SECTION FIVE

CASE EXAMPLES AND TOOLS

As you develop strategies for your Action Research you can add them to this Section. You can also use the information in this Section to train new staff or co-action researchers about how Action Research is done day-to-day in your Reconnect service.

Three useful case examples

These three case examples are drawn from the Action Research experiences of particular Youth Homelessness Pilot Programme and Reconnect services. They are not intended as models to be copied exactly, but as examples of how Action Research was used in practice.

Case example one—applying the cycles for a particular question

(Contributed by Connect, Darwin)

Connect in Darwin used a broad range of processes, including focus groups, one-on-one discussions, group work, questionnaires, and action-oriented 'gatherings'. Action Research questions were initiated at all points in the cycle, often at the 'action' point when clients and/or other organisations identified a need for change.

This example shows briefly what Connect did in each phase of one particular Action Research cycle.

The initial question	**What would it take to provide an effective service to young people and families in rural areas?**
Observation—Describing 'what happened' by gathering perspectives and 'data' from all stakeholders.	This involved gathering information and people's stories (clients, potential clients and service providers) so we can identify referral sources, issues, gaps and needs. Sources of data were: ● minutes from relevant meetings (for example, local support workers forum); ● service and client data; ● records of feedback/ interviews with individual workers and clients;

	• client case files; • stakeholder focus groups (for example, rural school counsellor, local politician, aboriginal liaison officer, and so on); • input from 'experts' (people living and working in rural communities); and • our own observation of client accesses to service.
Reflection—'Developing theories', through analysis, and interpretation. This should be undertaken collaboratively with key stakeholders.	Sharing this information through discussion and idea generation using: • focus groups with young people and clients; • discussions at our community reference group; and • sharing client feedback with other service providers and other clients and getting their views (for example, 19 other people have said they would like us to have an office base in a rural area ... what do you think?').
Planning—Translating broad generalisations and analysis into practice	Forward plan using: • focus groups with clients or other stakeholder groups; and • one-on-one discussions with clients and potential clients (for example, 'most people we asked said they wanted us to have an office here in Humpty Doo, how should we do that with existing resources?').
Action—Based on three previous stages. It should be deliberate and critically informed and will lead to new cycles with a refined question.	Trying things out, based on previous phases, such as: • establishing a one afternoon a week office base in Humpty Doo, and one in Palmerston; • gathering feedback about this (a new cycle of 'observation'); and • this then leads to a new specific question for each of the two new sites. Refined questions: What would it take to set up effective early intervention support services for parents in these two locations?

Case example two—from question posing to evidence-based findings

(Contributed by Resourcing Adolescent and Family Team (RAFT) Wollongong)

This case example demonstrates:

- how a general issue or concern can be refined over time to a more specific targeted question;
- how various sorts of data can be used to develop an evidence base for practice changes. Information was used from a combination of existing and specifically-developed strategies. In this example, substantial use is made of client and service level statistics complemented by records kept from practice which are anecdotal (people's comments and views). To help make it manageable, a sample of cases for a particular period was used to help answer the question; and
- the findings and the evidence to support them have been documented in detail. This can be useful when a strong evidence base is required for findings, but it is not suggested you necessarily go into this amount of detail.

This case study does not actually illustrate the Action Research cycles involved in the processes. However, it does show how this service made clear links between refining questions, gathering evidence, and then changing their practice to reflect what they found out.

The initial question: Gender issues?

Revised question: In what ways does variation of gender impact on services provided by RAFT?

Re-revised question: What impact does the flexibility of location and hours have in ensuring more men (as fathers/guardians/significant others) participate in the program?

Process description—Although Australian society has changed with more women entering the workforce, the experience of the Wollongong Youth Accommodation and Support Association Inc. seems to indicate women are still the primary carers of children.

Our experience has also shown that, in general, it is the female caregivers who seek support and counselling when difficulties occur in the family, and male caregivers are less available to make appointments during the ordinary working day.

It was decided to examine if counselling and support were available after ordinary working hours in places that would better suit men. If so, would male caregivers (for example, fathers and guardians) take up the opportunity to be involved.

The initial Action Research question was devised to look at the rate that males in the family accessed the service. It was then further revised to investigate whether the after hours component and flexibility of location did indeed encourage males, such as fathers, stepfathers and guardians to access the service.

Once the question was established, quantitative and qualitative data was collected over the period l July 1997 to 31 October 1997 in the form of questionnaires, interviews with males and responses included in exit forms.

Key findings and changes

Percentage of families with a significant male involved

Between 1 July 1997 and 31 October 1997, 58 clients were seen. Of these, 26 had males, such as fathers, spouses, or grandfathers living with the family. Of those families with male caregivers, 84.6 per cent (22 families) participated in some or all of the services provided by RAFT.

This sample indicates that, in families with male caregivers, a high majority of them were involved with the pilot.

Who made referrals? (If made by parent/guardian)

Of the six referrals made by a parent/guardian from l July 1997 to 31 October 1997, five were made by a female, and one by a male. None of these referrals were made after 5pm. This indicated that females are the main referral source in the family. It also shows that females still use the traditional hours, before 5pm, to initially access the service.

Times of appointments when males were involved

For families involved with the pilot the appointment, times differed where:

- fourteen had only after-hours' appointments;
- five had no after-hours' appointments;
- four had the father not involved at all; and
- three had some after-hours' appointments.

Some of the reasons behind males not accessing the after-hours' component were that the male, being a shift worker, was available at times during the day; the male being unemployed; or the parents or the male were not being involved.

The reasons that male caregivers were not involved in all cases were that the young person did not want their father involved. In cases like this, RAFT dealt with the female caregiver only and that no immediate family members were involved.

The choice of appointment times indicated that after traditional work hours (after 5pm) was the preferred choice by males when making appointments for sessions with the service. Of the remaining 30 families that did not have a male, seven (23 per cent) used the service for some after-hours' appointments, while six (20 per cent) only accessed the service after-hours. So, to be readily accessible to males and encourage their participation, workers needed to maintain a flexible attitude and approach to working hours.

Changes to the way we delivered our service—service locations

The hours after 5pm were maintained by the pilot for working parents whenever possible. Home visits were offered to families when dealing with the service.

There were 17 males who were involved in the service during the sample period, either exclusively after-hours, or sometimes after-hours. The location of these visits was, 17 in the clients' homes; one was at a crisis youth refuge; and one was at a grandparent's home.

Both the Crisis Youth Refuge and the grandparent's home were used in conjunction with home visits.

This indicates that the preferred location by males for contact with the service was at home. Our perceived rationale behind this is that most males have worked during the day and thus a service visiting the home would be more time effective for them. It would also cause less disruption to their leisure time (and less stress) and allowed all of the family to be involved if appropriate.

The location of visits to clients where there was no male in the family were more varied, often with a number of locations being recorded for each client. This was possibly due to the fact that there was more flexibility in choice of locations during the day. This was particularly so when the worker was dealing with an individual client, rather than the whole family, which logistically was harder to coordinate and had more limited options.

Main meeting locations and subsequent number of client visits

Home	23
Crisis Youth Refuge	9
School	5
Friends	5
RAFT	5
Other for example, McDonalds, beach, relatives	6

Outcomes

A positive outcome is for RAFT to perceive that the client was somewhat re-engaged in one or more of activities like education, training, employment and community participation. A neutral outcome is for the service to perceive that nothing had changed for the client, either positive or negative. The table below shows the differences in outcomes with and without male caregivers.

	Positive outcome	Negative outcome	Neutral outcome
Families with a male	61.54% (16)	15.38% (4)	23.08% (6)
Families without a male	46.88% (15)	25.00% (8)	28.12% (9)

Results appear to indicate that single-parent families (predominantly female) have a lower level of positive outcomes, reinforcing the need for additional supports to be provided to a single parent when dealing with young people at risk of homelessness.

Changes to the way we delivered our service—for single parents and working families

Additional supports and/or referral to other services were accessed more frequently when dealing with single parent families. RAFT endeavoured to promote the after-hours' component when dealing with working families.

Changes to the type of service we delivered—for males

Workers encouraged males to participate, where appropriate.

Key learning about the process—In most cases, the service used the family approach, not an individual one. Because of the high level of access by males, the pilot workers need to increase their awareness of the needs of male parents, especially if they are single parents.

The after-hours' component should be used predominantly for families who work between 9am and 5pm. Staff hours needed to be flexible to accommodate the varying numbers of clients that need an after-hours' service.

It may be difficult, but not impossible, to engage males in a counselling or support model. When they are engaged, it appears to be effective, and this produces a more positive outcome.

Many working families are surprised to know that the pilot can operate after hours, and often appear to feel that they are imposing on a worker's private time. The worker must ensure that the family understands that this is their work hours.

Anecdotes, quotes and insights—One father stated 'that it was good that you could sit in your own chair with your slippers on when you spoke to a worker. I feel more comfortable discussing my family's problems in my own home'.

One mother said that she wished that her husband had been more involved, as the problems in the family were due to the fights with her daughter and her husband. She stated that each said it was the other's problem, and each were waiting for the other to change first, rather than working on it together. Unfortunately as a result, nothing really changed in the family.

More positive outcomes have occurred when male and female caregivers are involved. This may be because they have more supports than a single-parent family.

Many families that the service deals with have issues with stepfathers and their relationship with the young person. Therefore, it is essential that the stepfather is present when working through these issues so that a long-term positive result can be obtained.

The regular absence of a particular parent or guardian in the session can say a lot about the functioning of the family's dynamics.

A father stated that he was only involved because it was after hours and in his own home. He stated that he was not going to come home, change and go out again just to hear his son 'dump on him'.

Case example three—a 'day in the life' of a Reconnect worker using Action Research

(Contributed by Connect, Darwin)

Being a Reconnect worker means that on any given day you can work across a huge spectrum of areas, using a number of interventions and with goals ranging from individual client change to long-term systemic change.

The use of Action Research in everyday work is imperative to the continued development of the Connect service in Darwin. With such a large emphasis put on the Action Research process in the pilot, Connect now has ingrained the use of Action Research questions and ways to develop/change how the program is run in response to client/community feedback, into every aspect of its service provision.

This is a typical (if you could call it that) day in a Connect workers' life…

8.30am–9.15am

Begin work, receive a message on the answering machine from Rita (Joanne's Mum who I provide case support to) requesting an immediate response. A phone call is made back to her after speaking with the other Connect worker, who supports the young person. Rita is asked for her preferred way of receiving support. The result was that the other Connect worker finds out if Joanne would be OK about a meeting between them all.

Action Research Component

An ongoing Action Research question is 'whether it is more viable for the young person and their parents to have separate workers'. It was found in the pilot that this was often the case, but with the recognition that every client is different, this is a question that is asked of clients and ourselves every time we engage with a family.

10.00am–12.00pm

Meeting with a youth detention centre social worker and other key stakeholders regarding the development of a 'Community of Origin Visitors Scheme'. This meeting is to discuss the draft Background Paper created by a Connect worker and the creation of a time-line that allows for the optimum amount of consultation and contribution by relevant community members.

Action Research Component

Within the pilot, it was identified through client feedback and service assessment processes that there was a need for Aboriginal young people in detention to receive visits from other members of their communities with language, family or just community ties. This would be seen as a way to ease the feeling of dislocation and isolation from their communities and families, who are sometimes 2,000 km away. In response to this need and in partnership with the detention centre, Connect has drawn together a few key stakeholders in an effort to secure funding and put the beginnings of a model together, before further consultation is undertaken with members of the sector and the community.

1.00pm–2.30pm

Meeting with a young woman who is 14 years old. Went to shopping centre food court and discussed current issues. These included school truancy, self-harming behaviour and violent behaviour towards other people. On returning from meeting, a few observations regarding our meeting are placed in the 12 to15 file.

Action Research Component

The key to making Action Research successful in terms of client work has been the ability to make it accessible on a daily basis. An example of this is creating a file titled *'what works with 12 to15 year olds?'* This came about as a result of observations by workers and in dialogue with local agencies. This age groups' support needs seemed to be different. The aim of this file is that when a worker has dealings with someone in this age group, they jot down what was effective, whether it be 'meeting for shorter times' or 'driving the whole time', and drop this in the file. This was a time-effective way of collecting information that was later collated. Then it was used at the service level and fed into an inter-agency process for improving access of under 15's. This helped to support services and improve their capacities to respond effectively.

2.45pm–3.00pm

Return from client visit and receive a message (amongst others) from the school counsellor at a local high school. Return her call to accept a referral for a 15 year old male requiring assistance with a mix of issues including extreme conflict with parents and the need to look at income support needs. Time made to meet with him and the school counsellor tomorrow.

Action Research Component

The school counsellors and Connect workers have jointly agreed to use Action Research to look at the best ways the service and school can work together to have the optimum result for the young person. This is at an early stage and tomorrow's meeting will be a good opportunity for observation and reflection on how collaborative early intervention case work can happen. At a practical level, we are asking *'what would it take for the young person and their family to have more options for referral, advocacy and support?'.*

3.00pm–4.30pm

Pick another client up from school and take her to Centrelink in relation to a breach that has been imposed. Exceptional circumstances have come to light in our work with her. During this interview, it strikes me that Connect staff have been regularly providing additional information to Centrelink at the time of a breach and that a collaborative look at communication processes between the agencies might improve the information base for decision making. I make a note to follow this up with Centrelink.

Action Research Component

Anecdotal evidence indicated it was worth looking at this area. This insight led to communication with Centrelink and it was later decided we would look collaboratively at how the service and Centrelink could improve communication, particularly at the time of breaches. A page in the back of the service daybook (a book used between workers to communicate information during the day) was created to record client experiences and worker communications with Centrelink. This information was then able to go to the regular collaborative meeting we have with Centrelink staff as a basis for improving practice between the agencies and identifying any emerging issues. From the meetings, collective decisions could be made.

4.30pm–5.00pm

Message in daybook from other Connect worker saying that Joanne says that she will meet with her Mum tomorrow night. Contacted Rita and told her that a meeting time has been made for tomorrow night after work at the office with her daughter. I help her prepare for the meeting and clarify with her the main issues she wishes to raise and discuss with her the potential impact on her daughter of speaking about these issues. The conversation ended with Rita being asked how she found phone contact as a way of getting support and indicating that face-to-face was always an option. Rita said she was happy with phone support as the main way of communicating, as it was very convenient for her.

Action Research Component

Another Action Research question constantly being explored by Connect is *'What is the most effective way to support families?'* One strategy for exploring this is for phone support to be actively offered to parents, as well as face-to-face meetings. There was some anecdotal evidence that parents often find phone contact a more viable and practical means of support. The worker records Rita's' feedback on the Action Research observation sheet which has been set up to look at phone support, (a one month focus). So far this is showing that phone support is a viable form of client work and not 'just a phone call'.

Practical tools to help with Action Research processes

In this section, you will find practical examples and tools that you can use in your Action Research processes. They are not intended to be prescriptive and you are invited to modify these or to develop other tools that better suit your context.

Tools provide some structure for thinking about Action Research and recording information in a form that is relatively succinct. The scanning and competencies' audit tools are designed to help you start Action Research at an agency. They can also be very useful for regularly reviewing and informing Action Research practice.

As well, there are some tools that are designed to assist in recording of Action Research processes and insights. They are simple and practical. In particular, they are intended to assist in building lots of information into key points that you want to keep.

The tools included here are not the only ones that can help in developing key points. Various computer programs can be used to record information and help sort it into themes—for example, for working out the themes of comments from a feedback box.

Tools and documentation are not an end in themselves. Reconnect's objective is not about developing impressive piles of paper about what is happening. The real objective of Reconnect is to improve the level of engagement of homeless young people or those at risk of homelessness with family, work, education, training and the community. The Action Research tools in this kit are to help you and your community achieve this objective.

Undertaking scans of internal and external environments

Action Research cannot be simply imposed on a particular locality or on a 'community of interest'. To be successfully incorporated as an element of practice requires the support and contribution of a variety of stakeholders and tailoring to a particular context.

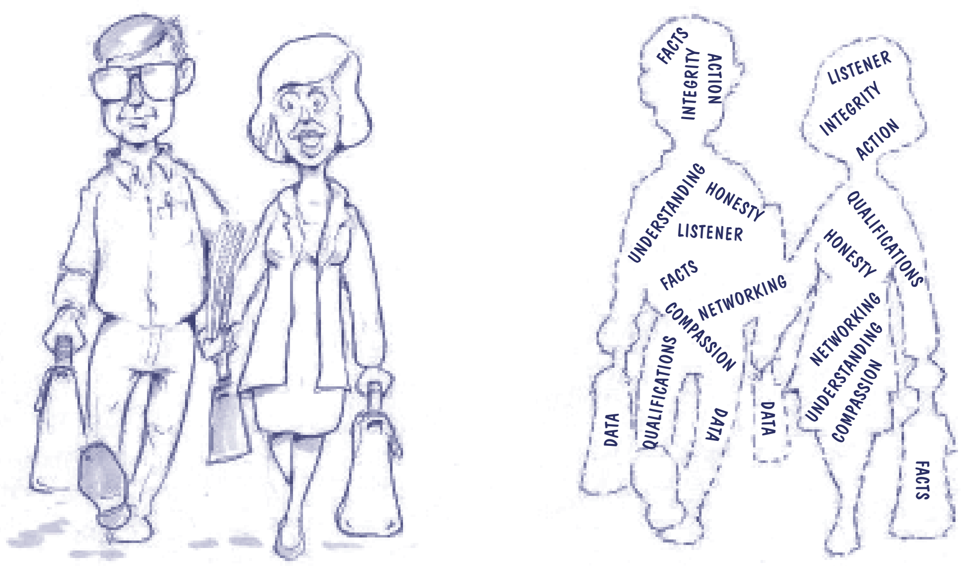
Indeed, you should 'Action Research' how you develop your Action Research capacity, rather than assume it will just happen! As a first step, you can involve an initial group of people to look at (observe and reflect on) their own organisation/s and the community context in which they are located. As organisations and communities change over time, this will be relevant to their later stages of Action Research implementation, as well.

Some questions to ask	Responses
Organisational context **How does your organisational context affect the implementation of Action Research?** *‘What is the structure of the organisation and what parts of the organisation need to be, or would benefit from involvement in the Action Research process?’* *‘What Action Research values, identified in Section One of this kit, are present in the organisation (or the relevant parts of the organisation)?’* *‘Are there already processes within the organisation that reflect Action Research values or processes?’* *‘How open or closed is the organisation to include others, for example clients and other agencies in service development planning and reflection Should this include some groups more than others?’* *‘What concerns may emerge about implementing Action Research values and processes?’* *‘Are there any other relevant questions?’*	

Community Context **How does your community context affect the implementation of Action Research?** *'How might the history and character of your community/locality and how you fit within that, affect how you go about encouraging involvement in a local early intervention strategy and the Action Research aspect of this?'* *'What/who are the key first to know agencies/contacts in your community?'* *'What relationships currently exist with these?'* *'What networking/collaborative mechanisms already exist that may be involved in the Action Research effort? Who is 'on board' already? Who isn't?'* *'What are the other relationships that may be important to recognise or develop'* *'How will you start to build an understanding of Action Research and its role in early intervention with those currently and potentially involved in your Reconnect strategy? What communication strategy could you develop to facilitate this?'* *'Are there any other relevant questions?'*	

Undertaking a competencies' audit

The Action Research competencies' tables below are designed to demonstrate that Action Research is not about starting from scratch. Most services are used to taking formal terms of reference, funding guidelines, policies and theories and turning them into 'real world' practice. In Action Research, you will need to work out what capacities and competencies you already have and what other skills are needed to undertake the research. Then, you can look at how to use existing competencies and how gaps can be addressed. This is called a 'strengths-based' approach.



The left column of the table below lists key competencies of human services delivery relevant to Action Research. These include interpersonal communication, group work, community work, organisational coordination and research.

The middle column translates these into Action Research competencies. In the right column you can indicate areas of strength, together with any notes on areas where there are gaps or where it may be useful to seek other people's involvement or training.

Action Research competencies

Interpersonal and counselling competencies	Related Action Research competencies	Your strengths, gaps, areas to keep an eye on, areas to seek others involvement, training needs, and so on
Communication skills	Being able to engage with people, invite people to express their thoughts, actively listen. Making Action Research accessible by explaining it in ways that it can be understood. Communicating to people the value of their contributions (a 'strengths' perspective).	
Problem solving	Communicating that you value hearing about what's not working as well as what is working. Hearing people's concerns and hunches. Working alongside people to come up with Action Research questions. Mobilising resources. What can be used and how to get access to them. Setting goals and continually reviewing your progress. Ability to handle crisis situations and emotional issues.	

Empathy	Paying attention to people's concerns so that they feel comfortable with contributing or participating. Ability to respect diverse perspectives, values and cultures. Being able to look at things from the client's or stakeholder's frame of reference.	
Seeking understanding	The ability to step back and check your assumptions and values. Staying a bit sceptical about what will 'work'. Valuing and making time for non-chaotic reflection. Being able to cope with an open process and reporting of insights.	
Observation	Being able to describe what happened and postpone interpretation.	
Flexibility	Ability to change direction and modify questions, plans and strategies along the way. Being able to juggle a number of projects/research questions at a time.	

Group work competencies	Related Action Research competencies	Your strengths, gaps, areas to keep an eye on, areas to seek others involvement, training needs, and so on
Facilitation	Supporting people to have their say in focus groups or meetings. Facilitating and participating in reference groups and other collaborative mechanisms. Dealing constructively with group disagreements and conflicts. Debriefing and support to those who are `new' to participation.	
Group development	Providing support, resources and opportunities for groups to be established and sustained—for example, a parents' group.	
Evaluation	Assisting groups to negotiate, understand and name outcomes—intended and unintended.	
Creativity	Having fun and being comfortable with different ways of doing things.	
Empowerment	Taking steps to allow those least powerful to be heard and have influence.	

Community work competencies	Related Action Research competencies	Your strengths, gaps, areas to keep an eye on, areas to seek others involvement, training needs, and so on
Negotiation skills	Talking to and reaching agreements amongst diverse groups—for example, protocols and referral policies.	
Networking	Actively working with other people/groups/services, rather than 'flying solo' and trying to solve all the problems on your own.	
Small 'p' political skills	Choosing language that makes being involved easy. Negotiating access to resources and systems. Understanding protocols and customs—for example, cultural norms. Identifying key people—the 'movers and shakers'—and making the most of what they have to offer. Helping to reassure people who feel threatened by changes.	
Resource auditing	Ability to identify the main community issues. Ability to identify community strengths and resources.	

Community development and education	Assisting a diversity of people to become involved in building community early intervention and using Action Research as a tool for this.	
Facilitation skills	Working with diverse groups of people. Helping people generate their own ideas/solutions/meanings.	
Cross cultural competencies	Listening to and working with people in ways that respect and incorporate their 'cultures'. Negotiating guidelines and facilitating communication between groups who may not use the same language and/or have different understandings of things. Paying attention to what it will take for different communities to 'own' certain strategies/actions.	
Motivating	Engaging and educating those involved. Creating enthusiasm about 'what's in it' for various stakeholders. Recognising and celebrating. Making the achievements and skills of all those involved.	

Organisational Competencies	Related Action Research competencies	Your strengths, gaps, areas to keep an eye on, areas to seek others involvement, training needs, and so on
Planning	Able to work through how things will be done in fairly systematic ways.	
Information sharing	Communicating up, down, out and between—for example, developing a communication strategy.	
Policy development	Using Action Research insights to inform policy and service directions. Breaking down broad policy questions into manageable research questions. Keeping focused on big picture program goals, and change actions, and coordinating micro/macro levels of inquiry.	
Time management	Structures for making effective use of time—fitting Action Research in between morning tea and lunch.	
Conflict resolution	Diffusing tensions across a broad range of groups. Creative use of conflict for learning.	

Team management	Motivating and supporting work teams. Making workloads/roles/tasks suitable to particular people/groups.	
Monitoring	Maintaining the 'quality' of the Action Research processes. Checking thoroughness/validity of what is happening.	
Marketing	Being able to communicate good practice and positive early intervention outcomes arising from community-based collaborations—for example, summary reports of local strategy and its achievements.	

Research competencies	**Related Action Research competencies**	**Your strengths, gaps, areas to keep an eye on, areas to seek others involvement, training needs, and so on**
Pre-research preparation (in traditional research this is often done by a literature review)	Checking out what has been found out and done already in relation to your issue or question. 'Do your homework'. Where possible, understand, critique and use previous insights.	

Developing research questions	Turning local issues/concerns/hunches into Action Research questions.	
Deciding how to go about the research (often called the methodology)	Working out the best way to gather and make sense of the information you need.	
Documenting	Being able to set up a simple and efficient system for documenting details of the process and the evidence you depend on.	
Data management	Managing information and data effectively—a rusting filing cabinet out the back or a pile of papers under the left had side of the desk? Working out the best physical or computer-based methods of managing your Action Research information.	
Theory building	Working out why things happened in partnership with others.	
Publicising/publishing	Sharing your insights and findings publicly and in a way that allows for their evaluation.	

Six examples of documenting Action Research processes

There is no single way to document and record your Action Research activities. You will need to develop and adapt the way you record information to suit your individual situations and preferences. Some of your recording tools may be flexible and informal. Others may be more structured.

Different recording tools may be used in a number of ways. In some cases, the tools are used to record primary data. In others, they act as ‘prompter sheets’ to help you plan each phase of the Action Research cycle. They may also act as ‘summary sheets’ to document your main research activities and work as cross-references to where your primary data is stored.

Feel free to mix and match those aspects that seem to meet your particular needs. Or make up something that suits you better.

Recording example one—to prompt discussion and record activities

(Contributed by Kangan Batman TAFE, which delivered Action Research training to Reconnect services)

The questions under each cycle are taken largely from Section Two of this kit. This tool can be used as a 'prompter' for discussion about your Action Research activities. You can also use it to write your responses to the questions on this form and to record your activities. Using the questions to guide you through each phase of the Action Research cycle will help ensure you take a rigorous approach to the research.

Planning

'What are our questions?'

'What do we want to do?'

'How will we do it?'

'When will it be completed by?'

'Who will do what?'

'How will we know if we're on track?'

Action

‘What actions are completed?’

‘Which actions were planned but abandoned?’

‘Which actions were modified or were not in the initial plan?’

Observation

‘In what ways have we tried to find out what happened?’

‘Who thinks it happened differently?’

‘How did things happen?’

‘What supporting documentation do we have?’

‘Are our ways of observing what is happening actually capturing the essential/exciting/unusual features?’

‘Are we including ‘voices’ that may not usually get heard?’

Reflection

'Why did this happen? Do we need to probe further to really understand this?'

'How do different groups understand what happened?'

'What assumptions am I working with? What ideas are being supported/challenged?'

'Who agrees/disagrees and what does this reveal?'

'Who got to have a say and who did not—and what does this mean?'

'Have we got a shared understanding of the meaning of what happened?'

'What does the interpretation mean for planning change?'

Recording example two—to track your main research activities

(Contributed by Kangan Batman TAFE)

This tool can be used to tracking your main research activities. You could summarise the key activities for each cycle on this form, with cross-referencing to the records that contain primary research data. (These may include case notes, minutes of meetings, client feedback data sheets, and so on) You might fill out each column as you finish each phase of the cycle to help you manage the recording of the process. To help maintain an overview of each research cycle, present the follow-through for each aspect of your plan on the one page.

Research question ______________________________

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Plans *'What do we intend to do?'*	**Actions** *'What did we do?'*	**Observations** *'What happened? How do we know what happened?'*	**Reflections** *'What does this mean for changed practice?'*

Supporting documentation:

Recording example three—a research 'journal'

(Contributed by Kangan Batman TAFE)

This tool works more like a research journal, where minimum formatting allows you to jot down anything from a record of activities, to comments and observations, to plans for what to do next. This is a kind of 'catch-all' tool where any relevant thoughts or activities are recorded indiscriminately for summarising and analysing later. You may like to transfer this format into an exercise book, allowing one page for each phase of the cycle.

Research Question:

'What would it take to…?'____

____

Planning

Research Question:

'What would it take to…?'____

____

Action

Research Question:

'What would it take to...?' ______________________________

____

Observation

Research Question:

'What would it take to...?' ______________________________

____

Reflection

Recording example four—recording data an interpretative material

(Contributed by Kangan Batman TAFE)

This tool is slightly more structured than example three. On the one hand, it allows you to record hard evidence. On the other hand it also allows you to record your own thoughts and interpretations. This allows the tool to record both primary data and interpretative material. It allows you to record your thoughts about your Action Research, even on days when you actually do nothing on it.

Research Question:

'What would it take to…?' ____

____

Planning	Date	Comments

Action	Date	Comments

Observation	Date	Comments

Reflection	Date	Comments

Recording example five—documenting the plan-act-reflect observe cycle

(Contributed by Colony 47, Reconnect, Tasmania)

Here is another example of how you can document information on each phase of the plan-act-reflect-observe cycle.

Macro Question: ______________________________

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Micro Question: ______________________________

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PLAN—What do we want to try?

(Describe the background of the issue (other research and so on)

Strategy	Methods of review	Time frame

Stakeholders:

ACT—What are we actually doing?

(Breakdown the process of implementation)

(Breakdown the process of obtaining feedback)

Barriers/Issues	Strategies

OBSERVE—What is happening? What do people think of it?

(Any information attached—for example, questionnaire?)

(Measurable outcomes?)

(Other feedback?)

(Other observations?)

REFLECT—What is working? What does that mean?

(Our thinking on what we found)

(Others' thinking on what we found)

(Where to now—other possible questions/directions?)

Recording example six—a two-step planning proforma

(Contributed by RAFT Wollongong)

Step one—general plan

What is our question?	What do we want to do?	Who is involved?	What strategies could we try?	Preferred strategies	Who needs to do what?	Time Line	Insights
Macro or micro level? For example, 'What would it take to improve our responsiveness to young people after hours?'	What are you seeking to change or explore? For example, 'We want to ensure we are able to engage with young people who need assistance after hours'.	Seek stakeholders/ participants and list them here.	What are the ideas brainstormed by participants?	Negotiate and 'prioritise' strategies, taking into account strategic and resource considerations.	Delegate tasks to the relevant people. How are they involved in participating to carry out the plan?	Put the actions in a timetable.	List any insights, issues or questions that have arisen throughout this process which may lead to new cycles.

Step two—specific/strategic plan

Strategy	Who is involved?	Who is doing what?	Timeline	What else have we learned during planning? What other questions have emerged?
The specific strategy you wish to try out in response to your Action Research question—for example, 'develop an after hours intake system'.	List the various people who are involved with carrying out and monitoring the strategy.	Map out and delegate tasks.	When are things to be done by?	Is a new plan needed? Does this raise a new question?