

# Are skilled manual practitioners and therapists artists or technicians, or both?

Schon (1987) states:

It is not difficult to understand why practitioners (therapists) should be puzzled by their own performance in the indeterminate zones of practice...Artistry for example is not only in the deciding but in the doing...Often when a competent practitioner recognizes in a maze of symptoms a particular pattern, and constructs the basis for a coherent design in dealing with it, or discerns an understandable pattern in a jumble of information, something is being done which cannot easily be described. Practitioners/ therapists make judgments of quality for which they cannot state adequate criteria. They display skills for which they cannot describe procedures or rules.

Schon also describes a special demonstration of knowledge which we see in many of our spontaneous actions, for example when we display the ability to recognize, judge, decide and perform skills in patterns of what can be called 'knowing-in-action', exemplified in the skills displayed in a tightrope walker's abilities on the high wire, or a baseball pitcher's ability to 'know' and exploit a batter's weaknesses. These examples cannot be seen to depend upon planned, structured decision-making and although it seems to be essential that in practice we think before acting, in truth much spontaneous action in skilful practice suggests a knowledge which is not directly linked to intellectual activity.

We can all relate to the fact that we can describe something as deviating from the norm far more easily than we can describe what that difference is, or than we can describe what the norm actually is. This is particularly true of palpation information. Our hands recognize normality and deviations from it, but trying to put this difference into words or to analyse the difference is far from easy and often impossible.

It seems that skilled people may learn to perform complex operations without being able to give verbal descriptions which are capable of explaining the action – and this can be called 'know how'.

In unusual clinical situations we may

solve problems through trial and error as we invent procedures to overcome difficulties and this is not necessarily something to be dismissed as mere random experimentation – especially when applied by someone with sound knowledge and basic skills – since it then flows from an inner logic in which the unexpected influences the design of what is done next. This is a form of improvisation much like that of a jazz musician who displays an ability to simultaneously listen to others as well as to his own performance, and to adjust constantly to what is happening. We do something very similar every day in conversation with others as the form and content of conversations take unpredictable directions and we improvise our responses.

Schon (1987) calls this 'reflection in action': learning to understand what it is we have done as well as why.

Many skilful therapists/practitioners continually engage in a process of appreciating, probing, experimenting, assessing and evaluating what is being done, and which can only imperfectly be described. They seem willing to embrace error, accept confusion and reflect critically on previously unexamined assumptions even though they are uneasy at their inability to describe what they know how to do.

One of the primary objectives of the *Journal of Bodywork and Movement Therapies* will be to offer material which can both increase our knowledge base while also encouraging creative, intuitive, improvisation in the individual and collective professional evolution of those engaged in health care utilizing manual and movement methods.

**Leon Chaitow**  
Editor

## REFERENCE

Schon D 1984 In: Christensen CR, Hansen AJ (eds) *Teaching by the case method*. Harvard Business School, Boston, Mass.