and client-focused, mirroring Oscar's needs better than one created without his input.

Co-construction also impacted the client's perception of the CLD programme. Oscar inferred he would find the emerging programme useful and valuable, as it accommodated his expressed needs and concerns. In this context, co-construction has proved a helpful approach to develop meaningful career guidance (Thomsen, 2017).

Rather than placing a client on the 'receiving end of orders' (Hooley, 2018) by proposing a practitioner-designed CLD programme, this research aimed to

situate Oscar as a partner in programme design. Oscar reflected that the process: 'made me think quite a bit about what I would want and what I think other people would want from a course like that', inferring he knew his input was valued. Although co-construction rarely resolves the power balance completely (Cullen, Bradford & Green, 2012) between those drafting CLD programmes and intended recipients, it did challenge this client group's powerlessness by sponsoring collaborative development of career guidance support.

The research revealed Oscar had experienced CLD's principles (experiential and collaborative learning) and target outcomes (DOTS supporting career resilience, career happiness, and career growth) through BT's vocational rehabilitation programme. This surprised me, as BT's programme is not called CLD or consciously based on CLD theory or frameworks. It appears CLD does not have to be termed 'CLD' or be knowingly based on CLD theory to deliver its principles and outcomes.

However, Oscar's narrative exposed his need for further CLD to strengthen his career management skills. A theory-based, user-focused CLD programme that consciously reflects CLD's principles and target outcomes could extend BT's good work. The findings suggest that to be most effective a BT CLD programme should take account of the following:

First, the programme should be centred around experiential learning. Oscar's story illustrated that experiential learning is memorable, addresses experience gaps, and builds skills, confidence, self-efficacy, and capital. As confirmed by Oscar, reflective writing and/or discussion should be incorporated, helping clients to transform experience into knowledge (Kolb 1984).

Second, this should be a group-based programme. Oscar's insights reveal how working with others appears to enhance a sense of belonging, reducing isolation, and offering opportunities for peer support, reassurance, and shared insights. Adopting this approach would also serve to enhance clients' support networks and develop social capital.

Third, the ZPD should be an integral programme feature. Oscar's stories highlighted benefits of working

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in the ZPD, including making step-by-step progress and building independence as support is gradually withdrawn. A skilled, empathic facilitator can guide and support Oscar in his CLD.

Finally, CLD's target outcomes (career resilience, career happiness, career growth) should be delivered by offering learners opportunities to build self-awareness, opportunity awareness, decision learning, and transition learning. Oscar requested at least two sessions on each DOTS outcome. He rated self-awareness as the most important outcome, enabling him to recognise his skills and build self-efficacy and optimism for the future. Reflective writing and discussion and narrative approaches can support achievement of this outcome, helping Oscar to build his self-concept and, in his words, 'realise' what he 'can do'.

Co-construction has offered a useful opportunity to verify the applicability of CLD's principles and outcomes to this client in this context. It has provided insights into how they should be applied and I again conclude co-construction has been a helpful approach.

Oscar's expressed need for further CLD in addition to the career learning he had already experienced appears to validate the usefulness of constructivist CLD frameworks, which position career development as an ongoing process not a single-cycle event. The draft programme therefore included learning outcomes from the CDI Framework and Blueprint for Careers. However, although existing frameworks provide a solid platform upon which to base a CLD programme for this group in this context, they should not be applied indiscriminately. Programme structure and outcomes must be selected with clients' needs front of mind. The frameworks and outcomes selected are congruent to Oscar's needs, and potentially to those of other adults with mental health challenges. Yet, one client's needs cannot be termed representative of every client (Knight, 2002). We need to check if the proposed programme's structure, content, and delivery methods are appropriate for other target clients.

Oscar and I agreed a logical next step would be the design and delivery of a 'pilot programme', inviting other clients to provide 'extra feedback' and 'help decide'. In July 2019, BT received provisional

confirmation of a grant award through the SELEP Community Grants programme. Now confirmed, this grant will facilitate pilot development, delivery, and evaluation, intended as the main focus of ongoing research. This work commenced in autumn 2019.

In summary, working with clients of a mental health charity to co-construct a CLD programme offered a powerful learning experience for me, as researcher and career practitioner, and my target client. It also delivered a theoretically sound, user-focused programme outline, a helpful foundation for BT, its clients, and me as practitioner in this context.

Involving and valuing clients' input during planning and construction of learning programmes can help practitioners learn about themselves and their communities of practice, challenge existing power structures and counter inequality (Dorling, 2011; Thompson, 2016).

Co-construction offers a useful opportunity to verify the applicability of CLD's principles and outcomes to the client group. It can provide insights into how they should be applied and offers practitioners a vehicle to design client-led, client-focused learning programmes, while promoting equal access in a move towards equal share and social justice for clients with mental health challenges, thus enhancing emancipatory practice.



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