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A diffractive reading of dialogical feedback through the political ethics of care

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Abstract
With regard to improving higher education feedback practices, there is an increasing interest in using the efficacy of dialogue rather than the more traditional unidirectional approaches. We build on this impetus by considering how the ethics of care can be used to analyse the dialogical aspects of feedback. By diffractively reading insights of Boud and Molloy [2013a. "What is the Problem with Feedback?" In Feedback in Higher and Professional Education: Understanding it and Doing it Well, edited by D. Boud, and E. Molloy, 1–10. London: Routledge; Boud, D., and E. Molloy. 2013b. "Rethinking Models of Feedback for Learning: The Challenge of Design." Assessment & Evaluation in Higher Education 38 (6): 698–712] on dialogic feedback through the moral elements of care ethics, this paper proposes a novel way of discerning the extent to which the dialogical giving and receiving of feedback contributes to learning. To illustrate this, we draw on experiences from an Emerging Technologies professional development course for higher educators. We examine our own dialogical interactions of giving and receiving feedback using the moral elements of care ethics – attentiveness, responsibility, competence, responsiveness and trust, to provide a concrete example of how the ethics of care can be used productively for evaluating feedback practices.

Care as a practice involves more than simply good intentions. It requires a deep and thoughtful knowledge of the situation, and of all of the actors' intentions, needs and competencies. (Tronto 1993, 136)

What is termed feedback doesn't necessarily lead to a positive effect on learning. (Boud and Molloy 2013a, 4)

Introduction
The use of feedback, particularly the traditional one-way feedback method of educator to student, is an ongoing concern for educators, particularly regarding the intention to improve student learning (Boud and Molloy 2013a). Developing a framework as an analytical tool for dialogical feedback could assist higher educators and students with more productive ways of engaging in the processes of giving, receiving and acting on feedback to improve learning. This paper makes a contribution to developing such a framework

through a diffractive reading of the political ethics of care and dialogical feedback. A diffractive reading is a way of rethinking issues by reading theorists or different theories and data through each other (Barad 2007). Diffraction is a concept from physics which has been used by feminist natural scientists and queer theorists Donna Haraway (2000) and Karen Barad (2007). It is a move that acknowledges differences and how they interact/ intra-act with each other to form patterns of significance, like waves in the ocean that connect and combine to create a new wave pattern (Barad 2007).

The definition of feedback by Carless (2013, 90) as the 'interactive exchanges in which interpretations are shared, meanings negotiated and expectations clarified' is emblematic of the dialogical approach to feedback that we are considering in this paper. We read feedback texts diffractively through Tronto's political ethics of care (1993, 2013), which moves away from principle ethics (Sevenhuijsen 2003) by identifying five moral elements – attentiveness, responsibility, competence, responsiveness and trust – as necessary elements in feedback for meaningful learning to occur. This paper is thus written from the assumption that both the political ethic of care and dialogical feedback relationally offer a fruitful normative framework to discern the adequacy of feedback as a process for learning. Both approaches encompass complexity and thought, opening up the interaction of all the actors' needs and competencies. The political ethics of care is beginning to gain attention in higher education, for example, in professional development of teaching and learning in a higher education institution (HEI) and care and responsibility in higher education (see Bozalek et al. 2014; Zembylas, Bozalek, and Shefer 2014).

Dialogical feedback and the ethics of care

Feedback is a central mechanism through which learning takes place in higher education (Carless 2013; Jolly and Boud 2013; Ladyshewsky 2013; Lillis 2011; Nicol 2013). However, many students report dissatisfaction about the timing and process of feedback (Falchikov 2005; Weurlander et al. 2012). Boud and Molloy (2013a, 2013b) have made a significant contribution to formative feedback in higher education teaching and learning through their proposition of a dialogical approach to feedback. For effective learning to take place, it is important to be able to give and receive feedback over a period of time, as it is through this extended process that students understand what is valued in their learning context. Boud and Molloy (2013a, 2013b) propose moving out of the conventional ways of giving feedback as a top-down process from a more knowledgeable teacher to a less knowledgeable student. Instead of focusing on the quality of comments given by teachers to students, students need to be actively engaged in the process of improving their learning. Molloy and Boud (2013) emphasise the importance of making explicit the criteria for learning in the dialogical relationship so that all are equipped to participate in the expanded process of giving and receiving feedback.

Although Carless (2013) has written about the importance of trust in dialogical feedback, no authors have linked the usefulness of the moral elements of the political ethics of care to the dialogical feedback relationship. Tronto (1993, 2013, 2015) has elaborated on the moral elements of care, namely attentiveness, responsibility, competence, responsiveness and trust,

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and how each of these moral elements are necessary for caring practice to be done well. We recognise many resonances between dialogical feedback practices and the moral elements of the political ethics of care. Both are based on a relational ontology which assumes that entities or individuals do not pre-exist relationships. It is through relationships that meaningful learning and practices are enacted. We therefore regard it as fruitful to integrate elements of these approaches with each other. The moral elements of the political ethics of care are explained in detail in the section of the paper which focuses on the analysis of the feedback process using an ethics of care framework.

Context

The context for this paper is a course on using emerging technologies to improve teaching and learning in higher education which is offered annually across four HEIs in Cape Town, South Africa, for academics and educational developers. The writers of this paper come from two of the four HEIs involved in the course in 2013, and are educational developers in different disciplinary contexts with an interest in care and social justice perspectives.

The course under discussion in this paper was designed to provide participants with an experience of how technologies can be used to enhance educators' own teaching and learning in HE. In the course, participants were required to write a case study first as a formative and then as a summative task. The authors of this paper were working in an interest group which focused on collaboration as a form of communicative interaction in response to educational challenges they were experiencing. The technological tool that was identified as having the most appropriate affordances (Bower 2008) for collaboration was Google Docs. The group used this platform for all their formative and summative assessment tasks in the course and continued to use it for iteratively writing this paper over a period of two years. The use of Google Docs to promote collaboration has been noted in other publications (Rowe, Bozalek, and Frantz 2013).

In the course, participants were encouraged to take an active role in both giving and responding to feedback. Each week, group participants were given a specific part of their case study to write about in a Google document, after which group facilitators and participants would give feedback on participants' work. Throughout the duration of the six-week course, participants produced four tasks for the case study on Google Docs and both gave and received feedback on these tasks in preparation for their final case study. The tasks were to describe their current contexts in relation to pedagogic problems, students' learning needs and current available technologies; to design and develop a small-scale learning activity using an appropriate collaborative tool such as Google Drive; to formatively test this learning activity out with one peer and or a student/s; and to evaluate this and reflect on the process. In the last session, they presented their case studies to the course participants and the facilitators in a face-to-face session.

Methodology

A diffractive methodology was used for this paper, involving new ways of looking at situations through a constructive and deconstructive approach where one set of ideas is read through

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another (Barad 2007). The data chosen and analysed for this paper were selected from comments on assignment tasks which were written in Google Docs by the facilitators and participants in our small group in the Emerging Technologies course. We selected data that 'glows' (Maclure 2013, 661) for us in generating something meaningful, an approach consistent with a diffractive post-qualitative methodology that moves away from representational measurement seeking reliability and validity (Maclure 2013). These data were analysed using a political ethics of care framework which was then read diffractively through Boud and Molloy's (2013a, 2013b) texts on feedback. We selected data which we found to best illustrate the elements of care and dialogical feedback. Using a diffractive methodology requires a careful, fine-grained reading of the insights and details of one set of ideas or text through another, while remaining 'rigorously attentive to the important details of specialized arguments' (Barad 2007, 25) in both of the sets of ideas. This diffractive methodology, in reading one set of ideas through another – in our case Boud and Molloy's (2013a, 2013b) dialogical feedback with the political ethics of care, provides inventive provocations for a respectful entanglement of ideas between dialogical feedback and the ethics of care (Barad 2007; Dolphijn and Van Der Tuin 2012). Barad (2007, 90) views a diffractive methodology as a 'critical practice for making a difference in the world', examining which differences matter and the ways in which they matter. Thus the methodology does not separate ethics from ontology and epistemology – diffraction is known as an ethico-onto-epistemological practice (Barad 2007). A diffractive methodology takes as its point of departure the position that we are all part of the world and implicated and that it is impossible therefore to maintain a distance from the world (Barad 2007).

In this paper, we explore the co-constitutive nature of our feedback that was facilitated by our iterative dialogue in Google Docs. All parties interacted with each other (including the facilitators) towards the co-construction of the emerging writing tasks. This mutual implication makes it possible for conversations to be held in juxtaposition with the text, as well as the text in the document to be changed in response to the feedback. Each author chose one or two elements of care and the Boud and Molloy texts on feedback to read the Google Docs feedback and responses to this feedback diffractively. Hultman and Lenz Taguchi (2010, 537) write

a diffractive 'seeing' or 'reading' of the data activates you as being part of and activated by the waves of relational intra-actions between different bodies and concepts (meanings) in an event with the data. As you read, you install yourself in an event of 'becoming-with' the data.

An intra-action acknowledges the mutual agency of human and non-human forces (Barad 2007). In addition to this activity, reading the data diffractively with one set of ideas (the political ethics of care) through another (dialogical feedback) means that the one text remains within the other in reviewing the data, similar to Barad's (2007) description of how in the process of diffraction, one wave combines and builds on another. Thus a diffractive reading enables a critical rethinking of the relationality of dialogical feedback to the moral elements of the ethic of care.

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In writing this paper, Google Docs enabled us as co-authors to write intra-actively and collaboratively on the same document, giving space for asking questions of each other's writing, while working asynchronously in different locations as well as synchronously in our face-to-face meetings. The document remained open to further changes with feedback comments and text revisions over two years as we revisited it repeatedly in its various iterations. This enabled new insights to emerge through the intra-actions of discursive practices and material phenomena of Google Docs and its affordances. The writing of this paper has thus emerged 'in-between different bodies involved in mutual engagements and relations' (Hultman and Lenz Taguchi 2010, 530).

An analysis of the feedback process using an ethics of care framework

This section of the paper explores the feedback which was given and received by the co-authors across the four formative tasks for the short course in the preparation of the case studies developed by the participants. We use Tronto's moral elements of care to evaluate the quality of the feedback given and received during this process. According to Tronto (1993, 2013) the ethics of care comprises five moral elements which correspond to phases within the caring process (Table 1).

We diffractively read the feedback given, the responses to the feedback and the resultant changes which were made to the tasks which participants constructed for the course using Tronto's five elements of the ethics of care in relation to dialogical feedback. In the following section, each element of care is considered in relation to the dialogical feedback which was given and received to improve the final case study product of each of the participants.

Attentiveness

The moral element of attentiveness is related to the first phase of care involving caring about – the acknowledgement that care is necessary (Tronto 1993). If one is not attentive to the needs of others, then it is not possible to address these needs. The capacity for attention is crucial for any genuinely human interaction. Following the French philosopher, Simone Weil, Tronto characterised attentiveness as an 'other directed' activity and claimed that attention involves the capacity to suspend thought and to empty the mind, being ready to receive the object of attention (Tronto 1993, 128). Listening to what others say is a prerequisite for understanding needs (Sevenhuijsen 2002). Moreover attentive listening does not consist of just opening the ears. One also needs to be able to ask the right questions (Weil 1973, in Sevenhuijsen 2002). Lerman and Borstel (2003) advise that it is preferable to provide feedback through an open-ended question than express an opinion, imposing judgement. The latter response may lead to defensiveness, where learning could be compromised. In our process of giving and receiving feedback on the reflective pieces written for the course, attentive listening needed to occur through reading each other's texts and comments as well as through face-to-face group interactions. In an online context where one does not have the visual and voice cues, the need for attentive 'listening' to the meaning of the text and 'asking the right questions' may be more challenging.

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Table 1. The phases and corresponding moral elements of care.

Phase of care	Explanation of phase	Moral element associated with phase
Caring about	noticing/recognising people's needs	attentiveness
Caring for	once the need is recognised, it is necessary to take responsibility to ensure that people's needs are met.	responsibility
Caregiving	the actual hands-on physical work of caring for people.	competence
Care receiving	responding to the care that is given by the caregiver	responsiveness
Caring with	the reiteration of the process of care, where habits and patterns of care emerge through time	trust and solidarity

In one of the tasks in the course, Arona had written about the initial stages of an online intervention in a staff development project on developing teaching portfolios which was supplementary to a series of face-to-face workshops. One of the facilitators made the following comment on the participant's text, 'Building an online community is important here. Simply putting the tool out there will not encourage people to use it'. This was a valuable point, however, Arona felt discomforted. Earlier in her text she had described how the inclusion of this same online tool was mediated and her attempts to use it in building an online community. The feedback received indicated that these points had been missed, an example of listening without attention. 'Attentive listening' (Sevenhuijsen 2002, 5) involves careful reading of both the text as it stands as well as openness to the intended meaning of the writer. In this case the facilitator had missed Arona's discussion of the mediation of the tool with her workshop participants, thus leading her to experience a lack of attentive listening.

Responsibility

Responsibility corresponds to the phase of 'caring for' or 'taking care of' and indicates a willingness to do something which will improve a situation (Tronto 1993). From a political ethics of care perspective, responsibility is distinguished from obligation, which refers more to a set of formal rules and duties. Responsibility is seen as more flexible, as a willingness to do something and is 'embedded in a set of implicit cultural practices' (Tronto 1993, 131–132).

In our small group responsibility meant that participants would respond to the weekly reflections that the group members were writing, assuming that the responses or feedback would be helpful towards improving individual's final product, the case study. Because of the dialogical possibilities in Google Docs, if the feedback was experienced as unhelpful by the recipient, a responsible act on her part may also require a response indicating this concern to the person giving feedback so that they could be assisted to give more pertinent feedback in future. However, sometimes power differentials between participants and facilitators would mitigate against such acts of responsibility.

In our course, it was considered important to extend the responsibility beyond the facilitators to the other participants in the group. Tronto (1993) alerts us to the danger of certain

groups of people (in this case the facilitators) becoming overly responsible, and assuming a paternalistic or authoritarian position over participants. Various types of responsibilities regarding feedback were evident in our group:

- giving feedback on the part of the facilitators and the participants
- responding to the feedback
- acting on the feedback, if it made sense to the participant, to improve the task at hand, or if there was uncertainty, to engage in a dialogue with the person giving the feedback.

In examining participants' responses, responsibility was evident. For example, Veronica responded warmly to Arona on her first reflection with a neutral, encouraging comment, 'What an interesting project. I wonder what can incentivize participants to feel motivated to spend time and energy to complete their portfolios'.

To encourage participants to improve their case studies, Vivienne asked further probing questions prompting participants to take on this responsibility and to start thinking about what to do differently in order to achieve the desired outcomes. Some questions about the educators' intentions regarding their students' dispositions and abilities were asked to promote responsibility in improving the text. In response to Melanie's stated outcome in her reflection of motivating 'busy clinicians to participate [in dialogue] as they reflect critically on teaching, learning and assessment' the facilitator asked what she would like her participants (the health professionals on a health educators' course) 'to be able to be and to do at the end of the process'. The text was then elaborated on in response to the question. She explained that requiring the health professionals to reflect on their learning in the course was based on strong evidence of the educational value of reflection in becoming a professional and provided literature to support this. She added that 'once students have learnt how to reflect and how reflection is assessed, an additional outcome would be that they [would] be able to apply it to their own context and be able to teach their students how to reflect'.

The importance of taking responsibility to change the text and improve the product is evident in this above example – an opportunity not generally afforded by unidirectional feedback practices, which are often too late to respond to and offered in isolation of the text (Boud and Molloy 2013a).

Competence

The third phase of caregiving is the actual hands-on physical work of caring, corresponding to the moral element of competence (Tronto 1993, 2013). In giving feedback in our small group, competence was related to giving, receiving and acting on feedback to help improve each other's projects. Feedback from peer participants and facilitators were effective but served different purposes. The facilitators' comments assisted in terms of completing the curriculum goals, and the participants' comments helped each other elaborate further on their case study contexts.

The facilitators gave more direct guidance on how to go about writing the case study. This concurs with Boud and Molloy's (2013b) concept of competence which presumes that the facilitators would be the ones who have deeper knowledge of the broader curriculum and the requirements of the smaller individual tasks so that they could give competent feedback that would guide student action and assist them in completing their tasks and improving their performance. Melanie felt that the more direct guidance from facilitators assisted with completing tasks initially.

Despite the group participants' initial tentativeness to commenting and questioning in their feedback, confidence was developed in the process, and participants' competence in giving dialogical feedback, different from the usual one-way process of giving feedback, improved. This was facilitated by common interests arising out of engagement in similar work. The understanding of the context amongst peers added to the feeling of relevance and authenticity of the project and the perceived competence of the feedback to each other. Participants regarded their engagement with each other's writing as a learning experience as they could learn from their discussion of common issues. For example, Melanie responded with interest to Arona's discussion of her use of Google Docs in her project. Referring to her own teaching practice, she said

at the moment I give feedback individually but it would be excellent if they [students in the Postgraduate Diploma course] could give each other feedback as well – so if Google Drive works for you now, I may think of introducing this mid way in June when they come for the face-to face block.

Veronica wrote, 'Perhaps your experiences could help guide our choices'. Thus they were both asking for and sharing information that could assist the group as a whole, since all staff development initiatives experience similar challenges.

By the fourth task, participants became more confident in giving feedback or questioning in a manner that was aimed at refining each other's case studies with particular regard to aspects that had not been clearly explained. For example Melanie asked Arona, 'Do you give them any criteria that can guide them on aspects to give feedback on?' By this time the participants had become familiar with the platform, the task at hand and had gained confidence and competence in giving feedback, initially role-modelled by the facilitators.

Tronto (1993) argues that competence cannot be reduced to technical expertise, but has moral consequences if needs are not met. The context is important, as are the resources at hand such as time, space and funding. To give competent feedback, adequate time would be required. In discussions held after the course, some of us felt that due to time constraints, while we adapted to each other and the technical platform, we were unable to gain in-depth understanding of our colleagues' work, and initially did not feel sufficiently competent to give feedback on many issues. Tronto (1993) argues that if care is incompetent, it is not adequate or good and therefore needs will not be met. Similarly, feedback from the perspective of Boud and Molloy (2013b) employs a far broader context that takes into account actions and reactions by

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the educator and student in activities and processes before and after feedback, needing time and resources. It is not only about the technical 'delivery' of feedback from educator to students, or the better phrasing of feedback comments or 'the formulaic responses such as the feedback sandwich' (Boud and Molloy 2013a, 5). This technical process alone may have no effect on student learning or change in performance.

Responsiveness

The fourth moral element that arises out of caring is the responsiveness of the care-receiver to the care received (Tronto 1993). Care, by its nature, is concerned with conditions of vulnerability and inequality and thus the need for care is a challenge to the notion that individuals are entirely autonomous and self-supporting. In a university context there are inequalities between academics at different levels and between those who are perceived as more senior and knowledgeable in their field and those who are less so. Although there was a relaxed and collegial environment in the course, there were still real and perceived inequalities. During the process of writing this paper, the participant authors recalled feeling anxious and vulnerable at the start of the course about exposing their work to scrutiny.

When reviewing the feedback given, we observed that most of it was related to clarification, asking for more information and/or affirming the value of the work of the writer of the piece. For example, Arona asked, 'Are the various themes linked to the years and to the courses or clinical blocks they are doing?' Veronica probed for more information about her colleague's project, saying, 'I'm curious to know if you received feedback from those participants who dropped out of the workshops'.

Arona, an academic staff developer was writing about an intervention in her faculty, facilitating academics' writing of teaching portfolios with an online feedback component using Google Docs. After these academics' first opportunity to give feedback on the portfolio programme, they expressed their unwillingness to give feedback because they felt that they had inadequate knowledge of teaching philosophies. Arona suggested a few reasons for this disappointing response which elicited more comments from us as respondents and suggestions for how Arona could make her intervention more effective.

Vivienne: How could you make them feel that it is ok not to be an expert to give feedback?
Veronica: Would it be advisable to do a feedback session in class together where everyone can share the risky move?
Veronica: What about those educators who have a closed philosophy and do not want to share their work?
Melanie: Do you give them any criteria that can guide them on aspects to give feedback on?

Through interactions with her fellow participants and facilitators in the course, Arona began to feel comfortable exposing her vulnerability about her own academic development practice and disappointments that she had experienced. By opening up to the group, she exposed herself to receiving feedback which she found particularly insightful and helpful. As participants developed trust and confidence in the group, their attentiveness to Arona's

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project enabled them to offer suggestions and to prompt her to think further in relation to her project. This dialogical feedback provided a positive and productive force that contributed to her professional competence in the context of her practice. This feedback thus met with the criteria provided by Molloy and Boud (2013, 3) that its impact should extend beyond immediate subsequent task performance, to rather 'build [students] capacity to use feedback for their own ends'.

In terms of our framework the quality of feedback derives from participants being attentive to the problems, plans and contexts of their colleagues, taking responsibility to act on this and feeling more confident and competent to give useful feedback. At the same time participants experienced the attentiveness and active 'listening' of their colleagues and thus became more comfortable and responsive to feedback. This illustrates the entangled nature and the importance of each element of the caring process, as well as the integrated whole, in what Tronto (1993, 2013) refers to as 'the integrity of care' for good care (in our case learning) to happen.

Applying an ethics of care framework to feedback, we focus on the caregiver, the care-receiver and their relationship in the giving and receiving of feedback. Boud and Molloy's (2013b) model of dialogical feedback prioritises the responsiveness of the learner to feedback, placing learner agency in the centre of the learning process. Thus the responsiveness of the learner can be seen to be central to the effectiveness of the learning process. This model requires

the active positioning of learners as elicitors of knowledge for improvement, not just the recipients of inputs from others. Unless students see themselves as agents of their own change, and develop an identity as a productive learner who can drive their own learning, they may neither be receptive to useful information about their work, nor be able to use it. (Boud and Molloy 2013b, 705)

In our experience we recognise that feedback processes could have been improved by explicitly encouraging participants to communicate what types of feedback and on which particular issues feedback would be most beneficial to them. Responsiveness of a learner to feedback includes the extent to which they are able to apply the feedback in a subsequent task. Boud and Molloy (2013a) outline a number of curriculum features that would support effective learning. These include nested tasks to allow for 'feed forward' of assessment feedback' (2013a, 707). This involves 'timing and design of tasks to permit input from others and self on each task to be utilised to benefit performance on subsequent tasks as well' (2013a, 707). The Emerging Technology course, with the four formative tasks leading up to the summative case study (outlined in the Context section), was specifically designed to facilitate maximum provision of feedback in order for participants to apply the feedback to their work and particularly to the summative case study.

We have mentioned the vulnerability of learners receiving feedback, as those receiving care. It was exposing for participants to share their reflections and to open themselves to feedback

from others, particularly their peers from other HEIs in the same field. In order to do this, we needed to build a relationship of trust within the group.

Trust
The moral element of 'caring' with incorporates a sense of solidarity and trust. This fifth element of Tronto's (2013) ethics of care was added at a later stage, drawing on Sevenhuijsen's (2014) notion of trust, that acts as 'the oil' to lubricate relationships.

Trust has been defined as

the willingness of a party to be vulnerable to the actions of another party based on the expectation that the other will perform a particular action important to the trustor, irrespective of the ability to monitor or control that other party. (Mayer, Davis, and Schoorman 1995, 712)

Risk, vulnerability and generosity influence the degree of trust in a relationship (Sevenhuijsen 1998).

Carless (2013, 90) points out that trust is an 'underexplored factor impacting on teaching, learning and assessment'. It involves taking risks for the participants to open up their practice and their learning to the scrutiny of others, which can be daunting as mentioned earlier. Tronto (2013) suggests that such a collective approach away from a deficit model is forward-looking rather than critical and judgemental. Lillis (2011, 413) asserts that textual dialogue can be considered in terms of 'intellectual generosity'. Trust is further enhanced when dialogic engagement happens over a period of time.

The trajectory of trust within our dialogical feedback developed iteratively through three phases, namely the establishment of trust, the willingness to make oneself vulnerable by risking the sharing of ideas without knowing how others will respond to this risk taking, followed by an openness to respond to the feedback to these ideas. An appreciative and non-punitive climate contributes towards developing a trusting relationship both online and in face-to-face group interactions. In the first phase of developing trust in our course, the climate was cultivated by mutual concern for each other's tasks. Our introductory face-to-face interaction, and the modelling of trust by the facilitators through their caring, democratic engagement enabled our later online discussions. The process was further enhanced by the informal (and sometimes humorous) nature of online dialogic conversations. For instance, when Vivienne reminded Melanie to 'start with full name and then use acronym' Melanie replied 'This is what I tell my students!' – admitting that her error mirrored her own criticism of her students' work.

The past does play out in issues of trust. For instance Veronica acknowledged that a previous experience of eroded trust regarding a work situation delayed the process of trust-building. She was initially apprehensive and tentative to share her work. Encouragement by others acted as the 'oil' to facilitate her full engagement in the course.

In the second phase, sharing values to foster trust was encouraged by finding commonalities and interrogating each other's practices in order to sensitively address each other's needs. Valuing and appreciating the work of others was reflected in Melanie's comments when she shared her intention to use the experiences of other participants as a scaffold to empower her practice. Normalising beliefs also contributed to building trust. Vivienne cautioned Melanie saying 'I think we often assume that experience will lead to application but it sometimes doesn't!' Furthermore, the democratic nature of dialogic feedback fostered imaginative creativity. Veronica felt supported by the feedback to explore new possibilities.

In the third phase, building on our gains, moving beyond a completed task and short course, we have continued the conversations, developing a collegial friendship. Over the years since the course, this group has formed a sustainable community of enquiry enabled by the trusting relationships established in the collaborative process.

There were and continue to be challenges in working with new and familiar colleagues. Relationships are precarious with individual's concerns around what influences participants' sharing of both content and comments. As mentioned, Veronica was reticent to open up her work to a colleague in a more senior position. However, she chose to expose herself to the dialogic space realising that the benefits outweighed her feelings of vulnerability. This choice was facilitated by her understanding that the facilitators were experienced, caring and fair, and her self-awareness that she was not risk-averse. The dialogic nature of the feedback with the space to 'answer back' empowered her to take part on an equal footing with others without fear of criticism and negative responses – acknowledging the value of care in teaching and learning.

Integrity of care
Diffracting dialogical feedback through an ethics of care perspective reveals something new that values all the moral elements and the phases of care with the dialogical feedback practices. The integration of these elements in a holistic manner provides inventive provocations for thinking about dialogical feedback practices in teaching and learning. In our focus on feedback as a caring practice, rather than a technicist performative and critical teaching process governed by rules and checklists (Boud and Molloy 2013a), we recommend an examination of the process in its entirety. Ideally, it is important for each of the five elements of care to be present to create a balanced symbiotic relationship. When one or more is missing or minimised, there is a detrimental impact on the dialogical feedback process and on the learning process. For example, even though a person giving feedback was attentive, if their competence and knowledge was limited regarding the subject matter under discussion, their feedback would not necessarily lead to learning. In the same way competent feedback which is not attentive, as is described in the section on attentiveness on the feedback that the participant received, was also inhibiting to her learning. In order to be receptive to feedback, an element of trust between the giver and receiver of feedback would be necessary. The entanglement of the moral elements of care is evident in Carless'

(2013) chapter on trust, where he includes attentiveness, responsibility competence and willingness to listen (responsiveness) as essential elements enabling trust.

Conclusion

This paper has documented how a diffractive reading of dialogical feedback with an ethics of care approach provides important insights for thinking about the entanglements from both these sets of ideas. We have attempted to show how reading care ethics through Boud and Molloy's (2013a, 2013b) provides a useful and novel extension to the higher education feedback literature. By exploring this interface through a practical application using our own experiences of a professional development course on Emerging Technologies for higher educators, the value of the dialogical aspects of the feedback process is strengthened.

Tronto's political ethics of care framework read diffractively through Boud and Molloy's (2013a, 2013b) dialogical feedback, provides enlarged thought on what constitutes the process of giving, receiving and acting on feedback. Both approaches are based on a relational ontology, foregrounding the social nature of learning and caring. By diffracting our thoughts and experiences iteratively over time through these two relational ontological frameworks, we offer an alternative to the one-way, one-time formulaic, technicist sandwich approach which does not necessarily lead to improved learning. Attentiveness, responsibility, competence, responsiveness and trust are important elements in the feedback process. Rather than feedback being experienced as an unpleasant and ineffective adjunct to teaching, this way of giving and receiving of feedback as an open dialogic process which is affirmative as opposed to critical, foregrounds the positive impact and potential on the learning process. Nonetheless, as Boud and Molloy (2013a) point out, not all feedback is helpful as we have noted in various sections of this paper.

There is a need to wrestle with honest feedback with the acknowledgement that our vulnerability may be uncomfortable. However if given in a caring manner with opportunities for dialogue, feedback can significantly contribute to improvements in practices for both teaching and learning. Feedback does not need to be extensive to lead to learning – just one sentence can provoke a thoughtful response leading to change and improvement.

Disclosure statement

No potential conflict of interest was reported by the authors.

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