

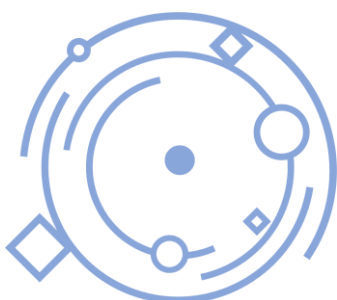
Practical guidelines for utilizing experiential knowledge.

By Marvin Scheffer and Shirley van Alphen

Many professionals have walked in the similar shoes as those they now support. They have personal experience with the issues they are helping others to navigate. These experiences are a valuable source of knowledge that can be used as a tool in professional settings. But how can this knowledge be translated into effective practice?

The professional use of experiential knowledge is gaining traction and is increasingly promoted in the healthcare sector. However, each experience and situation is unique, making it challenging to create a one-size-fits-all guide. Nonetheless, general guidelines outlining do's and don'ts can be established. Through literature reviews (both Dutch and international), expert (Dutch) interviews, survey results with Dutch professionals, and our own insights, we have compiled and refined practical guidelines applicable to all professionals and sectors within health and social care. For this reason, we use the general terms 'care recipient' and 'care provider'.

We start by explaining the difference between experience and experiential knowledge, followed by key conditions and considerations before deciding to use experiential knowledge under the section 'Connecting with yourself'. Next, under 'Connecting with the care recipient', you will find guidelines on how to apply your experiential knowledge.



Experience

Experience refers to what you know because you have lived through it. Sharing your experiences, feelings, and thoughts is called 'self-disclosure'. This involves revealing something about yourself that was previously hidden. When done in a professional capacity, this is known as professional self-disclosure. It can be verbal, non-verbal, or contextual – for instance, by literally sharing something about yourself, facial expressions, body language, or the decoration of your workspace. Self-disclosure can be initiated by the care provider, but the care recipient might also encourage it through (personal) questions.

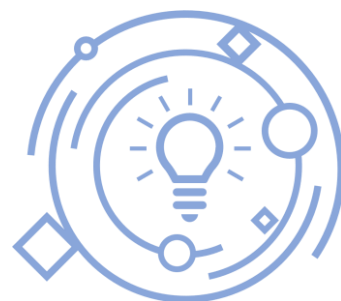
Experiential knowledge

Self-disclosure is different from experiential knowledge, as using the latter involves a conscious decision. You can utilise experiential knowledge without revealing personal details.

Experiential knowledge goes deeper than self-disclosure, as it's the knowledge derived from analysing and reflecting on your life experiences. Initially by feeling and asking yourself questions such as:

What does this do to me? - What do I think about it? - What do I want/can I do with it? - How will I handle it next time? - What do I need for this?

Experiential knowledge stands alongside scientific and professional/practical knowledge and, like these sources, is independent of any specific group or (care)sector. Experiential knowledge arises from all types of experiences: positive, negative, life-changing, and disruptive.





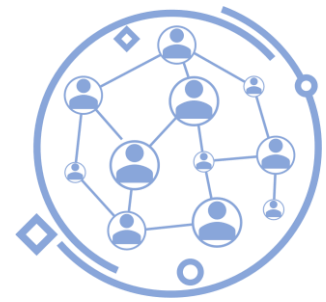
Individual experiential knowledge

Experiential knowledge is individual and personal. It encompasses not just the event itself but also what preceded it, what followed, how you experienced the whole, and what you felt. This can include practical aspects like finances, housing, work, and receiving care, making experiential knowledge comprehensive or holistic. Deepening and broadening your experiential knowledge involves analysing other sources, reflecting on them, and linking them to your own experiences. Such sources can be scientific knowledge, literature, stories, feedback, and critical questions from others.

The process of experiencing, feeling, analysing, and reflecting is a continuous process. This makes experiential knowledge fluid, as your analysis and reflection on a repeated experience might change how you perceive or handle it the next time.

Collective experiential knowledge

When you connect your experiential knowledge with that of others, analyse, and reflect on it, you develop collective experiential knowledge. Together, you discover different recovery possibilities and find recognition and acknowledgment. You realize that others have different ways of dealing with their experiences. The reflection involves asking yourself what you can learn from it, whether it suits you, and if it resonates with you. What are the similarities or differences, and how will you handle them?



Connecting with yourself



Take care of yourself

Decide for yourself whether you really want to use your experiential knowledge. Recognize that choosing to use your experiential knowledge is an internal process that should not be forced. It can be daunting but also fulfilling. It takes courage to overcome shame and coming out for certain experiences. You may feel you need to keep these experiences secret or carry them as a burden, but you don't have to as they are part of your being.

It's crucial to set, maintain, and communicate your boundaries. This involves self-awareness, communication, and self-care. Reflection and learning are essential, as is seeking support from colleagues, friends, family, and/or professionals. This allows you to contribute to the well-being of both yourself and others in a healthy and respectful manner. You are the one who decides what you want to share and where your boundaries lie.

Processing experiences

To use experiential knowledge professionally, your experiences must be sufficiently processed. You know your experiences are processed when you can acknowledge any accompanying emotions (positive or negative), set them aside or articulate them, and still focus on the care recipient's needs. It prevents countertransference, the projection of feelings, desires, and expectations onto the care recipient. It also ensures that you do not become absorbed in your own story and lose sight of the care recipient.

Only when experiences are converted into experiential knowledge and adequately processed can you use them professionally.

Ensure a safe work environment

Not every organization or team is open to care providers using their experiential knowledge professionally. This can make the use of experiential knowledge more difficult or lead to changes in how others perceive you. Therefore, a safe work environment is essential for experiential knowledge to be fully effective.

It would be ideal if your organization and team provide the space for this, as your colleagues and the organization can also learn from your experiential knowledge. Even better is if the use of experiential knowledge is included in the policy and actively supported. Where this is not the case, you can start by finding allies – someone you feel safe with to discuss your experiential knowledge and your intention to use it. Gradually expand this group so that you can eventually use your experiential knowledge in your work.

Keep developing

It's important to develop and maintain your experiential knowledge, just as you do with other skills used in your work. Consider training or education to become proficient in using experiential knowledge or to broaden and deepen your skills. Keep your experiential knowledge up to date by continually analysing and reflecting on experiences. Supervision, intervision, periodic evaluation, and seeking feedback are helpful.

Connecting with the care recipient

Define your goal

You use experiential knowledge as a tool to support the care recipient. You can do this by creating space for the other person's story, normalizing their experiences, or offering new/different perspectives and/or facilitating the conditions for their development.

Of course, you can open up and show emotions; reciprocity in experiential knowledge is important, but it should not be your main focus. Ensure the care recipient feels free to talk about themselves and that your input aligns with their needs. Remember, it's not about you, it's about the care recipient.

Use experiential knowledge implicitly and/or explicitly

When using experiential knowledge implicitly, you listen to your intuition to better align with the care recipient. During the conversation or in your actions, you intuitively sense what is appropriate and what is not. It can already be effective if you empathize without disclosing your own experiences. For example, if you have undergone a treatment that your care recipient is also about to undergo, not only can you explain the process better, but also bring up its potential impacts or consequences for someone (the holistic aspect) without having to mention that you have experienced it yourself.

When you use it explicitly, you actually share (parts of) your experience. First, intuitively sense whether it's the right moment to share. You convey individual or collective experiential knowledge by talking about your own struggles or recovery. Keep in mind that people may have questions or comments and might want to discuss what you have shared. Be open to this and receive it without judgment.

Take your time

It sounds so easy, but the reality is that many care providers often lack sufficient time. Using experiential knowledge, especially explicitly, can't be 'squeezed in'.

Care recipients need time to process shared experiences and/or determine if they apply to their situation. This can prompt questions. The process of asking and answering questions, and jointly exploring whether your experience is also relevant for the other person, takes time. Ensure that you have and take this time, as it helps care recipients feel heard and seen.

Additionally, this can lead to fewer questions later in the process, ultimately saving time in the long run.

Ensure you align

Ensure that your experiential knowledge aligns in depth and level with the care recipient's needs. It's desirable for the care recipient to recognize themselves in the shared experience and feel that you truly understand their situation. You can't relate your 'Monday morning feeling' to someone experiencing depression, just as you can't relate to the nausea associated with chemotherapy if you have never undergone it. However, you can connect on general experiences such as loss, love, or hopelessness. These elements are not necessarily tied to a specific group or diagnosis. It's important not to try to equate your experiences with those of others. Each experience is unique and can be felt differently.

Disclose your experience

Care recipients are sometimes inclined to idealize care providers and therefore express doubts or questions less often, believing that 'the expert must know best.' By mentioning that you also have been through something, but are now in a different role, it can create a sense of equality. This can benefit the relationship. As a result, care recipients will be more likely to express their doubts and thoughts, allowing you to get to the core of the issue more quickly.

Tune in with the care recipient

Keep in mind that the care recipient may not always want to hear about your experiences and may instead need 'the expert.' It's important to sense this and/or discuss it with the care recipient.

For example, ask the care recipient beforehand if they actually want you to share your experience. Afterwards, you can further inquire about the care recipient's own experiences and acknowledge that they may have different views. You can also ask if and how your experiential knowledge was relevant and if it was helpful to them. Sometimes, sharing happens spontaneously; in such cases, check with the care recipient afterwards if it was appreciated.

By checking, you ensure that your input is of added value to the other person.

Normalize

Many care-related issues are often taboo, even though they are more common than people think. As a care provider, you can create space and provide recognition for doubts, questions, and emotions such as shame and fear. Sharing your experiential knowledge can help normalize this process, remove the taboo, and emphasize the human aspect. You can also serve as a safe haven where topics that can't be discussed elsewhere are welcomed. By standing alongside the care recipient, you reduce 'us-versus-them' thinking, making them feel less like an exception and more willing to discuss 'failure'.

Implement recovery-oriented care

Recovery-oriented care is a methodology that partly arises from the perspective of care recipients. It emphasizes the individual, their experiential knowledge, strengths, and personal story. It requires care providers to adopt an attitude of being present, hopeful and optimistic, listening without judgment, and demonstrating humility. This approach aims to enhance the self-direction, autonomy, and experiential knowledge of the care recipient.

Recovery-oriented care humanizes and normalizes living with vulnerabilities and can be applied to almost every sector in healthcare. This methodology is often associated with care providers who use experiential knowledge professionally, making it an essential guideline to include in this list.

Conclusion

These guidelines were developed as part of an assignment in the Dutch course on 'Ervaringsdeskundigheid in Zorg en Welzijn'. The complete underpinning (in Dutch) of these guidelines and the definition of experiential knowledge can be downloaded [HERE](#).

Want to share these guidelines? Share the following link: www.ervaringskennisinzetten.nl.