

A Person-Centred Enquiry into the Experiences of  
Teaching and Learning Reflection and Reflective  
Practice in Pre and Post-Registration Mental Health  
Nurse Training

by

Nicola Marie Clarke

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## **Abstract**

Reflection and reflective practice has become a key issue for curriculum development within nurse education, particularly mental health nursing. The Nursing and Midwifery Council have linked the demonstration of reflective skills to clinical competence to gain entrance onto the professional register. However, despite a significant volume of literature on reflection there is a paucity of research evidence regarding how nurse educators teach mental health nursing students to reflect and become effective reflective practitioners and, little research exploring experiences of staff and students engaged in reflection for teaching and learning purposes.

A person-centred enquiry was undertaken to explore staff and student perceptions and understanding of reflection in the context of the undergraduate pre- and post-registration mental health nursing diploma programme, utilising a framework involving four focus groups and conducted in the university setting. Findings indicated that participants' definitions were congruent with the literature on reflection. However, it was evident that students were uncertain as to how to reflect on their practice and this was attributed (by students) to a lack of appropriate teaching, whilst staff felt that they lacked the appropriate context within which to teach skills of reflection. A new model and extended description of effective reflection is offered together with some non-prescriptive recommendations aimed at enhancing teaching practice.

## **Dedication**

I wish to dedicate my thesis to my mum and dad who in my biased opinion have been the best parents anyone could ask for. Their dedication to me, unwavering support; emotionally, intellectually, financially is what has enabled me to get through not only to the point of submitting this thesis but to the adult and mother that I have become. I couldn't have asked for a better mum and dad.

Thank you.

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Lastly I would like to thank my daughter and especially my mum and dad, for their encouragement and emotional support in continuing and finishing the EdD and for helping me to finance the tuition.

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## **REFLECTION**

“By three methods we may learn wisdom: First, by reflection which is noblest; second, by imitation which is easiest; and third by experience, which is the bitterest”.

- Confucius - Chinese philosopher

“Follow effective action with quiet reflection. From the quiet reflection will come even more effective action”.

- Peter F Drucker - renowned guru of management

“When you are a Bear of Very Little Brain, and you Think of Things, you find sometimes that a Thing which seemed very Thingish inside you is quite different when it gets out into the open and has other people looking at it.”

— A.A. Milne, Winnie-the-Pooh

## **A WORD FROM THE RESEARCHER:**

I, as the researcher and author of this study would like to thank any person who has taken the time to read this thesis. I hope that the style of writing used to communicate the information generated from the research and in formulating this thesis will reach a wide audience beyond that of the research community. This thesis has been written for the lecturing staff, practitioners, and students who wish to perhaps learn more about reflection or perhaps wish to analyse, reflect upon and evaluate their own practice of reflection in accordance with the findings of this research.

As a novice researcher myself I have often struggled with the language of research. Those of you who have bravely made the attempt to delve into this complex world of research may, like me have found that it is like trying to learn a new way of speaking. I hope that this is not the case with this piece of work and that my target audience perceive this to be a useful working document.

In the words of Gilgun (2010) one of the areas where the researcher needs to become reflexive is in relation to the audiences to whom the research findings will be directed, “researchers write to specific audiences, presenting ideas and evidence for the ideas in language that audiences can understand”.

Thank you

Nicola Clarke

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# **CHAPTER ONE**

## **PREFACE**

## 1. INTRODUCTION

To denote the importance of reflection and the empowerment it can give a person, Christopher Johns refers to A.A. Milne's famous children's character Winnie-the-Pooh, and the story of Edward Bear being dragged downstairs bumping on the back of his head behind Christopher Robin, Milne noted that:

“As far as Edward Bear knew, it was the only way of coming downstairs, although he sometimes felt there was another way, if he could only stop bumping for a moment and think about it “ (Johns 1999a p.241).

My first encounter with reflection was in 1993 during my first year as a student mental health nurse. I remember having to write a 'reflective assignment' based upon a critical incident I had experienced on my clinical placement. The difficulty facing me at this time, I had absolutely no idea what a 'reflective assignment' was or, how 'to reflect'. I did through applying a common sense approach loosely understand the term critical incident, but had no wish to air 'my dirty laundry' on paper, for fear of appearing a not very competent student nurse.

Having no particular connection with my peers as none of us had had the chance to spend any real bonding time together and having only met my personal tutor once, I had no-one to talk through and compare my experience with. As a consequence my assignment was a written piece of descriptive drivel which if I am totally honest I probably made up and just about gained a pass mark for my efforts.



My learning from this experience was, I could scrape a pass mark writing the night before the submission date, an assignment that I did not understand the purpose of. It is fair to say that my early experiences with reflection and reflective practice did not bode well for a good working relationship.

For the first three years of my training my relationship with reflection did not progress beyond the point of necessity. I spent my non clinical time trying to write learning contracts that were reflective essays with the underpinning philosophy of teaching students how to apply and link theory to practice. By the end of three years I had come to detest the word reflection.

When I look back now, it was only in my final year when I was fortunate enough to be allocated a mentor who was interested in me and my development enough to offer me guided reflection in action and on action for 12 months (terms which will be discussed later on in this assignment), that I finally started to understand what it meant to be a reflective practitioner. I came to realise the importance and usefulness of reflection in enhancing my abilities to be a safe and effective practitioner whilst also enabling me to develop personally. When I now think about my own experiences and the way in which I endeavour to teach my student's how to reflect, I view reflection as a way of enabling personal growth, enhancing and supporting the development of self-awareness; and problem solving skills, whilst engaging and enhancing a deeper approach to learning. In a nutshell my personal belief is that

reflection or reflective practice is applying the person-centred counselling approach to oneself, i.e. becoming one's own person-centred therapist.

Having been mainly involved in the education of pre-registration mental health nursing students for over nine years, it has become apparent that in nursing, reflective practice has become a key issue for all those involved in curriculum development. Within many nurse education programmes it has become an explicit requirement that students engage with this concept (Pierson 2001, Mantzoukas and Jasper 2004 and Nicholl et al 2004). Not only are health care professionals required to utilise reflective practice both within their initial training and continuing professional development, it is also seen as a higher education transferrable skill evidence of which is required by the Quality Assurance Agency (QAA) (Mantzoukas and Jasper 2004, Tate and Sills 2004). The inclusion of critical reflection into the curriculum is also promoted in the health professions by the requirements of professional and statutory bodies (Health Professions 2007 and Driscoll 2007). The Nursing and Midwifery Council (NMC) in fact stipulate that reflection is a competence that needs to be demonstrated in order to gain entry onto the register as a Mental Health Nurse for all new pre-registration nursing programmes from September 2011.

The competencies that relate to reflection are detailed below:

- All nurses must be responsible and accountable for keeping their knowledge and skills up to date through continuing professional development. They must aim to improve their performance and

enhance the safety and quality of care through evaluation, supervision and appraisal.

- All nurses must practise independently, recognising the limits of their competence and knowledge. They must reflect on these limits and seek advice from, or refer to, other professionals where necessary.
- Mental health nurses must have and value an awareness of their own mental health and wellbeing. They must also engage in reflection and supervision to explore the emotional impact on self of working in mental health; how personal values, beliefs and emotions impact on practice, and how their own practice aligns with mental health legislation, policy and values-based frameworks (NMC 2010, paragraphs 7, 8 and 8.1).

It is because of the above that the discussion regarding the threading of reflective practice through the curriculum in the new nursing degree programme has taken prominence at the university in which I work.

Experiences of reflecting on practice and using this to inform future behaviour has been widely advocated by nurses and educationalists. This has been acknowledged in the literature (Kolb 1984; Boud et al 1985; Schön 1987; Minghella et al 1985; Fish et al 1998; Taylor 2000; Ghaye and Lillyman 2000; Levett-Jones 2006; Driscoll 2007) and is also supported by the increasing use of critical incidents and reflective journals as part of the overall assessment strategy (Benner 1984; Clarke and Croft 1998;

Johns and Freshwater 2005). The university in which I work is no exception to this rule.

The majority of the current three-year pre-registration nursing diploma course (which is currently being phased out) and also to some extent the pre-registration degree, graduate diploma, the new degree programme and the top up degree courses, are assessed through reflective writing, whether this is in journal, essay, critical incident or presentation form.

The next section will further introduce the reader to the rationale for the enquiry.

### **1.1 RATIONALE UNDERPINNING THE RESEARCH ENQUIRY**

When I took up the post of a mental health nurse lecturer the first assignment that the pre-registration nursing students were required to write was a reflective essay based upon a critical incident. It was the issues that arose from this particular assignment that ignited my interest in researching reflection, reflective practice and some of the possible associated problems with it. Through some very ad hoc, observational research when reviewing the progress of my second year students I noticed that approximately 90% of them had failed this assignment, yet had passed all others with average marks of 60-70%. Considering that I was about to write an assignment myself on reflection for my PGCE (an academic award required by the NMC to be registered as a nurse lecturer) I decided to ask some of my students why they felt they had failed this particular assignment and why they had passed all others with flying colours.

In relation to the failed assignments the majority of my students stated that when asked to write the essay they had little or no idea at the time what reflection actually was. They reported having heard of the Gibbs reflective cycle, which they were required to utilise for this piece of work, but had no real concept of how to use it when reflecting. The university's first year nursing students at the time were explicitly taught the Gibbs cycle so by the second year they should have an understanding and have utilised it in their preliminary assignments. This raised the question for me of how well we as lecturers were preparing them in their first year for reflective writing never mind reflective practice. Since my students seemed to lack understanding of what reflection meant, they had assumed that they only had to describe something that had happened to them. I then asked them through brief discussions what they thought reflection was and whether they felt it an important part of their training. It was clearly apparent that the students did not understand the importance of reflection; reflection was viewed as an arduous task, just a way of remembering an event in order to write about it and thus pass their clinical placement. In relation to reflective practice the students felt that this was a way of thinking about the day and then forgetting about it.

The resulting data that came from these very brief informal discussions prompted me to repeat the exercise with the handful of third year students who were my personal tutees at the time. I believe I was hoping that by this point the students would have a real understanding of what was meant by reflection and reflective practice.

What I learned was that although the third year students had more of an idea of how to reflect they were actually frightened of it as it required them to take a good look at themselves and address some of their own fears, hopes and inadequacies. Moreover due to the lack of support received in reflecting, they would again often only do what was required in order to pass either their clinical placement or their assessment.

A common theme emerging from both my second and third year student groups was that they saw reflection as a task forced upon them by the requirements of the course rather than as a tool to enhance learning, personal and professional development.

I have now been at the university where I am employed as a senior lecturer for over nine years. Even with courses changing and adapting in accordance with student satisfaction surveys, and professional body requirements, there remains a predominant emphasis on the use of reflective models as ways of reflecting. The students' portfolios of practice achievement for the pre-registration diploma course contain examples of the reflective models the students are expected to use for their end of placement reflective piece. These reflective models are also often alluded to by module leaders who set reflective assignments in varying guises, expecting their students to use one of these models to structure their essay and in turn structure their reflection. The most commonly used models and the ones represented in the students portfolios currently are Gibbs' (1988), Johns (1994), Atkins and Murphy's (1994) reflective models and Kolb's (1984) learning cycle. However it seemed clear from my informal enquiries with students that they had little understanding of how to effectively use these models successfully in their day to day practice.

Because reflection and reflective practice are a large part of the nursing curriculum, I personally felt that we as lecturers were letting our students down when it came to teaching reflection, I felt that conducting a person-centred enquiry into reflective practice would be a useful piece of research that may ultimately enhance what we do as lecturers within the university setting, and that it may ultimately not only produce more effective reflective practitioners but enhance the learning experience of students.

The further reason for undertaking this research become even more pertinent with the phasing out of diploma programmes at the university; the new Nursing and Midwifery Council standards of practice, and the emergence of the new degree programme. As acknowledged in section 1, external professional bodies are now formally requiring nursing students to demonstrate actual competence when it comes to reflection. Yet how can they become competent effective reflective practitioners if reflection is perceived by students to be an assessment 'hoop' rather than a core part of practice?

On completing an earlier literature review as part of my Educational Doctorate programme of studies, a further reason in support of this study was highlighted as it was apparent that there is a paucity of research into nursing student's real time perspectives of their learning experiences in relation to being taught how to reflect. There is an abundance of research and books written on reflection per se, but not on this particular matter. I therefore felt that I would be adding to the body of evidence

on reflection from a new angle that would be useful to the research community as well as reflective practitioners and teachers of reflection.

The next section will provide an overview of the thesis.

### **1.1.2 THESIS OVERVIEW**

This thesis concerns itself with a person-centred enquiry into the perceptions and understanding of reflective practice concepts related to the learning experiences of undergraduate pre-registration diploma mental health nursing students; post registration nursing students, and the teaching experiences of the mental health lecturing team. Due to the ontological and epistemological assumptions of the researcher, assumptions that sit within the Humanistic paradigm, the methodological framework selected for the research was that of Carl Rogers' Person-centred Approach. The reasoning behind this choice is further discussed in chapter 3; at this point suffice to say this choice was based on two central points:

- a) The person-centred approach has its roots in Humanism, has been developed out of Humanistic values and principles and has one of the founders of Humanism as its originator.
- b) The person-centred approach is an approach which is familiar to and underpins much teaching in mental health nursing.

Four focus groups were conducted, with individual participants engaging from years two and three of the pre-registration diploma course, a post-registration mental health



studies top up degree and the mental health lecturing team. It was hoped that by sampling across the range of provision for pre and post-registration mental health nursing in this way the interpretation of data would be able to usefully inform on-going curriculum development and contribute to the knowledge held by the lecturing team.

### **1.1.3 RESEARCH AIMS, OBJECTIVES AND QUESTIONS**

The overarching aim of this research was twofold, firstly to accurately understand the internal frame of reference for and unique perspective of pre and post registration mental health nursing students regarding reflection and reflective practice. In particular student perceptions of their learning environment and the ways in which they had been taught to reflect. Secondly, to explore and enquire into the internal frame of reference and unique perspective of mental health lecturers perceptions of learning and teaching of reflection and reflective practice at the university. The objectives of the research therefore were to produce:

- a) A profile of reflection from the perspectives of both students and lecturers.
- b) Recommendations arising for the most effective ways to enhance reflection and reflective practice learning and teaching experiences for both staff and students in the pre-registration mental health curriculum.

Research questions explored through this enquiry that informed the development of questions for the focus groups were:

- 1) How do the participants make sense of the notion of reflection and reflective practice? - How do they define it?
- 2) What are the participants' perceptions of the way in which reflection and reflective practice is taught at the university?
- 3) Is there a skill set that enables effective reflection?
- 4) How would participants wish to change the teaching and learning of reflective practice at the university?

#### **1.1.4 STRUCTURE OF THE THESIS**

Chapter 1 introduces the reader to the research itself, the research aims, objectives and questions. The rationale for the enquiry is explained, providing a brief preview of the methods used for data collection and interpretation. Most importantly this chapter aims to familiarise the reader with the researcher to enable a greater insight into the reasoning behind the methodological approach taken. This chapter makes particular reference to Carl Rogers the American psychologist, whose work has heavily influenced the development of both theoretical and methodological frameworks for this study, offering a concise insight into his theories which are further developed in chapter 2.

Chapter 2 presents a literature review of works pertinent to the field of enquiry. It is not the purpose of the literature review to exhaustively explore all the literature on reflection and reflective practice, rather the aim is to investigate certain key aspects of the subject that pertain to the context of this study and to provide an initial model

or frame for the investigation. The intention is to clarify how the literature has informed the research questions and methodology.

Chapter 3 dedicates itself to a discussion of the research methods. The person-centred approach as a research method will be discussed in greater detail, whilst the reasons alternative methods have not been chosen are discussed with reference to the underpinning research paradigm.

Chapter 4 will tell the part of the story that details how the research was implemented. Here the reader will gain a feel for the actual empirical work that was carried out in the field and how the data itself was interpreted. Ethical issues that arose due to the nature of this study are addressed in this chapter.

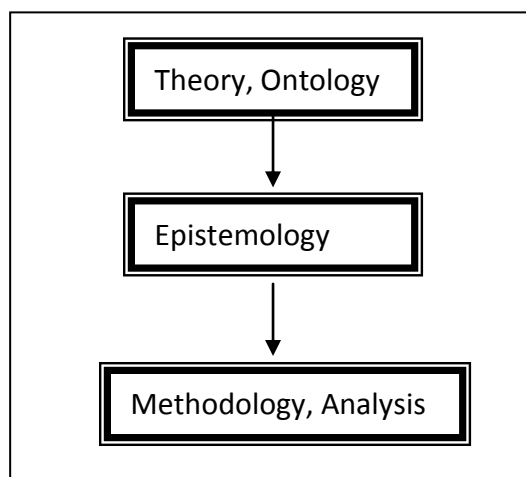
Chapter 5 presents the research findings (the perceptions of both students and tutors compared and contrasted with particular concern for any contradictions this may yield) and then offers an overall discussion with reference to the explanatory power of existing theory to account for the data. Conclusions and recommendations are also highlighted within this chapter.

Chapter 6 will conclude the thesis, with particular reference to contributions the research has made to the existing body of knowledge and recommendations for future research.

## 1.2 SITUATING THE RESEARCHER: ONTOLOGY AND EPISTEMOLOGY

The formulation of the research methodology and associated methods for this study has been guided by the principles of the qualitative research process as defined by Denzin and Lincoln (2008). They suggest that three interconnected, generic activities define the qualitative research process, and that behind the process stands the personal biography of the researcher. Denzin and Lincoln surmise that researcher speaks from a 'particular class, gender, and racial, cultural and ethnic community perspective'. (Denzin and Lincoln 2008). It is the personal biography of the researcher that shapes and moulds the research process. The researcher approaches the world with a set of ideas, a framework (theory, ontology) that specifies a set of questions (epistemology) that the researcher will then examine in specific ways (methodology, analysis). The three activities involved in the research process can therefore be defined as:

**Figure 1:** The 3 Activities of Research



Adapted from Denzin and Lincoln (2008)

It is the personal biography of the researcher that is of great importance in setting the context for this study, specifically in relation to understanding the origination of the researchers (my) ontological and epistemological assumptions, as it is these assumptions that prescribed the methodological framework for the research.

It is at this point that research activity one and three will be undertaken introducing the reader to the ontological and epistemological assumptions of the researcher. The nature of humanism as the theoretical paradigm underpinning this research will be touched upon, as will the work of humanistic psychologist Carl Rogers who's Person-centred Approach to Counselling has been reframed as the methodological framework for the research process.

Mason (2002) illustrates the qualitative research process as an intellectual puzzle that is pieced together by the researcher asking themselves five questions. Questions 1 and 2 support the researcher undertaking research activities one and two and questions 3 to 5 fulfil research activity three. Mason does infer that not all researchers will provide full and clearly formulated answers to all of these questions, but that the researcher should still know what the answers should be. This will enable the researcher to be clear about the essence of their enquiry.

Mason's first two questions concern the nature of reality and what represents knowledge (ontology and Epistemology). Ontology and epistemology are aspects of a branch of philosophy called metaphysics. Willis (2007) suggests that metaphysics is concerned with two fundamental questions, 'what are the characteristics of things

that exist?' (An ontological question) and 'how can we know that things exist?' (An epistemological question). It is these first two questions of Mason's intellectual puzzle and the first two activities of the research process that will be undertaken and answered at this point.

The third, fourth and fifth questions in order to develop the intellectual puzzle and fulfil research activity three, require the researcher to ask 'what is the broad research area?' 'What are the research questions?' and 'what are the research aims?' These questions have already partly been answered in the previous sections and will be referred to again in Chapters three and four.

The first question Mason (2002) tells the researcher to ask themselves is about social reality, their ontological perspective. What is the nature of the phenomena, or entities or social reality that they wish to investigate? Scott and Usher (1996) suggest ontology is concerned with what exists, what is the nature of the world and what is reality?

In the field of substance misuse understanding the individual needs of the service user is of paramount importance; the objective is to enable and support the person to engage in treatment, teaching an individual who did not wish to stop injecting heroin, how to inject heroin properly to keep them safe, would be an appropriate intervention. Most nursing models sit within the humanistic paradigm and focus on the caring and compassionate side of treatment irrespective of the person's diagnosis; they are

concerned with the nature of the experience from the unique perspective of the individual, seeing the patient as a human being not an illness (please see the literature review, chapter two for a synopsis of nursing models).

Being driven by nursing models that are underpinned by humanism I was always more interested in the person's unique experience of their situation, their perception of what they were experiencing to me was the nature of reality for them, and ultimately the reality from which I would be attempting to understand the service user from.

Nurses are also governed by a code of conduct (NMC 2008) and by policies devised by the Department of Health such as the white paper 'Equity and excellence: Liberating the NHS' (Department of Health 2010) which require us to treat people with dignity, as individuals and in collaboration. The result is to put individuals at the forefront of treatment, promoting autonomy and control.

In the classroom as a senior nurse lecturer I have tried to craft a climate of acceptance and warmth, create a feeling of safety, offering a non-judgemental attitude whereby the students can explore their own understanding, perceptions, opinions, values and beliefs about what they are learning. I have always hoped that by creating an arena for discussion, the freedom to share without fear of criticism, the student will develop the ability to take a deeper approach to learning rather than that of a rote approach.

It is because of my experiences as a student, clinician and lecturer that I perceive the nature of reality as; inherently subjective, unique to the individual, perceptual, emotional and attitudinal. In this model beliefs are based on the experiences of individuals in this life. Epictetus (Greek philosopher, c.135AD) may have concurred as he stated that 'people are disturbed, not by things that happen, but by the beliefs they hold about the things that happen'. I recognise that the external environment exists independently of the person's individual, intrinsic perception and that the external environment helps to shape the beliefs and perceptions the individual has. To really know what reality is and to understand it, is to ask the questions that help tap into the individuals' unique, intrinsic perception about how they are experiencing the external environment.

It is therefore reasonable to suggest that my own ontological position is to view the very nature and essence of things in the social world through individual beliefs, attitudes, psyche, interpretation and internalisation. I perceive individuals to be more than the labels often given to us by those in positions of power, and that we all have unique qualities that distinguish us from each other. Carl Rogers (1980) whose conceptual model has defined and shaped this research might have agreed. The central tenet to Rogers' Person-centred Approach to Counselling is that of empathic regard and fully entering the internal frame of reference of the individual in order to accurately understand and perceive their world as if it were your own, whilst recognising that all human beings have the intrinsic ability to reach their own unique potential. The ontological assumptions held by both Rogers and I sit at the heart of the humanistic paradigm that Carl Rogers is so strongly associated with as one of its



developers and founders (Cain 2001). These ontological assumptions are also closely associated with what Hammersley (1992) described as the ontological notion of 'Subtle Realism'. Accepting that the social world does exist independently of individual subjective understanding but that it is only accessible to us via the respondents' interpretations. The ontological position of subtle realism emphasises the importance of respondents' own interpretation of relevant research issues and that different vantage points will generate different types of understanding, while not ignoring the existence of an external reality, which can be captured (Ritchie and Lewis 2003).

The second question relating to Mason's research puzzle is to ask what is the epistemological position of the researcher, what might represent knowledge or evidence of the 'reality' that is to be investigated? According to Scott and Usher (1996) epistemology has traditionally been concerned with the factors that distinguish 'knowledge' from 'non-knowledge'. How can individuals or researchers know what is the 'truth' or valid knowledge? Mason (1996) concurs with Scott and Usher and suggests that in order to determine the epistemological stance the researcher must ask what might represent knowledge or evidence of the entities or social reality that is to be investigated?

My research is based upon enquiring into the 'reality' of the students' and staffs' experience of learning and teaching reflection and reflective practice within a university setting. I believe that what represents knowledge or evidence of the reality that I am investigating will come from an accurate understanding of the subjective

beliefs, experiences and feelings of the students and lecturers whom are integral to this research. Therefore it could be suggested that my epistemological position derives from the interpretive paradigm; In that I feel that knowledge and truth comes from exploration and understanding of the social world through the participants and their own perspectives (Scott and Usher 1996). Quite simply if I feel that what is reality is how life events and the external environment are interpreted via the internal frame of reference of individual people then, the natural course is to recognise that what is valid knowledge is my empathic understanding of the expressed feelings, beliefs, perceptions and assumptions of the participants in the research.

### **1.3 AN INTRODUCTION TO THE THEORETICAL PARADIGM - HUMANISM**

It is important at this point to introduce the reader to humanism as the underpinning paradigm for the research. It is this paradigm that underpins the majority of nursing models and shapes the way in which human nature is perceived and understood. In turn this has framed the way in which I have worked as a nurse and lecturer, leading me towards using the conceptual model of the person-centred approach to counselling to enable me to be person-centred in my care and teaching.

Two of the most prominent paradigms in psychology going into the 1950's were the behaviourist and psychodynamic standpoints. Humanism, it could be suggested, was a reaction to both these standpoints rejecting the Freudian emphasis on destructive unconscious urges and over simplified laboratory based analyses provided by behaviourism (Gillon 2007). Humanism came into force during the 1950's and 1960's presenting a very different philosophical standpoint to those previously mentioned.

Bugenthal (1964) claims that the humanistic paradigm evolved on the basis of five fundamental postulates or principles.

1. Human Beings, as human, supersede the sum of their parts. They cannot be reduced to components or isolated elements.
2. Human beings have their existence in a uniquely human context, as well as in a cosmic and ecological setting.
3. Human beings are aware and also aware of being aware – i.e. they are conscious. Human consciousness always includes an awareness of oneself in the context of other people.
4. Human beings have some choice, and thus responsibility.
5. Human beings are intentional and goal orientated. They are aware that they can cause future events and seek meaning, value and creativity. (Bugenthal. 1964).

These points highlight specific aspects of humanistic thinking but they also hint at an underlying philosophy encompassing a small number of core themes. These core themes have been addressed by a number of authors in this field. Warmouth (1998), in reference to point number 1, suggests that this reflects a theme of 'holism' a standpoint stressing the importance of viewing people as unique and comprised of a complex range of living systems with personal values and creativity not as a narrow range of psychological variables that can be scientifically measured (Seeman 2001).

A second theme is that of choice. Individuals are seen as active and constructive agents in their lives and trusted as such to meet their unique needs and desires. Along with this choice comes personal responsibility (Gillon 2007). Cain (2001 pg. 4-5) states that the humanistic paradigm assumes people to be “self-aware and free to choose how they will live and be responsible for the choice that they make”. One of the main endeavours of humanistic therapists is to strengthen the clients’ belief that they can be the authors of their own lives.

A third theme is that of recognising human potential. People are viewed as striving towards meaningful growth and evolution wherever possible. Maslow (1954) termed this ‘actualisation’ an idea he suggests as proposing an intrinsic human motivation toward constructive growth and change. Although various models contained within humanism will approach this differently, they all reflect the optimistic and positive view of humanity that the humanistic paradigm holds.

It is hoped that the reader can now appreciate the link between my ontological and epistemological assumptions and humanistic principles especially in relation to the core themes of holism and choice.

## **1.4 AN INTRODUCTION TO THE METHODOLOGICAL FRAMEWORK: A WORD ABOUT CARL RANSOM ROGERS**

Carl Rogers is recognised worldwide as one of the founders of humanism and humanistic psychology. In the field of counselling practice the principle ideas and beliefs of humanism are seen to be most clearly articulated as not only a conceptual model but in Carl Rogers's person-centred approach as a mode of practice (Mearns and McLeod 1984). The philosophy of the person-centred approach can be viewed as offering a set of ideas and values that can be usefully applied both to research and therapy.

It is the purpose of this section to introduce the reader to the ideas and assumptions of the person-centred approach. However it must be noted that Carl Rogers has written extensively about his approach, all of which cannot be captured in this thesis. What shall be referred to in this section are the ideas and beliefs that are pertinent to the development of the person-centred approach as a methodological framework for this qualitative research. Further reading can be viewed in appendix 1.

The person-centred approach developed by Carl Rogers is not just a theory of personality, but a theory of counselling whereby the counsellor or helper does not just have a tool box of techniques or skills but adopts a way of thinking towards or about the individual they are helping. The counsellor has an attitude that consumes and, in simple terms, embodies the way they think, feel and act towards another individual. It is these attitudinal qualities that provide the orientating framework from

which the counsellor / helper/ worker views the world. Rogers referred to this attitude as a way of 'being' and was clear that the person centred therapist / helper / researcher could be a fallible person-centred practitioner as long as they did not perceive the approach as solely a set of techniques (Rogers 1951). Rogers offered that by embodying the person-centred approach the practitioner could allow their personality to come through.

Carl Ransom Rogers (1902 – 1987) has been classed as the most influential psychologist in American history (Kirschenbaum and Henderson 1989. pgxiii). He pioneered a major new approach to psychotherapy, known successively as the 'non-directive', 'client centred' and 'person-centred approach'. His message was deceptively simple;

“all individuals have within themselves the ability to guide their lives in a manner that is both personally satisfying and socially constructive. In a particular type of helping relationship, we free the individuals to find their inner wisdom and confidence, and they will make increasingly healthier and more constructive choices” (Rogers 1961 in: Kirschenbaum and Henderson 1989. pgxiv).

The central hypothesis to the person-centred approach can therefore be briefly stated as;

“it is that the individual has within himself or herself vast resources for self-understanding, for altering his or her self-concept, attitudes and self-directed behaviour – and that these resources can be tapped if only a definable climate of

facilitative psychological attitudes can be provided; the actualising tendency” (Rogers 1986, pg. 197-208).

This hypothesis is what drove and led Rogers to think carefully regarding the title he gave his new psychotherapy. Initially termed non-directive because of the nature of the person seeking help as the driver of therapy, Rogers felt that this title led to the misunderstanding that the counsellor took no active part in the process and was perceived as *laissez-faire*. In actual fact the counsellor, as it shall be demonstrated must possess the communication skills, and hold and convey attitudinal qualities to enable therapeutic engagement in the helping relationship and is anything but a passive spectator of the therapeutic process. As time went on he made the change from non-directive to client centred. The term ‘client-centred’ represented for Rogers the understanding that the person came seeking help out of a conscious choice they had made for themselves. That therapy was a process they had chosen to engage in as they recognised themselves as being at a level of anxiety or incongruence that required help. As Rogers then engaged in the research process, learning more about his own techniques, he taught, tested and lived his hypothesis for 57 years, he realised that this approach could be applied to every helping profession and other areas of daily living, e.g. the teacher in the classroom, the director of business, youth leader, and families. He also came to appreciate that this type of therapeutic engagement was not one that should be limited to one-to-one relationships, and that his ideas and techniques and the attitude of the helper could be brought into group situations, where there is an intention of helping (Rogers 1958). Therefore he felt that the term ‘client –centred’ could not be applied in a generic manner, and ultimately

settled on the title of person-centred counselling as the term 'person' could be applied to anyone, any person or group as a recipient/s of this approach.

Two landmark papers written by Rogers, 'The Necessary and Sufficient Conditions of Therapeutic Change' (1957) and 'Theory of Therapy' (1959) laid down his theory of therapy and personality change. There has been much controversy over the actual chronological order of these writings and the slight change in the wording used but these papers were Rogers' attempt to state in formal terms a theory of psychotherapy (McMillan, M 2004). In his 1957 paper Rogers asked himself the question as to whether it is possible to state in terms which are clearly definable and measurable, the psychological conditions which are both necessary and sufficient to bring about constructive personality change? (Rogers 1957).

He goes on to define briefly what he means by phrases such as 'psychotherapeutic change' and 'personality change' as a means by which criterion of change may be determined. By change in the personality structure of the individual he means at both the surface and a deeper level, in a direction which clinicians would agree means greater integration, less internal conflict, more energy utilisable for effective living: change in behaviours generally regarded as immature and toward behaviours regarded as mature.

Both papers answer his own question as he defines his basic theoretical position of the theory of therapy and personality change, and a theory of personality.

The theory of therapy and personality change has three parts to it.



Part A is termed as the conditions of the therapeutic process and is deemed as the most important part in relation to this piece of research and will be the focus of the next part of this discussion.

Part B and C relate to the process of therapy and the outcomes in personality and behaviour.

These latter two parts are more applicable to the area whereby the helper/therapist/counsellor is working with an individual or group that are classed as vulnerable and experiencing a state of incongruence. In my research, I do not mean to suggest that the participants of my study are not congruent with themselves. I am not wishing an outcome of personality alteration that is not the focus of this research, but to adopt the principles of Rogers's way of being to enable me as the researcher to enter the unique frame of reference of the participants and to create an environment whereby the participants feel free to express themselves in a way where there is no external judgement. Part A is about creating the climate that will allow part B (the process of therapy) and C (outcomes in personality) to occur.

Therefore part A is as follows: 'For constructive personality change to occur, it is necessary that these six conditions exist and continue over a period of time':

‘The Six Conditions’:

1. Two Persons are in psychological contact.
2. The first, whom we shall term the client, is in a state of incongruence, being vulnerable or anxious.
3. The second person, whom we shall term the therapist, is congruent or integrated in the relationship.
4. The therapist experiences unconditional positive regard for the client.
5. The therapist experiences an empathic understanding of the clients’ internal frame of reference and endeavours to communicate this experience to the client.
6. The communication to the client of the therapists’ empathic understanding and unconditional positive regard is to a minimal degree achieved.

The first condition Rogers’ hypothesizes that significant personality change does not occur except in a relationship where a minimal relationship must occur. Conditions 2 through to 6 define the characteristics necessary for each person in the relationship which are essential (Rogers 1957). I would now like to go on and offer a little more detail on the essential conditions, conditions 2 through to 6 so that the reader can gain a greater understanding of each condition. All the expanded definitions have been taken from Rogers’s 1957.

- Condition 2 the state of the client, as being incongruent is a basic construct in the theory. It refers to a discrepancy between the actual experience of the organism and the self-picture of the individual insofar as it represents that experience.
- Condition 3 means that within the relationship the therapist is freely and deeply himself, with his actual experience accurately represented by his awareness of himself. It is the opposite of presenting a façade, either knowingly or unknowingly.
- Condition 4 is where the therapist finds himself experiencing a warm acceptance of each aspect of the clients experience as being part of that client. It means that there are no conditions of acceptance.
- The fifth condition of empathy has been described as essential to therapy where the therapist is accurately experiencing and sensing the clients private world as if it were your own, but without losing the 'as if' quality.
- The final condition is whereby the client perceives the therapists' behaviours and words as meaning that to some degree the therapist accepts and understands him or her.

The therapist here is not a passive observer of therapy as Rogers may have been misunderstood to mean when he first called his process non-directive. At least 3 of the conditions (3, 4, and 5) are all and completely provided by the therapist and in his 1951 book titled 'Client Centred Therapy' Rogers acknowledges very clearly that these six conditions are not only about the attitude of the therapist but therapist's

skills as well. Rogers' belief was that a truly effective therapist had the attitude and skills to create an effective therapeutic atmosphere.

Rogers felt that the major value of stating any theory in unequivocal terms is that a specific hypothesis may be drawn from it, which are capable of proof or disproof. His resulting hypotheses, which follow from the theory provided, would be of this order:

1. If these six conditions exist, then the constructive personality change (as defined) will occur in the client.
2. If one or more of these conditions is not present, constructive personality change will not occur.
3. These hypotheses hold in any situation, whether it is or is not labelled 'psychotherapy'.
4. Only condition 1 is dichotomous, and the remaining five occur in varying degree, each on its own continuum. Since this is true, another hypothesis follows, and it is likely that this would be the simplest to test:
5. If all six conditions are present, then the greater the degree to which conditions 2 to 6 exist, the more marked will be the constructive personality change in the client' (Rogers 1957, pg. 95-103).

Mearns and McLeod (1984, pg. 372-373) perceived the beliefs and assumptions of Rogers' philosophy as offering a set of ideas and values that could be as usefully applied to research as to therapy. They felt that the person-centred philosophy could not so much provide a set of methodological techniques or rules, but a general framework for understanding persons within which existing research practices could

be located. Mearns and Mcleod reflected on research they had conducted using person-centred techniques and postulated a set of key characteristics associated with a person-centred approach to research. They came up with 5 basic features for the person-centred qualitative researcher.

These are:

1. The researcher treats individuals who take part in research projects as equal, participants rather than subjects (the latter being the term that denotes the authority of the researcher); a person with his or her own perceptions and feelings and preferences.
2. The researcher maintains an interest in empathically understanding the participants' subjective experiences. Thus reflecting the phenomenological nature of the person-centred philosophy in emphasising that the goal of research is to explore as sensitively and accurately as possible the frame of reference of the other.
3. The researcher sees the research as a process and not an activity simply focused on an outcome.
4. The researcher maintains a congruent stance in relation to his / her participants. There is a sense of authenticity in self and others.
5. Accepts participants and their experiences in a non-judgemental manner. This is the value orientation of the researcher.

It is these 5 features and attitudinal qualities adopted by the person-centred researcher that provide the way of being for the researcher and the methodological

framework for this research and by extension to the methods of data collection, and interpretation of findings

**Table 1:** Methodological Framework Informing the Research Process

<b>Equality</b>
<b>Empathy</b>
<b>Process Orientated</b>
<b>Genuineness / Congruency</b>
<b>Unconditional Positive Regard</b>

### **1.5 AN INTRODUCTION TO THE RESEARCH METHODS**

The overarching aim of this research was twofold, firstly to accurately understand the internal frame of reference for and unique perspective of pre and post registration mental health nursing students' regarding reflection and reflective practice. In particular student perceptions of their learning environment and the ways in which they had been taught to reflect. Secondly, to explore and enquire into, the internal frame of reference and unique perspective of mental health lecturers' perceptions of learning and teaching of reflection and reflective practice at the university.

The aim for the research was composed in this particular manner as it would enable the exploration of a subject matter and generation of the kind of data/knowledge that would be congruent with my ontological and epistemological assumptions. The impact of this was that the methods chosen needed to be harmonious with the aim to more accurately understand the unique perspectives of the participants. The methods chosen would also need to be appropriate to the methodological framework that underpins the research. The methodological framework has been introduced in this chapter and discussed in greater depth in chapter 3. The overall premise is that a qualitative methodology is best suited to the in-depth analysis of phenomenological cases such as this.

The research method chosen to generate data was a focus group held four times with 4 separate groups of participants. These focus groups were held in the university setting that the students were part of, “qualitative researchers usually collect their data in real-world, naturalistic settings” (Polit and Beck 2010, pg. 261). It was not my intention however to maintain control over the environment, but to meet with the participants within a setting that they may perceive as not out of the ordinary.

Once the data had been generated it was important to follow up with a data analysis tool that was congruent with the methodological framework for the research. The following diagram is the data analysis tool that would allow me to understand the data and present the data in a manner that others may also understand the

experiences of the participants. The formulation of this tool has been discussed in detail in chapter Four.

**Table 2:** Data Analysis Tool

1. Read the entire set of protocols to get a sense of the whole.
2. Discriminate units from the participants' description of the phenomenon being studied.
3. Articulate the psychological insight in each of the meaning units.
4. Synthesize all of the transformed meaning units into a consistent statement regarding participants' experiences (referred to as the 'structure of the experience'); can be expressed on a specific or general level.
5. Reassess the consistent statement regarding participants' experiences against the original material

Adapted from Giorgi (1985) and Mayring (1983)

### **1.5.1 UNCONDITIONAL POSITIVE REGARD**

It is important at this point to address the fifth characteristic and attitudinal quality identified in the person-centred framework for research in more detail. This is unconditional positive regard. This is also the 4<sup>th</sup> condition required in Rogers's model for therapeutic change, and in some respects similar in manner to the concept of bracketing in phenomenology.



The essence here is that researchers should not advocate their own value systems within the research process. However Mearns and Mcleod (1984) are very clear that they do not mean the researcher should, as is traditionally the way, conceal their values creating the illusion of value-freedom in research. They suggest that this strategy infers the researcher is an authority figure and this has no place in person-centred research or therapy. It would be impossible to conceal values yet adhere to the first characteristic of the person-centred framework for research, meeting the participants as equal. Mearns and Mcleod further purport that it would be impossible to be actively involved with the participants and to maintain congruence whilst concealing one's values and adhering to the fourth characteristic of congruence. Therefore what is meant by unconditional positive regard in the context of person-centred research is to be able to acknowledge both your own value systems and also those of others. In person-centred research, as in person-centred therapy, acceptance does not denote agreement.

Throughout the research process, in order to attend to the fifth characteristic of unconditional positive regard when engaging with the participants, I needed to be able to recognise what my own value systems were. I have therefore included in the appendices examples of different pieces of work that have supported and enabled me to come to terms with my own ideas, beliefs and attitudes. I have been very cognisant throughout the research process of my own reflexivity in my attempt to remain true to characteristic number 4 of transparency, openness and being congruent; but in the process of embodying congruency not wishing to unwittingly

influence the information offered by the participants or lead them in a certain direction.

Appendix 2 is an assignment I wrote as part of the Educational Doctorate programme. I was asked to investigate how photographs could represent knowledge about present institutions of learning. I took photographs of the university within which I work as the old building was being torn down and the new building was in production. I found writing this piece quite cathartic as I did not realise at the time that I held quite strong perceptions about the place in which I worked. Completing this assignment in this manner enabled me to acknowledge my judgements, to recognise them so that I could then open myself up to accepting my research participants' perceptions about the same university. I have not included the photographs as it is the content of my actual reflections that were important to me during the research process not the topic of the actual assignment.

Appendix 3 is a blog I posted about reflection on the university website. Approximately two thirds of the way into my Educational Doctorate programme a colleague felt that it would be beneficial not only to students but to staff also, to hold a 'Lecturers' Tea Party' via the mode of intranet and internet. The premise behind the 'Tea Party' was that the lecturers within the Faculty of Health could post a 'Blog' (appropriate) about any aspect of mental health they were interested in, had thought about, perhaps wanted to know an answer to or just as a thought for discussion. The blog could then be viewed by all staff at the University, all students and also

anyone who happened to come across our 'Tea Party' via a Google search for example. If that person was stimulated by the blog they could post a response and hence generate a discussion. In a sense it was to become a way of learning from each other.

Having completed the majority of my field research I decided that another way to generate data in a more informal manner was to post a blog about my research enquiry. Not only did I hope it may generate some useful discussion but it would also allow me to air my own views on reflection and allow people to comment on them in a forum that was apart from the actual research I would be conducting. I have included that blog with its responses as appendix 3 in an attempt to demonstrate why reflective practice is such an important concept to me and as the reader you may gain a sense of why I am passionate enough about this subject to dedicate time to research it and learn from my findings.

Appendix 4 is an example of where I allowed myself to free write, utilising Gillie Boltons (2010) stage two of 'through the mirror writing' as a way of reflecting on the focus groups I had conducted. This enabled me to process the actual time I had with the participants, again recognising my own value systems so that I may offer unconditional positive regard to the data at the analysis stage.

It has been acknowledged by Speziale and Carpenter (2007) that it is in the researcher's best interest before starting a qualitative study to make clear their

thoughts, ideas, perceptions about the subject that they are studying. The purpose of this exercise is to enable the researcher to approach the topic of study in an open and honest fashion. They go on to suggest that the act of expressing your ideas as the researcher should help remind you to listen to and “see what is real for the participants” (Speziale and Carpenter 2007 pg. 27). Schutz (1970) concurs and suggests that by following this process of describing thoughts and feelings about the subject of study the researcher can then ensure that they are not making judgements about the information offered based upon personal experience.

## **1.6 CHAPTER SUMMARY**

It is hoped that this introductory chapter has provided the necessary foundations in understanding the research process for this study. I anticipate that the reader has gained a sense of the researcher and how the research methods have been driven by the researcher’s ontological and epistemological assumptions. It has been made evident that the researcher’s ontological and epistemological assumptions sit within the humanistic paradigm and are the driving force being the choice of methodological framework of the person-centred approach to research.

The next chapter will present the findings of the literature review pertaining to the field of enquiry.

**CHAPTER TWO**  
**LITERATURE REVIEW**

## 2. INTRODUCTION

This chapter presents a review of the literature pertaining to the field of reflection and as a result reflective practice. I shall be exploring the notions of reflection and reflective practice and how they apply to nursing practice; in particular, the way in which reflection has become an integral part of the nursing curriculum within the university setting. I shall endeavour to utilise the literature to define and describe reflection and address the concept of reflective practice whilst analysing the mechanisms by which a person reflects. The chapter establishes the current consensus concerning the nature of the skills required to reflect and how this may impact upon the quality of the reflection.

The chapter will also establish how emergent themes from the literature provide orientating frameworks for reflection helping to support and further inform the research questions for this study which has in turn informed the research methods chosen to explore the questions. The emergent themes from the literature review coupled with my own understanding of reflection, have also supported the development of a new model of reflection - The Ten Essential Ingredients for Successful Reflection. These ingredients will be alluded to throughout the review so that it is clear how the review has informed each ingredient, and an illustration of the new model of reflection will be provided at the end of this chapter. It is therefore anticipated that the orientating frameworks conceived from the literature review and the new model of reflection will enable appraisal and comparison of the data generated from the study, informing the reader of how the data fits into what is already known about the phenomenon of reflection and reflective practice.

## **2.1 THE NATURE OF REFLECTIVE PRACTICE IN NURSING AND NURSE EDUCATION**

Since the early 1990s there has been an emerging interest in the concepts of reflection, reflective practice and the development of reflective practitioners within the nursing literature. The notion of reflection as a significant concept in nurse education has been influenced by a developing awareness on the part of nurse educators of the need to encourage their students to become thoughtful individuals capable of critical and innovative thinking (Pierson 1998). Reflection according to Bolton (2010 pg3) is a “state of mind, an on-going constituent of practice, not a technique or curriculum element”. Bolton goes onto suggest that reflection can enable enquiry into:

- What you know but do not know
- What you do not know and want to know
- What you think, feel, believe, value, understand about your role and boundaries
- How your actions match up with what you believe
- How to value and take into account personal feelings

It is anticipated that undertaking reflection should enable the practitioner to explore and experiment with areas of experience that could otherwise be difficult to approach, and enable them to become thoughtful individuals capable of critical and innovative thinking. Bolton (2010) provides examples of these difficult to approach areas which include;

- What you can change in your context; how to work with what you cannot.
- How to value the perspective of others, however different they are to you.

- How others perceive you, and their feelings and thoughts about events.
- Why you become stressed and its impact upon life and practice.
- How to counteract seemingly *given* social, cultural and political structures.

Accessing these difficult to approach areas successfully is based on the assumption that the person reflecting knows how to do so effectively.

### **Nursing and Humanism**

The drive to shift nursing, especially mental health nursing, away from a purely medical model (whose pedagogical methods are derived from the positivist and behaviourist educational paradigms) back to its routes of humanism (see table 2), meaning a shift toward a more qualitative / humanistic approach to teaching (Pierson, 1998), reflection has therefore been viewed as one of the most appropriate vehicles/pedagogical approaches in analysing and assessing nursing practice. Reflection being a critical subjective enquiry into oneself allows it to align comfortably with humanistic principles.

If we take a 'bird's eye view' of how nursing has been defined over the years from 'Nightingale' to 'Taylor' (table 3), we can see that nursing is a person-focused / patient led profession, requiring hard work and a strong evidence based practice ethos from which to face the daily challenges of practice.



**Table 3:** A Chronology of Definitions of Nursing

Nightingale (1893 in Seymer 1955: 33)	'Nursing puts us in the best possible conditions for nature to restore or to preserve health – to prevent or to cure disease or injury'.
Frederick and Northam (1938: 3)	'Nursing requires the application of scientific knowledge and nursing skills and affords the opportunities for constructive work in the care and relief of patients and their families'.
Peplau (1952: 16)	'Nursing is a significant, therapeutic, interpersonal process'.
Henderson (1955: 4)	'Nursing is primarily assisting the individual (sick or well) in the performance of those activities contributing to health, or its recovery (or to a peaceful death) that he would perform unaided if he had the strength, will or knowledge'.
Orem (1959) and Kinlein (1977)	'Nursing Involves self-care, putting the responsibility back into the hands of the person receiving care, with the nurse giving assistance only as required.
Abdellah et al (1960:24)	'Nursing is a service to individuals and to families; therefore, to society. It is based upon an art and science which mould the attitudes, intellectual competencies, and technical skills of the individual nurse into the desire and ability to help people, sick or well, cope with their health needs, and may be carried out under general or specific medical direction'.
Orlando (1961), Rogers (1961), Abdellah et al. Travelbee (1971: 7)	These authors agree with the supportive role of the nurse depicted by Nightingale, Henderson, Orem, Kinlein and Wiedenbach (1964). Nursing is 'an interpersonal process whereby the professional nurse practitioner assists an individual, family, or community to prevent or cope with the experience of illness and suffering and, if necessary, to find meaning in these experiences'.
King (1971: 22)	Nursing is supportive in 'a process of action, reaction, interaction and transaction'.
Roy (1976: 18)	Nursing is about supporting people's adaptation.
Paterson and Zserad (1976: 51)	Nursing 'is the act of nursing, the inter-subjective transactional relation, the dialogue experience, lived in concert between persons where comfort and nurturance prod mutual unfolding'.
Watson (1981), Benner (1984), Leininger (1985), Pearson (1988), Benner and Wrubel (1989)	Nursing is holistic caring, involving transcultural sensitivity and practice expertise, encompassing the therapeutic effect of the nurse-patient relationship.
Kermode and Brown (1996), Keleher and McInerney (1998), Taylor (2000).	Nursing is part of a postmodern world, in which ideas are left open to question and there can be no absolute definition of nursing.

Taken from Taylor (2006 p 19)

## **The Modern Challenges of Practice**

These modern challenges of practice include dealing with how the economic climate is affecting resources, staffing cutbacks, reduction in trainee nursing posts commissioned, too many patients, too few beds. In mental health further challenges include supporting vulnerable people, helping people with challenging behaviour, coping with others' mental distress, high turnover of staff on wards and sometimes accepting the potential for possible physical or verbal attack / abuse from those being cared for.

Taylor (2006) suggests that systematic approaches to reflection and action are needed to strengthen resolve for nurses to be effective and happy at work. Bolton (2010) concurs with Taylor and suggests that reflection and reflexivity are essential for responsible and ethical practice. Mantzoukas and Jasper (2004, p. 931) on medical wards found that,

“nurses used, and indeed acknowledged, that reflection was both powerful for developing practice and was also a tool for revealing the totality of their professional knowledge and input in patient outcomes”. Reflection / reflective writing, or as Bolton (2010) terms it, ‘through the mirror writing’ allows discovery of who and what we are in practice, and why we act as we do. It can help practitioners towards perceiving and taking full responsibility for themselves and their behaviour, something which is constantly strived for in pre-nurse education training. In the words of Beckett (1969, p. 169) “to be capable of helping others to become all they are capable of becoming we must first fulfil that commitment to ourselves”.

Research conducted by Ghaye (2000) takes this notion a little deeper by acknowledging the varied roles that health professionals have from managerial, professional, clinical, mentor, and researcher whilst completing tasks that could be regarded as basic, routine, ordinary, extraordinary, special or enjoyable. He suggests that in all of this we need to be particularly conscious of the power of language. When being the patient's advocate we are enabling the patient to have a voice; enabling their thoughts, emotions, hopes and anxieties to find expression. He states that with this in mind

“two fundamental skills necessary for all healthcare professionals are firstly, to discover and reflect on their own voice and secondly to enable others to hear and claim their own” (Ghaye 2000 pg55).

A reflective conversation is enabling a person's voice to find expression, and it would be assumed here that the ability to find your own voice and help others find theirs occurs in pre-registration nurse training and during continuing professional development.

### **The Development of the Student Nurse**

If reflection can support practitioners in achieving all that Bolton, Beckett, Taylor and Ghaye would suggest, whilst helping nurses to remain person-focused / patient led in their model of working, it seems reasonable that it is used so primarily in the field of nursing for development of students' personal and professional sense of self and in assessing their 'fitness to practice'. However as it has been noted by Bolton (2010 pg4) reflective practitioners when writing as a way of reflecting 'write for self-illumination and exploration, not to create a product'. A dichotomous situation is

therefore created in the teaching and assessing of reflection within the university setting. Assignments / assessments are fashioned in such a way that students are required to create pieces of work that are reflective products that can be assessed against standard university criteria. Yet the literature presents the argument of reflection as an introspective process whose purpose is to enhance self-understanding and reflective practice utilises this self-understanding to enhance clinical practice and not the creation of a 'manufactured' product.

Should there be agreement with Pierson (1998) that educational practitioners should be taking a more humanistic / qualitative approach to teaching in the classroom, in order to encourage students to become thoughtful individuals capable of critical and innovative thinking, then it could be suggested that educators should be emulating or adopting Carl Rogers' philosophy and approach to learning. However in order to be humanistic in the classroom, one should understand what humanism means and how it can be applied. Carl Rogers believes that significant learning takes place within the spheres of humanistic psychotherapy. This he felt was not an accumulation of facts, but the kind of learning that makes a difference in an individual's behaviour, in the course of action the person chooses in the future, in their attitudes and their personality. Rogers refers to this type of learning as a pervasive learning which is not just an accumulation of knowledge, but knowledge which interpenetrates with every portion of his existence (Rogers 1967). Rogers (1967) goes on to suggest what he believes is the significant learning that takes place within psychotherapy:

- The person sees themselves differently.
- They accept themselves and their feelings more fully.
- They become more self-confident and self-directing.
- They become more the person they would like to be.
- They become more flexible, less rigid in their perceptions.
- They adopt more realistic goals for themselves.
- They behave in a more mature fashion.
- They change maladjusted behaviours.
- They become more accepting of others.
- They become more open to the evidence, both to what is going on outside themselves, and to what is going on inside of themselves.
- They change in basic personality characteristics, in constructive ways.

The person therefore in humanistic psychotherapy can become more capable of critical and innovative thinking (Pierson 1998) through a process that although not termed reflection, can be compared to. Rogers would have possibly concurred with Bolton and suggest that the learning that takes place within psychotherapy is a “state of mind, an on-going constituent of practice, not a technique or curriculum element” (Bolton 2010 pg9). Earlier authors such as Maslow (1962) and Claxton (1988) also proposed that for individuals to achieve this deep level of learning they needed to be engaged as a whole person within the three domains of: actions (behavioural), thoughts (cognitive), feelings (affective). However William Rogers recognises that a complete alteration of the education system to a student-centred, self-elective education programme can cause many problems, and that respect for “disciplinary

integrity, as well as thoroughness in the study of academic material need not be in opposition to a person-centred perspective” (Rogers 1984, pg. 324). This relates specifically to nursing as there is core, fundamental information that must be known by the student to be able to carry out nursing duties and hold the attitude required of a qualified practitioner.

So to revisit the notion that teaching in the field of nursing should adopt a more qualitative / humanistic approach in order to achieve the results that Rogers, Maslow, Claxton, Pierson and Bolton are referring to, it could be suggested that we need to adopt some of Rogers’ ideologies of therapy to make possible the learning that occurs in therapy to also occur in the classroom / teaching arena and enable our student nurses to become effective at reflecting and in turn reflective practitioners.

### **Attitudinal Conditions for Learning**

Rogers laid out his theory of therapy in 1957 and stated that in order for therapeutic change / significant learning to occur there were specific attitudes that need to be held by the therapist. He also previously offered some tentative hypotheses about student centred teaching that built on the concepts of person centred therapy. Including postulating that “we cannot teach another person directly; we can only facilitate his / her learning” (Rogers 1951 pg. 389). Following development of the attitudinal qualities for therapeutic change a refinement took place so that these attitudes could be related to education (Rogers 1967, pg. 1-18). These attitudes he felt characterise a facilitator of learning and learning environment and are as follows;

*Contact with Problems:* The student in a regular university course, in particular a required course often may view the course as an experience in which there is an expectation to remain passive, resentful or both, the student may not see the teaching or learning as relevant to their own problems. Yet a university course where the student/s does perceive that the course is relevant to their own problems which are of concern to them, the difference in engagement according to Rogers (1967) can be astonishing. In other words we should be permitting the student, at any level, to be in real contact with the relevant problems of their existence, so that they perceive problems and issues which they can resolve.

*Realness in the Facilitator of Learning:* The teacher needs to be real. The teacher needs to be the person that she/he is and be openly aware of the attitudes she/he holds. This requires the teacher to engage in a relationship with the students without presenting a front or façade. Rogers (1967) suggests that when the teacher does this there is an awareness of any thoughts and feelings that are being experienced at the time and the teacher will be able to communicate them to the students if appropriate. A direct personal encounter with the student/s can occur and there is a meeting with the student/s on a person to person basis. The teacher can now be a real person, as Rogers (1967) noted they can be have feelings like boredom, happiness, enthusiasm, interest in the student, be sensitive and sympathetic. Because the teacher can recognise and acknowledge their own thoughts and feelings they can accept them as their own and therefore have no need to impose them on their students, or to insist they feel the same way. The teacher can then become a person not a faceless embodiment of a curricular requirement. This however requires the

teacher to have faith in themselves as a person of worth and have the confidence to be real.

*Acceptance / Trust / Empathy:* Significant learning will take place if the teacher can accept the student for who they are and understand the feelings they possess. The teacher who can warmly accept, who can provide an unconditional positive regard and who can empathise with the feelings of fear, anticipation, and discouragement which are involved with meeting new material, will have done a great deal towards setting the conditions for learning. Rogers here is assuming that the teacher not only has the skills of empathic responding and questioning, but also the right attitude and frame of mind.

*Resources:* In education resources are vast, from books, to maps, to workspace and tools etc. We must not however forget the teacher as a resource, of knowledge, experience, and opinion, but that none of this would be forced on the student but instead made available to them or offered to the student. The teacher would want the quality of the relationship with their students to be such that they can offer their opinion and the student could freely disagree and would not feel that they had to follow in their footsteps.

*Self-actualising Tendency:* Lastly the teachers' basic reliance should be upon the self-actualising tendency in their students.



Rogers(1967, pg. 1-18) states clearly that “the hypothesis upon which the teacher would build is that students who are in real contact with life problems wish to learn, want to grow, seek to find out, hope to master, desire to create. The teacher would see his function as that of developing such a personal relationship with his students, and such a climate in his classroom, that these natural tendencies could come to their fruition”.

In order to develop students into fully functioning persons, within humanistic education principles, education would need to according to Patterson (1977) cease focusing on imparting facts, information, knowledge, to concern for the development of the affective, emotional and interpersonal relationship qualities of individuals”

However this would require educational institutions to change the focus in education from cognition to a combination of both the cognitive and the affective and from teaching and the teacher, to learning and the learner. Educators would need supporting in learning how to be person centred and adopting the person centred principles, in facilitating small group encounters. Extra resources will be required to ensure the availability of small these group encounters. According to Rogers (1984) Humanistic education would require a complete overhaul of the current education system.

In agreement with Rogers (1967) is Gould (2004) who suggests that reflection leading to change and development only happens in learning organisations. Learning organisations where critical reflection is occurring. Critical reflection has been

perceived by authors such as Jasper and Rolfe (2011, pg.8) as a “paradigm for practice in its own right”, a way of analysing experiences, conducting a critical inquiry into practice that ultimately produces knowledge and evidence to inform future practice. Jasper and Rolfe (2011, pg.9) suggest critical reflection is “a reflexive integration of research and practice into a single act”.

However Tate (2004) expands on this idea of the learning organisation and qualities of the facilitator by adding in the dimension of role modelling. She suggests that if we are telling our students to engage with critical reflection then to be certain that we are not in conflict with our own message we need to be engaged in critical reflection ourselves as teachers. Tate places great emphasis on the importance of role modelling critical reflection coupled with the philosophical underpinnings of Humanism that relate back to Rogers views which according to Tate suggests “students are valued as individuals on a personal journey where process is of equal if not more value than outcome” (Tate 2004. Pg. 15: 1). Gray (2007) perhaps would add that this only occurs with supportive mechanism of coach, mentor or facilitator, and as Senge (1992) offers, not when organisational visions are imposed from the senior members of the hierarchy leading to compliance.

## **Synthesis**

Having taken a brief look at the literature so far, we have from Ghaye (2000) and Bolton (2010) acquired a sense of what can possibly be gained from reflection; we have from Taylor (2006) and Bolton (2010) gained a sense of the importance of reflection; we have from Pierson (1998) and Rogers (1957 and 1967) been offered

ways of 'being' within the classroom, revealing the attitudinal qualities required by the teacher to affect significant learning; and we have from Jasper and Rolfe (2011) been introduced to the idea of critical reflection. It is these early emergent themes that provoked and offered evidence in support of embryonic ideas for some of the essential ingredients for successful reflection; *academic skills, attitude, attitudinal qualities, person centred and self-awareness.*

However before the intricacies involved in reflection are explored in greater detail, the next section will focus on defining reflection and identifying different perspectives on what reflection and reflective practice means to those in the nursing and educational literary field who have written about this subject.

## **2.2 WHATS IN A NAME: DEFINING REFLECTION**

Reflection, in the physical phenomenon sense of the word, means to throw back from a surface. The meaning of reflection in this sense means to throw back rays, such as heat and light (Swannell, 1980). In nursing practice the term reflection is used metaphorically since what is thrown back are our ideas, thoughts and experiences. Yet Bolton (2010) holds the opinion that the term reflection is not terribly useful. She suggests that the metaphor it embodies is limited: a mirror reflection is merely the image of an object right in front of it, faithfully reproduced back to front. She suggests in stronger terms than this, 'what is the reflection of rubbish? Rubbish'. Yet on the other hand that which is reflected to us is also 'shown' to us. It is my opinion that the reflection of rubbish is still important as we can see the rubbish for what it is and then go onto do something about it. I believe that Bolton is advising us that the word

'reflection' actually doesn't tell us enough about what it actually means for the individual to reflect.

## **Framing**

What is interesting is that Paul Horan, lecturer in nursing, preceded Bolton in expressing dissatisfaction with the term reflection being used to describe a rather complex process. In 2005 he wrote an article for 'Nurse Education in Practice', whereby he describes the process that has been termed 'reflection' as a complex activity of psychologically and emotionally processing the issues that trouble nurses / midwives in everyday clinical practice. He states that this term reflection has negative undertones as a word and a concept. To demonstrate this he asks us to look at our reflection in the mirror and contemplate how inaccurate or accurate that glass frame can be at depicting what we feel is our true self (Horan 2005). He suggests that reflection in its many guises does not verbalise or articulate the complex nature of the process just described. Instead he refers to Schön who he describes in the mid 1970's and 80's as coining the term 'Framing'. This term of 'framing' Horan believes has more value and would be better suited to describe the process that goes on when reflecting. He believes that this is because a person can pre-frame an experience before it happens, frame an experience as it happens, and reframe an experience as it happens and after it has happened. He believes that by terming this complex process of 'reflecting' as 'framing' "we become the nursing artists of our own experience, through framing our thinking can be as creative as we wish" (Horan 2005 pg.257). Johns denotes agreement with Bolton and Horan and describes reflection as

“a window through which the practitioner can view and focus self within the context of her lived experience in ways that enable her to confront, understand and work towards resolving the contradictions within her practice between what is desirable and actual practice” (Johns 2000 pg. 34).

## **Reflexivity**

If we refer back to Bolton who was also dissatisfied with using the term reflection alone, we can view another way of perceiving this complex notion. Bolton (2010) discards the term reflection and instead refers to reflective practice, seeing reflective practice as ‘through the mirror’. She uses this term to describe the process of reflective practice and reflexivity. Reflective practice she describes as

“learning and developing through examining what we think happened on any one occasion, and how we think others perceived the event and us, opening our practice to scrutiny by others, and studying data and texts from the wider sphere. It is an in-depth consideration of events or situations outside oneself: solitarily or with critical support,” Bolton (2010 pg. 13)

It will require the reflector to review and relive the experience to bring it into focus. Innocent details might prove to be the key while vital details may prove to be irrelevant.

Reflexivity Bolton describes as “finding strategies to question our own attitudes, thought processes, values, assumptions, prejudices and habitual actions, to strive to understand our complex role in relation to others” (Bolton 2010 pg13). Reflexivity is about having self-awareness in relation to how others perceive and experience

ourselves. It is being able to stay with personal subjective insecurity, and being not only curious as to how I perceive things but how others perceive things as well, and flexibly to consider altering deeply held ways of being (Bolton 2010).

Therefore the connecting or bringing together of both these concepts in Bolton's terms is 'Through the mirror' or more specifically 'through the mirror writing'. Through the mirror is described as a creative adventure right through the glass to the other side of the silvering. Bolton (2010) suggests that such reflective practice takes us beyond the indulgent ruminations while driving home, and beyond the notion that to reflect is to self-indulgently (or painfully critically) think about ourselves, to a more purposeful way of perceiving experiences from a range of viewpoints and potential scenarios. She likens it to a game of chess in which the player would not isolate the pawn (the reflector) to consider the moves away from the game of chess, this would not be helpful. Instead the player considers the pawn not in isolation but in amongst all the other chess pieces (life and work) and how the next move will impact upon the whole of the game.

John Dewey a prominent figure in the field of education and an important proponent of reflective practice who saw reflection as a specialised form of thinking, a key component of the process he termed inquiry. He described it as a form of thinking that comprises turning a subject over in the mind and giving it serious consideration. His definition of reflection is that it is

“Active, persistent and careful consideration of any belief or supposed form of knowledge in the light of the grounds that support it, and further conclusions to which

it leads...it includes a conscious and voluntary effort to establish belief upon a firm basis of evidence and rationality” (Dewey, 1933 in Moon 2001 pg4).

Thus for these authors considered so far, reflection is seen as a *process* in learning that can occur through thoughtful consideration of practice or events. It has the broad meaning of being able to examine your own professional behaviour and practice with the intention of using the information to improve and develop (Clarke and Croft, 1998). Fundamentally here is the notion of change in the self and in the individual reflecting. Most of these definitions hint at the transformational potential of reflection, and when reflection leads to change in an individual or a change in practice then it becomes reflective practice (Freshwater, 1998a, 2000, 2007).

Peter Jarvis (1992) views reflective practice as something more than thoughtful practice. He like Dewey sees it as a form of practice that can problematise aspects or elements of professional practice. In doing so these situations / experiences can become possible areas where development can occur both professionally and personally. However Benner (1984) would argue that the process of reflecting is documenting, recording and discussing the outcomes of practice. This belief would not be dissimilar to viewing reflection as an audit process, there appears an almost descriptive rather than analytical quality to this reference to what reflection is which to me would have little demonstrable relevance in the development of self and the process of learning, and certainly would conflict with authors such as Bolton, Schön and Horan. Yet at a later date Benner et al (1996) appear to offer greater importance

to reflection by asserting that reflective practice is the essence of expert clinical judgment.

### **Reflecting In and On Action**

Rather than dwell on such differing beliefs concerning the purpose of reflection we might do well to consider beliefs about reflection as a process and how these beliefs might feed into discussions concerning purpose: for this reason two types of reflection will be described 'in-action' and 'on-action' as defined by Schön (1983).

Schön (1983) divides the reflecting process into two main kinds: reflecting in-action and reflecting on-action. These he describes as the principal processes professionals can use to help them uncover and articulate their knowledge. He emphasises the idea that reflection is a way professionals can bridge the theory-practice gap, based on the potential of reflection to uncover knowledge both during activity and afterward through analysis of activity. In the nurse education setting this should enable the students to make the link between the theoretical underpinnings of mental health that are taught in the classroom and how they are applied in the clinical setting. This analysis becomes more than just reflection and can be viewed as reflective practice. The practical outcome of what Schön had to say about reflective practice is that it enables nurses and midwives to articulate what it is they know and how they have come to know it (Taylor, 2000).

Reflection-in-action is the process by which the practitioner recognises a new situation or a problem and thinks about it while still acting (Burns and Bulman, 2000).



Schön, (1987) and Boud and Walker, (1990) believe that it is possible to encourage reflection in action and in doing so improve practitioners' ability to identify problems in the social setting and to attend to the relevant surrounding stimuli in order to identify and deal with problems immediately. It is often seen as an automatic activity that occurs subconsciously. It can be perceived by people to be an intuitive and an unconscious process (Jasper, 2003), 'thinking on your feet', 'keeping your wits about you', and 'learning by doing' are everyday phrases that Schön (1983) refers to in order to describe in real terms 'reflecting-in-action'. Reflection-in-action assumes that the practitioner is a mindful practitioner and can think at the same time as they are doing and has a knowledge base that moment by moment action and behaviour can be judged against. This may not be possible for trainee nurses who are still learning the theory behind the actions they are taking.

Reflecting 'on-action' on the other hand is the retrospective contemplation of practice undertaken in order to uncover the knowledge used in a particular situation, by analysing and interpreting the information recalled. The individual may speculate upon how the situation might have been handled differently and what other knowledge would have been useful (Burns and Bulman, 2000). Jasper (2003), suggests that reflection on action involves us consciously exploring experiences and thinking about practice after it has occurred. Reflection on-action occurs through analysis, interpretation and recombination of information about the experience so that a new perspective can be found concerning what has occurred (Jasper, 2003). As stated previously this is a retrospective process that usually happens away from the scene of the experience and it assumes that practice is underpinned by knowledge,

therefore it becomes a cognitive process. Jasper (2003) suggests it can be seen as an active process of transforming experience into knowledge and is a more complex process than simply thinking about and describing an experience. It also needs to be guided so that thinking and practice can move forward.

## **Mindfulness**

Phenomenologist Van Manen (1990) like Schön breaks reflection down, however, not into two, but four elements.

1. Anticipatory: thinking about possible actions, interventions and outcomes
2. Active: maintaining and promoting awareness of what one is doing
3. Mindful: developing the capacity to be actively reflective and thoughtful
4. Re-collective: considering the success of actions and interventions.

It could be suggested that Van Manens stages represent what could be classed as reflecting pre-action, in- action, on-action and evaluative. These stages require the individual to be consciously and actively engaged in the reflective process. However to move this forward from reflection to reflective practice Van Manen does need to acknowledge a stage of applying the learning taken from this process and putting it into action.

Beverly Taylor provides us with what she believes is a fairly comprehensive definition of reflection and describes it as “the throwing back of thoughts and memories, in cognitive acts such as thinking, contemplation, meditation and any other form of attentive consideration, in order to make sense of them, and to make contextually

appropriate changes” (Taylor 2003 pg3). This definition seems to be fairly simplistic in relation to some of the previous definitions we have discussed. It would seem that this definition does not allude to the complex nature of reflection and I feel may mislead the reflector into thinking that reflecting is just an act of remembering and hopefully understanding. Christopher Johns (2004a) on the other hand has been developing his own definition of reflection over many years, and would refer to it as a description of reflection rather than a definition which implies authority that would be misplaced. His description is quite lengthy but none the less important if we are trying to define this phenomenon;

“reflection is being mindful of self, either within or after experience, as if a window through which the practitioner can view and focus self within the context of a particular experience, in order to confront, understand and move toward resolving contradiction between one’s vision and actual practice. Through the conflict of contradiction, the commitment to realise one’s vision, and understanding why things are as they are, the practitioner can gain new insights into self and be empowered to respond more congruently in future situations within a reflexive spiral towards developing practical wisdom and realising one’s vision as a lived reality. The practitioner may require guidance to overcome resistance or to be empowered to act on understanding”. (Johns 2004a, p.3)

The difficulty here with John’s description of reflection is whether it is comprehensible for the student nurse. It could be suggested that in order to understand this description one must first understand the terminology utilised and already have an understanding of reflection. It is interesting to note that Johns is not the only author to

use 'mindful' as a term related to reflective practice. In fact Epstein (1999), Knott and Scragg (2007), Wilson (2008), and Bolton (2010) all refer to mindfulness as an important component or quality of reflective practice. They refer to it as reflection before action, being acutely / mindfully aware of what you are attending to and in doing so developing accurate observation and communication skills, together with the ability to use implicit knowledge in association with explicit knowledge, and gain insight into others' perceptions. Bolton (2010) goes on to say that the observation skills and awareness of a reflective writer develop mindfulness, and are developed by it. Johns (2004) sees mindfulness as a conscious exclusion of other elements of life, apart from that which is being attended to; this is the opposite of multitasking.

### **Synthesis**

So it would appear that the majority of authors referred to would agree that the term 'reflection' on its own does not do justice to the complex process of reflective practice. Some authors would go as far as to lose the term reflection altogether and refer to the process as 'Through the Mirror', or 'Framing'. In fact Christopher Johns would assert that definitions of reflection such as reflection on experience or reflection in action, "reveal a cognitive approach that seeks to reduce experience into a rational understanding: a standing back from the situation to take an objective view" (Johns 2005, pg7). While he suggests that this can be useful he states that this approach does not acknowledge reflection as "a mindful, holistic and intuitive lens to view self within the unfolding moment" (Johns 2005, pg7).

There would however appear to be some consensus of agreement with regards to what the terms reflection and reflective practice actually means. If we try and synthesise what is meant by reflection, we can see that it is a process of analytical learning about oneself not only in relation to the development of self-awareness but also in the development of the self-concept with regards to understanding how experiences have impacted upon the individual person, but also in relation to the persons position in society and how that person is perceived by others. It is not a self-indulgent, ruminating process but a critical and analytical method that requires total focus to the exclusion of everything else (mindfulness) either before an event or experience, during it (in-action) or following it (on-action). The person reflecting needs to be reflexive and have a knowledge base that informs the reflection. Bolton likens this to a game of chess. The individual reflecting considers and analyses themselves in accordance with and in context with those they are in contact with.

Reflective practice is concerned with acting as a critical friend to oneself, having internal and external dialogue in order to gain greater understanding of self before, during or after an experience, whilst being cognisant of your position and its impact on those around to the exclusion of everything else. Reflective practice is taking the learning that occurs in the reflective process and applying this to practice or life situations whereby old knowledge is combined with an experience, reflected upon and new knowledge is created.

These notions of mindfulness, internal supervisor and critical friend would sit comfortably within the dialogical paradigm. This paradigm views meaning as being

created out of the interaction between different voices and different perspectives (Wegerif, 2001). Dialogicality means not merely that participants in interactions respond to what other participants do, “they respond in a way that takes into account how they think other people are going to respond to them” (Wegerif, 2001 pg2). As acknowledged previously, this could be seen as the essence of reflexivity.

In consideration of the formulation of the Essential Ingredients for Successful Reflection it can be acknowledged that further evidence has been offered at this point in support of the ingredients of: *academic skills* with the suggestion of the need for critical analysis; *attitude*, the literature suggests that reflection is not solely based upon a cognitive act, but that the person reflecting needs to engage in aspects of psychological and emotional processing; *empathy*, the person reflecting uses a particular type of dialogue to encourage a deeper level of understanding about oneself in relation to the experience that has occurred; *knowledge*, it is clear that some authors recognise the need for tacit knowledge that can be used in relation to the examination of an experience in order to develop new knowledge; *mindful*, the need for recognition of oneself in the context of others; *person-centred*, getting to know oneself in the context of an experience allows for the framing and reframing of our perceptions of that experience; *process orientated*, there is a consensus of opinion that reflection is not just about the outcome, but about the process that is undertaken, some authors have acknowledged reflection as a disordered process that may not produce a concrete outcome; *self-awareness* has been acknowledged as a skill that is required in the reflective process, a skill that needs to be already

inherent within the person reflecting, but will also be developed by the reflective process; *and strategic*, which relates to reflection as a process and being mindful.

Particular aspects of the discussion in this section and in the previous section where the literature concerned itself with the nature of reflection and reflective practice in nursing and nurse education has tentatively led us to touch upon specific reasons as to why it is important to undertake reflection or reflective practice. The next section will explore this in further detail. To warrant the study of reflection and reflective practice and the way it is taught there is a need to know if it's important enough to warrant the time and effort, and also, if the curriculum requires lecturers to teach reflection to student nurses, there should be a solid rationale.

## **2.3 THE RATIONALE UNDERPINNING REFLECTION**

On review of the literature it would appear that the keenness for reflection has resulted in reflection being used for a range of differing purposes and as it relates to nursing practice and nursing education there are a number of elemental reasons for why we should reflect. It could be proposed that the driving purpose of reflection stems from what is considered to be important about reflection. The importance of reflection in turn stems from two differing rationales underpinning reflection; reflection 'for self' and reflection 'for others' (Dalley 2009). When reflecting 'for self' the individual decides the purpose or outcome, it could be assumed, based upon what is important to them. When reflecting 'for others' the other might be a professional body, an educational establishment, or a clinical supervisor, for example. Each of these 'others' will have their own purpose for asking for reflection again based upon

their view of what is important. Dalley (2009) suggests it must be recognised that the categories of 'for self' and 'for other' are not mutually exclusive, they can overlap. An example of this is where the student nurse has to reflect on their clinical placement to satisfy the NMC student clinical placement learning outcomes (NMC 2008), but through reflecting on an area of practice of their own choice from their placement it could be said that there is overlap between reflecting 'for self' and reflecting 'for others' (Dalley 2009). The importance of this piece of reflection is not only about meeting the requirements of the NMC and addressing a learning outcome in order to pass a placement, but also from the students perspective they may have chosen an experience to reflect upon that has meaning for them, that raised issues, concerns anxieties within them that they wish to talk through with their personal tutor (Dalley 2009).

### **Professional Artistry**

In further examination of the importance of reflection Tate (2004) refers to the work of Schön (1983) who supported the categorisation of knowledge into two types; technical rationality and professional artistry. Technical rationality was an idiom for scientific knowledge that has been generated by research referred to as 'knowing that', in contrast professional artistry is intuitive knowledge derived from individual experiences and is referred to as 'knowing how'. Tate (2004) suggests that both types of knowledge are needed as practitioners and it is the interface of these two types of knowledge that is the professional artistry that is required by practitioners to offer holistic patient-centred care. Tate goes on to suggest that professional artistry is developed through critical reflection and Benner (1984) identified this as a



characteristic skill of an expert nurse by which staff will be able to describe and demonstrate their skills, thereby gaining credit and recognition. The importance of reflection is determined as an essential skill that relates to the ability of the nurse to offer patient-centred holistic care (professional artistry).

### **The Reflective Conversation**

Ghaye (2000) develops on from this idea of professional artistry and further purports that critical reflection is central to effective clinical supervision whereby the supervision is in the format of a reflective conversation. This reflective conversation is of paramount importance as it is an interactive process that allows for construction and re-construction of meanings and actions termed previously by Schön as framing and reframing. The importance of this, as noted by Ghaye is that it allows the healthcare professional to seek their own voice, “an authentic voice and one that enables them to talk about their experiences and their ability, or not, to learn from the work that they do” (Ghaye, 2000 pg. 59). The reflective conversation that occurs in clinical supervision is about developing practice through a richer and more holistic appreciation of it (Ghaye 2000). Padesky (1996) it would appear concurs and suggests that the principles of clinical supervision are achieved through the modern of Socratic questioning and dialogue, the aim of this type of questioning and dialogue is to explore through ‘guided discovery’ the content and meaning of experiences to enable learning to take place, and thus allow for change to occur in cognition and behaviour (Wells 1997). So it would seem that effective reflection is linked very closely to the success of clinical supervision and the ‘guided discovery’ that takes place within the supervision arena, in fact it would appear that Ghaye (1996) views

reflection as the essential ingredient of clinical supervision and that clinical supervision is a vital tool if we are going to develop and learn as practitioners. Ghaye also appears to assume that the supervisor has the skills to enable the supervisee to 'find their voice'.

Boud et al (1995) highlight the fact that it is reflection as an intellectual and effective activity that allows individuals to explore their experiences leading to new understandings and appreciations, outside of that which occurs within the clinical supervision setting. It could be argued that what Boud et.al (1995) are suggesting is of paramount importance in the field of mental health nursing. Understanding our service users, the relationships we have with them, the way we respond as clinicians to certain people, certain situations is what enables us to develop personally and professionally and to be safe in our practice.

### **The Four Purposes of Reflection**

This chapter has previously alluded to some of the underpinning purposes of reflection. Bolton (2010, pg.3) suggested that a purpose of reflection and reflective practice is to allow enquiry into areas that may be difficult to approach, enabling practitioners to become thoughtful, and critically innovative thinkers. Taylor suggested that reflection and reflexivity support the practitioner in ensuring their practice is responsible and ethical. Whereas Cooke and Matarasso (2005), offer the purpose of reflection as, a way to increase self-awareness and develop a conscious knowledge base at both macro and micro levels. Ghaye (1996) when previously developing this line of work came up with four purposes of reflection.

1. To act as bridge from the tacit knowledge to the considered action and from the practice world to the process of theory generation.

Here it is accepted that the practitioner will know how to access and use the already known knowledge, apply this to the action to be undertaken, undertake the action and from this evaluate the action in accordance with the known knowledge to develop new knowledge.

2. Enhances quality of action as it allows individuals to talk about their practice and provide different methods of work which can be tried out.

There is an assumption with this particular purpose that reflection is being carried out in a supervisory setting and that the practitioner has access to this, and that the supervision is of a high enough quality that the supervisee can acknowledge different methods of working that can be tested.

3. Increases individual and collective accountability.

The supposition here is that the reflection that is occurring is of a high enough standard that allows the individual to take responsibility. The reference to collective accountability it could be suggested assumes that staff teams are having group supervision sessions where reflection can occur encouraging collective accountability.

4. Allows the status quo to be challenged constructively and yet critically.

To ensure that the status quo is challenged through reflection the reflector has to be open, honest and confident and hold attitudinal qualities discussed further on in his chapter.

Perhaps in agreement with Ghaye would be Johns who suggests that the purpose of reflection is to “surface contradiction between what the (nurse) intends to achieve with any situation and the way she actually practices” (Johns 2001, pg. 241). In summary when applying the four purposes to mental health nursing, reflection bridges the theory-practice gap, it enhances patient care, it enables accountability and can help prevent generalised acceptance of situations, if the reflection is undertaken appropriately, correctly and the reflector has the right attitude. At present these are required competencies for pre-registration nurse’s entry to the professional register:

- All nurses must appreciate the value of evidence in practice, be able to understand and appraise research, apply relevant theory and research findings to their work, and identify areas for further investigation (NMC 2010, pg. 23).
- All nurses must be professionally accountable and use clinical governance processes to maintain and improve nursing practice and standards of healthcare. They must be able to respond autonomously and confidently to planned and uncertain situations, managing themselves and others effectively. They must create and maximise opportunities to improve services. They must also demonstrate the potential to develop further management and leadership skills during their period of preceptor ship and beyond. (NMC 2010, pg. 29).
- All nurses must act as change agents and provide leadership through quality improvement and service development to enhance people’s wellbeing and experiences of healthcare (NMC 2010, pg. 29)

Therefore it could be suggested that reflection is important if a student wishes to successfully qualify as a nurse. However the four purposes of reflection can only occur if the person reflecting knows how to reflect, is open to the learning that can occur in the reflective process and has the courage to act as their own critical friend, or has a supervisor who can be the critical friend.

Boyd and Fales (1983, pg.100) viewed the importance of reflection from a different angle. They claim that critical reflection 'is the core difference between whether a person repeats the same experience several times becoming highly proficient at one behaviour, or learns from experience in such a way that he or she is cognitively or affectively changed'. This process should therefore not be viewed as a bureaucratic exercise in order to gain professional registration as a nurse, but be perceived as a process of personal development and gaining self-awareness. Attitudinal qualities mental health nurses should have if they are going to work with vulnerable individuals. These are also a skills and attitudinal qualities that can be passed onto to those we care for in the form of role modelling. Take for example the individual who comes into contact with services due to low mood caused by low self-esteem compounded by one dysfunctional relationship after another. If the nurse can help this individual gain the ability to reflect, guide them through a reflective process, engage in a reflective conversation, help them to find their voice, it may just be that they are cognitively and/or affectively altered so that they are enabled to change the course of the next relationship.

## **The Relationship between Purpose and Importance**

It has been mentioned previously about the purpose of reflection being closely linked, maybe even based upon the importance of reflection to the person reflecting. It would appear that I am not alone in this thinking. Dalley (2009) would go along with this notion although she terms 'importance' as 'value' and goes onto suggest that what defines importance and or purpose for the individual reflecting will also shape the mode of delivery or indicate what elements of reflection are most valued at any one time. This idea is developed further by purporting that the individuality of the students reflecting and the individuality of their own personal epistemological assumptions, which even if they are not aware of the concept of epistemology will affect the way that they reflect, why they reflect and what the outcomes of the process of reflection might be. As an adjunct to this we also need to apply the same thinking to the individuals who teach the students how to reflect as their pedagogical approach to reflection will also be based upon their own epistemological assumptions (Burns and Bulman, 2000).

A further way Dalley (2009, pg.19) attempts to categorise the possible differing purposes of reflection is,

“to consider whether the purpose is seeking the outcomes of reflection or seeking the development of reflective skills per se. Is the outcome considered more important? Or is the process by which that outcome is arrived at considered the more important?”

A generalised example of this might be an adult nurse reflecting on why their patient is not responding to their prescribed dose of insulin. They may not place any

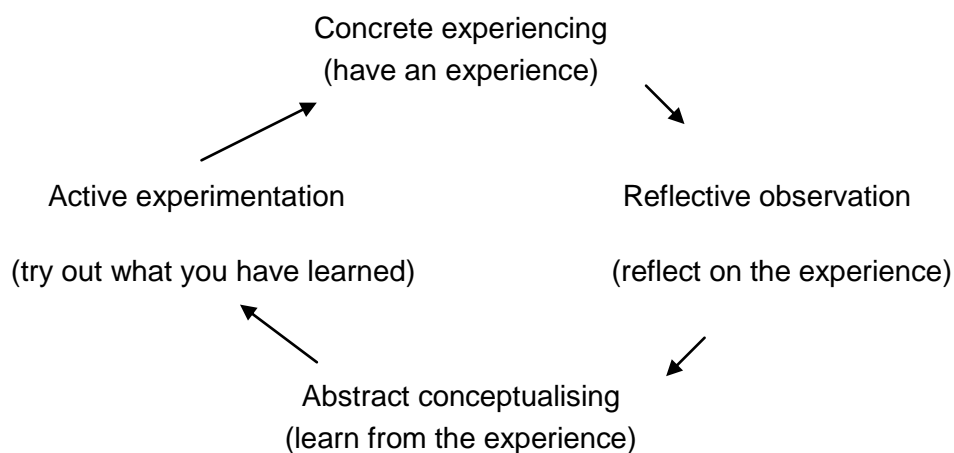
importance on the process of reflection; they may be more interested in an answer to this particular question which is the 'outcome'. A Mental health nurse may be reflecting upon why they responded and felt a certain way about a particular patient. To this nurse the process of reflection, getting to know their self, being mindful, reflexive, processing thoughts and feelings in the reflective process may be just as important if not more so than answering a question that may not be answerable.

Taylor (2006) also focuses attention on the process of reflection which she views as important when impacting upon the outcome. However she sees these two as inextricably linked and that even if you are more outcome driven you still need to be good at the processes, otherwise the outcomes do not come to fruition. In her book titled 'Reflective Practice; A Guide for Nurses and Midwives', she offers a whole chapter on coaching how to be an effective reflective practitioner, a topic that will be addressed within this review.

### **Reflection and Learning**

Kolb (1984) sees reflection as an integral part of the way in which we learn. That the purpose of reflection on experience is to stimulate further inquiry and so generate new cycles of meaningful activity (further experiences), in turn aimed at constructing new knowledge, not dissimilar to Gaye's (1996) first purpose of reflection. The development of cognitive, intellectual and practical skills is a product of activity (Kolb 1984). Therefore learning by means of reflection can best be conceived as a process that is grounded in and emergent from experience or experiences.

**Figure 2:** Kolb's Learning Cycle



Kolb (1984)

Thus Kolb considered reflection as a mental activity that has a role in learning from experience. In the Kolb cycle, reflection features as a “development of the process of observation – and apparently it occurs before a person has learnt” (Moon 2001, pg.3). Whereas others would see ‘reflection as part of learning and part of the processing of material already learned, having a kind of cognitive ‘housekeeping role’ as well as generating new learning’ (Moon, 1999a).

### **Synthesis**

So it would appear that reflecting is an important aspect of being a nurse. It enables, cognitive and affective development, it is an integral part of the way in which we learn, it helps people to become ‘professional artists’, to find a voice, to view their world critically without unwitting acceptance and to become person-centred in their care. It has been purported that the development of practice occurs through reflection and the mode of reflection is through the critical conversations held in supervision, yet these critical conversations cannot take place unless the person can reflect.



Reflection is viewed as the essential ingredient to clinical supervision and clinical supervision is regarded as crucial in allowing the nurse or practitioner to construct and re-construct the events in their life. It has been acknowledged here that the importance of reflection is also inextricably linked to the purpose of reflection and vice versa. It has been noted that the importance and purpose of reflection are driven by reflecting for 'self' and reflecting for 'others'; that reflecting for 'self' and reflecting for 'others' can function as discrete entities as well as mutually.

With regards to the new model of reflection it can be acknowledged that the underpinning rationale for reflection would support the requirement for each of the essential ingredients for successful reflection. Without the essential ingredients then it could be suggested that reflection would not achieve its purpose.

So far the literature review has addressed the nature of reflective practice within nurse education, examined the terms reflection and reflective practice and made an attempt to understand the importance of reflection within a nursing context. The next part of the enquiry will delve into 'how'. How do we actually reflect?

Now that a rudimentary understanding of reflection has been provided, its implications for personal and professional growth and the nature of what drives the need to reflect it is important to address how reflection is actually undertaken.

Previous sections have identified a handful of different methods or ways in which to reflect. These include reflecting by way of critical incidents, reflective journals, presentations and assignments set as part of university assessment strategy;

documenting, recording and discussing the outcomes of practice; examining what we think happened and how we think others perceived us, reviewing and reliving of experiences; retrospective contemplation of practice which is underpinned by knowledge; and being mindful. Other expressions applied to ways of reflecting that have been discovered in previous sections comprise: through the mirror writing, ethical engagement, framing and re-framing, thinking on your feet, keeping your wits about you, and the reflective conversation that occurs in clinical supervision. With further consideration it would appear that these methods of reflection could fall into one of two categories as identified by Schön (1983); whichever way a person reflects it will either be 'in action' or 'on action', some may fall into both modes with the concept of being mindful relating to not only reflecting in and on action but pre-action (Epstein 1999, Knott and Scragg 2007, Wilson 2008, and Bolton 2010).

It has also been acknowledged, albeit briefly, in previous sections that to develop our students into effective reflective practitioners it is not just about what they do when reflecting but what we do as educators. It has been suggested that we need to develop students to be more innovative and critical and that to do this we need to be adopting Carl Rogers' educational stance and be more humanistic in the classroom. Whilst alluding to how we become mindful, it has been suggested that observation skills and awareness develop this, whilst being mindful in turn develops those observational skills and awareness.

The purpose of the following is to delve into these ideas of how to reflect more deeply in order to identify the mechanics of reflection.

## **2.4 METHODS AND TOOLS FOR REFLECTION**

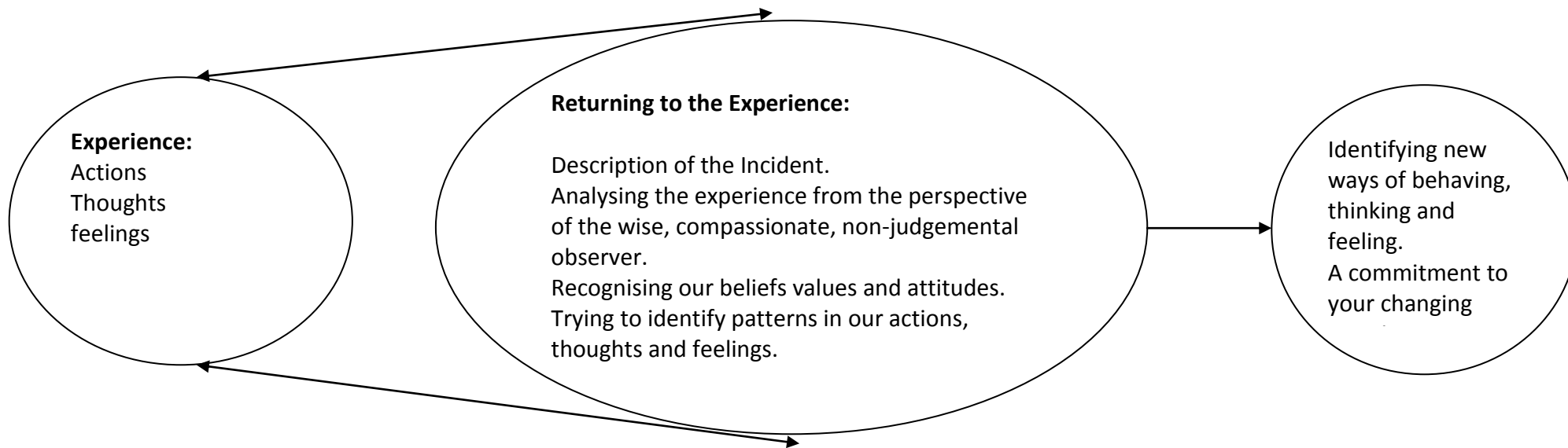
Schön (1983) suggested that we can engage in reflection in one of two ways. Either following the experience termed 'on action' or during the experience, termed 'in action'. Tate (2004) infers that the latter of the two is more difficult to achieve and requires more advanced reflective skills and the former is more likely to be utilised when teaching healthcare professionals. This observation by Tate not only corresponds with the information in the literature as the focus for discussion on how to reflect favours reflection 'on action', but also is an accurate representation of the teaching of reflection within the university setting that has the attention of this piece of research. It is at this juncture that attention will be focused on how to reflect 'on action'.

### **Models for Reflection**

On review of the literature various supporters have devised and advocated a range of models to guide and develop the practice of reflection on action. Key proponents of models for reflection and learning include, Boud Keogh and Walker (1985), Gibbs (1988), Atkins and Murphy (1994) and Johns (2004). This section shall take a brief look at these models for reflection as although not an exhaustive list it is these particular models that feature prominently within the faculty of the university that is integral to this research, and students are encouraged to view these actual models as ways to reflect and to use them when compiling reflective assignments or presentations.

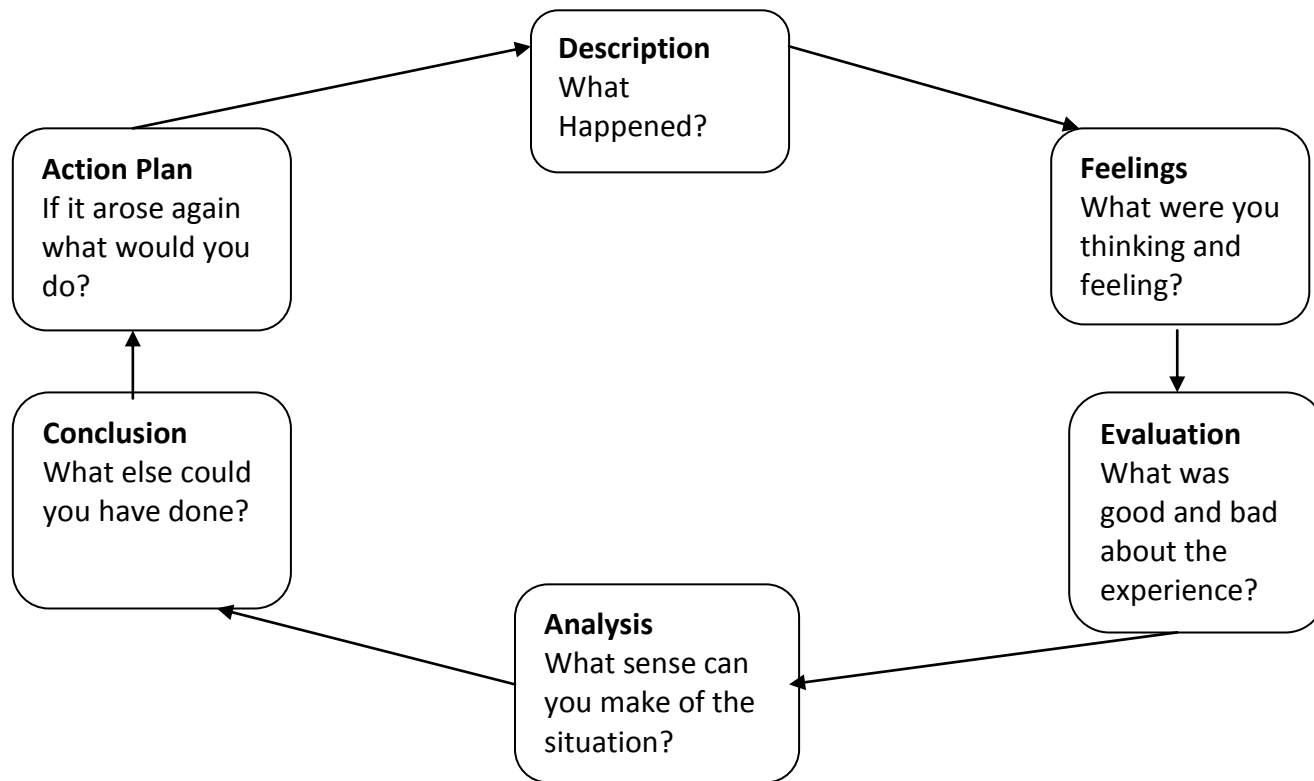
Below are the diagrammatic representations of models for reflection, as you will be able to determine from the structure they convey what is perceived as the dynamic process of reflection.

**Figure 3: The Reflective Learning Cycle**



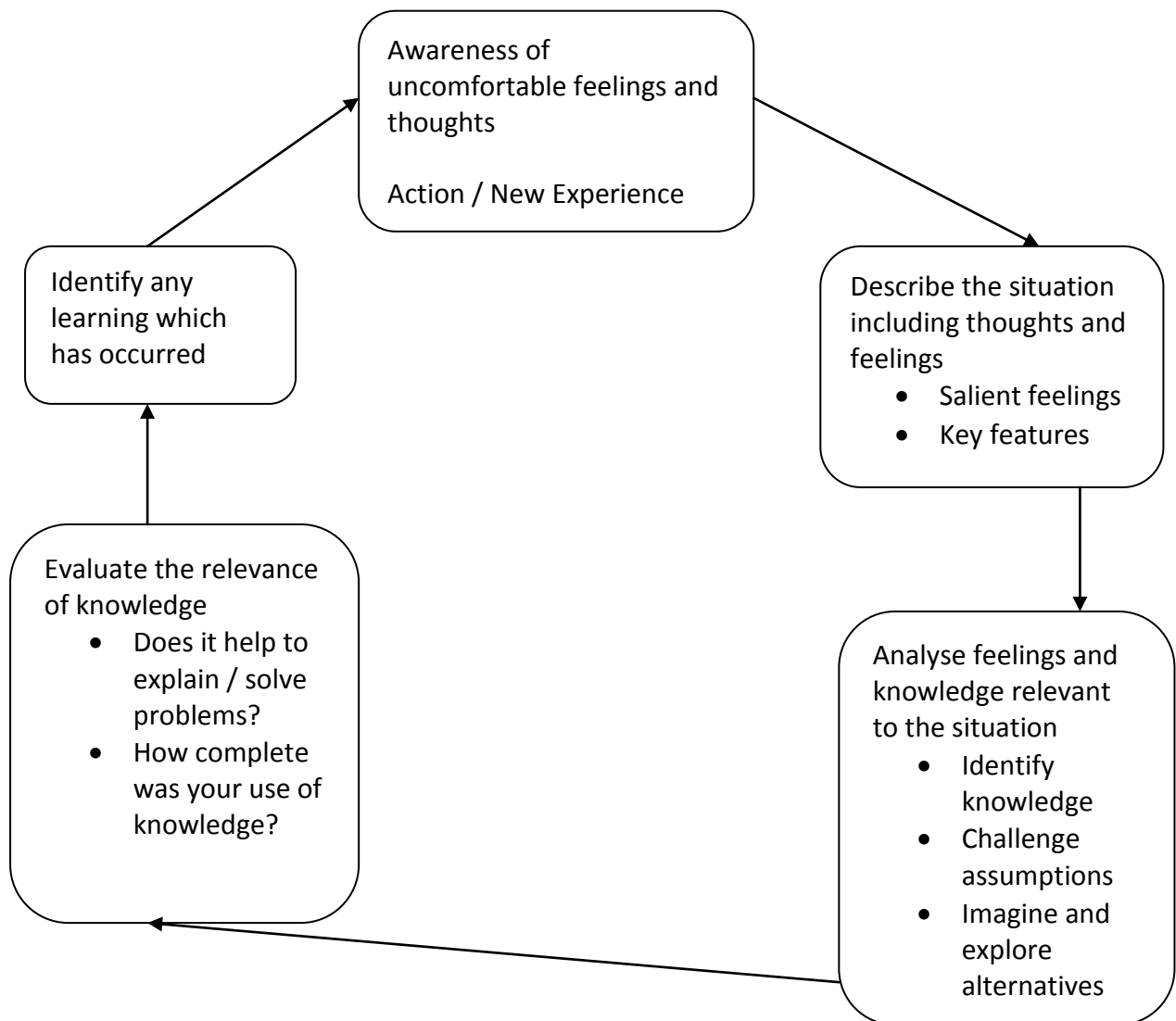
Adapted from Boud, Keogh and Walker (1985)

**Figure 4: The Reflective Cycle**



Gibbs (1988)

**Figure 5: Model of Reflection**



Atkins and Murphy (1994)

Within the university setting it is often the case that the mode of reflection for the nursing student is by way of presentation and/or written assignments. The students in general are expected to reflect alone when writing their reflective assignments or preparing for reflective presentations and that their only guide or support in their

reflective process would be one of the above models. These provide the student or reflector with a framework within which to reflect. They enable to a certain extent a strategic approach to what could be a rather random exercise, very useful for the novice reflector. However for the novice or even experienced reflector the terminology may not be overly helpful in the development of reflective skills and in aiding the complex discourse we need to have with ourselves during the reflective process. Heath (1998) suggests that using a model of reflection at the outset may produce uniformity and suppress students' creativity and thinking.

Boud et al. (1985) in their model of reflection suggest that of particular importance is the observation of the feeling induced during the experience, as emotive responses can override a person's rationality to such a degree that our perceptions of the event are blurred. Yet Johns (2010) would question this idea and suggest that perception is not affected or blurred by feelings, and that perception is quite simply what it is. Johns (2010, pg17) would critique Boud et al's model and recommend that feelings are not removed but are accepted as "valid and harnessed for taking positive action".

Semantics in nursing, especially mental health are very important. Part of the role of mental health nurses is to study the use of discourse within interactions with the people cared for. Using words, phrases, speech, listening as a way of getting to know and understand the person in distress is of paramount importance. Mental health nursing is a complex process of inter-relating with another person using complex verbal and nonverbal communication (Brown, 2012 pg. 20-50).

In following the Gibbs' cycle the students are required to state what it is they thought was 'good' and or 'bad' about the experience. These terms it could be suggested lack a mature essence. Answering what was good or bad about a situation it could be suggested requires little thought. It directs the student towards a descriptive interpretation of events that is reliant upon recalling simple knowledge from memory thereby encouraging the use of simple language to describe the experience, rather than provoking a more sophisticated way of remembering the event. Should the student be required to remember the experience in a more sophisticated manner this may impact upon the rest of the cycle, where by the student is encouraged to move through the stages of Blooms taxonomy (1956) viewing themselves progressively more analytically, critically, and in an evaluative manner . Therefore if inappropriate language is used to describe learning objectives, processes or activities then we may receive reflections from students that lack in mature reasoning and analysis and which are superficial. Because of this, reflection may become a superfluous exercise by no means helping to develop self-awareness within the students. Rolfe (2011) would suggest that the Gibbs cycle uses cues that are general and unspecific, and that this generic feel could be advantageous to some, but to the novice practitioner, it may be perceived as too vague and therefore unhelpful. Rolfe (2011, pg.35) also makes reference to the use of the term cycle for the Gibbs model. The fact that the model appears to "terminate with the action plan", there is no clear link through to the description phase refutes the use of the term cycle.

On the other hand some of the terminology used for example in the Atkins and Murphy (1994) model may not be understood by the student. It could be tentatively



assumed that a pre-registration nursing student trying to reflect on their own may not understand the term 'salient feelings'. If the student cannot understand what it is the model is asking them to do, they may skip a stage and the resulting reflection could lose some of its meaning.

If we take a look at what these models are asking us the person to do when reflecting, (to make sense of a situation; explore alternatives; analyse the experience from the perspective of the wise; be compassionate; be a non-judgemental observer; identify new ways of behaving); it can seem almost impossible to achieve by oneself. It would seem that there is an assumption that the reflector already has a level of self-awareness that they can tap in-to and have the ability to be critical and analytical in their thinking, which may not necessarily be the case for all of the students. Rogers (1959) put forward quite clearly that as human beings we have vast resources for self-understanding, for altering our self-concept or basic attitudes, and to self-direct our behaviour, all goals of reflection. But he also suggested that these resources could only be tapped into if the right psychological climate is provided. This climate requires the individual to experience genuineness, unconditional positive regard and empathy either from the person acting as the helper or, the reflector must apply these conditions to him or herself to create the climate for solo reflection. If educators are not providing the right climate or teaching the students how to provide the climate for themselves, and the student is expected to reflect alone utilising one of these models, it may be that educators need to re-assess how critical and insightful the students reflection will be. The models do however ask the student to acknowledge

feelings taking the reflection beyond that of mechanical, technical rationality that is often seen in stepped or staged methods of reflection.

### **Guided Reflection and Socratic Dialogue**

Johns (2000) acknowledges that there are limits to reflecting alone, and that guided reflection with a second person can allow the reflective process to become more meaningful. Students and practitioners often bring situations of emotional disturbance, grounded in such feelings as guilt, anger, anxiety, distress, conflict and inadequacy to guided reflection. The guide is there to help the student/practitioner to find meaning in the event, to understand and learn through and from it, and from Rogers' point of view, to create the 'climate' to enable self-exploration to take place (Rogers 1959). Johns (2000) does also caution us that these frameworks or models are just devices to help with reflection; they are not designed to impose a prescription. Through extensive work with practitioners, exploring their experiences in supervision, recognising the need for a guide and enabling reflection to become more meaningful to the reflector especially as they get to grips with what reflection is, Chris Johns developed a model of structured reflection. The later version of the model is depicted in the following table and also includes elements of reflexivity which 'encourages the experienced practitioner to employ reflective effort in tackling a particular issue, which is less evident in other frameworks' (Bulman and Schutz 2004, p. 167).

**Table 4: A Model of Structured Reflection – 14th edition Johns (2004a)**

Reflective cue	Way of knowing
• Bring the mind home	Aesthetics
• Focus on a description of an experience that seems significant in some way	Aesthetics
• What particular issues seem significant enough to demand attention?	Aesthetics
• How were others feeling, and what made them feel that way?	Personal
• How was I feeling and what made me feel that way?	Aesthetics
• What was I trying to achieve, and did I respond effectively?	Aesthetics
• What were the consequences of my actions on the patient, others and myself?	Personal
• What factors influenced the way I was feeling, thinking or responding?	Empirics
• What knowledge informed or might have informed me?	Ethics
• To what extent did I act for the best and in tune with my values?	Reflexivity
• How does this situation connect with previous experiences?	Reflexivity
• How might I respond more effectively given this situation again?	Reflexivity
• What would be the consequences of alternative actions for the patient, others and myself?	Reflexivity
• How do I NOW feel about this experience?	Reflexivity
• Am I more able to support myself and others as a consequence?	Reflexivity
• Am I more able to realise desirable practice monitored using appropriate frameworks such as framing perspectives, Carper's fundamental ways of knowing, other maps?	Reflexivity

Adapted from Johns (2005, pg. 3)

As can be viewed in this table, John’s model of structured reflection is composed of a series of questions which should help the individual reflecting to focus in on a specific experience, giving order and structure to the reflection and helping the reflector to gain something meaningful from it. In other words Johns is trying to help the student to gain an empathic understanding of self, in relation to the experience they had and the effect their experience has had on others. This is a possibly more useful model of reflection if you are reflecting alone and require a more structured format than the previous diagrammatic examples, as the empathic / Socratic questioning technique that is evident here is acting as the guide. This model does not assume that the

reflector knows the questions to ask of oneself. However it does require the individual reflecting to still act in a non-judgemental manner or, offer unconditional positive regard towards him or herself whilst reflecting, otherwise the honesty that forms part of the basis for any effective reflection may be hindered or reduced. This model also excludes the conscious effort to consider oneself in the context of others. Johns in this model does not ask the reflector to take into account the impact they may have had on those around them whilst in their own experience. Therefore it could be suggested that although a good model for the novice reflector it misses out an important aspect of reflexivity.

### **Through the Mirror Writing**

A further critique of the use of reflective models comes from Bolton (2010) whom views reflection as 'through the mirror' methods. Her view seems to infer that models are one dimensional in nature and detract from the complexity that is reflection. Her perception is that they can provide an angle on the picture but will never represent the true reality, and that using reflective models will leave the reflector unfulfilled, the range of experience is narrowed and "participants are disabled from taking authority over their own learning" (Bolton 2010 pg79). The inference in her writings is that true reflection and reflexivity may generate more questions than there are answers, 'that it is messy, inconclusive, entail uncertainty, self-doubt and generate strong feelings' and that reflection may not occur in a strategic, logical single loop manner but in a flexible/meandering double looping process.

Gillie Bolton's main method of reflecting and being reflexive is via '*through the mirror writing*' (Bolton 2010). She refers to this as "trusting the authority of the writing hand" (Bolton 2010 pg 104). In her book titled *Reflective Practice: Writing and Professional Development* she dedicates a whole chapter on the 'how' of reflection and reflexivity, where she describes in detail how to undertake *through the mirror writing*. This type of writing recognises content as its corner stone, not grammar, language, or other rules. The writers are their own first readers whereby no one else will read this work without expressed permission. When writing in this manner Bolton is clear that people need to rid themselves of the sense that teachers or editors are ready to correct and control content. The writer has full authority over their own writing and there is no wrong way, allowing for almost anything to be written uncensored. This type of writing remains with the initial draft and does not have to move onto methods required for publication, assessment etc. *Through the mirror writing* is about the process not the product. Bolton (2010) suggests it is exploratory and expressive, undertaken often at speed; it is a dynamic initially private process of discovery.

In the chapter Bolton describes in great detail the six stages to achieving *through the mirror writing*. Stage one through to stage six takes the reflector through phases that 1) prepare the reflector for the free writing that is required of them as part of this method, to 2) free writing about the experience, 3) reading the free writing, digesting the story, asking and answering questions, 4) utilising a critical friend to ask further questions of the free writing, 5) becoming reflexive and writing about the same experience but from a different point of view, to 6) preparing their reflective writing for academic purposes.

Stage four of Bolton's method whereby the critical friend is utilised, mirrors at this point the dialogue that takes place within the domain of clinical supervision. Ghaye (2000) and Todd (2005) refer to this dialogue as the reflective conversation. The mode of reflecting via conversation is the essential ingredient in clinical supervision and this type of dialogue occurs between at least two individuals the reflector (supervisee) and the supervisor, or a further example is that of the nursing student (reflector/supervisee) and the clinical assessor, or personal tutor (supervisor). Reflecting in this manner teaches the reflector to reflect on action through recalling and revisiting past events with the aim of learning from their experiences towards developing a new understanding of themselves and the situation (Todd 2005). This type of reflection, the reflective conversation that is the crux of clinical supervision, and occurs between student and assessor/personal tutor, has also been termed guided reflection by Johns (2000).

So it can be acknowledged that Bolton's method of reflecting can be of benefit in developing reflective skills and confidence in becoming reflexive when reflecting 'on action'. It also could be acknowledged that this method requires time and effort on behalf of the reflector and is not a quick undertaking. This type of reflection may also depend heavily upon the critical friend's involvement at stage four, if at stage three the reflector does not know what questions to ask of their own reflection. We may also need to question how this method of reflecting helps with enhancing the skills of reflecting 'in practice' and being mindful, consciously aware of impending experiences pre-practice.

## **The Fluid Method**

Taylor (2006) has developed her own method of reflecting in the form of a fluid rather than stepped model. She refers to her model which can be further modified into five elements as fluid in order to best represent the 'on-going and seamless connections between the reflective processes that permeate and flow in and through the human and material matrix of the sphere of practice' (Taylor 2006 pg 71).

Element one of the model is the *readiness* of the person to reflect. The momentary quietness and the accumulation of some knowledge and skills is the starting point for effective reflection. Taylor likens this aspect to the starting point of a journey where there is an idea of the itinerary, an idea of how to get there, but without having a detailed memory of the landscape and the eventualities you may come across.

Element two is *exercising thought*, through various strategies such as writing, conversation, supervision; at this stage the reflector must be spontaneous, be able to express themselves freely, be open to ideas and be personally prepared.

Element three is *following systematic processes*, through one of three types of reflection: technical, practical and emancipatory. This is because Taylor views reflection as a complex process and the need to be analytical at this stage is of paramount importance.

Element four is where *enfolding insights* occur. Enfolding insights may come from various sources, but here the reflector remains open to the possibility of amalgamating, replacing, altering their current ideologies with those of others. The reflector follows seamlessly on to the next element of *changing awareness*. The previous element will have led to insight and insight leads naturally to change whether it is large or small.

Element five is to *demonstrate tenacity* in the resolve to maintain reflection. Persistence and determination are the key ingredients at this stage.

It could be purported that reflection in this manner requires the reflector to already have knowledge about the issues being reflected upon, that there is an intrinsic subjective level of motivation to reflect and that this is something the individual wants to do. It requires the person to be open-minded enough to utilise external sources to assist in the reflective process, and lastly it requires the individual to be analytical. Therefore it could be suggested that this process may require the reflector to already possess key skills and personal attributes for reflection to be successful.



## **Van Manen: The 4 Types of Reflection**

In discussing types of reflection Van Manen (1990) broke reflection down into four sub types;

The first of these subtypes; *Anticipatory*: is where the reflector before engaging in a task is required to think about possible actions, interventions and probable outcomes, often referred to as pre-reflection. Although not reflecting in the sense of throwing back of ideas, or reviewing past experiences, it is about engaging with a situation even before it occurs (Taylor 2006).

The second subtype is *Active*: At this point Van Manen suggests the reflector should be maintaining and promoting awareness of what one is doing at any given time. This requires the reflector to be conscious of what they are doing, at the time they are doing it.

The third stage develops on from this and is termed *mindful*; Schön (1983) would possibly refer to this reflecting as 'in action'. Here the reflector has developed and is developing the capacity to be actively reflective and thoughtful during the experiences that they are encountering, sometimes referred to as 'thinking on the job'.

The final stage in Van Manen's model of reflection is *re-collective*. Here the reflector having thought about the experience to be encountered, becomes consciously aware during the experience, reflected at the time of the experience, is now asked to

consider and evaluate the experience by addressing the success of actions and interventions. This model assumes that the reflector understands each of the stages and knows how to accomplish each of the stages. Referring back to Tate (2004) who has inferred that reflecting *in action* or being *mindful* is more difficult than reflecting *on action* and requires more advanced reflective skills, it could be proposed that Van Manen's method of reflection may not be for the novice reflector.

Having reviewed the literature on reflecting *on action* it would seem that there are a variety of methods one could utilise to reflect *on action*, it could be suggested that some methods are more useful than others. There is a consensus of opinion within the literature that reflecting on-action develops the individual's skills as a reflective practitioner and provides a way for the individual to frame and reframe the situations they have experienced. It opens the person up to criticise the tacit knowledge they hold about given situations and to make new sense or reframe these experiences as they see fit (Schön1983). Gaining this level of self-awareness or getting to know what frames are given to situations or experience's and reflecting on them allows the person to create new frames that are stored and utilised in future events, whilst opening the person up to viewing situations from many different angles. A further advantage of reflecting on-action is that as the reflector's skills develop, so does their ability to reflect in-action (Schön 1983) or become mindful (Van Manen 1990).

## **Reflecting In Action**

Reflecting on-action whilst in the midst of an experience is termed, reflecting in-action. This is a concept coined by Schön who proposed that framing and reframing can occur not only when reflecting on-action but when reflecting in-action. Schön suggests the individual can also frame and re-frame the situation they are in and adapt their response, their practice, their conversation according to the frame they choose to adopt (Schön 1983). Schön does purport however that this is an analytical and critical process that occurs at the time of the event seeming to ignore or make no reference to the time element of quick decision making that occurs in many professions especially nursing. According to Rolfe (2011) Schön was interested in the practical knowledge that accompanies skilled behaviour. According to Rolfe (2011, pg. 162) Schön perceived that this “practical know how was part of the behaviour and could not be separated from it”. Rolfe (2011) suggests that there are two aspects to reflecting in-action. The first aspect is the “conscious and mindful attention to the task at hand” (Rolfe 2011, pg. 166). He suggests that this is where the practitioner can actually stop in the midst of action and verbalise their perception of the experience they are having. This is perceived by Rolfe as an important aspect of reflecting in-action especially as the practitioner may need to teach and mentor others during the experience. The second aspect of reflecting in-action is that the practitioner is consciously aware of the thoughts they are having during the experience and can actively reflect on those thoughts. Rolfe (2011, pg. 167) terms this aspect meta-reflection, “reflecting on our own reflections”. Rolfe (2011, pg67) therefore offers that reflection in-action involves “doing, thinking about doing, and thinking about thinking about doing”.

## **The Internal Supervisor**

It has been acknowledged in the literature that spontaneous reflection in-action is not only a product of the development of reflecting on-action skills but of the development of the internal supervisor (Casement 1985, Bond and Holland 1998, Todd 2005). The internal supervisor has been coined as a metaphor to describe the internal Socratic dialogue that occurs in the consciousness of the reflector, within the moment of the experience (Todd 2005), or the conversation that a person holds internally about the event as the event or experience occurs. The internal supervisor questions personal bias and subjectivity towards finding an objective perspective (Todd 2002). The internal supervisor can also be likened to the critical friend defined by Costa and Kallick as:

“... a trusted person, who asks provocative questions, provides data to be examined through another lens, and offers critiques of a person’s work as a friend. A critical friend takes the time to fully understand the context of the work presented and the outcomes that the person or group is working toward. The friend is an advocate for the success of that work” (Costa and Kallick 1993, p. 50). The internal supervisor is a way of questioning the self at the time of engaging in any given situation, it allows the person to be fully aware of their own engagement and be mindful of the outcome. The critical friend, whether this part is taken on by your own internal supervisor or an external party, will listen more than they talk but they will use reflective questioning and be mindful of the salient points as the reflector speaks (Taylor 2006). By activating the internal supervisor, the person is able to reflect in-action, or as Van Manen would suggest, become mindful.

## **Being Mindful**

A conscious exclusion of all elements, apart from that which is being attended to (Johns 2004), mindfulness and what it represents has been elaborated upon quite extensively by Christopher Johns and Freshwater in their book 'Transforming Nursing Through Reflective Practice' (Johns and Freshwater, 2005). They suggest that *mindful* practice most "typifies reflection as a way of being: a way that honours the intuitive and holistic nature of experience" (pg. 7). They perceive that using terms such as reflection on-action or in-action, transforms reflection into a reasoning process that seeks to "reduce experience into a rational understanding" (Johns and Freshwater 2005, pg. 7). Whilst they do not discard the terms on and in-action completely as being of no use they do suggest that mindful reflection places more emphasis on viewing reflection as, 'a holistic and intuitive lens to view self within the unfolding moment' (Johns and Freshwater 2005, pg.7). It would also seem that previous discussions by Benner et al. (1996) would have concurred with this designation of being mindful. Benner et al. (1996) cited in Johns and Freshwater (2005, pg7) view mindful practice as the "exquisite ability to appreciate the pattern of the unfolding situation from a position of deep ethical engagement within the situation". Bolton (2010) suggests mindfulness means that the person is fully conscious of their actions, which in turn enables awareness of the likely outcome and appropriateness of the actions to be undertaken. She suggests that mindfulness resembles reflection before-action, which as previously acknowledged is the first stage in Van Manen's model of reflection titled *Anticipatory*. Here the individual does not just blunder into situations but actually contemplates, cogitates and reflects upon the situation about to be encountered. In support of reflection *before action*

Greenwood (1993) cited in Moon (1999, pg. 49) would suggest that it is at “least arguable... that much of the suffering in the world including that caused through nurses’ errors could have been avoided if practitioners stopped to think about what they intended to do and how they intended to do it before they actually did it”.

## **Synthesis**

On review of the literature there is a consensus of opinion that there are a number of methods that individuals can use to facilitate reflection. Methods of reflection it would appear fall into one of three categories, reflection before, in or on-action. It has been suggested that reflecting before or on-action is perhaps a more simple undertaking than reflecting in-action. Methods of reflecting within these two categories vary from the use of reflective models / cycles, to guided reflection with another person, holding a reflective conversation perhaps within a supervision session or engaging with *through the mirror* writing. It has been noted that there are criticisms related to the use of reflective models and that reflective models can detract from the complexity of the reflective process, or present a rather one dimensional impression of the experience being reflected upon. A cogent argument has been presented in the literature that whatever the method chosen to facilitate reflection it remains a complex process, at the outset requiring a certain amount of skills and personal attributes on behalf of the reflector to be able to engage even marginally in the reflective process. An example of this is being mindful or reflecting in-action. This type of reflection can develop observational skills, communication skills and the ability to use the tacit knowledge in association with explicit knowledge, which in turn can then develop the skills of reflection. As such there is an implication here that the

reflector will already have a level of observational and communication skill with some ability to use what they perceive as knowledge in association with what is known as knowledge, before they engage in reflection in-action. Therefore there is an insinuation here that the reflector will know and be aware of what they hold as tacit or implicit knowledge and therefore hold a level of knowledge that can be perceived as explicit. This further implies that a level of self-awareness is owned by the reflector, and that there are certain attitudinal qualities inherent in the reflector, such as tenacity and motivation that enables the person to engage fully in the reflective process.

Here it can be seen that not only do methods and tools for reflection assume the reflector already possess certain skills that are required for reflection, but they do also support the need for the essential ingredients of reflection such as *academic skills, attitude, attitudinal qualities, empathy, being mindful, being person centred* and having a level of *self-awareness*. Other methods of reflection further support the need for these ingredients by requiring the reflector to critique, to analyse and to be Socratic in their questioning.

It is because of these assumptions that the next section will address what is the skill set required in order to reflect effectively.

## **2.5 SKILL SET AND ATTITUDE REQUIRED OR EFFECTIVE REFLECTION**

Dewey viewed reflective practice as a tool for enabling us to know what we are about when we act. It “converts action that is merely appetitive, blind, and impulsive into intelligent action” (Dewey 1964, pg. 211). Possibly referred to more recently, by others interested in the field of reflective practice, as being mindful. He argued that reflection consists of five steps:

“The first being perplexity, confusion, doubt, due to the nature of the situation the person finds themselves in;

Second is conjectural anticipation and tentative interpretation of given elements or meanings of the situation and their possible consequences;

Third being examination, inspection, exploration, analysis of all attainable considerations which may define and clarify a problem with which one is confronted;

Fourth is elaboration of the tentative hypothesis suggestions;

Fifth is where deciding on a plan of action or doing something about a desired result occurs” (Dewey 1973, pg. 494-506).

However in order to reflect in this manner Dewey argued that knowledge of reflective methods alone is not sufficient, that there must be a union of skilled method with attitudes.

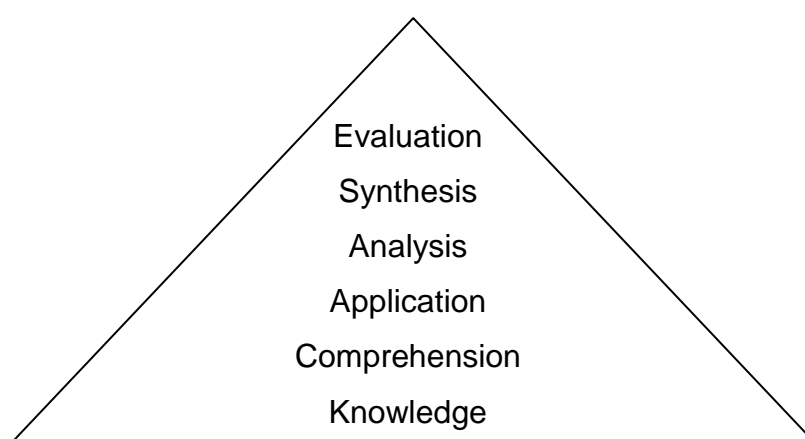
### **Higher Order Cognitive Skills**

If we review what Dewey is asking us to do when we reflect we can see that there is an element of problem solving via a strategic process of exploration, interpretation,



informed conjecture of possible outcomes and analysis, resulting in the person being able to form a plan of action in order to achieve a desired result. The skills here that Dewey is alluding to, to be able to reflect appear to be ones of critical analysis, and problem solving not dissimilar to those required for academic work within higher education, which include; underpinning knowledge of the subject matter that the individual is reflecting on (Jasper, 2003) and the higher order cognitive skills as defined by Bloom et al (1956) taxonomy of educational objectives:

**Figure 6:** Taxonomy of educational Objectives



Bloom et al (1956).

Bloom's taxonomy has guided the development of nurse education within the university setting and as a result every activity/task students are asked to complete is aimed at progression toward and demonstration of deeper levels of learning and understanding. The basis for this is the notion that the skill of critical / analytical thinking is paramount to effective nursing practice. It must be acknowledged that some authors do reverse evaluation and synthesis, or may often replace synthesis

with create, but the top three components are viewed as the skills of critical thinking (Anderson and Krathwohl, 2001).

Nurses not only need to be caring, compassionate, and kind but need to be able to work within an evidence-based framework, possessing the cognitive skills of decision making and problem solving (Wilkinson 1996). Being able to critically review the literature, research and clinical guidelines is what ensures safe and effective practice (Atkins 2004 and Taylor 2006).

Atkins and Murphy (1993) made reference to these academic abilities when they outlined the five main skills helpful for reflection. Four out of the five skills sit within the category of higher order cognitive skills, these are

*a) description:* the ability to recognise, recollect and describe situations as well as feelings and emotions;

*b) critical analysis:* challenging of assumptions, exploring alternatives and asking the relevance of knowledge in specific situations;

*c) synthesis:* the amalgamation of new and previous knowledge in the move towards a new perspective

*d) evaluation:* making value judgements involving the use of criteria and standards (Atkins and Murphy, 1993, pg. 1188-92). Taylor (2006) would possibly refer to the amalgamation of the top three skills as critical thinking.

Taylor (2006) would suggest that critical thinking processes and the possession of critical thinking skills are important if you require, careful fully analytical reasoning to

assure you of the conclusions you have drawn in relation to some objective issues in your practice. She concludes that as some kind of reasoning will always be involved in the reflective process then critical thinking is a skill that not only gives you more choices about the ways in which you reflect but that this is a skill that underpins successful reflection. Examples of the requirement for critical thinking in order to reflect effectively can be seen in reflective models. On review of the previous discussions it can be seen that in relation to the reflective models presented there is a reference to and suggestion of underlying skills involved when reflecting. The skills of description, critical analysis, synthesis and evaluation are implicit in the models and theories of authors such as Boud et al (1985), Gibbs (1998) and Atkins and Murphy (1994). Not only do these models allude to the need for higher order cognitive skills associated with academia but they ask students to attend to feelings and attitudes throughout the process making use of positive and negative feelings experienced which denotes a level of self-awareness.

### **Self-Awareness**

It is the skill of self-awareness, the first skill that Atkins and Murphy (1993) identify as one of the five skills for successful reflection that differentiates reflective practice/learning from generic academic work or mental activity/logical thinking (Mezirow 1981). Self-awareness has been noted as the foundation skill upon which reflection and reflective practice is built. It underpins the entire notion of reflection as it enables the individual to see him or herself in a particular situation and honestly observe how they have affected that situation and how the situation has affected them, it also allows the person to analyse his or her feelings regarding that particular

event (Atkins 2004). It is suggested by Atkins that self-awareness enables a person to analyse his/her own feelings, beliefs, and values an essential part of the reflective process.

Taking a brief look at Mezirow's seven levels of reflectivity;

**Table 5:** Levels of Reflectivity

<ol style="list-style-type: none"><li>1. Reflectivity – Awareness of a specific question</li><li>2. Affective reflectivity – awareness of how we feel about the way we are perceiving, thinking or acting/habits.</li><li>3. Discriminant reflectivity – assessment of the efficacy of our perceptions, thoughts, actions, habits, of doing things. Identifying immediate courses, recognising reality contexts, and identifying our relationships in a situation.</li><li>4. Judgemental reflectivity – making/becoming aware of value judgements about perceptions, thoughts, actions and habits.</li><li>5. Conceptual reflectivity – self-reflection leading to questioning of values.</li><li>6. Psychic reflection – recognition of the habit of making precipitant judgements on the basis of limited information. Recognising interests and anticipations influencing our perception, action and thinking.</li><li>7. Theoretical reflection – awareness of reasons for our habit of precipitant judgement or conceptual inadequacy.</li></ol>
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Mezirow (1981)

It can be seen here that the need for self-awareness is embedded throughout the seven levels and it could therefore be suggested that these levels are unattainable if the person reflecting does not possess the ability to be self-aware.

Atkins (2004) further purports that developing an honest self-awareness is more complex. Even if the person reflecting has a level of self-awareness this may not be altogether fully objective. She suggests that individuals have a natural tendency to

want to see and portray themselves in a positive or favourable light. This desire, together with “our own prejudices and assumptions, can sometimes interfere with the ability to take a more objective look at oneself” (Atkins 2004, pg.29).

### **Attitudinal Qualities of the Reflector**

To be honest about oneself, Atkins suggests requires more than just skill but a certain type of attitude that includes courage, confidence, a level of maturity and the support of others. Dewey would perhaps to some extent agree with Atkins as he also spoke of the need for developing certain qualities or traits for effective reflection such as “open-mindedness/sincerity, wholehearted or absorbed interests, responsibility, as well as the need for a habit of thinking in a reflective way” (Dewey 1964, pg. 224-228).

Wilkinson suggested that in order to be able to think in an independent critical manner within the reflective practice mode, further attitudes such as “intellectual humility, courage, empathy, integrity and perseverance were needed” (Wilkinson 1996 pg29-32). In fact Taylor dedicated a whole chapter in her book ‘Reflective Practice: A Guide for Nurses and Midwives - to preparing for reflection. The majority of this chapter focuses on the qualities or attitudes required for reflecting. Her work and suggestions in this area echo those of Dewey, Atkins, Wilkinson and Johns. She suggests that after years of practising, teaching and researching reflection, she has come to the conclusion that it “takes considerable time, effort, determination, courage and humour to initiate and maintain effective reflection” (Taylor 2006 Pg. 48).

Acknowledging the importance of not only cognitive skills but the attitude or mind set required for effective reflection was taken a stage further by Johns who amalgamated the aspects of attitude required for reflection into a mode of being. He purported that in order to engage effectively in the critically reflective process the individual reflecting needs to engage the 10 c's of reflection.

**Table 6:** The 10 C's of Reflection

COMMITMENT	Believe that self and practice matter; accepting responsibility for self; the openness, curiosity and willingness to challenge normative ways of responding to situations.
CONTRADICTION	Exposing and understanding the contradiction between what is desirable and actual practice.
CONFLICT	Harnessing the energy of conflict within contradiction to become empowered to take appropriate action.
CHALLENGE AND SUPPORT	Confronting the practitioner's normative attitudes, beliefs and actions in ways that do not threaten the practitioner.
CATHARSIS	Working through negative feelings.
CREATION	Moving beyond self to see and understand new ways of viewing and responding to practice.
CONNECTION	Connecting new insights within the real world of practice; appreciating the temporality of experience over time.
CARING	Realising desirable practice as everyday reality.
CONGRUENCE	Reflection as a mirror for caring.
CONSTRUCTING PERSONAL KNOWLEDGE IN PRACTICE	Weaving personal knowing with relevant extant theory in constructing knowledge.

Johns (2000, pg.36)

Here we can see that engaging the 10 C's of reflection is more than technical rationality. It's about the reflector's attitude to learning; their openness to learn about themselves, to be able to acknowledge what their attitudes and perceptions are, to be open to challenging those current ideologies, to have the ability to be empathic, to

view the world as others may see it, and to be able to combine evidence-based theory with personal knowing in the construction of new knowledge. If you are also acting as your own critical friend or, activating your internal supervisor then you must also be skilled in reflective questioning as previously noted by Taylor (2006).

## **Synthesis**

From this albeit brief but important section we can see that reflection does not just occur, it's not something that as a human being we are automatically born with the ability to do. To be effectively critically reflective, whereby the individual is not only thinking about their practice but subjecting the way they consider and think about their practice to a degree of interrogation (Freshwater 2007), there is a consensus of opinion in the literature that the individual reflecting needs a set of specific proficiencies. These proficiencies it could be suggested fall into one of two categories; those of *higher order cognitive skills* such as those defined in Bloom's taxonomy (1956) of educational objectives and *attitudinal qualities* such as those acknowledged in John's (2000) the 'Ten C's of Reflection'. Critical reflection it appears requires more than just an understanding of reflective cycles. It requires the person to hold a level of knowledge on the subject upon which they are reflecting so that they, through the process of reflection can determine if that knowledge was correct and construct new knowledge if needed. It requires the person to be open, congruent, confident, honest and self-aware, be able to critique and analyse a situation they have experienced in a manner that goes beyond a description of the event and allows the person to not only understand themselves in relation to the experience but to also empathically understand how others were affected by their

experience. At the end of the process it requires the person to be able to synthesise new knowledge and amalgamate the new knowledge with the current knowledge in the development of self. The proficiencies suggested here provided evidence towards the development of some of the essential ingredients for successful reflection, namely the ingredients of *academic skills, Attitude and attitudinal qualities, knowledge and self-awareness.*

It could be suggested however that there is a paucity of literature on the skills required of the person offering any guidance in the reflective process. On review of the work on clinical supervision by authors such as Driscoll, Johns, Ghaye and Lillyman there is discussion on the composition of what constitutes an effective supervision relationship but scant detail on the skills of the supervisor.

It can perhaps be assumed that in order to guide reflection effectively the guider/supervisor/mentor/tutor needs to have and own the same skills and attributes as the person reflecting. The same can be said for literature relating to the teaching of reflective practice. The literature tends to discuss methods such as the use of journals, group reflection, and assessment, rather than how to teach this subject to our students.

## **2.6 SUMMARY**

As it can be perceived from the literature review the teaching and learning of reflection has become over the years an integral part of the nursing curriculum. Being effective at reflection and thus becoming an effective reflective practitioner is deemed



as highly important especially in the field of nursing. There is a huge consensus of agreement that to be a safe practitioner it is important to be able to reflect effectively. The literature acknowledges that the importance of reflection is based upon its perceived importance to safe/high quality outcomes for patients (Tate 2004 and Dalley 2009).

Numerous arguments are put forward to support the notion of importance relating to reflection and so popular is this notion of importance that it is now accepted and supported by the health professions, notably nursing's regulating bodies to the extent that it has led to prescribed professional competencies (QAA 2004 and NMC 2010), yet there is scant direct supporting evidence in the literature to actually support the notion of the importance of reflection to safe outcomes.

However it could be perceived from the review that no matter how important people perceive reflection to be, actually how well the teaching of reflection has been integrated into the curriculum is also open for debate. Tate (2004) warns us, reflection needs to be embedded not only into the wider curriculum but into staff and students support and professional development systems. It would appear that reflection cannot or perhaps should not be taught by those unwilling to be reflective practitioners themselves, or by a system that perceives reflection as a 'bolt on' the curriculum rather than an integral part.

The literature whilst being fairly firm in its stance on embedding reflection into the curriculum, also demonstrates a broad consensus of opinion in relation to the values

required by the organisation and the teaching staff working for it, if the environment is to be conducive to the nurturing of reflection in its students. There is not an abundance of research into, or theories on how, to teach reflection. Nevertheless, the modest amount of research available alludes to the need for adopting a humanistic approach not only by teachers / lecturers in the classroom but top down throughout the organisation. The information gained from the literature review implies the alignment of a variety of authors with the views of humanist Carl Rogers (1967) in relation to education. The qualities and value systems he identified as needed by teachers if they are to support the development of reflection and reflective practice amongst students are it seems widely accepted in the literature on reflection.

The literature review presented here highlights the congruency between researchers in the field of reflection on what the terms reflection means at a very broad level. However it is easily noted that there are definite differences of opinion when it comes to offering one single definition of reflection as each author offers very specific and sometimes unique idiosyncratic details to elaborate their own understanding of what reflection means e.g.

Dewey (1933) '*specialised form of thought*';

Jarvis (1992) a way of '*problematizing situations*';

Schön(1983) and Horan (2005) '*framing*';

Bolton (2010) '*through the mirror writing*'.

It could be perceived that the views of certain pioneers in the field of reflection have widely influenced the majority of work undertaken into reflective practice by others.

Such a pioneer in this field and widely quoted is Schön whose theories and work on reflecting in and on-action seem to have been adopted or adopted and adapted in some manner by most authors discussed in this review. Yet even with widespread understanding and use of the terms reflecting in and on-action there is no one mode or method of reflecting in this manner alluded to in the literature. Each author has their method or mode for reflecting including; *through the mirror writing, reflective conversation (with a critical friend or with a supervisor)*. Conversely, there is agreement intimated with regards to the use of reflective models or cycles. Caution is suggested when using these models/cycles and a number of authors such as Johns (2000) and Bolton (2010) concur with the opinion that models such as Gibbs (1998) reflective cycle detract from the complexity that is 'reflection' by being one dimensional.

However it would seem that no matter what method or mode of reflecting a person chooses there are certain key skills or attributes required to reflect effectively. The skills essential for reflection appear to be those of the higher order cognitive skills required for academic work and the personal attributes appear to be qualities in an individual that lead to self-awareness and an empathic appreciation of other people and of self. What is interesting is that there is reference in the literature to the use of the internal supervisor, Socratic dialogue and the reflective conversation, yet no discussion on the communication skills that support this type of discourse. There appears to be a presumption on behalf of authors quoted in the literature review that the individual reflecting already possesses the ability to communicate in such a manner as to hold this type of conversation with themselves. Yet Socratic dialogue

and the discourse that occurs in the reflective conversation and on behalf of the internal supervisor, is specific and quite different from the conversation a person may have with when mulling over internal thoughts or having a conversation with friends.

### **Answering the Research Questions**

The emergent themes from the literature review have not only supported and provided evidence towards the development of the Ten Essential Ingredients for Successful Reflection (as demonstrated throughout the review), but coupled with the my own experiences of the phenomena under discussion, have allowed me to develop my own description of reflection. I utilise the word 'description' as the term 'definition' I feel implies an authoritative, fixed stance towards reflection that could be perceived as lacking in the ability to alter with new developments. At the end of this chapter my own description and the new model of reflection the - Ten Essential Ingredients for Successful Reflection will be presented and utilised as part of the orientating framework within which to analyse raw material from the study.

The emergent themes from the literature, in order to also provide part of the orientating framework within which to analyse the research findings have been grouped and tabled in relation to the specific research questions. It was felt that the literature review had generated themes in relation to research questions one and three, and these themes are summarised in tables 7 and 8. As research questions 2 and 4 were context specific, themes that may have been generated from the literature review have not been tabled but will be alluded to where appropriate when discussing the findings relating to these specific research questions.

Research questions 1 and 3 are as follows:

1. How do the participants make sense of the notion of reflection and reflective practice? - How do they define it?
2. Is there a skill set that enables effective reflection?

**Research Question 1:** How do the participants make sense of the notion of reflection and reflective practice? - How do they define it?

Table 7 houses the emergent themes that pertain to this question.

**Table 7: Literature Review – Emergent Themes Concerning Research Q1.**

Emergent Themes	
Accountability	Internal supervisor
Advanced reflective skills	Limitations
Articulation of knowledge	Modes
A significant concept in nurse education	Outcomes and process
Assessment	Patient care
Attitudinal Qualities	Personal Attributes
Supervision	Pre-Action
Credibility and recognition	Reconstruction of meanings
Evidence Base Practice	Reflective conversation
Guided reflection	Reflexivity
Higher order cognitive skills	Role modelling
Humanism	

**Research Question 3:** Is there a skill set that enables effective reflection?

Table 8 houses the emergent themes that pertain to this question.

**Table 8: Literature Review – Emergent Themes Concerning Research Q3.**

Emergent Themes	
Attitudinal Qualities	Mode of Being
Critical analysis	Personal Qualities
Evidenced based practice	Socratic dialogue
Higher order cognitive skills	Support

It is these two tables that will be part of the orientating framework from which the emergent themes from the participant research findings will be compared and contrasted. The final part of the orientating framework relates to my own understanding of reflection as underpinned by experience, the literature review and research. The following is my own description of reflection and the ensuing table demonstrates the model containing what I feel is the essential ingredients' for successful reflection. The essential ingredients' have been referred to throughout the literature review and are based upon information gained from the review and my own experiences. This model along with the description of reflection and the information gained from the literature review are the orientating frameworks from which the data generated from the study can be interpreted, informing the reader of how the data fits into what is already known about the phenomena of reflective practice.

## **Author's Description of Reflection**

“Reflection is engaging in a process that allows the reflector to frame and reframe their reality that is being experienced moment by moment. It requires us to become our own person-centred therapists, understanding ourselves in relation to experiences we are about to have, are having or have had, empathically and with accuracy, then stepping beyond the self and using the knowledge gained to understand how we may then have impacted on those around us. For this process to be fruitful we must leave arrogance and complacency at the door, be actively engaged in mindfulness, consciously aware of the self in the moment, open to learning and using the new knowledge gained to develop ourselves personally and professionally. When fully engaged in the reflective process the experience can be humbling as we realise we are perhaps not what we assumed ourselves to be, yet also rewarding as we confirm that our best may have at that time been good enough”.

**Table 9: The Ten Essential Ingredients for Successful Reflection**

ACADEMIC SKILLS	Reflecting is not a vivid description of an event, a situation, an experience, but a review of the experience either prior to, during, or after in a critically, analytical manner. This critical analysis is supported by knowledge and the ability to bridge the theory – practice gap. New knowledge is often then amalgamated with the old and current knowledge, from which the person then synthesises a new way of being, or expands and enhances the current way of being.
ATTITUDE	The driving force of successful engagement with the reflective process. The practitioner needs to be humble to the process, be open, honest, and have the willingness and motivation to understand and learn.
ATTITUDINAL QUALITIES	The practitioner needs to be brave, courageous and confident in order to support the honesty required in the process. Kindness, compassion and offering unconditional positive regard to oneself supports openness.
EMPATHY	The practitioner needs to want to understand themselves in relation to their experiences accurately. They need to use the skills of empathic questioning and responding to allow for deeper analysis of their thoughts, feelings and behaviour in relation to what they are reflecting on. A Socratic dialogue with oneself. Not only this they need to also be able to use their empathy to understand how others are perceiving them and the experience they in.
KNOWLEDGE	The practitioner, in order to evaluate and reflect upon what they are experiencing in the clinical setting, needs to have a level of knowledge that they can refer to and evaluate their experience against. If they do not have the existing knowledge, they need to know how to source the knowledge so that they may bridge that theory – practice gap, and enhance their ability to understand the experience they are reflecting on, prior to, in action or on action.
MINDFUL	The practitioner needs to be cognisant of themselves, their surroundings, their behaviour, thoughts, and feelings. An acute awareness of the experience they are having or have had moment by moment and in the context of others.
PERSON-CENTRED	Reflection is about the subjective experiences of the person reflecting. The



	<p>reflector can grow and develop personally and professionally if they create the climate that allows them to get to know themselves better and as a result understanding is developed, with understanding comes self-awareness. Being person-centred with oneself requires the reflector to be able to hold that internal dialogue that allows for deep understanding.</p> <p>Facilitators and teachers of reflection need to be person-centred in the classroom in order to foster the climate that enables honest reflection from the students. Facilitators and teachers need to be engaged in critical reflection themselves.</p>
PROCESS ORIENTATED	<p>Reflection is not about the outcome / output, but about the process that takes place when reflecting. Reflection may not always be so smooth as to guarantee a definitive outcome. As much learning can take place from the process as can occur from the result.</p>
SELFAWARENESS	<p>The practitioner needs to have a current level of awareness of self, a perception of how they perceive themselves to be. It is this current knowledge of self that is the basis for the reflective process. Self-awareness allows the individual to be honest about how they perceive themselves to 'be' in the experience, it is this existing knowledge of the self that is also agreed, challenged, developed and overturned, in and by, the reflective process.</p>
STRATEGIC	<p>The practitioner must be cognisant that every decision they make as a result of reflection has a 'ripple effect'. The actions they take from the reflective process will not only impact upon the practitioner reflecting but on those around them.</p>

**CHAPTER THREE**

**RESEARCH METHODOLOGY**

### 3. INTRODUCTION

It has been previously noted in chapter one that there are three interconnected activities associated with the research process;

1. Ontology
2. Epistemology
3. Methodology / Analysis

(Denzin and Lincoln 2008)

In undertaking these activities five possible questions that formulate the research puzzle should be asked by the researcher (Mason 2002).

Chapter one answered Mason's first two research puzzle questions and in doing so engaged in the first two activities of research. The ontological and epistemological assumptions of the researcher were discussed in some detail providing the reader with a sense of how these assumptions can not only be located within the theoretical model of the Humanistic Paradigm, but also the conceptual model of the person-centred approach. A conceptual model not dissimilar to the paradigm of phenomenology which, no matter what school of phenomenology there is alignment with, there will always be a concern with the subjective lived experience of the individual (Speziale and Carpenter 2007). In fact the person-centred approach can be closely associated with the Husserl school of phenomenology whose followers believe that the purpose of phenomenology is to provide pure understanding sometimes referred to as descriptive phenomenology (Gillon 2007 and Speziale and Carpenter 2007).

It is activity three that will be discussed in detail within this chapter whilst reviewing the answers to Mason's final three questions of her research puzzle.

### **3.1 RESEARCH AIMS AND QUESTIONS**

Mason suggests in order to develop the research puzzle the final three questions need to be answered,

'what is your broad research area?'

'What are your research questions?'

'what are your research aims?'

These questions have already been answered in chapter one but it is important to revisit them in this chapter as along with my ontological and epistemological assumptions, they have informed the methods used in this study i.e. they have informed activity three of the research process.

Therefore in answer to the third question: what is your broad research area? I knew from the moment I embarked on the Educational Doctorate I would be interested in understanding and studying the way people learnt. Being relatively new into a career as a nurse lecturer at the time I envisaged that greater understanding would enhance my teaching. As I embedded into the doctorate programme my interest in reflection and reflective practice was ignited and so this became my broad research area.

Currently as a lecturer and now qualitative researcher I am committed to understanding the view points of the participants (Speziale and Carpenter 2007). My

answer to questions four and five: What are your research questions and aims needed to reflect this? Also I felt that the research questions and aims impacted upon each other and could not necessarily be viewed as separate entities. My research questions would depend upon the aims and objectives of my research and vice versa. How I phrased the research questions was also important as they needed to allow me to remain true to the commitment of understanding the participant's view point and supported me in understanding their internal frame of reference. It needs to be recognised also that my research questions were in part influenced by the findings from the literature review. Research questions 1 and 3 sit loosely within a deductive model of formulating research questions as they emerged from and were influenced by the literature review and preceded the development of the research framework. Whereas research questions 2 and 4 sit within an inductive model as these were not influenced by the literature review and emerged during informal discussions and observations I had made over the years I had been teaching and followed the development of the research framework. So in answer to question four, my research questions are:

- 1) How do the participants make sense of the notion of reflection and reflective practice? - How do they define it?
- 2) What are the participants' perceptions of the way in which reflection and reflective practice is taught at the university?
- 3) Is there a skill set that enables effective reflection?
- 4) How would participants wish to change the teaching and learning of reflective practice at the university?

These research questions were then used to inform the questions developed for the focus groups.

Question five of the intellectual puzzle concerns itself with research aims. The overarching aim of this research was twofold, firstly to accurately understand the internal frame of reference and unique perspective of pre and post registration mental health nursing students regarding reflective practice. In particular student perceptions of their learning environment and the ways in which they had been taught to reflect. Secondly, to explore and enquire into the internal frame of reference and unique perspective of the mental health lecturer's perceptions of learning and teaching of reflective practice at the university. The objectives of the research therefore were to produce:

- a) A profile of reflection from the perspectives of both students and lecturers.
- b) Recommendations arising for the most effective ways to enhance reflection and reflective practice learning and teaching experiences for both staff and students in the pre-registration mental health curriculum.

To reiterate its importance, there should be: clarity through the phrasing of the research questions and aims; commitment to the characteristics of qualitative research; an entering into the internal frame of reference of the participants; and most importantly a commitment to generating an accurate understanding of the participant's viewpoints.

### 3.2 THE METHODOLOGICAL FRAMEWORK

According to Speziale and Carpenter (2007 pg21) qualitative researchers emphasize six significant characteristics in their research:

1. A belief in multiple realities.
2. A commitment to identifying an approach to understanding that supports the phenomenon studied.
3. A commitment to the participant's views.
4. The conduct of inquiry is in a way that limits disruption of the natural context of the phenomena of interest.
5. Acknowledged participation of the researcher in the research process
6. The reporting of the data in a literary style rich with participants commentaries.

It is at this point that I move onto the third and final activity in the research process methodology and analysis. In order to effectively design my research I needed to use the emergent themes from chapter 2 and with my aims and objectives in mind, select a range of methods of data collection that are congruent with my ontological and epistemological stance and enable me to collect data that will answer my research questions whilst embracing the above six characteristics of qualitative research.

In planning and executing a research study Silverman (2000) suggests methodology refers to the choices we make about cases to study, methods of data gathering, and forms of data analysis. Our methodology defines how we will go about studying any

phenomenon. He goes on to say that in social research; methodologies may be defined in very broad terms e.g. qualitative or quantitative or more narrowly for example, grounded theory and conversation analysis. He suggests that comparable to a theory, methodology cannot be correct or wrong, only helpful or unhelpful in some way. It has been clearly acknowledged in chapter one, that my stance is essentially interpretivist and that it is therefore appropriate that the methodological framework underpinning the research be mainly qualitative in nature.

Richards and Morse (2007), when explaining the purposeful nature of qualitative enquiry, are very clear on the need for methodological consistency between the researcher's stance, the methods and the questions addressed. They go on to suggest that this does not mean that the researcher cannot be flexible in their approach once they have embarked on a particular path. It was felt that the person-centred approach as a methodological framework for research, demonstrated significant methodological homogeneity with my ontological and epistemological stance, my methods and my research questions.

The 5 basic features of the person-centred qualitative researcher that make up the person-centred methodological framework as a research approach are:

1. The researcher treats individuals who take part in research projects as equals, as participants rather than subjects (the latter being the term that denotes the authority of the researcher); a person with his or her own perceptions and feelings and preferences.

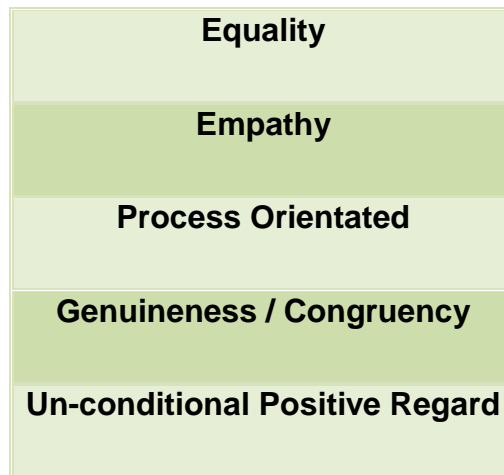


2. The researcher maintains an interest in empathically understanding the participants' subjective experiences. Thus reflecting the phenomenological nature of the person-centred philosophy in emphasising that the goal of research is to explore as sensitively and accurately as possible the frame of reference of the other.
3. The researcher sees the research as a process and not an activity simply focused on an outcome.
4. The researcher maintains a congruent stance in relation to his / her participants. There is a sense of authenticity in self and others.
5. Accepts participants and their experiences in a non-judgemental manner. This is the value orientation of the researcher.

(Mearns and McLeod 1984).

As we can see the features represent a list of values not techniques that act as an orientating framework for research. These values represent a 'way of being' for the person centred researcher, a "philosophy of the person, or attitude toward life, that can be expressed in the research act" (Mearns and McLeod, 1984, pg.389). The following table depicts these 5 basic features of the approach as an orientating methodological framework for research.

Methodological Framework Informing the Research Process:



Mearns and McLeod (1984) are clear to point out that this framework for research is “not the new solution to all behavioural research, but that it is advantageous when full cop-operation of research participants is necessary, and particularly when the researcher aims to probe deeply and personally into the conscious experience of participants” (Mearns and McLeod pg. 384, 1984). Cohen and Taylor (1972) and Mearns and McLeod (1984), acknowledge that the trust, openness and flexibility of a general person-centred approach is effective in enabling research participants to explore areas of feeling and vulnerability in a way that could have been impossible with more structured, measurement orientated methods.

By recognising the individual as a participant in the research process, it supports removal of the power imbalance that can occur between researcher and subject. If there is less of an imbalance, the participant may feel more inclined to offer their thoughts and ideas. The use of empathic questioning and responding techniques tells the participant that the researcher wants to truly listen, hear and understand

what they have to say. If the researcher is genuine, real and open to reflexively understanding their part in the research process, it allows the participant to connect with the researcher on a human to human level. The offering of unconditional positive regard on behalf of the researcher towards the participant allows the participant to feel accepted without judgement and therefore the person may feel free to offer their own thoughts and beliefs without fear of condemnation.

Mearns and McLeod also suggest that it is a very useful approach when studying phenomena that may invoke an emotive response from the researcher. This approach requires the researcher to be empathic; to be respectful of others' values and ideas; to recognise the difference between transference from researcher to participant and empathy, and to also check for understanding with the participants to enable accurate empathy. So it can be very useful in helping to minimise distortion and bias.

However Mearns and McLeod (1984) were cognisant of the fact that adopting a person-centred approach to research does carry implications that could be difficult for the researcher. Firstly, the building and maintaining of the collaborative research relationship takes time and effort on behalf of the researcher. The researcher needs to cultivate the relationship with the participants, building trust and demonstrating equality. Secondly, person-centred research is quite demanding with regards to the depth of personal commitment that the researcher is making, not just to the research process but to the participants as people. Thirdly, the process orientation of person-centred research means that it is impossible to define tightly the research strategy or

even the research field in advance. “As one avenue is explored, others open up” (Mearns and McLeod, pg.385).

Exactly how the five basic features were put into practice as a methodological approach is discussed further on in this chapter.

This framework would therefore support the choosing of methods to collect and generate data that would demonstrate a commitment to recognising multiple realities and the individual’s point of view, and would require an empathic attitude towards the whole process. This empathic attitude would mean conducting the enquiry in a manner that limited disruption to the participants. Methods of data collection that place importance on the participant’s narrative and allow for the reporting of data in a manner that is thick with rich description are also required. The methods also need to be able to present the unique internal frame of reference of the participants, accurately, ultimately enabling the research process to embrace the 6 significant characteristics of qualitative research (Speziale and Carpenter 2007 pg21), whilst allowing the researcher to embrace being person-centred.

### **3.3 METHODS OF DATA GENERATION**

The person-centred framework asks the researcher to adopt a way of being that focuses on the unique internal frame of reference of the individual participant in the study. It focuses on the 5 characteristics of the researcher (see previous table). These 5 characteristics are an adaptation of Rogers’ six core conditions for therapeutic change or, what he termed as the ‘climate’ created by the therapist /

helper / teacher / researcher. Therefore the methods of data collection must demonstrate congruence with the essential ingredients of the chosen methodological framework. Therefore I, as a researcher working within the person-centred framework need to always behave in a person-centred manner. This implies that no matter what methods of data collection or analysis I use they must demonstrate that they are underpinned by the approach and that I as the researcher am 'thinking and behaving' in a person-centred way towards my participants and data.

### **Being Person-Centred**

Before discussing specific methods used for data collection it is important to address what I mean by 'thinking and behaving in a person-centred way'. It will be relatively transparent to the reader, that the person-centred approach as a methodological framework for research, is not about prescribing a set of methodological techniques or rules by which to conduct a study (Mearns and McLeod 1984), but the concept as with Rogers' actual 6 conditions for therapeutic change relate more closely to the attitude, qualities and attributes of the researcher or therapist as the framework in the helping or research relationship (Gillon 2007). So it is therefore important to understand what these characteristics mean for the researcher if they are to adopt this as a methodological framework as the attitude of the researcher needs to be viewed as part of the methods.

Choosing to use the term 'participant' rather than 'subject' or 'client' reflects the fundamental attitude underpinning the person-centred approach. The term 'client' is too closely associated with the therapeutic domain, whereas the term 'subject'

denotes such inferences as a person being treated, dealt with or done to (Mearns and McLeod 1984). Mearns and McLeod (1984) suggest that the term participant infers that individuals are viewed as being part of the study, sharing in the research process and have an equivalent status to the researcher; the participant is acknowledged as an equal to the researcher. This in turn accentuates the relevance of the researcher's involvement in the process. Ultimately developing acceptance, congruence and empathic understanding, all necessary aspects of the person-centred framework: aligning with Carl Rogers's original stance of practitioners attending to the quality of the relationship they have with the client (Gillon 2007). What this means for me as the researcher of this study is that I needed to view and act towards the individuals taking part as equal to me and that my role as researcher did not in any sense elevate my status. This was not difficult to achieve until it came to facilitating the focus group with staff, where I did not see myself as of higher status, but I did at times perceive myself as of lower status. This I have reflected on and can be viewed at appendix 4. I feel it did not particularly hinder the process of the focus group more than it possibly inhibited my experience of the focus group and influenced and altered many pre-conceptions I had about facilitating this particular group. I have used the term 'participants', or 'individuals taking part' throughout the whole process as from the perspective of a mental health nurse I have always understood the importance of not labelling and seeing beyond the diagnosis. Therefore it required no effort on my behalf to view these participants as being involved in the process and having a vested interest.

A further characteristic that I was required to take on board was that of maintaining an interest in empathically understanding the participants' subjective experiences. Carl Rogers has written extensively on what empathy is and it is one of the most often discussed core conditions (Patterson 2000). Rogers has referred to empathy as not only an attitude but a skill set. The empathic attitude is about striving to 'enter the client's private perceptual world and become thoroughly at home within it' (Rogers 1980 pg. 142.). As the researcher this means that I am demonstrating to the participants a wish to fully understand their unique perceptions on what they are experiencing. To be empathic also requires the communication skills that not only articulate the attitude of empathy but allow the participant to delve deeper, and explore further their own understanding (Mearns and McLeod 1984). For me this meant having a genuine interest in my own research, wanting to understand the viewpoints of the participants, allowing this interest to come across in my nonverbal and verbal communication. It also meant that my questions devised for the focus groups needed to be empathic in nature, which includes being open to exploration by the participants. It also meant that the facilitative aspect of the focus groups was conducted in an empathic manner. Questions such as 'who', 'how' 'what' and 'why' would need to be asked. That I as the researcher would demonstrate my accurate understanding of what the participants were telling me; that I would be able to use empathic responding and questioning that enabled the participants to delve deeper into their own internal frame of reference. In the transcripts at appendix 6 examples of my attempts to paraphrase, summarise, clarify, and demonstrate empathic understanding can be viewed.

It was important for me to view this research as a process rather than focusing on the production of outcomes. Mearns and McLeod (1984) stress research that is static or too focused on the product is not useful in the humanistic domain, and that research within a person-centred framework should be dynamically responsive to the whole process. Being process orientated also reaffirms the notion of the participant as part of the process and the relationship between the researcher and participants is also a process or continually developing (Mearns and McLeod 1984). So instead of focusing on the information generated and the need to produce recommendations I focused my energies on just the process of understanding the internal frame of reference of the participants. Once a question was asked of the participants I endeavoured to be as far as possible non directive in my exploration of their discussion.

Congruency has also played a large part in creating the therapeutic climate in the conditions for therapeutic change (Rogers 1957). Viewing the therapist as real and transparent with respect for the client has been viewed as a condition that is seen as the most powerful in allowing a person to experience the unconditional positive regard and empathy from the therapist (Mearns and Thorne 1999). Congruency also requires self-awareness on the part of the therapist which also supports those conditions of unconditional positive regard and empathy. In the research process Mearns and McLeod (pg.379, 1984) have defined congruency as the 'accurate transmission of the feelings of the researcher in his behaviour to a participant'. If I am congruent as the researcher this will enable congruency within the participants and will enable deeper exploration of the phenomena. If the participants perceive the researcher to be withholding or false this will decrease the levels of trust between



them and be unhelpful to the research process. I feel this characteristic has been aided by my previous involvement with all participants either as a personal tutor, lecturer or a colleague. I have always strived to be real at work and in the classroom. It is my perception that this ability to just be myself and be open and transparent with what I am feeling and thinking at any one given moment has enabled me to nurture good collaborative relationships with those I teach and those I work with. This process was also aided by the initial paperwork on this research. The information leaflet, the confidentiality agreement and consent form all aided the process of congruency.

The final characteristic of the researcher in the person-centred framework is that of unconditional positive regard, originally in Rogers' theory referred to as acceptance, warmth, prizing and respect (Bozarth 2002). Mearns and McLeod (1984) suggest that offering unconditional positive regard does not mean actually concealing your own judgements as concealment has no place in person-centred research. They refer to this characteristic as 'an acceptance of other value systems.....which does not necessarily mean approval of his actions' (Mearns and McLeod 1984, pg. 382). This means that the researcher values the opinions of the participants and does not allow their own value system to hinder their ability to understand the other person's unique internal frame of reference. It is therefore apparent that utilising the person-centred framework requires more than just practical methods of data collection and that the whole process is very reliant upon the researcher's ability to adopt the five characteristics of the framework. The subsequent factors are that any practical methods of data collection used must be harmonious with the methodological

framework and not only support the use of it but enable the demonstration of the five characteristics. Mason (1996) would possibly agree and suggest that my contemplation of what methods to use will have been informed by the answer to the five research puzzle questions I have addressed previously. What I see as a potential data source, or what I see as a method of generating relevant data, will not only depend upon but allow expression of my ontological and epistemological positions. Mason stresses that these positions should be seen as enabling rather than constraining, as the object is to think as 'creatively as possible' about the data sources and method.

Silverman (2000) also stresses as he did with research methodology, that techniques of data collection are not true or false,

“they are more or less useful, depending on their fit with the theories and methodologies being used and the hypothesis being tested or research subject being explored” (pg. 99). Therefore the overall general approach of the methods utilised for this research are of a qualitative nature, as Denzin et al (2003) suggests the word qualitative implies an emphasis on the qualities of entities and on processes and meanings that are not experimentally examined or measured in terms of quantity, amount, intensity, or frequency. Qualitative methods, in emphasising meanings, mesh strongly with the phenomenological standpoint of the person-centred framework (McLeod 2003a). By utilising a qualitative method I will be emphasizing the value laden nature of enquiry, the subjectivity of the personal experience. I wish to seek answers to questions that stress how social experience is created and given meaning (Denzin et al 2003). Qualitative researchers tend to hold a common belief

that they can provide a deeper understanding of social phenomena than would be obtained through quantitative methods of data collection and analysis (Silverman, 2000). The researcher who adopts qualitative methods has particular preferences which include: analysing words and images rather than numbers; a preference for naturally occurring data and unstructured interview; a preference for attempting to document the world from the point of view of the people studied and a preference for inductive, hypothesis generating research (Silverman 2000). This approach to methods fits well with the person-centred framework as it concentrates on methods that will allow the individual to tell their story, providing the researcher with rich description of the intrinsic world of the participant, whilst allowing the research to adopt the five characteristics of the person-centred framework.

I must stress at this point that my demonstration of the 5<sup>th</sup> characteristic of unconditional positive regard in the person-centred methodological framework was of paramount importance because of the nature of the subject of enquiry for this research. I would be inviting the participants to tell me about their thoughts, feelings, perceptions and opinions of the teaching and learning of reflective practice at the university where not only I as the researcher work, but the staff who were also participants work and where the students who were participants studied. I wanted to ensure that not only would confidentiality be maintained but I as the researcher who, may have once been or still was, the students' lecturer would not sit in judgement on their intrinsic world; neither would there be any repercussions for the student who may have strong thoughts or beliefs. So any methods I chose for data generation needed to bear this in mind.

## **Preliminary studies**

I would like at this point to recognise two small studies that were conducted as part of my engagement in the Educational Doctorate programme. These preliminary / pilot studies into this subject matter helped me to trial two different methods of data generation. The point of which was to see if the methods chosen would generate the kind of information that would meet the aims and objectives of the research and allow me as the researcher to utilise the person-centred approach as a methodological framework.

The first study conducted utilised the method of focus groups, one with third year pre-registration mental health diploma nursing students and one with 3 members of the mental health lecturing team. Although this study was held on a very small scale it did help confirm the methods I wished to utilise for the larger study presented in this thesis. The discussions that took place within these two very small focus groups gave validation to the aim of my study and demonstrated to myself that there was scope for significantly further exploration on a larger scale with a greater number of students. The information that was generated by these first tentative groups was thought provoking, and enabled me to review the questions I used for the focus groups which subsequently shaped the questions I then used for the main study. I was able to put into play the 5 characteristics of the person-centred framework. I felt connected to the participant's and my interpretation that they felt secure and safe to allow me into their internal frame of reference came from the rich discussion that occurred with the very small number of participants. This study also allowed me to 'practice' running focus groups and to reflect upon my abilities as facilitator.

The second enquiry that took place approximately one year later enabled me to trial an alternative method of data collection. At this point I utilised the method of questionnaire that was sent out to staff via email. Similar questions were asked to that of the focus groups. I wanted to test out whether this method of data collection would generate more detailed answers. In short it did not. Not only did most of the staff not respond, but of those who did I was reduced to reading one word answers that really gave me very little insight into the thoughts, perceptions and feelings of the staff in relation to reflective practice at the university. So although very little data was gathered it helped in the decision making process when it came to methods of data collection for the main study. The main point taken from this was that this method deviated from the underpinning philosophy of my methodological framework. I was unable to demonstrate equality, congruence, empathy and unconditional positive regard. Having no face to face contact between the participants and myself prevented me from demonstrating that I saw them as equal in the research process, that I was being real and transparent. I was unable to demonstrate the attitude and skills of empathy to check out my understanding and create the climate of acceptance that would allow the participants to feel free to offer their unique insights.

Therefore, based upon my experience and complete feelings of disconnection from the participants the use of a questionnaire as a research tool was dismissed as a method for the main study. I needed a method that would ensure physical and psychological contact with the participants. This would then allow me to demonstrate and adopt the rest of the characteristics in the methodological framework.

As a result the process of the focus group helped shape the research questions and develop my technique in running focus groups. The questionnaire highlighted the importance of remaining true to my theoretical perspective and methodological framework if I was going to engage the study participants to a level that they felt secure enough to offer their own unique perspectives.

### **Focus Groups**

Due to the nature and size of the student groups on the pre-registration mental health nursing diploma (3yrs), I did feel that conducting interviews on a one-to one basis would not be appropriate. I wished to engage students from the second and third year of this programme; qualified mental health nurses returning to the university as part time students to complete a 'top-up' degree; and the mental health lecturing team. It would have been logistically impossible to conduct sufficient one-to-one interviews to gain a good quantity of rich data. Having had a positive experience with the pilot study that utilised the method of focus groups it was decided that this would be the method utilised to generate the data. The focus groups would allow for a good number of students and staff to participate and would allow myself as the researcher the face to face contact that would enable me to create the climate of the person-centred framework. Focus groups have been found most useful when dealing with sensitive topics, and are particularly suited to the collection of qualitative data as they have the advantages of being 'inexpensive, flexible, stimulating, cumulative, elaborative, assistive in information recall, and capable of producing rich data

(Fontana and Frey, 1994: Macdougall and Baum, 1977). The use of focus groups as a method of data generation is discussed in detail in chapter 4.

### **3.4 SUMMARY**

It has been the purpose of this chapter to reiterate the research questions and aims and to take a further look at the methodological framework of the person-centred approach to research. It has been acknowledged this particular framework is not a set of methodological techniques per se but methods represented as the attitude and characteristics of the researcher. In order to fulfil the requirements of and remain congruent with the framework the practical method of the focus group has been chosen to encapsulate the process of the research framework and the collaborative working of the researcher and the participants. The next chapter will detail how the research was carried out and how the data was analysed.

**CHAPTER FOUR**  
**RESEARCH IMPLEMENTATION**



## **4. INTRODUCTION**

In the previous chapter the reader has been introduced to the research framework and the methods utilised to generate and gather data; methods that were designed to be congruent with the research framework.

It is the purpose of this chapter to detail the actual research process. This will include addressing the potential sources of data, sampling technique and methods used to determine and engage the participants, the process of devising questions for the focus groups, and how the information was analysed.

### **4.1 SELECTION AND ENGAGEMENT OF THE PARTICIPANTS**

Before I could progress with the formulation of the focus groups I had to determine where the potential participants for the study would be engaged from. As has been noted in chapter one, my interest in reflective practice was re-ignited when I began work as a nurse lecturer. My interest was further stimulated in how the students were experiencing the teaching of reflection, by the experiences I was having as a lecturer, engaging with the students and having to mark their work. Having already conducted the two pilot studies I wanted my research to mean something to the staff and students in my working context and not just the wider community. It was important not to disrupt the natural environment of the participants if the authentic phenomenon of study were to be preserved. Recruiting participants at the university where I worked would also allow me as the researcher to locate myself as part of the research process, and provide me with access to the mental health lecturing team whilst working around their schedule to cause least disruption.

As a mental health nurse lecturer I was interested in mental health nursing students. These are the students that I encounter on a daily basis and the students I wanted to understand. It was students from the Pre-registration Diploma programme that were invited to take part in the study. The Diploma programme runs across three academic years and at the time held the largest cohort of students.

As I was interested in the student's experience of particular a phenomenon, reflection and reflective practice, I made the decision that it would add to the richness of the data if I held a focus group also with post-registration mental health nurses whom had returned to the university to gain their top up degrees. It felt at the time that their experiences may offer me information that I could compare to the pre-registration groups, to see if and how their perceptions of reflection and reflective practice may have altered since qualification. Another aspect of the research concerned the actual teaching of reflection. As the mental health team are experiencing the phenomena of teaching aspects of reflection on a daily basis formally in class, and informally as part of their pastoral role as personal tutors, I decided I needed to also capture their voice within a focus group setting. What I realised was occurring here was the preparatory phase of purposive sampling.

## **Sampling**

Miles and Huberman (1994) suggest that there are key features associated with qualitative sampling. These include:

- Usually working with small samples of people, nested in their context and studies in some depth.
- Samples tending to be purposive, rather than random.
- Samples usually not wholly pre-specified, but can evolve once the field work begins.
- Sampling usually includes two actions: the first is to set boundaries: to define aspects of your case(s) that you can study within the limits of your time and means and, that connect directly to your research questions. The second is creating a frame to help you uncover, confirm, or qualify the basic processes or constructs that undergird your theory.
- Being decidedly theory-driven either 'up front' or progressively.

Krueger and Casey (2000) further suggest that the number of participants for focus groups should be no more than 6-8. Larger groups (more than 10) are often difficult to control and may inhibit the sharing of insights. In my own experience of running groups, larger groups can be intimidating to those participants who lack confidence or who may perceive themselves as shy. I took this point on board when considering the number of participants involved in each group.

However and, more importantly I needed participants who experienced the phenomena of reflection. This type of sampling or purposive sampling is very common in qualitative research, individuals are selected because of their first-hand experience with the subject of interest (Patton 2002 and Speziale and Carpenter 2007).

The nature of purposive sampling allows the researcher to choose a case because it illustrates some features or process in which we are interested (Silverman 2000). Denzin and Lincoln (2000) agree and suggest that purposive sampling means that the researcher seeks out individuals, groups or settings that embody the process being studied or situations where phenomena of study are likely to occur. According to Speziale and Carpenter (2007, pg. 29) “there is no need to randomly select individuals because manipulation, control and generalisation of findings are not the intent of the inquiry”. The purpose of qualitative enquiry has been acknowledged by Krasner (2001) as a greater understanding of the phenomena under study. However it must also be acknowledged that there is a slight deviation from the methodological framework here of the person-centred approach. Characteristic 5 requires the researcher to adopt a non-judgemental stance (Mearns and McLeod 1984), however I was at this point purposefully judging the participants on inclusion and exclusion criteria based upon whether or not they had experienced the phenomenon of reflection and reflective practice. This was very apparent when I made the decision to not invite the first year students on the pre-registration diploma programme. At this very initial stage of their training it would have been highly unlikely that they had experienced reflective practice so I purposefully did not include them in the study. Therefore four focus groups were held;

- Second year pre-registration mental health nursing diploma students,
- Third year pre-registration mental health nursing diploma students,
- Post-registration mental health nurse students,
- Mental health lecturing team.

#### **4.2 FORMULATION AND APPLICATION OF THE FOCUS GROUPS**

According to Krueger and Casey (2000) a focus group is not just getting a group of people together to talk. A focus group is a specific type of group in terms of purpose, size, composition and procedures. Characteristics of the focus group are inclusion of people who possess certain characteristics in order to provide qualitative data in a focused discussion that helps understand the topic of discussion (Krueger and Casey 2000). We have already discussed the inclusion of particular participants; the next task was the development of questions for the groups in order to generate the data rather than 'collect it'. Mason (1996) uses the term generation of data (as opposed to collection) as a way of encapsulating the wide range of relationships between researcher, social world and data which qualitative research aims to capture.

I made the decision to generate the data by what could be termed qualitative interviewing within the focus group setting. The person-centred methodological framework due to the nature of the five characteristics of the researcher aligns itself well with qualitative interviewing as it allows the interviewer/researcher to explore the participants' perceptions and internal frame of reference (Plummer, 2001). This type of interviewing allows me to accept that I am also an active and reflexive agent in the process rather than aspiring to be a neutral observer (Mason 1996). Although I was

aspiring to be non-judgmental in my approach I did use person-centred empathic responding techniques of paraphrasing, clarifying, summarising and mirroring in order to draw out the thoughts and feelings of the participants. Examples of this can be viewed in the following table and in the appendices.

**Table 10: Example of Person-Centred Responding Techniques.**

Researcher	So, for those of you who get it via your personal tutors, do you feel that that meets your needs? <b>(Clarifying)</b>
Student Participants	Yeah. it's not that often...the one I have with my personal tutor is if I come back from placement she asks me...I give it to her and she reads through it and asks questions  Yes, yes, because if there's any mistakes she corrects me.  The only bad thing about that is the fact that it is only when you have another placement meeting or the end of your meeting so you only see them two or three times a year to do that.
Researcher	Ok. So that small bit you get off them, which is not on a regular basis, meets your learning needs but are we saying that what would meet your learning needs more is if it was more regular? <b>(Paraphrasing / Clarifying)</b>

I was aware of the acknowledged danger for potentially 'leading the witness' during the qualitative interviewing that occurred within the focus group, which is finding only what I set out consciously to look for to confirm my thesis, I was conscious that I wanted the natural voices of the participants to come through. Therefore not only did I have to ensure that the questions developed for the focus groups were not leading,

I had to ensure that I actively monitored and was mindful of my own dialogue and interviewing technique.

It has already been established that the person-centred approach can be used in a group setting. Carl Rogers (1986b) has not only written extensively on the use of the person-centred approach within group settings, but has advocated its use within education, healthcare, and business (Corey 2008). Therefore there is an established appropriateness of the approach within a focus group setting. However, it must be acknowledged that in order for the participants in a focus group setting to allow me access to their inner world, the creation of the 'climate' on my behalf was of absolute importance.

The person-centred approach in a group therapy situation holds a deep sense of trust in the group's ability to develop its own potential by moving in a constructive direction. In order for the members to feel able to reveal their own unique perspectives, and "for a group to move forward, it must develop an accepting and trusting atmosphere in which the members can show the aspects of themselves they usually conceal and move into new behaviours" (Corey 2008, pg.251). I had to be aware that a focus group setting differs from the group therapy setting. The main difference being that the focus group is a group that occurs once; there is no mechanism within the focus group setting for the group to develop trust and acceptance of the individual members. This issue was in part overcome for the student participants by already being part of respective larger groups of their year cohort; it would also appear that the student individuals who had chosen to

participate in the study also knew each other and had chosen to take part as a group of friends. A level of trust and acceptance was already present for the students. The staff also knew each other and it could be suggested working together as a team had already developed a level of trust.

For the focus group method to work in accordance with the person-centred approach I also had to be aware that self-disclosure or becoming a member of the group as a participant would make me the focal point and inhibit the participant's willingness to share (Corey 2008). However, as I was not conducting a therapy session and the topic under discussion was not about trauma, as long as I embodied the notion of 'being' person-centred, rather than 'doing' person centred techniques I did not foresee any major factors that would prevent the use of focus groups as a way of data collection.

Recognition of the possible difficulties in utilising the focus group method meant that the questions for the groups needed to also be consistent with the methodological framework and so allow for qualitative interviewing style rather than a technique that only enabled static one word answers. I wanted the students to be able to generate situated knowledge (Mason 1996) so the style of the interview was given careful consideration. If the interview style within the focus group was completely unstructured then I could not be certain that the participants would talk about the phenomena of interest. Should the interviewing schedule be too structured just a list of questions that I adhered to meticulously there would be little room for expansion and exploration to include the concerns and interests of the participants. Neither



would there be room for paraphrasing, summarising or clarification to check my own understanding as the researcher; I would therefore lose congruency with the research framework. As a result the method of semi-structured interview was employed in the design of the focus groups.

The role of therapist from a person-centred perspective is to act as a sounding board and to be, as Carl Rogers, discussed non-directive (Rogers 1957). That means taking the cues of flow and thread of the conversation from the individual, allowing the person to bounce ideas off the other in order to come to his or her own conclusion. However as I am transferring in effect the role of therapist to the role of researcher I would need to stray slightly from the concept of the total non-directive stance. By employing the technique of semi-structured interviewing I am going to ultimately become a little more directive to ensure that the questions I had were covered. However, within this frame, by taking a broadly non directive approach, I hoped to gain a fluent conversational experience where participants were able to discuss, confer and expand upon their own generated content and where the researcher did not overly lead participants, thus avoiding any sense of 'begging the question'. I still wished to act as a sounding board. As it can see from the following table this was achieved to a degree but in my last statement I do actually respond in a manner that could be perceived as leading.

**Table 11: Example of the Interviewing Style**

Student Participants	something that's just happened...
Researcher	Ok, so you can reflect on moments that have just happened.
Student Participants	<p>I think also, when ..... and I have done stuff together as a group we're very much in tune with discussions, advancing our ideas and feelings are brought together drawing upon, you know, feedback from each other. So, we like to give a positive on things that we can improve on and working as a group for me is verbalising it with other people.</p> <p>So actually, reflecting as a group can be quite useful, that's another way of reflecting. How else can you reflect?</p> <p>I was thinking that it can be negative as well, if you're not careful. But of course, reflection itself actually helps you rationalise things and makes you realise that there are other options, there are other ways of seeing things.</p>
Researcher	Ok, so reflecting helps to rationalise things. How might you then actually reflect? Would you write it down?
	I'd write it down...but in practice, I suppose, you'd write it down. But you'd learn from it, wouldn't you? Learning your emotions, your feelings, you'd learn to contain them I think.

Further reading around developing questions for focus groups led me to realise that qualities of good questions meant that they sounded conversational, they are easy to say, are clear, open ended, fairly short usually one-dimensional (Krueger and Casey 2000). The questions should not be put together randomly and should have a 'questioning route'. Krueger and Casey (2000) go onto suggest that a good route will have the following qualities: there is an easy beginning; there is a sequence, it moves from general to specific. The questions are usually developed in the form of categories. Not all questions are equal and each type of question has a distinct purpose. Some questions may only exist in order to prepare the participants to

answer the next question. Krueger and Casey (2000) suggest that there are essentially five categories of questions, each with a distinctive function in the flow of a focus group.

**Table 12:** Five Categories of Focus Group Questions

<b>Category</b>	<b>Definition</b>
Opening Questions	Gets people talking, helps people to feel conformable. Easy answer required. Not typically analysed.
Introductory Questions	Introduce the topic of discussion; get people to think about their connection with the topic. Encourage conversation among the participants.
Transition Questions	Move the conversation into key questions that drive the study. Make the connection between the participants and the study.
Key Questions	Drive the study. Typically two to five questions here. These typically are the ones that require the greatest attention in analysis.
Ending Questions	Bring closure to the discussion. Enable participants to reflect on the discussion and are critical to analysis. Allows researcher to summarise and check understanding (empathy)

Adapted from Krueger and Casey (2000)

This was the approach I adopted when formulating questions for the focus groups. It can be acknowledged that for each group I kept the questions the same or modified versions of each question to ensure parity. In table 13 the opening questions that I used can be viewed. There is however slight differences in the questions asked to accommodate the situational differences of the participants.

**Table 13: Opening Questions.**

Pre-Reg Participants	Student	Post-Reg Participants	Student	Staff Participants
<ol style="list-style-type: none"> <li>1. Tell me who you are and if you don't mind what you most enjoy doing when you are not at university?</li> <li>2. What do you most enjoy about being a student nurse and what do you least enjoy?</li> </ol>		<ol style="list-style-type: none"> <li>1. Tell me who you are and if you don't mind what you most enjoy doing when you are not at university or working?</li> <li>2. What do you most enjoy about being a nurse and what do you least enjoy?</li> </ol>		<ol style="list-style-type: none"> <li>1. Tell me who you are and if you don't mind what you most enjoy doing when you are not teaching?</li> <li>2. What do you most enjoy about your job as a lecture and what do you least enjoy?</li> </ol>

The opening questions are gentle questions where no prior knowledge is needed. It allows the participants to get to know each and for the researcher to gain a little insight into the participants. The questions although directive, are not leading and the aim here is to 'break the ice'.

In table 14 houses the introductory questions. Here the questions are now more closely related to the phenomena of study. As with the previous questions, these are gentle, non-confrontational and aim to open up discussion between the participants on the phenomena of study in a moderate manner. As with the previous questions they do not push the participants into giving opinions they may not be ready to share. It was hoped that these questions would lead to discussion that presented the participants' opinion without the participants feeling like they had been pushed into a corner

**Table 14:** Introductory Questions

Pre-Reg Student Participants	Post- Reg Student Participants	Staff Participants
<ol style="list-style-type: none"> <li>1. What is the first thing that comes to mind when I say Learn?</li> <li>2. What is the first thing that comes to mind when you hear the terms reflection and reflective practice?</li> </ol>	<ol style="list-style-type: none"> <li>1. What is the first thing that comes to mind when I say Learn?</li> <li>2. What is the first thing that comes to mind when you hear the terms reflection and reflective practice?</li> </ol>	<ol style="list-style-type: none"> <li>1. What is the first thing that comes to mind when I say Teach?</li> <li>2. What is the first thing that comes to mind when you hear the terms reflection and reflective practice?</li> </ol>

There are no differences here in the questions asked of the pre and post-registration students, but there are differences in the questions asked of the staff. At this point I thought the students would find it relatively easy to talk about learning as they are experiencing this on a daily basis and staff would find it easy to talk about teaching for the same reason. Both questions are related to the phenomena of study.

Table 15 shows the next stage of questioning titled transition questions. These questions now move the focus of the discussion into the topic under study.

**Table 15:** Transition Questions.

Pre-Reg Student Participants	Post- Reg Student Participants	Staff Participants
<ol style="list-style-type: none"> <li>1. What is your understanding of reflection and reflective practice?</li> <li>2. Are there different ways in which to reflect?</li> <li>3. Is reflection helpful to you as a student nurse?</li> <li>4. How important is it to be an effective reflective practitioner?</li> </ol>	<ol style="list-style-type: none"> <li>1. What is your understanding of reflection and reflective practice?</li> <li>2. Are there different ways in which to reflect?</li> <li>3. Is reflection helpful to you as a qualified nurse?</li> <li>4. How important is it to be an effective reflective practitioner?</li> </ol>	<ol style="list-style-type: none"> <li>1. What is your understanding of reflection and reflective practice?</li> <li>2. Are there different ways in which to reflect?</li> <li>3. Is reflection helpful to you personally?</li> <li>4. How important is it to be an effective reflective practitioner?</li> </ol>

Again as with previous questions there are slight differences to accommodate for the situational differences of the participants. These questions are aimed at gaining a general understanding of the participant’s views and perceptions of the actual phenomena of study. It is these questions and the introductory questions that gave me the raw material to answer question 1 of the research questions.

Table 16 takes us into the key questions for the study. These are the questions that would give me the most insight into the perceptions and views of the participants and answer the specific research questions I had about the way the participants viewed this phenomena at the university where they studied and taught. The responses to these questions provide the raw material for research questions 2 and 3.

**Table 16:** Key Questions.

Pre-Reg Student Participants	Post- Reg Student Participants	Staff Participants
<p>1. When and how do you learn reflection at.....?</p> <p>2. What is your opinion of the way in which reflection has so far been taught to you here at .....?</p> <p>3. Do you feel that the way in which reflection is taught here at .....meets your learning needs?</p> <p>4. Please discuss what you require as a student from the teaching staff here at .... that will help you to become an effective reflective practitioner. Please make a list of your requirements / needs?</p> <p>4a. what do you feel is the most important requirement?</p> <p>5. Can you please discuss the skills you feel are required in order to reflect effectively then make a list of these skills?</p> <p>5a) which do you feel is the most important Skill?</p>	<p>1. When and how did you learn the art of reflection?</p> <p>2. What is your opinion of the way in which reflection is taught to you as a student nurse?</p> <p>3. Do you feel that the way in which reflection was taught to you met your actual learning needs?</p> <p>3 a) Did any of what you were taught in your training about reflection help you when you qualified?</p> <p>3 b) When do you feel you learnt the most about reflection, pre or post qualification?</p> <p>4. If you were a pre reg student now please discuss what you think you might require from the teaching staff here at ... that would help you to become an effective reflective practitioner. Please make a list of your requirements / needs?</p> <p>4a) what do you feel is the most important requirement?</p> <p>5. Can you please discuss the skills you feel are required in order to reflect effectively then make a list of these skills?</p>	<p>1. When and how do you teach reflection at ....?</p> <p>2. What do you feel impacts or affects you're teaching of reflection at....?</p> <p>3. Do you feel the students understand what reflection is and the importance of it?</p> <p>4. Can you please discuss the skills required in order to reflect effectively then make a list of these skills.</p> <p>4a) which do you feel is the most important Skill?</p> <p>5. Please discuss what you require as a lecturer in order to help your students to become effective reflective practitioners. Please make a list of your requirements / needs?</p> <p>5a) what do you feel is the most important requirement?</p>

	5a) which do you feel is the most important Skill?	
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There are differences here in relation to some of the questions, specifically question 3. Questions were adapted to support the differences in the participants and to ensure that the questions would allow for as much exploration of the subject matter as possible.

Table 17 shows the ending questions and the raw material that allowed me to answer research question 4. At this point I asked what could be classed as the 'million pound' question. I was very interested to know at this point if they had the power to control their environment fully, what the participants would want differently for themselves in relation to teaching and learning. The ending questions also allowed me to summarise the entire discussion, demonstrating to the participants that I had heard and understood them (empathy). This also allowed for correction by the participants of anything I had understood incorrectly.



**Table 17: Ending Questions:**

Pre-Reg Student Participants	Post- Reg Student Participants	Staff Participants
<p>1. All things considered if you had the chance to influence the way in which you are taught reflection here at ... what if any, changes would you make?</p> <p>2. Me to summarise. “How well have I captured what you have said here”?</p> <p>3. Me to go over the purpose of the research, then ask, “Is there anything we should have discussed or mentioned that we didn’t.”</p>	<p>1. All things considered if you had the chance to influence the way in which you were taught reflection what if any, changes would you make?</p> <p>2. Me to summarise. “How well have I captured what you have said here”?</p> <p>3. Me to go over the purpose of the research, then ask, “Is there anything we should have discussed or mentioned that we didn’t.”</p>	<p>1. All things considered if you had the chance to influence the teaching of reflection here at ... what if any, changes would you make?</p> <p>2. Me to summarise. “How well have I captured what you have said here”?</p> <p>3. Me to go over the purpose of the research, then ask, “Is there anything we should have discussed or mentioned that we didn’t.”</p>

A complete copy of the questions I asked the students and staff can be viewed in appendix 5.

The literature review, (chapter two) also came into play at this point. The research questions and, in turn the focus group interview questions were not developed blindly but in part guided by the categories of discussion in the literature review, it could be suggested that the research and interview questions were at times ‘theory driven’ (Flick 2009). That is a deductive approach was taken and questions 1 and 3 of the

research questions and as a result the interview questions that relate to these were informed by the theory. Whereas research questions 2 and 4 developed from an inductive approach, that is they were not theory driven but were informed by observational experience, informal discussions that I had over the years working as a lecturer.

In summary it was of high importance for me, prior to, during and after the focus groups, to behave in accordance with the person-centred methodological framework, this climate would then enable me to emerge myself in the data generated in a manner that allowed the perceptions and experiences of the participants to come through.

### **4.3 ETHICAL CONSIDERATIONS**

Mason (1996) suggests that qualitative researchers should be as concerned to produce a moral; and ethical research design as we are to produce an intellectually coherent and compelling one. This means attempting to carry out our data generation and analysis in a moral manner, but also to plan our research and frame our questions in an ethical manner. Mason (1996) continues to suggest that one way to confront the moral and ethical issue is to clarify my intentions whilst I am formulating the research problem.

Three ways of doing this are to:

1. Decide what the purpose of your research is.
2. Examine which individual groups might be interested or affected by your research topic.
3. Consider, what are the implications for these parties of framing your research topic in the manner you have done?

I questioned in the initial pondering phases of my research, what would be the purpose of this study? I knew that the purpose of the data generated would be to either support/give evidence to the current practice of teaching and learning at university, or identify factors that could enhance it for both staff and student perspective. I did not foresee any moral or ethical dilemma related to the purpose of the research as I was not trying to prove 'how bad we are at teaching reflective practice' or to name and shame lecturers. I saw the purpose as professional advancement, and enhancement of the learning and teaching experience.

There would be no groups particularly affected by my research topic per se unless the interested parties read my final thesis. The interested parties I hope would be those involved in the teaching of reflective practice at the university and those involved in the managerial level of decision making. I would hope that as parallel process students of nursing and other practitioners and lecturers outside of the university might find this a topic worthy of reading. The staff and students that took part in this research hopefully perceive their voice as being heard and that I as researcher have listened to their voice with the utmost respect. Which I feel is

demonstrated by my responses that can be viewed in the transcripts of the focus groups.

In order to engage the participants I felt face to face interaction would be most suitable to generate interest in taking part. I met with the different groups explaining the nature of my research. Inviting students to take part, providing information leaflets (appendix 8) all of which I felt would represent the attitude of equality and allow me to demonstrate genuineness and congruency with the tentative participant's, thus embodying the first and fourth characteristics of the methodological framework. I was very aware of the possible perceived power imbalance between myself and in particular the student participants, after all I may be the researcher but I am also their lecturer, personal tutor and possible programme director. Using the conditions of the person-centred approach, inviting the participants to engage with me, making it clear that this was not a teaching exercise or a test, but a genuine wish to understand their view points, asking for their personal opinions in a manner that meant they were not being judged, arranging the groups at times to suit the students and inviting them to take part in laying down their own boundaries of confidentiality supported the equal status between researcher and participant. I am not sure that equality was ever fully achieved; a fact of life is I am their lecturer, but the freeness with which they spoke to me and engaged with me hints at successful reduction of the status gap between myself and participants.

During the actual groups I was consciously aware of creating the attitude of empathy, and using communication techniques to demonstrate accurate empathy to the

participants. I made a conscious effort to paraphrase, summarise and clarify, offering unconditional positive regard throughout the process to enable the climate for rich discussion. Also at the conclusion of each of the groups I noted down thoughts about the experience as they occurred for me as the researcher. I wanted to be cognisant of my own thoughts and feelings about the process so that I was able to offer that unconditional positive regard at the next focus group, but also able to offer it to the data generated when analysing the information.

Undesirable issues that could have arisen include possible repercussions for staff and students should they hold strong negative views regarding the teaching and learning experience of reflection at the university. I was aware of the possibility of repercussions so the design of my research took this into account i.e.

Firstly confidentiality as far as possible has been maintained for all participants throughout the research process (please view the invitation, information sheet and consent form in appendix 7, 8 and 9). However, I did move from my initial naïve stance and recognise that I was not going to be able to completely prevent participant disclosure outside of the research arena. I endeavoured to pre-empt the occurrence of this by gently reminding the participants of confidentiality before the tape was even turned on. But rather than putting this across in a manner that would elevate my status I asked the participants what they felt about the confidentiality clause they had signed and how would they like to see confidentiality maintained. This allowed the participants to take ownership of this discussion and as far as possible preclude a power imbalance between me and the participants.

Secondly I ensured that the person transcribing my tapes would leave out any names mentioned in the focus groups in relation to the participants discussing members of staff or students here at the university. I was careful not to lead the participants into a name-and-shame scenario.

Thirdly during the development of my questions for the focus groups I was conscious of not framing the questions in a way that would sway, lead or put words into the participants' mouth;

Fourthly I followed ethical guidelines developed by the central office for research ethics committees (NHS 2006). Invitations to take part in the study, my information leaflet, my consent form would all be ethically acceptable by an external body. Guidelines specified by the British Educational Research Association (BERA 2004) were also used, which ensured all participants in the research study were informed of the aims, purposes and likely publication of findings involved in the research and participants were informed that they could withdraw from the study at any stage;

Fifthly, before I commenced on any field work my research proposal was passed by the ethics committee at University of Birmingham, plus I was given permission by the Associate Dean at the time of the university where the field work took place to engage the staff and students in the study.

With regards to Mason's final question, I think that the only implications for any parties pertaining to the way the research has been framed is that they may find it interesting reading. I have made a conscious attempt not to be offensive or controversial in any way. I wish the parties involved to find my research interesting may be even enjoyable to read and should they choose to utilise the information, it may also enhance their practice. The conceptual framework and data understanding tool I have utilised I feel has allowed me to represent in a true fashion the voice of the participants. I do not feel that their voice has in any sense been adulterated or misrepresented.

I therefore feel that by following the process as just described, utilising the person-centred framework for research and remaining transparent throughout is what has helped me to remain morally and ethically satisfactory.

#### **4.4 DATA ANALYSIS**

The person-centred approach is very clear in its premise, that the best vantage point in understanding behaviour, how people perceive, interpret and feel about the external environment is from the internal frame of reference of the individual you are working with. Carl Rogers' work locates itself very closely to the philosophical position of phenomenology. If we look at his first two propositions in his theory of personality as first described in his 1951 writings, we can see the clear connection to the phenomenological paradigm:

1. Every Individual exists in a continually changing world of experience of which he/she is the centre.

2. The organism reacts to the field as it is experienced and perceived. This perceptual field is for the individual, 'reality' (Rogers, 1951 pg. 483-4).

The phenomenological position in the context of personality theory, is one where “we think that the ‘truth’ about experience is generated within the individual, not something that has to be or can ever be validated by objective observers” (Sanders, 2006 pg. 20-21). Therefore to remain in accordance with the person-centred framework means that when analysing or understanding the data generated from the focus groups, I did not want to subjectively pass judgement on the spoken word of the participants. This would then ultimately adulterate what they may feel was their truth; “the primary objective of the person-centred researcher is to give an account of the frames of reference or perspectives of research participants” (Mearns and McLeod, 1984 pg. 388).

Mearns and McLeod (1984) go onto suggest that criteria such as statistical significance and the use of psychometrically validated measures or control groups have no place in person-centred research. The researchers’ ‘theory’ when analysing the data within this approach has no real validity. To meet the participants of the study on equal terms means, in part “not being able to explain his/her actions more adequately than he can himself” (Mearns and McLeod, 1984 pg. 388).

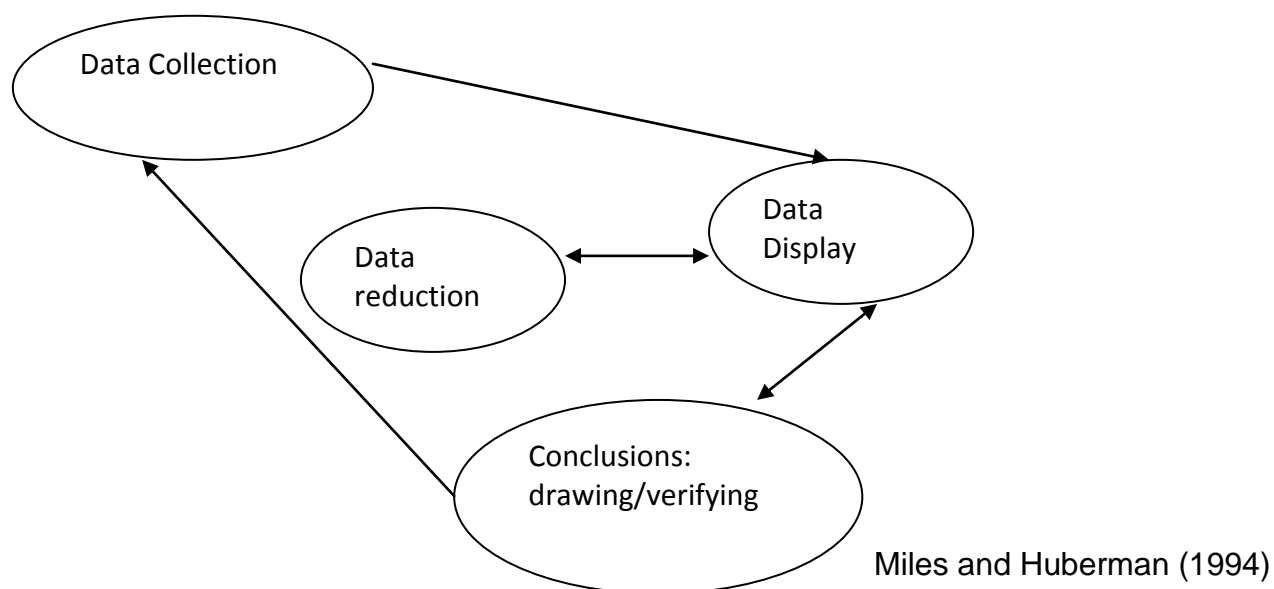
Rogers was also very clear that the function of the person-centred therapist is to understand the patient, not to predict or control. It would therefore mean that I utilise a data analysis tool that does not interpret, analyse or question the rich descriptions



of the participants but strives to *understand* the material. It was my intention to present the data in a format that remained true to those raw descriptions. Mearns and McLeod (1984) suggest that in person-centred research a detailed description of participants' perceptions will often be the conclusion of data 'presentation' often termed 'data analysis'. However I did feel that I had an ethical responsibility to the participants to not only represent their perceptions accurately but to put the data into a format that would reach the audiences that most needed to hear their voices.

Miles and Huberman (1994) refer to data analysis as consisting of three current flows of activity: data reduction, data display and conclusion drawing/verification. They suggest that these three streams are interwoven before, during and after data collection. Miles and Huberman go on to suggest that the three streams of analysis activity and the data collection itself form an interactive cyclical process, as per figure 8, they term this the 'Interactive Model'. The cyclical process contains four nodes and the researcher progressively moves between these four nodes during data collection. Miles and Huberman suggest that the researcher 'shuttles' between reduction, display and conclusion drawing for the remainder of the study.

**Figure 7: Components of Data Analysis: Interactive Model**



It was important for methodological congruence that whilst I as researcher ‘shuttled’ between data reduction, display and conclusion that the analysis style be clearly consistent with the person-centred methodological framework. As Rogers (1951, 1957, 1996) and Mearns and McLeod (1984) have previously stated, the person-centred approach is not about interpreting, analysing or controlling the information offered to you by those you are caring for or researching. As a person-centred therapist, or researcher your role is to accurately *understand* the viewpoint of the individual and to verify the accuracy of your understanding. So I was very cognisant of not using a data analysis tool that would overly reduce the data but rather to represent the data in a fashion that demonstrated or, in person-centred terms, give an empathic account on their behalf.

The chosen data analysis tool would need to allow me to understand the material and put into play the 5 characteristics of the person-centred framework. I would need

to connect with the data on an equal level, perceive the data as part of a process not just an end point or outcome, be congruent / genuine in my representation of the information and attempt to not lead the data into providing answers I wanted or needed (i.e. avoid the 'cherry picking' indicative of confirmatory bias). To do this I would need to actively check my emerging understanding against the original transcripts of the focus groups.

Ely et al (1991) suggest that individuals come into the world of qualitative research bringing with them whatever understanding of analysis they may already have. Work experiences in our own disciplines, role models and mentors, all shape the way we perceive analysis. Having utilised aspects of Carl Rogers' person-centred approach, within a harm reduction programme which in turn is embedded within a broader humanistic framework and uses brief interventions such as motivational interviewing means that all of these have shaped my view of what analysis *is* and *is not*. In the person-centred approach analysis is about ensuring that I have understood accurately the inner world of the person that I am working with rather than trying to interpret their world. I am interested in the raw data and ensuring I have understood it. However, as Basit (2003) suggests raw data alone does not help the reader to understand the social world under scrutiny, and the way participants view it, "unless such data have been systematically analysed to illuminate an existent situation" (Basit, 2003 pg. 144).

Rogers (1951, 1957, 1996) and Mearns and McLeod (1984) would possibly disagree about the nature of such analysis, since their writings suggest understanding of the

lived experience comes from the rich, unadulterated description of feelings from the people in therapy or participants of research. Rogers (1961) and Glendin (1962 and 1966) have argued that the truth in any statement lies in the extent to which it accurately captures and carries forward the felt sense of the person. Nevertheless what is being debated here may be more a question of the balance between allowing the reader to make contact with actual and authentic lived experience through the presentation of raw data, whilst also offering the researcher's insights regarding what they *may* have to tell us about the social world and, in this way enabling the reader to make the final judgement as to the credibility of such interpretations. Mearns and McLeod (1984) therefore argue that an important criterion for the person-centred researcher is their sense of the authenticity of the material they are gathering and presenting.

### **Reading the Material**

Stage 1: Mason (2002) refers to reading qualitative data *literally, interpretively and/or reflexively*, suggesting that most researchers use elements of all three. The first stage; a literal reading means that I would be interested in the data's literal form, content, structure, style and layout etc. This type of reading would help me remain true to the characteristics of equality and unconditional positive regard in the person-centred framework. By literally reading the data I am accepting the data for what it is, I am adopting a non-judgemental stance and trying not to lead or direct the data. Creswell (1998) suggests that in this regard that the concept of *epoch* is central, and the researcher bracketing their own pre-conceived ideas about the phenomena in order to purely understand through the "voices of the informants".

Mason does, however, warn us to be cognisant of the issue of literally reading the data as she suggests,

“a purely literal reading is not completely possible because the social world is always already interpreted and because what we see is already shaped by how we see it” (Mason, 2002 pg. 149).

The stratagem here is to *reflect*, gain *self-awareness* so that we may in Giorgis’ terms (1976 & 1985) ‘bracket’ our preconceptions so that they interfere as little as possible with the analytical process. Examples of where I have reflected on and attempted to understand and therefore bracket some of my own pre-conceptions can be viewed in appendices 2, 3 and 4 and table 18 highlights some examples of bracketing.

**Table 18:** Bracketing.

Reflect, reflect, reflect, was all I heard from my tutors during the first three years of my nursing degree. I remember telling my friend ‘if they ask me to reflect one more time I think I am going to scream’. I could not get my head around what I was being asked to do. Why was it so important that every essay I wrote had to be reflective? As a consequence of my ignorance you can perhaps realise that most of my assignments barely scraped a pass and I was perceived as not the brightest of nursing students.
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I am not sure that self-awareness is something that we can teach our students but I do feel that our job as tutors and as clinical assessors is to offer the students the time and process that I was offered to help the student get to know themselves better and develop into good/healthy nurses.
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I am reminded of noise and chatter, bumping into lots of students as I rush from class to class, but managing the odd hurried hello and smile, of rushing to class and having difficulty getting down the corridor because of the notice boards being crowded with students, preventing the flow of traffic. My memories are pleasant, happy, busy, and efficiently friendly.
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Stage 2: according to Mason is to consider whether I wish to conduct an interpretive reading of the data. This will require me to read the data literally then document a version of what I feel I have understood from the data in my own words. This type of reading would allow me to apply yet another of the characteristics of the methodological framework to the reading of my data. By paraphrasing and summarising my understanding of the raw material I am offering a level of empathy that could be viewed as an interpretation of what the raw material is saying. To remain true to the characteristic of empathy, my interpretation must not be a judgement or an analysis of the raw data but an interpretation based upon I feel the raw data is saying to me. Thus demonstrating the engagement I have with the data, is grounded in a wish to understand the information from the unique perspective of the participants, not what I think they must feel. Table 19 contains an example of where I was a little unsure of what the post-registration student participant had just said to me. My paraphrasing is based upon, not what I fully heard and understood, but what little bit I heard and thought they were trying to say to me. It would seem that the response from the student would indicate I had gained a correct understanding. However in using person-centred techniques it is always hoped that the person or people you are working with feel comfortable enough in the climate that you have created, to correct any lack of understanding on behalf of the researcher or helper.

**Table 19:** An Illustration of Data Difficult to Understand.

Student Participant	I got taught the theory when I was a student nurse. I think it was the theory was updated I think, personally when I did the mentorship programme here but learning it is doing it in practice once you've qualified and you're doing stuff that you're accountable and responsible for, that's when you really tend to consider things and reflect.
Researcher	And it kicks in?
Student Participant	Yeah.
Researcher	So you're saying you learn the theory as a student but actually learning how to really apply it in practice and whether or not it's useful for you, you learn that practically on the job basically.
Student Participant	Yeah.

Stage three; the reflexive reading locates me as the researcher as inextricably linked to the data generation and interpretation. It will locate me as part of the data and will seek to explore my role and perspective in the process of generation and interpretation. By being congruent with myself I can enable myself to honestly acknowledge and reflect upon where I can locate myself with regards to the data generation and interpretation. This is an important step to take to try and eradicate researcher bias. It will also help me as the researcher to be transparent when writing up my findings and demonstrating the process I followed in order to analyse the data. The lecturers' tea party blog (appendix 3) I wrote on reflection enabled me to get

some of my feelings out and down on paper. At this point I was honest with myself about how I felt about reflection and the blog allowed me to share this with my colleagues and students of the university. I completed this blog before analysing my transcripts, allowing myself to acknowledge feelings that I had on reflection and to have others comment on them supported my ability to bracket my perceptions which in turn helped to eradicate any bias I may have when reading the transcripts. However, there are times when I can see that during my interactions with the participants in the focus group sessions I have developed a sense of identity with the participants and locate myself as part of the study seeming to forget that I am the one doing the studying. Table 20 shows an extract from the blog and the point at which during my session with the post-registration nursing student I become one of them. As you can determine, I use the word *we* instead of *you*.

**Table 20:** Transparency

Blog	<p>I am not suggesting that final year taught me everything I needed to know about myself to be the perfect practitioner or human being, but what it did do was open my eyes to the wonderful world of reflection and raise my self-awareness to a point that I no longer stumbled through life hitting the same road blocks over and over again. I still run into things every now again but never the same thing twice!</p> <p>I am not sure that self-awareness is something that we can teach our students but I do feel that our job as tutors and as clinical assessors is to offer the students the time and process that I was offered to help the student get to know themselves better and develop into good/healthy nurses.</p>
Focus Group	<p><b>Participants:</b> It worried me because I was thinking...each time I have a student I need to be reflecting on what happened.</p> <p>I think it does help. I mean I think it helped me but not at the time, I remember it was tedious and it felt tedious but I think afterwards I felt I'd got an awful lot out of doing it.</p>



<i>Me:</i> So, are we saying then that we learn more about reflection before we've qualified in our training or more about reflection after qualification?
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In conclusion I decided to adopt Masons' three-stage approach to reading the data as I felt that this was one way that I could overlay my theoretical framework to support my reading of the data.

### **Analytical Tool**

The next phase was to determine which analytical structure used in qualitative data analysis would allow me to not only read the data using my 3-staged approach, but that mirrored my epistemological assumptions and was congruent with my conceptual framework.

Polit and Beck (2010) in their discussions on appraising evidence for nursing practice discuss in some detail phenomenological methods of data analysis. I was intrigued particularly by their discussions regarding the Duquensne School of phenomenology where they focus on three frequently used methods for descriptive phenomenology. The three methods discussed are Colaizzi (1978), Giorgi (1985) and Van Kaam (1996). They suggest that the basic outcome of all three methods is the description of the meaning of an experience, often through the identification of essential themes.

I felt that this sat comfortably with my three-staged approach to reading my data. I want to describe the participants' experience of reflective practice from their internal frame of reference. They do however acknowledge important differences between

the three, which enabled me to determine the most appropriate one to consider for use in my own data analysis.

Colaizzi's method for example calls for validation of the results by returning to study participants.

Giorgi's method relies solely on the researcher/s seeing it as inappropriate to return to study participants or use external judges.

Van Kaam's method requires inter-subjective agreement be reached with other expert judges.

Reviewing these three methods: Colaizzi's final stage of returning to the participants would not practically be possible as some of the participants of my study are no longer students of the university and I would have no way of getting in touch with them once my findings have been written up. Giorgi's method would be appropriate as it would allow me to read the data using the three staged approach of Mason (2002) but in terms of really understanding the raw material and hearing the participants voice Giorgi's approach would have to be used with caution as it is also reductionist in that it reduces the data to consistent statements and does not rely on ensuring accurate empathy with the raw data. Van Kaam on the other hand requires agreement with other judges and resources and time constraints as such would dictate that I rely solely on myself as the researcher.

I was leaning towards the use of Giorgi's method with minor alterations as a data analytical tool, with Polit and Beck (2010) demonstrating Giorgi's method as four stages:

**Table 21:** Giorgi - Four Staged Method

<ol style="list-style-type: none"><li>1. Read the entire set of protocols to get a sense of the whole.</li><li>2. Discriminate units from the participants' description of the phenomenon being studied.</li><li>3. Articulate the psychological insight in each of the meaning units.</li><li>4. Synthesize all of the transformed meaning units into a consistent statement regarding participants' experiences (referred to as the 'structure of the experience'); can be expressed on a specific or general level.</li></ol>
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Giorgi (1985).

However on further reading I was led to the concept of qualitative content analysis. Referred to as one of the classical procedures for analysing textual material no matter where the material comes from (Bauer 2000). An essential feature of qualitative content analysis is the use of categories, which may be derived deductively from theoretical models or which may be derived inductively as emergent themes from data or may be derived from a mixture of the two: categories maybe brought to the empirical material and not necessarily always developed from it. This idea aligned appropriately with the way I generated my focus group questions. Questions to ask of the participants were based on emerging categories that came from my literature review. Mason (2002) would possibly refer to this as cross sectional indexing. If I view all the text from each focus group as one, the fact that I used almost the same questions for each group based upon categories that emerged from the literature, would infer that I have already applied an indexing system to the data to be generated.

Participants were not asked entirely to talk freely about reflection and reflective practice, the discussion was given a direction by the particular focus of the individual questions. This initial stage of cross sectional indexing Mason (2002) refers to functioning in the same way as headings and subheadings in the chapter of a book, giving a descriptive sense of what each section of the text is about. On review of the questions I utilize for the focus groups, as noted in tables 13-17 it can be seen that they act as a subheading. They tell the reader immediately what the discussion to follow is about. In some respects, by using this method I have strayed from my methodological framework. The person-centred approach as previously discussed is non-directive and non-leading. I must acknowledge that in the generation of my questions I was ultimately going to lead the focus of the discussion as.

This discussion has demonstrated that I have already followed the first step of qualitative content analysis. Mayring (2000 & 2004) developed a procedure for qualitative content analysis with its ultimate goal of reducing the data. Data reduction to a certain degree is important for this study as each focus group lasted about an hour and a half. The transcripts of the tapes produced considerable amounts of text to be presented, this text would need to be reduced to meaningful data but in a manner that would not detract from the feelings, and meanings expressed by the participants and would still allow for the participants voice to be heard in a manner that could be understood from a wide audience. The procedure is not that dissimilar to Giorgi's but instead of four steps there are seven with the final stage allowing for the characteristic of accurate empathy to be employed.

**Table 22:** Summarising Content Analysis

Step 1: Definition of the analytical units.

Step 2: Paraphrasing the passages that transport the contents.

Step 3: Definition of the intended level of abstraction: generalisation of the paraphrases on this level of abstraction.

Step 4: 1st reduction by selection and deletion of paraphrases with the same meaning.

Step 5: 2nd reduction by bundling, construction, integration of paraphrases on the intended level of abstraction

Step 6: Assembling the new statements as category system

Step 7: Reassess the summarising category system against the original material

Adapted from Mayring (1983)

Mayring (1983) then applies a set of rules to each of the steps from step 2 to step 5.

Step 2: we can see that we are paraphrasing, but in order to do so we must delete all passages that offer inconsequential material to the step one content, and then transform the paraphrases to a grammatical short version.

Step 3: requires the issues of the paraphrasing to be generalised to a level of abstraction, but keep paraphrases that are above the level of generalisation, and employ theoretical assumptions in the case of doubt.

Step 4: paraphrases with the same meaning in the analytic unit are deleted; paraphrases that are not seen as substantial on the new level of abstraction are deleted, paraphrases that are still seen as transporting central contents are kept.

Step 5 requires summarisation of paraphrases with identical issues and similar statements down to one paraphrase, and this is called bundling. Summarise

paraphrases with several statements about one issue and summarise paraphrases with identical issues and different statements to one paraphrase.

It was determined that this structure was actually more reductionist than Giorgi's and would not allow for full emersion in the three staged approach to reading the data enabling methodological congruence with the methodological framework. However this approach did utilise step 7 which allowed for the checking of understanding or accurate empathy with the original raw material. It was therefore decided that an adaption of Giorgi's approach to include Step 7 of Mayring's tool would be most suitable in enabling the maintaining of methodological congruence.

#### Data Analysis Tool

- 1 Read the entire set of protocols to get a sense of the whole.
- 2 Discriminate units from the participants' description of the phenomenon being studied.
- 3 Articulate the psychological insight in each of the meaning units.
- 4 Synthesize all of the transformed meaning units into a consistent statement regarding participants' experiences (referred to as the 'structure of the experience'); can be expressed on a specific or general level.
- 5 Reassess the consistent statement regarding participants' experiences against the original material

Adapted from Giorgi (1985) and Mayring (1983)

A full illustration of the complete staged process of data understanding can be viewed in appendix 6. Here the reader can see the process I undertook in understanding the data generated. However, extracts from each stage can be viewed in the following section.

Stage one focused upon immersing myself in the raw material by listening to the taped focus group discussions, and reading and re-reading the transcripts of the sessions. Stage one is where the focus is on the literal reading to gain a sense of the whole, listening to the tapes enhanced the sense of the whole and allowed me to reflect in greater depth on the actual sessions. Here I was offering the raw material unconditional positive regard. Accepting it for what it was telling me, meeting the data as an equal.

Stages two and three then required me to discriminate units from the participants' description of the phenomenon being studied and to articulate the psychological insight in each of the meaning units. I have termed these units, underlying themes. Stages two and three are where I as researcher am attempting to be empathic with the raw material, trying to understand what the material is saying to me so that I may present this as a theme. However it must be acknowledged that at this point this is not accurate empathy as I have not yet fully checked my understanding as being correct. Table 23 offers a brief illustration of this stage.

**Table 23:** Stages 2 and 3 of Data Analysis

<p><b>STAGE 1: Literal Reading / Own Words</b></p> <p><b>Instinctual reaction on hearing the terms reflection and reflective practice</b></p>	<p><b>STAGE 2 and 3:</b></p> <p><b>Discrimination of Units /</b></p> <p><b>Transporting the</b></p> <p><b>Contents-underlying</b></p> <p><b>themes</b></p>
<p>Looking back.</p> <p>From a university perspective...but in a day-to-day perspective that's pretty much my life. I use reflective practice in everything that I do. Every single day I reflect on how my day's went; 'That was really good' or 'That wasn't too bad but I've got tomorrow and I'll do this' so I use it as a sort of learning curve and plan to move on to the future, sort of thing.</p> <p>Even in practice, I find it good. The one downside of that is when you've got to write it down on a piece of paper...</p> <p>I think I...in saying I, personally, separate off reflection and reflective practice. So, reflection, for me, is sitting down and having a good think about how it went, and I enjoy doing that, and I always make a point of doing that. But reflective practice, I roll my eyes when I hear the term, because it means I've got to sit down and do a whole load of work that I'm not going to be interested in....so very negative connotations.</p> <p><b><i>So your gut instinct around reflective practice relates back to here (University).</i></b></p> <p><b><i>And being told to reflect on practice and sit down and think about it?</i></b></p> <p>Because, I suppose, I've always done it and I've probably taken it to great lengths and been told, 'Well, there's no point going over it', you know, you've lost all your money or you fell off a horse so, 'What's the point?' But I've always thought there is, because I do like to understand why something turned out as it did. I mean, I agree it can become an anxiety with some people and then you can go over it in your mind but if you can just do it every day with everything it can really help.</p>	<p>Reviewing the good and bad and learning from it.</p> <p>Writing.</p> <p>Reflection is separate to reflective practice.</p> <p>Reflection is quiet contemplation.</p> <p>Reflective practice is associated with work that the student is not interested in.</p> <p>Enables understanding.</p> <p>Hold in general positive connotations when not related to university.</p>



Stage four required me to synthesise all of the transformed meaning units into a consistent statement regarding participants' experiences. This has been referred to as, the 'structure of experience' (Giorgi 1983), and requires further demonstration of empathic understanding. I have also termed this 'essential themes'. Here we can see that a reduction in the raw material has occurred and so stage five was important to ensure that I had not lost the essential essence of the participant's voice. Table 24 demonstrates this process applied to table 23.

**Table 24:** Stage 4 of Data Analysis

<b>STAGE 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
Reviewing the good and bad and learning from it. Writing. Reflection is separate to reflective practice. Reflection is quiet contemplation. Reflective practice is associated with work that the student is not interested in. Enables understanding. Hold in general positive connotations when not related to university.	<ul style="list-style-type: none"> <li>• Reviewing experiences.</li> <li>• Intrinsic contemplation.</li> <li>• Academic writing.</li> </ul>

Stage five required me to reassess the summarising category system or essential themes against the original raw material; this is classed as accurate empathy. The accuracy, although not verified by the participants, is verified by the original raw material. It must also be noted that the process of data understanding starts from the 2nd of the students' introductory questions, as these are the questions deemed pertinent to the research enquiry. Table 25 illustrates stage 5 of the analytic process.

**Table 25:** Stage 5 of Data Analysis

Essential themes	Messages from the data
<ul style="list-style-type: none"> <li>Reviewing experiences.</li> </ul>	<p>The messages from the data indicate that student's instinctual reaction to the term reflection was 'looking back' and reflecting on day's events and learning from them.</p> <p>Reflecting everyday was felt to be useful but the students made a point of acknowledging that for some this reflection made them anxious.</p>
<ul style="list-style-type: none"> <li>Intrinsic contemplation.</li> </ul>	<p>The data indicates that students separated reflection from reflective practice and saw reflection as 'sitting down and having a good think'.</p>
<ul style="list-style-type: none"> <li>Academic writing.</li> </ul>	<p>The messages from the data indicate that the term reflective practice means a 'whole lot of work' from an academic point of view. This was not viewed favourably.</p> <p>Having to write down their reflections was seen at this point as negative and not enjoyable.</p>

It can be noticed when reviewing appendix 6 that I have included my own comments as researcher in the transcripts. This is important to demonstrate that equality, congruence, process, unconditional positive regard and empathy were evident during the facilitation of the focus groups and that I had adopted the framework of the person-centred approach to researcher at this stage of data generation. The data in italic and bold is where I as the researcher have used empathic responding skills of paraphrasing, summarising, clarifying and asking open questions to check my understanding and to enable the participants to correct my understanding and to explore the discussion in more depth.

Once the data had been analysed I wanted to be able to view the voices of the participants in their entirety against their respective essential theme for each research question. To enable the data to be more manageable I combined the two pre-registration focus groups, keeping the post-registration and the staff group separate. This enabled me to be able present stage 5 of the analytical process in a format that did not require the person interested to have to read all stages of the analysis.

What I wanted to do next was to be able to view the essential themes for both pre and post-registration students against the essential themes that came from the staff focus group. I felt that it might prove useful to be able to see comparisons and differences in the themes that emerged from what were essentially the learners and the teachers. I have not checked for accurate empathy again against the original data at this point as this has already been done, but looking to reduce the essential themes by combining themes that are the same or similar. It must be recognised however that even though the essential themes from the different groups may emerge as the same or similar, the raw material that led to the theme will possibly be quite different for each group. I have also underlined where there are similarities in the themes for the students and staff.

The following tables illustrate the combined essential themes from the 3 student focus groups aligned with the 1 staff focus group. Table 26a and 26d also show the essential themes from the focus groups next to those that emerged from the literature for research questions 1 and 3.

**Table 26a: Resultant Essential Themes**

<b>Research Q1: Making sense of the notion of reflection and reflective practice; definitions of - Essential Themes</b>		
<b><u>STUDENTS</u></b>	<b><u>STAFF</u></b>	<b><u>LITERATURE REVIEW</u></b>
Academic writing. (a)	Academic process. (a)	Accountability.
Automatic. (b)	<u>Cognition. (c)</u>	Advanced reflective skills.
Bureaucracy. (a)	Communication. (b)	<u>Articulation of knowledge.</u>
Clinical. (a)	<u>Complexity. (b)</u>	A significant concept in nurse education.
<u>Cognitive process. (b)</u>	<u>Confirmatory. (b)</u>	<u>Assessment.</u>
<u>Confidence building. (b)</u>	<u>Contemplation. (b)</u>	<u>Attitudinal Qualities.</u>
Conversation. (b)	<u>Development. (b)</u>	<u>Credibility and recognition.</u>
Develops questioning	<u>Essential. (b)</u>	<u>Evidence Base Practice.</u>
<u>Emotional awareness. (c)</u>	<u>Expectations. (b)</u>	<u>Guided reflection.</u>
Evaluating experiences. (b)	<u>In action. (b)</u>	<u>Higher order cognitive skills.</u>
<u>In Action. (b)</u>	<u>Knowledge. (c)</u>	<u>Humanism.</u>
Informal process. (b)	<u>Learning. (b)</u>	<u>Internal supervisor.</u>
<u>Intrinsic contemplation. (b)</u>	<u>Life skill. (b)</u>	Limitations.
<u>Natural process. (b)</u>	<u>On action. (b)</u>	<u>Modes.</u>
<u>Outcome driven. (b)</u>	<u>Personal attributes. (c)</u>	Outcomes and process.
<u>Personal Actions. (c)</u>	Pre-action. (b)	<u>Patient care.</u>
<u>Personal Attributes. (c)</u>	Reference to Literature. (a)	<u>Personal Attributes.</u>
<u>Peer supervision. (b)</u>	<u>Reflective models. (a)</u>	<u>Pre-Action.</u>
<u>Positive value. (a,b,c)</u>	Skill. (c)	Reconstruction of meanings.
Quality.(a)	Stages. (b)	Reflective conversation.
<u>Reflective models. (a)</u>	Storytelling. (b)	Reflexivity.
Safety. (b)	Styles of reflection. (b)	<u>Role modelling.</u>
<u>Selective process. (b)</u>	<u>Supervision. (b)</u>	<u>Supervision.</u>
<u>Solo. (b)</u>	Teaching style. (a)	
<u>Supervision. (b)</u>		
<u>Technique. (b)</u>		
<u>Transparent process. (b)</u>		
Writing. (b)		

**Table 26b:** Resultant Essential Themes

<b>Research Q2: Perceptions of the way in which reflection and reflective practice is taught - Essential Themes</b>	
<b><u>STUDENTS</u></b>	<b><u>STAFF</u></b>
<u>Academic process.</u> (d)	<u>Academic staff.</u> (g)
<u>Ad hock.</u> (d)	<u>Assignments.</u> (f)
<u>A positive value-year two mental health modules.</u> (e)	<u>Class size.</u> (f)
<u>Clinical area.</u> (g)	<u>Common foundation year.</u> (f)
<u>Alien concept.</u> (f)	<u>Didactic.</u> (d)
<u>Clinical Assessors.</u> (g)	<u>Environment.</u> (f)
<u>Clinical supervision.</u> (g)	External variables. (f)
<u>Critical incident analysis.</u> (g)	Honesty. (g)
<u>Guided reflection.</u> (d)	Initiating reflection? (f)
<u>Link tutors.</u> (g)	Learner individuality. (g)
<u>Logical thinking.</u> (e)	Personal tutor. (e,g)
<u>Mentorship course.</u> (d)	Piecemeal. (f)
<u>Modular programme.</u> (g)	Reflective cycles. (d)
Naturalising the process. (g)	<u>Staffing.</u> (f)
Negative value – 1st yr didactic teaching. (f)	Supervision. (g)
Not taught. (d)	Skills. (g)
<u>Peer reflection.</u> (g)	<u>Teaching strategy.</u> (g)
Placement documentation. (f)	
Positively on a counselling course. (e)	
Post qualification. (d)	
Pre-registration nursing course. (d)	
Provides structure. (e)	
Self-teaching. (f)	
<u>Teaching Style.</u> (d)	
<u>Tedious style.</u> (f)	
<u>Theoretically.</u> (d)	
Unhelpful. (f)	

**Table 26c:** Resultant Essential Themes

<b>Research Q3: Skill set- Essential Themes</b>		
<b><u>STUDENTS</u></b>	<b><u>STAFF</u></b>	<b><u>LITERATURE REVIEW</u></b>
<u>Communication. (i)</u> <u>Evaluative. (i)</u> <u>Higher order cognitive skills. (i)</u> <u>Knowledge (i)</u> <u>Organisational. (i)</u> <u>Personal attributes. (h)</u> <u>Strategic. (i)</u>	<u>Academic Skills. (i)</u> <u>Communication skills, verbal and nonverbal. (j)</u> <u>Personal Attributes. (h)</u> <u>Story telling. (h)</u> <u>Supervision. (J)</u>	<u>Attitudinal Qualities.</u> <u>Critical analysis.</u> <u>Evidenced based practice.</u> <u>Higher order cognitive skills.</u> <u>Mode of Being.</u> <u>Personal Qualities.</u> <u>Socratic dialogue.</u> <u>Support.</u>

**Table 26d:** Resultant Essential Themes

<b>Research Q4: Changing and influencing the teaching of reflection and reflective practice - Essential Themes</b>	
<b><u>STUDENTS</u></b>	<b><u>STAFF</u></b>
<u>Academic process. (k)</u> <u>Assessment. (k)</u> <u>De-formalise. (k)</u> <u>Group work. (k)</u> <u>Individualise. (k)</u> <u>Naturalisation. (k)</u> <u>Peer reflection. (l)</u> <u>Placement documentation. (m)</u> <u>Role of personal tutor. (l)</u> <u>Simulation. (k)</u> <u>Teaching process. (k)</u>	<u>Assessment review. (k)</u> <u>Blame culture. (k)</u> <u>Buddy system. (l)</u> <u>Course review. (n)</u> <u>External facilitator. (k)</u> <u>Group work. (k)</u> <u>Modular process. (k)</u> <u>Moodle resources. (k)</u> <u>Personal attributes. (k)</u> <u>Role of personal tutor. (l)</u> <u>Teaching process. (K)</u>

Not only did I notice similarities between the themes that emerged from the student and staff groups for each research question but on taking a closer look at these tables I also noticed that these themes could be further grouped under categories that have naturally and inductively developed. On review of the tables and their essential themes for all participants, and on further emersion in the raw data, it was clear that some of the themes emerged from discussions that related to the nursing diploma programme. The nursing diploma programme is an example of a category that has inductively emerged. Further categories arose from the grouping of similar themes.

Although it is not my intention to reduce the data even further to meaningless headings, it does enable the raw data to be presented in a mode of a more useful nature, in as much that the raw material will not only have meaning for the participants, but meaning and usefulness to any person wishing to review this study. At this point it is sufficient to recognise the categories that have inductively emerged. Chapter 5 will present the detailed discussion of these categories relating to each research question.

On review of the essential themes for research question 1 I observed that these themes could be grouped under categories that relate to;

*The mental health nursing diploma programme (code a);*

*The expression of reflection for the participants (code b);*

*The attributes required for reflection (code c).*

On review of the essential themes for research question 2 I observed that these themes could be grouped under categories that relate to;

*The mode of delivery (code d)*

*Positivity (Code e)*

*Negativity (code f)*

*Requirements that support the teaching and learning of reflective practice (code g)*

On review of the essential themes for research question 3 I observed that these themes could be grouped under categories that relate to;

*Personal attributes (code h)*

*Higher order cognitive Skills (code i)*

*Interpersonal skills (code j)*

On review of the essential themes for research question 4 I observed that these themes could be grouped under categories that relate to;

*Academic processes (code k)*

*Personal tutor system (code l)*

*Clinical Placement (code m)*

*Course review (code n)*



#### 4.5 DEMONSTRATING TRUSTWORTHINESS AND VALUE

Addressing what makes a study solid and convincing the reader of the rigor of the research is most important in demonstrating that qualitative research is a respectable approach to science. Some authors have argued that the terms reliability and validity have no place in qualitative enquiry (Lincoln and Guba 1985). Their perspective is based upon recognising that qualitative enquiry is subjective, interpretive and time and context bound, 'truth' is relative and 'facts' depend upon individual perceptions.

Lincoln and Guba (1985) recommend that qualitative researchers substitute for the concepts of reliability and validity the following aspects of trustworthiness; truth value which is the *credibility* of the inquiry; *applicability* which is the transferability of the results; and *consistency* which is the dependability of the results.

Lincoln and Guba (1985) suggest credibility pertains to activities that increase the probability that credible findings will be produced. Authors such as Creswell (2003) and Speziale and Carpenter (2007) advocate returning to the participants to see whether they recognise the findings of the study to be true to their experiences. Unfortunately for this study this activity was not possible, as by the time the tapes had been transcribed and the data understood the students had either left the university, or were on placement in the clinical area. However procedures I undertook to enhance credibility include ensuring the tapes have been transcribed word for word and, the full transcripts viewable as part of my data understanding. Given the complete transparency of my own thought processes in understanding the raw

material, an independent person wishing to see how I drew my conclusions is able to follow the stage by stage process I undertook.

In addition to the above factors a key criterion for measuring the quality of any research is that it is ethical. The person-centred framework for research requires an attitude held by the researcher of respect for the internal frame of reference of the participants of the study. The whole process relates to understanding the world as it is perceived and viewed by the participants, the views and theories of the researcher are put to one side. Person-centred research as a process aids credibility, as the voice of the researcher bears little relevance unless it has impacted in some way on the research process. In order to support transparency, and the ethical nature of the researcher I enrolled the support of an ex colleague to act as my *critical friend*. I asked him to review the transcripts following the analytical process I took to establish whether the essential themes that emerged from his analysis were comparable to mine. This process helped not only to eradicate researcher bias but ensured that I had maintained respect for the actual internal frame of reference of the participants.

However it is important to take note of further measures put into place to try to a degree to enhance credibility and dependability. The measures I took were to try and bracket or reflect on my own opinion of reflection and the way it is taught at the university. Acknowledging, identifying, owning my feelings and perceptions would allow me to put them to one-sided and view the raw material truthfully without being clouded by my own judgements, it would also enable me to recognise when they may have interfered with my understanding of the raw material.

Silverman (2000) in support of recognising the importance of credibility, asks the question how is the researcher going to convince themselves and their audience that their findings are genuinely based on critical investigation of all their data and not dependent on a few well-chosen examples? He refers to this as 'anecdotalism'. By adopting a final stage of checking my data back against raw data I provide a check on the dependability of my analysis as well as my reflexivity in monitoring in monitoring my own selectivity and potential toward over-reduction of the data or bias in the choice of voices to present.

Further, this research is not related to the proving or disproving of a hypothesis. If the research was trying to prove or disprove a hypothesis, theory, answer a question from a particular value base, then it could have been possible to share only data that sways results in a particular direction. However because the nature of the enquiry is exploration of perception towards a particular subject, and overtly involves inductive as well as deductive content analysis elements, there is a check provided on any tendency to seek out one side of the argument. By looking at how the data understanding tool is used on the full transcripts provided in the appendix, an independent person is able to ascertain if the analyses are credible to them. On viewing the transcripts it should be clear also that the study contains the phenomena under exploration.

Transferability, according to Speziale and Carpenter (2007), refers to the probability that study findings have comparable meaning to others in similar situations. Lincoln

and Guba (1985) however are clear that it is not the researcher who determines transferability but potential users of the findings.

This is an aspect of the research that I as the researcher cannot determine but I can provide a rich description of the context of the study to enable the reader to determine the closeness of fit to their own cases and contexts. From the literature review it appeared there are very few if any studies conducted into reflection and reflective practice of this nature. I am almost 100% sure that no such formal study has been conducted in and about the place in which I work. Therefore I would argue that this research is relevant to the research community, as it offers new information that can be helpful to by researchers, teachers, and students who are interested in reflective practice, and those who wish to ensure that the experience of teaching and learning reflection is a positive one.

In summary trustworthiness and the value of research are important factors for the qualitative researcher to bear in mind when designing and conducting their studies. We all wish to know that our research will stand up to the scrutiny of our colleagues and peers and that our results will be taken seriously. This will only occur if the researcher can fully demonstrate that their study is transparent, credible and transferable.

#### **4.6 SUMMARY**

It is hoped that from this chapter the reader will have gained a good sense for how the research was conducted, the approach and manner in which it was conducted, and how the raw material was understood. The following chapter will concern itself with presenting the voices of the study participants and initial interpretation or *understanding* of their viewpoints including the triangulation of the views of staff and students. In this way it is hoped to gain insights into the nature of the student and staff experience of learning and teaching reflection.

**CHAPTER 5**

**RESEARCH FINDINGS AND**

**DISCUSSION**

## 5. INTRODUCTION

This chapter will present a discussion of the findings as they pertain to each of the research questions. It is my intention to offer my understanding of the content of the participant's voices for the individual research questions utilising the categories that emerged from extended coding of the essential themes to structure the discussion, as illustrated in chapter 4.

To give evidence to my understanding extracts from the raw material will be utilised alongside my interpretation. I recognise that I have deviated from the usual manner of presenting qualitative data to illustrate my understanding. I have not utilised the most common method of interspersing direct quotations from the raw material either before my interpretation of the data or following my interpretation (Richards and Morse, 2007). Instead I gave careful consideration to the role played by the quoted evidence I wished to present. I knew I wanted to present enough of the participant's voice to really allow the reader to gain a full understanding of what exactly was said in the focus groups and the context within which it was said. I felt that the singular quote interspersed between my understandings would not allow for this. The most important factor to remember when using the chosen methodological framework is that the voice of the participants is more important than the interpretation of the data by the researcher. Therefore I felt that interspersing quotations would take away from the importance of the participant's voice. I wanted to give power/importance to their voice, "give credence to my claims about the data and provide enough description to bring the discussion I was analysing/understanding alive", (Richards and Morse,

1007, pg. 208). I therefore decided to present my understanding of the data and then to demonstrate my ability to empathically understand what I had heard, I chose to present the raw material in tabled format following. By presenting the raw material in this manner, I would be able to represent enough of the material to bring it alive for the reader, to allow the voices to be heard in full, and to ensure that they were perceived as important. As Mearns and McLeod (1984, pg.388) state,

“the primary objective of the person-centred researcher is to give an account of the frames of reference or perspectives of research participants. In practical terms this objective will often be fulfilled by constructing detailed descriptions of these perspectives... the researcher, as an individual trained in the social sciences, will develop her own perspective on the material and will wish to present this analysis alongside the accounts of participants”.

The discussion will also take into account how the information generated aligns with the emergent essential themes from the literature review and the description of reflection and framework produced by myself. This discussion will be reviewed and information taken from it to inform the production of material in relation to points a) and b) as stated below.

- a) A profile of reflection from the perspectives of both students and lecturers.
- b) Recommendations arising for the most effective ways to enhance reflection and reflective practice learning and teaching experiences for both staff and students in the pre-registration mental health curriculum.



## 5.1 RESEARCH QUESTION 1: HOW DO THE PARTICIPANTS MAKE SENSE OF THE NOTION OF REFLECTION AND REFLECTIVE PRACTICE? – HOW WOULD THEY DEFINE IT?

As illustrated in chapter 4 the categories that emerged from coding the essential themes for research question 1 are;

*The mental health nursing diploma programme;*

*The expression of reflection for the participants;*

*The attributes required for reflection.*

**The Mental Health Nursing Diploma Programme the participants are studying on, have studied on and are teaching on.**

Reflection it would seem is perceived by pre-registration student participants as a bureaucratic exercise that is outcome driven by the need to pass clinical placements or assignments, and not taught very well. The participants perceived reflection, as it relates to their programme, as a written exercise utilising reflective models that they struggled to understand, resulting in what was felt by pre-registration students and staff as an acceptable script presented as a piece of academic reflective writing.

**Table 27:** Extracts from the Raw Material.

**Pre-Reg Student** - "Reflective practice, as I understand it, is something that's written down on paper..."

**Pre-Reg Student** - "I haven't been taught it very well".

**Pre-Reg Student** - "But reflective practice, I roll my eyes when I hear the term, because it means I've got to sit down and do a whole load of work that I'm not going to be interested in..."

**Pre-Reg Student** - "Just every time we finish placement we have to think of something to

write about!"

**Pre-Reg Student** - "I had, on my last placement, everything I had to do was reflect, reflect, reflect"

**Pre-Reg Student** - "Gibbs, Cole..."

**Pre-Reg Student** - "I would just write it down, as in the cycle...."

**Pre-Reg Student** - "What I don't find helpful with reflection as a student is the reflection we have to do as part of our document. I don't learn anything from that, I don't feel that I'm writing...in the situation that I'm talking about".

**Staff** - "Yeah, I suppose we're probably going to come on to this but I think there's an acceptable script for reflections and that people fit in their reflections according to that perspective".

Reflection was viewed by the mental health team as too tied up in the academic process for it to be perceived by students as useful. Lecturers' expectations relating to students' ability to reflect, it would appear, are too high particularly of first year students.

**Table 28:** Extracts from the Raw Material.

**Staff** - "...And I also think that students get tied up in the process, the academic process of reflection. They talk about 'Johns' and 'Gibbs' without realising that it's actually very, very useful for them if they can just learn to do it simply and that they have been doing it most of their life, one way or another, but they don't realise it. So, it's a real skill process for people rather than an academic process".

**Staff** - "I don't think our students, here, at Diploma level, pre-reg, are equipped for it and I think that is our fault".

**Staff** - "...we expect too much from students, for them to open up their emotions and their feelings... There may be...when they are expressing themselves, maybe consider their weaker or stronger or something, it's got also some connotations attached".

It would further appear that pre-registration student participants held a more positive view of reflection in relation to informal supervision groups with peers.

**Table 29:** Extracts from the Raw Material.

<p><b>Pre-reg student</b> - “Yeah...reflecting in practice and on practice...members of the group is good”</p> <p><b>Pre-reg student</b> - “Because on my last placement there was the whole idea of pre-group and then after-group and the after-group was structured ten/fifteen minutes depending on the group and that was a reflection. It was like everyone bringing, because we all could have a different idea of what happened today so everyone has a different idea of what happened in that situation and then, obviously there are different levels of qualifications”</p> <p><b>Pre-reg student</b> - “...but what I do find helpful with reflection as a student is spending time with my friends or colleagues who are in the same area, you know, mental health”.</p>
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If we view this in light of the emergent themes from the literature review we can see that perhaps the fact that it is a requirement by health professions regulating body (Tate and Sills 2004, Driscoll 2007 and NMC 2008) may account for the perceived overtly formalised process of the teaching and learning of reflection within the nursing curriculum. However we are warned by the literature that reflection should not be viewed as a curriculum element but a state of mind (Bolton 2010). It would appear however that reflection has been excessively integrated with the academic process and so may have become for this university and the diploma course, a curriculum element.

### **Expression of reflection for the participants.**

As the researcher I wanted to understand how the participants perceived this notion of reflection, what it meant for them. The understanding I gained from the raw material was that the participants' (both staff and students) articulation of reflection was wide ranging. There was a definite agreement from all participants that reflection was important in the development of self both personally and professionally, in fact it was perceived as essential and referred to as lifelong learning as well as being fairly complex. It was felt that reflection keeps nurses safe in their practice; i.e. it prevents complacency, and enables the nurse to develop a much deeper level of self-awareness. It was felt that it enhanced the ability to ask questions thereby giving an individual the confidence to question practice. Student participants likened it to a form of therapy through which one can 'off load' the difficulties of the day from the clinical area. Reflecting in groups was also perceived as an important way of learning, being able to engage in open discussion with your peers enhanced the two way learning process.

**Table 30:** Extracts from the Raw Material.

**Pre-Reg Student** - "it's about understanding my emotions around an event and that's the most important thing for me really; understanding the way I feel about something".

**Pre-Reg Student** - "...it's a good way of analysing how you are as a person and how you deal with situations, so learning about yourself in the process".

**Pre-Reg Student** - "I think it's really important. I don't realise certain things about myself at all until I write them down".

**Pre-Reg Student** - "...reflective practice and reflection have been very important for me developing my own confidence and personality and how I want to be as a nurse".

**Pre-Reg Student** - "It can make you more assertive as well...."

**Post Reg Student** - "But even in the professional as well; if you've done something, perhaps"

you have interacted with a patient and said Have I...really asked the right questions, should I have asked this, should I have asked that...treat a lot better because you have evaluated your performance then..."

**Post Reg Student** - "Some people might sit down...an objective way of evaluating...looking at the outcome of...I've done this, I've done that and what really happened...trying to bridge the gap and see the way forward..."

**Post Reg Student** - "Peer supervision almost, kind of, informal peer supervision. You do tend to bring things up in clinical supervision that have bothered ...."

**Post Reg Student** - "I think it's healthy, sometimes, especially when you're newly qualified .... so when you reflect on what you have done it helps you to develop your confidence...."

**Post Reg Student** - "and you are able to learn as well so you can ask your senior colleagues questions to help you to develop better".

**Post Reg Student** - "I think it allows you to stay safe in your own practice".

**Post Reg Student** - "if you didn't use it you would definitely be exposing yourself to quite a lot more potential negativity".

**Staff** - "...and I would think that it is a lifelong approach to learning that is something that never stops".

**Staff** - "And I think that you need reflection, not only in an academic context, in a nursing context, in your work, but you need it personally because in your own life you need to reflect on your life and learn from your life lessons".

**Staff** - "...essential skill..."

**Staff** - "...personal development, well not just your personal development in the fact that you're teaching but very much as Staff 2 says, you know, you can go into a session when you're a teacher and observe people and think, 'Oh, that looked good'.

**Staff** - "I think, where reflection is really essential and that where we're trying to understand and help the person is not necessarily what you've got in the bank or elsewhere and that's why reflection is so, so important. I mean, I think Staff 7 said, it's absolutely central to nursing, I think it really is. I think that because, how do you offer a personal service without that there"?

**Staff** - "Part of being an excellent nurse is to deliver excellent care".

**Staff** - "And how do you know you're doing that unless you think about it"?

**Staff** - "...but I think it's actually very complex".

**Staff** - "it's very complex, the reason what you said, for the same reason you're saying its complex because you need to look at peoples beliefs, their values and all those things..."

It would appear that the rationale underpinning the significant agreement on how important reflection is both personally and professionally is not dissimilar to the perceived importance of reflection in the literature. It has been acknowledged by authors such as Benner (1984), Taylor (2006) and Bolton (2010) that reflection allows for consideration and examination of practice, is the essence of expert clinical judgement and by enabling examination of practice can support happiness and strengthen resolve in the workplace. It was also perceived by Ghaye (1996) as a way of enhancing patient care.

However as previously noted there are significant differences in the respective participants' understanding of what reflection actually is, not that they disagreed with one another's perceptions. Reflection and reflective practice were perceived by some as a written exercise whereby thoughts were written down on paper, others saw it as quiet, intrinsic contemplation, or a cognitive process whereby evaluation of experiences occur by thinking about them.

**Table 31:** Extracts from the Raw Material.

<p><b>Pre-reg student</b> - "Yeah I think it's like a structured diary of some particular thing, so I would write it like I would write a diary and write exactly how I felt at the time".</p> <p><b>Pre-reg student</b> - "..for me, is sitting down and having a good think about how it went"</p> <p><b>Pre-reg student</b> - "Reflective practice, as I understand it, is something that's written down on paper..."</p> <p><b>Post -reg student</b> - "I think it's more of an evaluation"</p> <p><b>Post -reg student</b> - All I would say is thinking back".</p> <p><b>Post -reg student</b> - "Some people might sit down...an objective way of evaluating...looking at the outcome of...I've done this, I've done that and what really happened...trying to bridge the gap and see the way forward..."</p>
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**“Post –reg student** - “I have a friend that is very good at documenting everything she does; she has a diary of everything she does...”.

**Staff** - “It’s learning, isn’t it?”

**Staff** - “in your own head”.

**Staff** - “I might think about something without having to write it down and so I’ll be reflecting about it without having to try and conceptualise it in words”.

Some participants agreed that an individual could reflect through the medium of informal/formal conversation seeing it a useful form of expression for those who find it difficult to write. It was perceived as a process that should be natural, transparent, a story telling process whereby the story can be told from different angles. Some participants felt that you could reflect before an event, whereas others felt that there should be a time delay following the event before reflection occurred and review and analysis could take place. Whereas other participants felt that reflection could occur in the moment of the event occurring. It was acknowledged that individuals would find their own style of reflecting and that it was a complex process for the novice.

**Table32:** Extracts from the Raw Material.

**Pre-reg student** - “..communication, just texting a friend and saying, ‘Oh my god, I did so-and-so”.

**Pre-reg student** – “Sharing your experiences together...time to chat together it’s quite informal”.

**Pre-reg student** - “Sometimes, something’s can seem so good or so bad that you need a bit of time to sort of detach the emotion from the event because you’re seeing it through perhaps”.

**“Pre-reg student** - But in mental health, there are as many personalities as there are people! So, what works for one person might not work with another”

**Post-reg student** - “It’s something that’s not formal either a lot of the time, you do it at the end of the shift as you’re walking back to your car or driving home, you think back through

your shift and reflect on it. But you don't necessarily sit and write it out and keep a record of it".

**Post-reg student** - "it just comes, you know".

**Post-reg student** - "I think you need to be open with yourself; you have to accept yourself, the good points and the bad points. If you've done something wrong, you've got to be willing to look at that and put it right the next time you do it. If you're going to be, "Yeah, that was fine, the problem wasn't with me", I don't think your reflection is going to be helpful".

**Post-reg student** - "It should be an automatic thing that you do. Most certainly for myself it's an impulse thing..."

**Staff**- "I think of it as story-telling; telling the story, in your own head, back to yourself and then kind of, looking at various potential endings to that story and thinking about them and, I think, that's what nurses do anyway; tell little stories about what they do".

**Staff** - "We rehearse, we go through the story, we go through our own narrative, and we think, Ok, what outcome do I want? What are my options? What are my alternatives?"

**Staff** - "I think it's also about trying to learn to reflect during rather than after an event and that's difficult to do".

**Staff** - "The written bit is a skill but, as I see, in reflection, you reflect pre-action, in-action, on-action".

**Staff** - "That we constantly have an internal dialogue and it's getting students to engage with that, in a way, that recognises their actions, their motivations, whether they're working in that, sort of, critical way and so actually going through the process".

**Staff**- "You can also do it, I mean, skilful clinical supervision is actually the skill of allowing someone to reflect in that session and you shouldn't have to input a lot. All you do is get the reflection going..."

Elements of the raw material emerged as essential themes in the literature when reviewing how the literature perceived reflection. The idea of quiet contemplation was supported by Taylor (2006) and Bolton (2010), with the notion of storytelling further supported by Bolton (2010). The reflecting pre-action was discussed in the literature by a number of authors such as Epstein (1999), Knott and Scragg (2007), Wilson (2008) and Bolton (2010). The time delay before reflection and the idea of reflecting in the moment is akin to Schön's (1983) notion of reflecting 'in' and 'on' action, with



the idea that reflection is a natural and transparent process supported by Jasper (2003). Reflection as a complex process by the participants was acknowledged by literary authors. Johns (2000) and Horet (2005) are both in agreement that reflection is a complex process of psychological and emotional processing. The concept of telling a story from different angles being similar to framing as referred to by Schön (1983) and Horet (2005), and not dissimilar to the theory of reflexivity discussed in the literature by Dewey (1933), Wegerif (2001) and Bolton (2010). The usefulness of the reflection through conversation was acknowledged by Ghaye (2000) with Cost and Kallick (1993), Todd (2002 and 2005) and Taylor (2006) discussing the use of Socratic dialogue in the reflective conversation.

In expressing their understanding of reflection and reflective practice the pre-registration student participants placed emphasis on the use of reflective cycles as ways in which to reflect. It was felt that reflective cycles or models provide a structured format from which they can analyse their feelings, in their practice and after practice has been experienced. The cycles that were referred to were Gibbs and Cole. The students did not go into any detail on the actual content of structure of either of these cycles. The data also indicated that students wrote down their reflections in relation to the placement area and would often use a reflective cycle to do so. However, some staff members felt that reflection was too tied up in the academic process and that there was an over emphasis on the use of reflective cycles, but that they could provide a level of structure if the student is aware of their own epistemological stance.

**Table 33:** Extracts from the Raw Material.

**Pre-reg student** - “Gibbs, Cole...”

**“Pre-reg student** - I would just write it down, as in the cycle....”

**Staff** - “I think the models can provide a good framework...”

**Staff** - “Sometimes I think that’s the problem we have because here I get confused with all the reflective theories that they’re given to work with, and to be quite frank none of those theories fit how I reflect”.

**Staff** -“I’ve chosen Cole’s Theory of Reflection and that, in itself, starts with pre-reflection, you know, what is your...position, what’s your epistemology, where do you come in on this, what are your ideas, what are your views, what are your anticipations before you go out there to engage in the practice, and that’s what they’re not doing”.

There is a modicum of agreement here with the themes that emerged from the literature. Authors such as Johns (2000) and Bolton (2010) offer caution relating to the use of reflective models, in as much as they can be useful for the novice reflector but can detract from the importance of reflection and be overly prescriptive.

### **Attributes Required for Reflection.**

Essential themes for research question one also highlighted the participants’ recognition that reflection required particular qualities, plus develops the personal qualities of the person reflecting. Although these qualities have been identified in greater and more specific detail under research question three, they do factor here as to how the participants make sense of the notion of reflection. Participants viewed reflection as a way of learning about oneself and enhancing self-awareness. It was viewed as helping understanding about the kind of nurse you wish to be and develop confidence and skills of assertiveness in dealing with negative experiences. It was however perceived that in order to be able to reflect openly students needed to be

able to talk about their own feelings and be honest about what is going on for them. However there was a cautionary note from the post-registration students that ruminating and dwelling for too long on one experience can also be unhelpful.

**Table 34:** Extracts from the Raw Material.

<p><b>Pre-reg student</b> - "it's about understanding my emotions around an event.."</p> <p><b>Pre-reg student</b> - "...reflective practice and reflection have been very important for me developing my own confidence and personality and how I want to be as a nurse".</p> <p><b>Post-reg student</b> - "I think you need to be open with yourself; you have to accept yourself, the good points and the bad points".</p> <p><b>Post-reg student</b> - "I think sometimes it can make you dwell on things a little too much though because you're replaying and replaying it and there's nothing you can do about it because it's gone by, all you can do is learn from it and move on."</p> <p><b>Staff</b> - "Another huge part of it, to me, is the idea of admitting and owning your own feelings and being able to talk about feelings and emotions because I think that's the hardest thing that students sometimes (fail to) grasp".</p> <p><b>Staff</b> - "They don't always reflect honestly either because they think there's going to be some personal implication for them, so they soften the story a little bit".</p> <p><b>Staff</b> - "...and that's the self-awareness part, that's what self-awareness is all about, is that pre-reflection because you're anticipating..."</p> <p><b>Staff</b> - "That's the important thing; it's about self-awareness and making myself comfortable with who I am and where I am and it's the process that allows me to do that".</p>
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The literature concurs with the essential themes from the raw material, suggesting that not only can self-awareness be enhanced by reflective practice, but to be able to reflect you already need a level of self-awareness (Mezirow 1981, Atkins and Murphy 1993 and Atkins 2004).

The next section will delve deeply and more specifically into how the participants perceive the way in which reflection has been taught to them.

## **5.2 RESEARCH QUESTION 2: WHAT ARE THE PARTICIPANTS' PERCEPTIONS OF THE WAY IN WHICH REFLECTION AND REFLECTIVE PRACTICE IS TAUGHT AT THE UNIVERSITY?**

In relation to this research question my rationale here was to gain a thorough understanding of how both the staff and current/past students felt about and perceived the way reflection is taught at the university. Student participants-what did they need from the teaching team to become effective reflective practitioners? Staff participants-what did they need from the university to meet the learning needs of the students? The purpose of this question was to ultimately inform the future teaching of reflection and reflective practice at this university in particular. I was hoping that should any negative essential themes emerge, should these be acknowledged and addressed then practice could possibly change, but should positive essential themes emerge, current practice could be built upon. This question is specific to the context of the university in which the research was carried out. However this is not to say that other institutions of learning could or would not benefit from the findings in relation to this question. Although I have not specifically addressed the literature review in relation to this question and this could be perceived as a weakness of the literature review, any essential themes that emerged from the literature review appropriate to this question shall be referred to and discussed.

As illustrated in chapter 4 the categories that emerged from coding the essential themes for research question 2 are;

*The mode of delivery;*

*Positivity;*

*Negativity;*

*Requirements that support the teaching and learning of reflective practice;*

### **Mode of Delivery**

The essential themes that emerged within this category relate to where the participants perceived that teaching of reflective practice occurs within the diploma programme at the university and its mode of delivery. It was recognised that the teaching of reflection occurred within the first year of the programme and was delivered in a 'didactic' fashion whereby students are informed about the theory of reflective cycles in a classroom setting. However some participants, although in agreement that reflection was taught utilising didactic teaching methods, also felt that there was a move away from this mode of delivery to a more emotive one, although what this meant was not elaborated upon.

**Table 35:** Extracts from the Raw Material.

**Pre-reg student** - “No, they don’t make it clear enough, and the lectures are very much boring and you just don’t, you’re just sat there and they’re telling you a load of information and you just don’t know when to put it”.

**Pre-reg student** - “Anyway, for part of one of the modules, you sit down and I remember them being particularly strict. You print this stuff off the internet and you sit down and these are your reflective cycles and they talk about the reflective cycles and you’ve got to go over the reflective cycles and learn them all”.

**Post-reg student** - “...lots of learning theory that just relates to pragmatic people who reflect, it was that kind of thing”.

**Staff** - “The common foundation...this is the process, you must do it, and then by the time they’re in their second year we’re now, sort of, trying to shift the goal posts but they’re, sort of, they’re uncertain”.

**Staff** - “And we introduce them to a range of different reflective cycles and I believe it is done in a relatively didactic sort of way”.

**Staff** - “Here are the models, get on and think about them, now write a reflective piece”.

There was a consensus of opinion that learning about reflection would often occur in sessions that took place with personal tutors and as such, these sessions were viewed as guided reflection. However although these meetings were often acknowledged as a curriculum requirement, the lack of formality, the individuality and naturalness of the process was perceived as supporting the learning that took place. Nevertheless this was not something that all students received as this was dependent upon the qualities of the personal tutor and the time available for sessions such as these. The participants, in particular the 2<sup>nd</sup> and 3<sup>rd</sup> year students, also recognised that there was a natural threading of reflection throughout the second and third year modules. The mode of teaching was not didactic; rather reflection was viewed as underpinning nearly all discussions that took place within the classroom.

**Table 36:** Extracts from the Raw Material.

**Pre-reg student** - "It's part of the way they teach and certain things like certain modules they challenge you to reflect yourself as well because it's just a better way of understanding how you are really and how you interact and stuff".

**Pre-reg student** - And my personal tutor goes through my reflections with me, like the reflections from the IPL events but you have to do it in your portfolio and she goes through them and says, "Well, what do you mean by that?" and just clarifying it so it goes over it again in my mind".

**Pre-reg student** - "post placement debriefs you get, where you sit down with your personal tutor, I think I would've gained a lot from trying to discuss my experiences...talk over the good things, talk over the bad things and what I'd do the next time".

**Pre-reg student** - "I think personal tutors have more of an understanding of how you're like as a person so they question it in a way that you understand it, it depends how well your personal tutor knows you but they will just make you sort of see it much more clearly and making it less complex".

**Staff** - "I also think that reflection can be taught in personal tutor sessions...because there's a real process of validating what they've done and what they've written and the work they've done. And I've gone through their reflective piece with them, getting them to expand on the emotional content or the analytical content or whatever.

**Staff** - "...at post-placement interview and also because of the time pressures and constraints that I'm often under with post-placement interviewing and personal students it's a case of I haven't got the time to invest to actually make this meaningful so frequently it's sort of the case that I do tick the boxes and say, 'Well, you've made an effort. You really need to develop your reflective skills. Can I refer you on to the Personal Development Centre and Student Support', and I opt out and I'll even do that with 3rd year students. I feel like I'm hitting my head up a brick wall. But I haven't got the time necessarily to put it right".

**Staff** - "I'm the opposite; I love reading them. I love reading them so much that if they give them to me at the beginning I say, 'Can you save that 'til last, so that I can have something to look forward to?' which is a bit sad, isn't it?! But I enjoy reading it and I agree that quite often they are description, but then I just interrogate them like mad and I say, 'Well, this is the next bit, what you should be doing, what you were feeling and why did you feel like that and then how would you do it differently', and try and lead them on through it..."

A further mode of possible delivery highlighted by the pre-registration student participants was via the clinical area when the students were engaged with their clinical placements. Reflective skills were viewed as being built upon by the people they met and by their clinical assessors questioning their practice. Although not a formalised method of teaching this was where participants along with meeting up with their peers, felt that a lot of learning about the reflective process took place. However the staff participants held a different opinion and felt that not enough reflection through supervision was taking place in the clinical area. The post-registration students on the other hand were quite clear in the fact that they felt where they learnt the most about reflection was following qualification. Greater accountability meant that they thought more about what they were doing. Another non-formalised mode of teaching reflection was highlighted by the use of assignments. Participants noted that reflective assignments did not formally teach students about reflection but because of the format of the assignment it was expected that learning would take place.

**Table 37:** Extracts from the Raw Material.

<p><b>Pre-reg student</b> - “Yeah, and then you put it into practice more and became more aware of it”.</p> <p><b>Pre-reg student</b> - “Overall, assessments and reflective cycles. Without me being aware of reflective cycles at the time, it made me logically think a bit more logically about reflection, whereas before it was just happening and then you put it into perspective...and learning experience”.</p> <p><b>Pre-reg student</b> - “...and then I found I was almost seeing the printed word in my mind and actually following it, rather than just reacting emotionally”.</p> <p><b>Pre-reg student</b> – “And we’ve got each other, haven’t we because we offload on each other all the time”.</p> <p><b>Pre-reg student</b> - “And the other thing, again it’s not something we’ve had as part of our course, but when we’re teaching the first year’s we put a lot of emphasis within a simulated</p>
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setting on feedback and, I suppose, that is a form of reflection; feedback on how your performance was, how your colleagues performance was”.

**Post-reg student** - “...personally when I did the mentorship programme here..”

**Post-reg student** - “...but learning it is doing it in practice once you’ve qualified and you’re doing stuff that you’re accountable and responsible for, that’s when you really tend to consider things and reflect”.

**Post-reg student** - “...I became much more aware of it when I did a counselling course and you had to do a diary of every week and it was a reflective account of sessions you were having and I think because I was doing it week in and week out I think that’s where it ingrained it for me”.

**Staff** - “But it goes back to that theory of ‘practice split’ and I also have concerns about how mentors and assessors encourage students to reflect in practice. I would like to see a much more rigorous approach to the clinical supervision of students in practice.

**Staff** - “I think that the opportunity is there all the time. Having worked as a CPN, what I did with students on a very informal basis..”

**Staff** - “I honestly think that the supervision, the clinical supervision for students is really missing”.

## **Positivity**

Some of the essential themes for research question 2 offer a positive view on the perceptions of the teaching and learning of reflection at the university. Already discussed is the mode of delivery and in relation to the threading of reflection through the second and third year modules, this was perceived in a positive light by the participants. Asking the students in the classroom setting to contribute, discuss and analyse was felt to enhance the reflective process and the students’ understanding of what reflection is. Along with this were the sessions with personal tutors. For those students who had what they perceived as good personal tutors, the reflective discussion that took place in these sessions was seen as a very useful way of enhancing not only the students’ understanding of reflection but their ability to reflect.

It was however acknowledged that this was not standard practice. This type of guided reflection, a reflective conversation, the use of Socratic dialogue, has been referred to in the literature by Ghaye (2000), Johns (2000) and Todd (2002 and 2005) all of whom would possibly concur with the participants from this study and view guided reflection in a positive light. It must also be noted that guided reflection with personal tutors was not the only way that this mode of reflection was perceived as useful. Guided reflection with peers and, with clinical staff when on clinical placement, shared the same positivity as that undertaken with personal tutors. Already in previous tables positive comments in relation to the aforementioned points have been highlighted. However further areas that were perceived as positive included the way students were treated from their second year onwards. The pre-registration students in particular felt that their learning was enhanced by being treated like adults in the classroom, not being afraid to ask a question, referring to the experience of learning as more humanistic, perhaps unwittingly concurring with Rogers (1967) and Pierson (1998) regarding the deep learning that can occur when humanism is applied to education. Reflective cycles, although a negative view of the teaching methods was held by most participants, the pre-registration students seemed to perceived the cycles themselves as supporting structure in the reflective process.

**Table 38:** Extracts from the Raw Material.

**Pre –reg student** - “It’s just more humanistic”

**Pre –reg student** - “...but we come into your lectures or someone in our mental health side or every other lecture and it’s like you feel like a human being, you feel like, I am an adult, I am a student, no matter what age I am”.

**Pre –reg student** - “I don’t feel ashamed about asking if I don’t understand”.

**Pre –reg student** - “I think it stretches my thinking to a level of logic”.

**Pre –reg student** - “Without me being aware of reflective cycles at the time, it made me logically think a bit more logically about reflection, whereas before it was just happening”

Other areas that were viewed as positive are the ability to self-teach. This was an area not perceived as negative by the pre-registration students, but to be a ‘thinker’ and able to go away and learn independently was seen as useful. Coming together as a group of students following placement and reflecting in a group setting with personal tutors as facilitator was perceived to be a worthy idea.

**Table 39:** Extracts from the Raw Material.

**Pre-reg student** - “I feel like I’ve learnt myself really. I’ve always been a thinker anyway. But, yeah, I taught myself to go away from a situation and sit down and think about it. So, that’s the important bit of reflection”.

**Pre-reg student** - “Perhaps if there was a programme where we could get together like this and share our experiences; good experiences, bad experiences and structure it from here.”

**Pre-reg student** - “I would like to perhaps have a tutor, or a tutor, not especially mine with a small group as a sort of de-brief after placement..”

## Negativity

The majority of participants across all four focus groups, in particular the pre- and post-registration nursing students, appeared to hold a negative perception relating to an aspect of the teaching and learning of reflective practice at the university. This negativity appeared to be mostly related to the first year of the diploma programme. It seems that students perceive they are not actually taught how to reflect in practice, but rather are taught the theory of reflection in relation to the reflective cycles and models, this style of teaching was deemed to be not useful. It was reported to be rigid, tedious, and ad hoc, lacking student involvement not enabling a deeper style of learning; it did not support the natural process of reflection.

**Table 40:** Extracts from the Raw Material.

**Pre-reg student** - “No, they don’t make it clear enough, and the lectures are very much boring and you just don’t, you’re just sat there and they’re telling you a load of information and you just don’t know when to put it”.

**Pre-reg student** - “Anyway, for part of one of the modules, you sit down and I remember them being particularly strict. You print this stuff off the internet and you sit down and these are your reflective cycles and they talk about the reflective cycles and you’ve got to go over the reflective cycles and learn them all”.

**Pre-reg student** - “It’s not very accessible”.

**Pre-reg student** - “It’s not interesting”

**Pre-reg student** - “Not clear”

**Pre-reg student** - They don’t involve students in it; they just tell you what you should be doing. They don’t say How do you feel about that”?

**Pre-reg student** - “Rubbish”.

**Pre-reg student** - “Dreadful”.

**Pre-reg student** – “I think it is just the way it is presented...get the students more involved”.

**Pre-reg student** - “I think with the PPP everybody, well the majority of people in there have felt like school kids and they felt really naughty we haven’t understood and ‘got it”

**Pre-reg student** - “I think all the other lectures are in a small group so when you go to a big group it’s so often very much out of reach and you feel so much alienated because you’re surrounded by so many people and you feel that if you put your hand up to ask I’m going to be seen as the stupid one”.

**Post-reg student** - “It was not taught to me...”

**Post-reg student** - “...I don’t think it was for me”.

**Post-reg student** – “I think it was introduced as an idea but I don’t think we were really taught it”.

**Post-reg student** – “I think it was portrayed as this quite alien concept “

**Post-reg student** – “No, I don’t think the teaching at the university helped I remember thinking, “So every day I’ve got to write about what I’ve done during the day or every training thing I’ve then got to write and then reflect on it”. I remember thinking that was going to be a right pain in the butt”.

**Staff** - “And we introduce them to a range of different reflective cycles and I believe it is done in a relatively didactic sort of way”.

**Staff** - “Here are the models, get on and think about them, now write a reflective piece”.

**Staff** - “They give little consideration to the strategies that students might use to reflect so we use a ‘broad brush’ approach so, you know, think about using this model”.

The students have also been advised that they are to use certain reflective cycles in the first year, but not in the second and third year, surprisingly it was felt there was a lack of explanation as to why this was. This was supported by the mental health lecturing teams’ response, that there are no clear guidelines on how to initiate teaching reflection. The staff participants felt that how you taught reflection was entirely dependent upon your own understanding of reflection and therefore some students would in effect “get a poorer deal”.

**Table 41:** Extracts from the Raw Material.

**Pre-reg student** - "...and then gives us rubbish in the second year saying you've got to use something better and then you get given these forms...so you can't use Gibbs anymore"

**Pre-reg student** - "We weren't allowed to use certain, my personal tutor had advised me to use Gibbs and you're not allowed to use that except in the first year".

**Pre-reg student** - "Yeah that's one thing; nobody still knows why you can't use Gibbs in the 2nd year and they never explained. Ok, they explained the fact that you're in level five and not level four because you're 2nd year but they didn't say how to do it".

**Staff** - "The common foundation...this is the process, you must do it, and then by the time they're in their second year we're now, sort of, trying to shift the goal posts but they're, sort of, they're uncertain".

**Staff** - "There's also an assignment in the second year, which insists they use a different type of reflection to the one they've been using. I really don't understand the point to that because you're very comfortable with Cole, I like Gibbs, so why would I want to struggle getting into Cole, or there's another one..."

**Staff** - "But then they're confusing the students further by making them do a level four piece of reflection and a level five piece of reflection".

**Staff** - "And how you begin to, academically, qualify whether something's a level four or..."

**Staff** - "So, no wonder the students are confused if we're confused".

**Staff** - "I don't think there's any clear guidelines for where it should be introduced, at what level it should be introduced, who should be doing it, and I think those are all barriers because my one-to-one tutorial with a student on post-placement would be different to Staff 2. So, everybody's been told different things and are doing different things and, even as practitioners, we're all at different levels of our own ability to reflect and our own levels of self-awareness, so it's all going to be different. Some students are going to get good deals, some are not".

It was felt that not only did the style of teaching reflection not meet the learning needs of the students, but the fact that reflection was taught to some students by members of the adult branch lecturing team was also perceived as not helpful. The student, and in particular, staff participants felt that adult nurses had a very different view of reflection that did not correlate with that of mental health nursing, and this hampered

the motivation to attend lectures. The staff participants also vocalised the need for the lecturing team teaching reflection to have enthusiasm and the relevant skills. They referred to this as role modelling and possessing the skills that they are trying to teach the students. There is a correlation with the literature here as Rogers (1967), Pierson (1998) and Gould (2004) suggest the need for learning organisations and that for learning to take place there needs to be humanism in the classroom. It is also interesting that Tate (2004) suggests that nurse educators, who teach reflection, also need to in effect lead by example and be engaged in meaningful reflection themselves. This takes us back to the issue of adult branch lecturers teaching mental health nurses how to reflect. Even if the adult branch nurses are engaged in meaningful reflection, the fact that the participants' perception is such that they believe adult nurses to hold a different school of thought on reflection. Then there is incongruence between what is being taught and what the students are saying they need.

**Table 42:** Extracts from the Raw Material.

**Pre-reg student** - “..but they challenged the lecturers and said, We’re mental health students and we do things differently and you’re teaching it in an Adult (Nursing) setting and we have some feedback that is related to our mental health practice and they’ve actually gone completely ballistic at us”.

**Staff** - “And also I feel quite strongly that it goes back to the old mental health thing of we’re always giving up our jobs to other people and I don’t feel that a lot of the people in the university have the mental health knowledge to teach reflection at this self-aware, understanding people, introspectional level. It tends to be taught didactically because that’s the only way they know how to do it”.

**Staff** - “They give little consideration to the strategies that students might use to reflect so we use a ‘broad brush’ approach so, you know, think about using this model”.

**Staff** - “I don’t believe the people who teach it go into the classroom thinking, ‘I’m talking

about something that's really important here and I'm enthusiastic about it' and so the students don't get enthusiastic. But if they could pick that idea up that we're enthusiastic about it, it takes away that this is purely and simply an academic piece, it's actually got some meaning to it".

**Staff** - "And you need most of the skills we said for the student, yourself; to be able to help people to help..."

**Staff** - A kind of modelling quality"?

**Staff** - "Plus many more skills that you mentioned there to be able to facilitate those skills to the students".

The first year of the programme also meant that students are being taught in large groups. The students that took part in this study felt alienated, and participants from the mental health lecturing team perceived group size as a significant barrier to engagement. Large teaching groups were deemed an unsuitable environment to teach reflection.

**Table 43:** Extracts from the Raw Material.

**Pre-reg student** - "It should be taught in smaller groups".

**Pre-reg student** - "I think all the other lectures are in a small group so when you go to a big group it's so often very much out of reach and you feel so much alienated because you're surrounded by so many people and you feel that if you put your hand up to ask I'm going to be seen as the stupid one".

**Staff** - "Group size".

**Staff** - "It's a, I think it's a significant barrier to really engage..."

**Staff** - "But I also think that's down to having 140 students in a room. How do you actually engage them in the reflective process on that grand scale,

**Staff** - "But I also think that's down to having 140 students in a room. How do you actually engage them in the reflective process on that grand scale, unless you bring in fourteen facilitators and break them down"?



There were also concerns regarding the use of the reflective essay as a form of assessment. The pre-registration student participants in particular felt that there was a lack of consistency in the marking of reflective essays. They felt that instead of being marked on the academic format of the assignment they were actually being marked on the context of the reflection. Pre-registration student participants felt that they were unsure of what was expected of them in reflective assignment and low word counts hindered the reflective process. The staff participants also felt that the teaching of reflection was hindered by the structure of assignments regarding reflection, and the fact that the students are made to write a reflective piece at the end of each placement. It was felt that this tactic to get them to submit reflective pieces was not a great motivator for students to learn about reflection. The staff participants felt that the students did not fully understand the importance of reflection and they are scared of it as it requires a level of honesty. The staff participants felt that the academic process and at times poor teaching of reflection is what engender this 'piecemeal' approach to reflection from the students.

**Table 44:** Extracts from the Raw Material.

**Pre-reg student** - "Yeah and write more encouragement from reflective essays because I feel like I've ripped out all what I was doing and for it just to be ripped to shreds, as if it wasn't a valuable...I just felt demoralised".

**Pre-reg student** - "The formal assignments that they have to do every year for this module, I think it's really silly how they put a word limit on it because when I'm writing a reflective assignment I'm not thinking about a word limit, I'm writing down how I'm feeling. That shouldn't have a word limit".

**Pre-reg student** - "...because now a lot of people are confused, I am a bit too...because like what I've said, when we talk about reflection we reflect on different type of things, positive and negative writing and even though you can relate...this is what I have done which is bad

and he realises that what he has done, it's not quite good enough."

**Staff** - "There's also an assignment in the second year, which insists they use a different type of reflection to the one they've been using. I really don't understand the point to that because you're very comfortable with Cole, I like Gibbs, so why would I want to struggle getting into Cole, or there's another one..."

**Staff** - "I think it's the university's fault because they're putting pressure on people to produce these pieces of work that they're giving no thought to at all and it's almost if they pay 'lip-service' to it, chuck another piece out".

**Staff** - "Absolutely but then we could make it so much more meaningful, couldn't we? Like, the reflective piece that's attached to every placement we could actually make that really, sort of, quite meaningful if we didn't make it so onerous".

**Staff** - "I think they're scared to death of it, you know, the stuff that they've got in their portfolio, I think they just look at it and think, 'My god, I'm never going to be able to do that, so I'll pick a formula', and that's why we get all this very safe stuff as well.."

**Staff** - "the best reflective pieces I ever read for the assignments were people who'd been really honest and they'd had a, kind of, critical incident. A lot of students are afraid that they are then going to be named and shamed in this incident and thinking about litigation and what's going to happen as a result of that. So, they're not honest".

**Staff** - "But it's also often a very superficial level and I've come across students who say, you know, 'I was very anxious; it was the first time I'd dealt with an older person. Oh, I've exposed my emotions' and they think that's fantastic. 'Why were you so anxious? What was the context of that?' There's no exploration of that, they reveal a little bit of emotion and they think, 'yes, I've done a great job', it's the superficiality of it and that's why I started to despair and stopped reading them".

**Staff** - "It's piecemeal, isn't it? Piecemeal exposure. A little bit of, 'to get them off my back, you know, because I mentioned my emotions, I've exposed that, aren't I vulnerable and wonderful', and then nobody pushes it any further".

### **Requirements that support the teaching and learning of reflective practice**

With regards to understanding how the participants perceived the teaching and learning of reflective practice at the university, it was important not just to note what the participants found useful and not so useful, but to understand what they felt they required from the staff and university that would help the students to be effective reflective practitioners. In this category a number of themes emerged that allow us a good level of insight into the needs of the students and teaching staff.

Supervision in one form or another was deemed as an important necessity in supporting students to become effective reflective practitioners. Greater use of the clinical assessors when out in the placement area in relation to offering the students supervision, either on a 1:1 basis, or as a meeting including the personal tutors, was perceived as a good method for enhancing the reflective process. Students should be advised to utilise their clinical assessors in the reflective process more effectively even if this means processing an experience in the car after a clinical visit, and to recognise that when the clinical assessor asks questions about the student's experience this is reflection not a test, creating the situational knowledge that would enable the students to realise how to put reflection into practice.

**Table 45:** Extracts from the Raw Material.

**Pre-reg student** - “I personally would want one-to-one supervision on a regular basis with my personal tutor”.

**Pre-reg student** - “Yeah, that would be really good on placement is if your personal tutor came to you on placement and sit with your mentor as well...”

**Pre-reg student** - “Perhaps if there was a programme where we could get together like this and share our experiences; good experiences, bad experiences and structure it from here.”

**Pre-reg student** – “I would like to perhaps have a tutor, or a tutor, not especially mine with a small group as a sort of de-brief after placement.”

**Post-reg student** - “I think in the placement books that you sign up as a mentor, they’ve got the page for them to do a reflection but that’s between them and their personal tutor. That’s got nothing to do with you quite often they will do it after the placement and it would maybe be quite nice if you could do one with your student”.

**Post-reg student** - “I think if you make a point that it can be informal, like those in-car sessions are just as effective as if you go away and sit down and write reams and reams and the reflections you do about personal life incidents; that’s as effective as applying it to a nursing situation.

**Post-reg student** - “Critical incident analysis”.

**Staff** - “I also think that reflection can be taught in personal tutor sessions”.

**Staff** - “And I suppose as well allowing personal tutors greater time to actually spend with the students, actually prescribing that time for reflection and actually prescribing time for small group work, prescribing time where we really ought to find reflection, not in that assessed way but when they actually do more of the soft skills...”

As it can be viewed in table 45 it was suggested that utilising the personal tutors as facilitators of reflective practice groups, especially following the end of clinical placements would be highly useful. Ensuring equity in personal tutor sessions with regards to the quality and length of time the students had in these sessions was deemed important. To assist in this it was felt that the university needed to give the personal tutors more time to accommodate the needs of the students in relation to teaching reflective practice. A more rigorous and equitable approach to the

implementation of clinical supervision by clinical assessors was also needed. It was also felt by some participants that focusing on critical incident analysis in some of these sessions would improve the confidence of students when reflecting on their clinical experiences.

The participants perceived the mode of teaching reflection especially in relation to the first year of the programme as unhelpful. It would seem that the participants would like to see a move away from didactic methods of teaching reflection in the classroom setting by adult branch lecturers. There appears to be a preference towards learning about reflection in the classroom setting from the same nursing branch point of view as the students who are being taught i.e. if the students are mental health students then they would prefer reflection to be taught by mental health lecturing team. The pre-registration students would like to see the lecturing team linking reflection throughout all the modules, and highlighting to students when reflection is actually taking place. The students felt that they can then make the connection between the theories of reflection and actually doing it. It was felt by all groups that the whole teaching process in relation to reflection needed a transformation and that reflection needed to be viewed and taught as a natural process.

**Table 46:** Extracts from the Raw Material.

**Pre-reg student** - “It should be taught less theory-based”.

**Pre-reg student** - “The formal assignments that they have to do every year for this module, I think it’s really silly how they put a word limit on it because when I’m writing a reflective assignment I’m not thinking about a word limit, I’m writing down how I’m feeling.

**Pre-reg student** - “I think there should be more of an emphasis on reflective practice, you know, real reflection. So, if we emphasise that it is reflection then people might start to pick it up in their mind that that’s reflection and then they might find it easier to take that reflection and maybe write it down; like, I’ve done diaries in the past”.

**Pre-reg student** - “Yeah, and it’s not just following a (reflective) cycle which a lot of people seem to think it is, just following a cycle...”

**Staff** - “I’m just trying to get you to think about what we’re doing and why you might be doing certain things” and maybe if that’s reiterated from the educational side that it is good to look at each different experience that you have and what your impact on that situation has been or what you’ve taken out of it or how it might progress”.

**Staff** - “I suppose the idea is to, sort of, really get a more coherent strategy to it so that we do, we do the, sort of, the soft skills earlier on, we do around those personal values, that sort of stuff, where we have sort of a slower pace to introducing them to actually becoming aware of who they are, what’s brought them into this, sort of, career and then, sort of, developing and looking at, ‘Ok, in this situation how are you going to feel? What are the sort of emotions that are going to be, sort of, brought up for you? Where does that belong? What’s your history to bring into that?’ But very gentle, very safe, but doing that in, sort of, safe environment and starting that early and then, sort of, continuing that process constantly”.

**Staff** - “And I suppose as well allowing personal tutors greater time to actually spend with the students, actually prescribing that time for reflection and actually prescribing time for small group work, prescribing time where we really ought to find reflection, not in that assessed way but when they actually do more of the soft skills...”

**Staff** - “And that’s what think the university needs to accept; that we should concentrate, in the beginning of reflection, on the personal and emotional content and remove the academic content totally from it and say, ‘This is a skill you will need once you’ve become an efficient reflector in practice and in life and that will then support things you do later on’. But we need to concentrate on that very basic personal and emotional part first and then maybe threaten them with science”.

The teaching team recognised that students will find their own particular style of reflecting rather than having to use a prescribed reflective model. Not only that but the raw material suggests that smaller teaching groups would be viewed as favourable, and a concentration on developing the students ability to reflect and write a reflective assignment rather than just focusing on delivering the theory behind reflective cycles.

In a similar vein as previously noted, it was suggested by participants that the lecturing team needed to possess the actual skills needed for reflection if they were going to support the students in becoming effective reflective practitioners. This was deemed as role modelling and would be supported by Tate (2004) who felt that nurse educators needed to be engaged in meaningful reflection themselves. Participants also wanted the teaching strategy to focus on how as educators they teach and enable the students to gain the skills required for reflection. They wanted a greater focus on soft skills that takes into account personal values and getting to understand your own emotions, with this being a constant and continual process throughout the entire training programme. Some student participants suggested removing the academic content of teaching reflection altogether, with a further request that lecturers offer more guidance on how to write reflective essays with greater sensitivity on behalf of the lecturer when marking reflective assignments. What is being suggested here by the participants it would seem is a need to move towards humanism in the classroom (Rogers 1967, and Pierson 1998). The pre-registration students in particular are asking for respect for their ideas in the classroom and an environment that allows them to question without fear of being judged. The staff want

to use techniques in the classroom setting that focus on enabling the students to gain self-awareness, the 'soft skills' that allow the students to get to know themselves in a safe environment. It was noted in the literature review by Bolton (2010) that when we reflect we reflect for ourselves, not to produce a product. It would appear that the participants are in agreement by asking for recognition of individualism regarding the mechanics of reflection and a greater respect and sensitivity towards the uniqueness of reflective assignments students are asked to produce as part of the academic processes.

### **5.3 RESEARCH QUESTION 3: IS THERE A SKILL SET THAT ENABLES EFFECTIVE REFLECTION?**

The purpose of this research question was to explore whether or not the participants felt that there is a particular set of skills needed in order to become effective at reflection. We know from the literature that those individuals who have taken an interest in this subject matter would say that there is a skill set required for reflection and their sentiments will be alluded to in this discussion.

As illustrated in chapter 4 the categories that emerged from coding the essential themes for research question 3 are;

Personal attributes;

Higher order cognitive Skills;

Interpersonal skills.



## Personal Attributes

A common theme that ran throughout all four focus groups was in relation to the personal attributes required for effective reflection. There appeared a consensus of agreement that in order to be effective in the reflective process certain personal attributes were needed. Some of these attributes were picked up on by three out of the four focus groups, and we can see from table 13 in the literature review that a good number of authors made specific reference to personal attributes in relation to reflection. Two of the attributes alluded to by all groups were confidence and honesty. It was deemed by participants that a level of self-confidence allows for an open and honest reflection enabling the reflector to critically review him or herself. This confidence and honesty was considered to enable the critical analysis of self that is, being able to know your strengths and weaknesses. It was Atkins (2004) who supported this notion of confidence and honesty. When alluding to those even with some level of self-awareness she suggests there is often a tendency to want to see yourself in a more favourable light. Confidence and real honesty in reflection is what opens the reflector up to objective critical analysis (Dewey 1964).

**Table 47:** Extracts from the Raw Material.

**Pre-reg Student** - "confidence"

**Pre-reg Student** - "Experienced".

**Pre-reg Student** - "Openness, honesty".

**Pre-reg Student** - "So, the ability to recognise your positive and negative traits, but also, to me, it sounds like you're actually talking about confidence to effectively critique yourself in the manner that's going to help you to move forward".

**Staff** - "Self-confidence, isn't it"?

**Staff** - "Self-confidence".

A further attribute that was judged necessary by all groups was that of self-awareness. Although in the focus groups the participants did not elaborate in any depth what they meant by self-awareness or why they felt this was important, self-awareness has been discussed in the literature in detail.

**Table 48:** Extracts from the Raw Material.

<p><b>Pre-reg student</b> - "So, the ability to recognise your positive and negative traits,..."</p> <p><b>Pre-reg student</b> - "Self-awareness"</p> <p><b>Post reg student</b> - "...that you have to have a very clear idea of what it is that you think you're up to when you're dealing with a situation. You can't just blunder in like, "Nice to meet you, I just happened to be here, I thought I'd just ask you about the overdose", you know, it's not like that! You cannot instil into them the idea, the student's idea's that they've got about it; we're actually doing a structured thing and there is a...part in it and you look out for the points that I will point out to you before you get into the situations and see whether they actually occur in the situation will prove to you that this is not being done as an ad hoc arrangement".</p> <p><b>Post reg student</b> - "I think you need to look at yourself, your self-awareness".</p> <p><b>Staff</b> - "Self-awareness".</p>
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Atkins and Murphy (1993) and Atkins (2004) view self-awareness as the foundation skill upon which reflection and reflective practice is built. They felt that self-awareness is what supports the honesty required for successful reflection and allows the reflector to view themselves openly in the light of the experience and how it affected them and in turn how they affected others. Mezirow (1981) was noted as viewing self-awareness as the attribute that differentiates learning through reflective practice from the learning that takes place through academia. We noted previously that in Mezirow's seven levels of reflectivity that self-awareness is threaded throughout and therefore perhaps can be perceived as an essential personal attribute.

Further personal attributes that participants made reference to included that of thoughtfulness, not dissimilar perhaps to that of mindfulness and the thoughtfulness noted in the literature by authors such as Epstein (1999), Johns (2004) Taylor (2006), Knott and Scragg (2007), Wilson (2008) and Bolton (2010). Although mindfulness and thoughtfulness were not necessarily understood in the literature as skills for reflection, they were deemed personal attributes required for reflection and were used as a way of describing what the author's perceived reflection to be. Other attributes alluded to but not discussed in any detail by the research participants were life skills, sense of humour, empathy, self-esteem and open-mindedness that would enable risk taking, and ensuring that the reflector did not take the blame for things that were not their fault. All of these personal attributes noted by the participants in the focus groups are congruent with Johns (2000) mode of being – 'The 10 C's of Reflection'.

**Table 49:** Extracts from the Raw Material.

<p><b>Pre-reg student</b> - "Ability to control your emotions"</p> <p><b>Pre-reg student</b> - "Being able to actually make improvements next time, like after reflection and coming out of it knowing what you're going to do differently the next time because there's no point reflecting if it's not going to change something..."</p> <p><b>Pre-reg student</b> - "You need to be able to positively criticise yourself"</p> <p>"<b>Pre-reg student</b> - Proactive".</p> <p><b>Pre-reg student</b> - "Experienced".</p> <p><b>Pre-reg student</b> - "some sort of detachment"</p> <p><b>Pre-reg student</b> - "The ability to recognise that you're good at things...balance that and not be offended and to take on board comments and..."</p> <p><b>Post reg student</b> - "The word that springs to mind is thoughtful."</p> <p><b>Staff</b> - "Empathy".</p> <p><b>Staff</b> - "Its vulnerability, isn't it?"</p>
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**Staff** - "It's taking a risk".

**Staff** - "I don't know how to express this succinctly but the ability to see many sides to the story, other than being, sort of..."

**Staff** - "Open-mindedness"?

**Staff** - "Open-mindedness, yeah".

**Staff** - "Well, we're not talking about skills are we? We're talking about personal attributes, I mean, we've kind of gone, and to me that's, you can't just give somebody the skill to do it without supporting these personal attributes".

**Staff** - "Sense of humour".

**Staff** - "Otherwise, can you imagine if you're reflecting and you're constantly saying, 'Oh, I didn't do that well, I didn't do that well'. It'd be so awful, wouldn't it?! You've got to be able to laugh at yourself".

**Staff** - "Life skills".

**Staff** - "Maybe a certain degree of self-esteem so that if things do go wrong they don't feel as though they're at fault or...to blame".

**Staff** - "Flexibility; the ability to change".

### **Higher Order Cognitive Skills**

Higher order cognitive skills have been acknowledged as skills required for reflection by a number of authors in the literature review. Bloom et al.'s (1956) taxonomy of educational objectives refers to these higher order cognitive skills as evaluation, synthesis, analysis, application, comprehension and knowledge. Authors such as Dewey (1973), Atkins and Murphy (1993), Wilkinson (1996) and Taylor (2006) denote agreement that reflective practice requires to one degree or another elements of, if not all of these higher order cognitive skills. It would seem that the research participants would also concur. The skill of having knowledge or being able to gain knowledge was deemed important in reflection as the participants felt you need a clear conceptualisation of what it is you are doing in relation to the subject you are doing it too. The person reflecting needs a good knowledge base of what they are

reflecting on otherwise they cannot reflect properly especially in a culture of evidence based practice. It was recognised also that first year students were not expected to have the necessary knowledge needed for successful reflection at this early stage of their training.

**Table 50:** Extracts from the Raw Material.

**Pre-reg student** - "Grammar and writing skills".

**Pre-reg student** - "So, the ability to recognise your positive and negative traits, but also, to me, it sounds like you're actually talking about confidence to effectively critique yourself in the manner that's going to help you to move forward".

**Post-reg student** - "A very clear conceptualisation really of what it is you are doing in relation to the subject that you're doing it too, as it were. I know that sounds a bit indistinct but if you're going to do a risk assessment it would be pointless dealing with someone who's got risk issues unless you were guided by the principal of risk assessment to then make a cohesive view of the thing that you've just assessed".

**Post-reg student** - "So if you use evidence base in your dealings with clients you're more likely to be able to reflect on what you did and how you did affected what happened only if you're aware of the evidence-base that suggests this is the way it should be done. It cannot be a vague thing; it has to be more specific".

**Post-reg student** - "You should have a purpose, shouldn't you? You should have a reason for why you're doing something. You shouldn't just be doing something because that's what people do".

**Post-reg student** - "Evaluation".

**Post-reg student** - "Analysis of what happened".

**Post-reg student** - "we've actually all acknowledged that it's difficult often to pinpoint the skills you have or the skills that you're using in a particular situation. So I think reflection becomes a bit harder because it is more automatic, isn't it?"

**Staff** - "Critical thinking".

**Staff** - "But knowledge and experience comes in as well, doesn't it, you know? And I don't mean to say that we're expecting first years (students) to have a lot of knowledge and a lot of experience, but they're not empty vessels"

**Staff** - "Well, can I just add into that, good clinical supervision"?

Of further importance were the skills of critical analysis. It was felt by participants that reflecting was about being critical and analytical, as was the ability to write an academic assignment, as formal reflection within the university setting was often in the guise of a reflective academic essay. Part of the marking criteria for academic work is to demonstrate levels of critical analysis.

### **Interpersonal skills**

Communication skills were deemed highly important when reflecting. Participants perceived that the ability to share and communicate your thoughts and feelings especially if you are reflecting with another person was essential. However it was not only the verbal skills of communication that were noted as important but the ability to communicate in written form as well, although this point was not elaborated upon. What is interesting is that the research undertaken for the literature review for this thesis did not discern in any detail, information relating to the importance of communication skills when reflecting. Johns (2000) discusses guided reflection, yet no real dialogue takes place in relation to the communication skills needed for the guider to facilitate the reflection and the guided to verbalise their thoughts and feelings. A number of authors also refer to the concept of the internal supervisor and the need for Socratic dialogue (Casement 1985; Bould and Holland 1998; Todd 2002 & 2005 and Taylor 2006), yet no mention is made of the skills needed to activate your own internal supervisor and no mention is made of what is needed to have a Socratic dialogue with oneself. We know that this type of dialogue is a communication method that allows for a deep analysis of self, probing, gentle questioning that may or may not have an answer, enabling the person to become

orientated with their own value system (Ciarrochi and Bailey 2008), and as such may not be an inherent skill.

A further concept highlighted as important for reflection was that of storytelling. The participants felt that being able to tell a story allows the person reflecting to make sense of what they are or have experienced. This notion is congruent with Bolton's (2010) concept of 'Through the Mirror Writing' which recognises the importance of free writing and writing the story from the perspective of another as if you were them as a reflective method.

**Table 51:** Extracts from the Raw Material.

**Pre-reg student** - "Good written and verbal communication skills".

**Pre-reg student** - "And the chance of sharing it with somebody that can feedback..."

**Pre-reg student** - "Communication"

**Staff** - "Ability to express themselves in writing".

**Staff** - "Communication skills".

**Staff** - "Maybe to tell a story as well, to make a, kind of, sense of something that's happened".

#### **5.4 RESEARCH QUESTION 4: HOW WOULD THE PARTICIPANTS WISH TO CHANGE THE TEACHING AND LEARNING OF REFLECTIVE PRACTICE AT THE UNIVERSITY?**

For me as the researcher this was possibly the most important research question that I wanted to ask of the participants in this study. The whole purpose of this study is to support or effect the practice of teaching reflection at the university. The raw material that came from the perceptions of the participants would either support the continuation of current practice, or recognise the need for change. However I wanted to know that if change was needed what would the participants wish to see changed, enhanced, removed.

As illustrated in chapter 4 the categories that emerged from coding the essential themes for research question 4 are;

Academic processes;

Personal tutor system;

Clinical Placement;

Course review

##### **Academic Processes**

This was a category that occurred as an essential theme in one form or another in all four focus groups. The participants would like to see the whole teaching and assessment process reviewed especially in relation to the first year of the programme with a much greater emphasis on the use of simulation and the development of introspection. The participants felt that they would like to see a shift away from the



overly formalised, didactic style of teaching reflection to a more natural teaching style that takes into account what reflection actually is and recognises the individuality and the different learning styles of the students, whilst supporting the students in moving through the different levels of academic writing. Moving away from an instructivist style towards a more humanistic style in the classroom is not a new concept and has been championed by individuals such as Rogers, Maslow, Claxton and Pierson in the sixties, eighties and nineties.

**Table 52:** Extracts from the Raw Material.

**Pre-reg student** - “The formal lectures”.

**Pre-reg student** - “I would de-formalise the process and make it into a more individualised thing and thereby have one-to-one’s, very small groups and I’d encourage people to reflect on their practice...feedback and give them positive responses...”

**Pre-reg student** - “Smaller groups. So you could actually express yourselves if you want to or not at that time”.

**Pre-reg student** - “And I still like the idea of simulating after the event..”

**Post-reg student** - “...it might become more natural if it’s followed up by being in a placement areas”.

**Post-reg student** - “From my experience with students, I want to know that they do understand that it’s not a paper exercise, that it’s not just about writing down what you did and learning from that. It is about doing it, like you said, in a natural way all the time because I do worry that sometimes students do a reflection thinking that the next time they go into that situation they’ll deal with that perfectly”.

**Post-reg student** - “I think repetition; I don’t think reflection is a module that should be taught once and forgotten about.

**Staff** - “More group work”.

**Staff** - “Smaller tutorial groups”.

**Staff** - “I think the personal groups with someone they trust is good”.

**Staff** - Staff 2’s idea about moving from a didactic approach to one that’s much more, sort of, inclusive with the students in year one is a good start, isn’t it?

The staff would like to see not only a change in teaching style but a teaching strategy for reflection that focuses more on the process, taking into account in particular the development of self-awareness in the students, rather than a strategy that focuses on the outcome. It has been noted in the literature that reflection should be more about the process than the outcome (Dalley 2009 and Bolton 2010), and has been referred to as a state of mind not a curriculum element. Reflection is viewed in the literature as a way of finding out about who we are as people, as practitioners and way we act the way we do. Participants felt that a greater use of the ELearning resources would support and enhance the individuality of the teaching process.

**Table 53:** Extracts from the Raw Material.

**Staff** - "I suppose shifting us to a process outcome, actually that whole educational process rather than outcome focus. We're currently very out of focus and in mental health we've always, sort of, liked to process approach where we actually develop and help people learn and shift and change within that process".

**Staff** - "They haven't been taught, in year one, the value of this kind of introspection or circumstance..."

**Staff** - "Much more emphasis on self-awareness and who you are..."

**Staff** - "...we could even MOODLE...you need to read through this, you need to get familiar with the approaches..."

**Staff** - "And maybe personal tutors could actually, you know, access the MOODLE and then you could have a small group on MOODLE".

**Staff** - "But you can also introduce elements of it into other modules and assignments, rather than having a reflective assignment.

**Staff** - "There's a range of different sorts of assessments. You could include academic assessments where, in fact, they would have to produce some evidence of reflection and how their practice has developed over the three years.

**Staff** - "I actually think that perhaps part of our third year assessment should be their ability to represent somebody else's narrative, that you can actually hear, listen and, if you like, demonstrate the ability to represent somebody else's narrative".

**Staff** - “And to empathise and all the rest of it... Yeah, because I think that, sort of, narrative work is really embedded in reflection”.

**Staff** - “Because, I mean, if I never had to mark another assignment that starts off, ‘My development need is drug calculation’, I’d be, but I think that’s the sort of idea! We get them embedded in it and grounded in it and then in year three that, kind of, tell a story from the perspective of the client, which means they have to work with them all the time they’re on placement and, maybe, they have to get a short video clip as a client who’s heard the story, saying what they think about it and put that all in to say a fifteen/twenty minute presentation.

Participants agreed that they would like to see a change in the way reflective assignments are assessed and marked. The student participants in particular would like to see a greater sensitivity and respect on behalf of the lecturers when marking reflective essays, as a difficult or negative critique with regards to reflective essays is viewed and perceived as demoralising. Student participants also reported an uncertainty as to how to use the literature as evidence in a reflective assignment and would like a greater level of teaching on this matter. Service user involvement when providing feedback was also seen as a helpful way of supporting the teaching and assessing reflection, as well as asking the students to present a service users narrative in their final year, this might help assess the empathic aspect of reflection.

**Table 54:** Extracts from the Raw Material.

**Pre-reg student** - “From the curriculum, we have to do an assignment where we’re marked on our reflection and I don’t think we’re actually marked on our own thoughts. I know you can be marked on how we thought....and the rationale side of things...but I found that quite de-personalising with my situation and what happened. We’re expected to reflect but then people start turning round telling us that’s wrong and it’s like, no, even though it was my situation....”

## Personal Tutor System

It was perceived by both staff and student participants that the role of the personal tutor in relation to supporting the teaching and learning of reflection needs to be enhanced. The participants wished to see a greater involvement of the personal tutors in the clinical area and that guided reflection with personal tutors in a group situation would be of great benefit. The participants would like these group sessions to be with others from the same student cohort so that they could get to know each other and start to develop a mental health branch identity. However the staff members also felt that it would be helpful to have an external facilitator for some of the group sessions to encourage honesty from the students within the sessions, as it could be perceived that an external facilitator would not be viewed as having loyalties to the university.

**Table 55:** Extracts from the Raw Material.

**Pre-reg student** - "...the personal tutors especially in the clinical area and that guided reflection offered by the personal tutor should be made compulsory".

**Pre-reg student** - *"More support, feeling more supported by the university as a whole"*.

**Pre-reg student** - *"More one-to-one supervision with tutors"*.

**Pre-reg student** - *"More visits on placements; make it compulsory...transition period..."*

**Staff** - "Get involved with the personal tutors much more".

**Staff** - "We could link them as a group and do some work".

**Staff** - "We could even 'buddy up', couldn't we? I mean because if you say 04/07 (student group) ...I don't know how many students we all got from that but I got four, I think, so if somebody else got four, just put them together and sharing like that. So, for the two intakes a year we'd 'buddy up' I'll take the April one, someone takes the September, something like that..."

**Staff** - "I think that would be a very solid foundation built. I think also, in year one, it would give them a branch identity mu "Well, you 'buddy up' two personal tutors so that they then

can do the personal supervision and the clinical supervision for that group without it becoming too time wasting, well, not wasting, wrong word, consuming”.

**Staff** - “Face to face, I think, would be better...”

**Staff** - “but I’ve never heard a student say to me they don’t trust their personal tutor. So, I genuinely believe that if we were running these small supervision tutorial groups they’d get used to the idea and relax into it, especially if they were three yearlong”.

### **Clinical Placement**

There were a number of issues that arose in relation to the students’ clinical placements. Firstly the students would wish to see an alteration to the placement documents. It was perceived that writing a reflective piece at the end of placement to support a clinical competency was not helpful, and that this should be replaced with a reflective diary. The elements of reflection that are taught in the classroom environment, should be followed up on a more formal basis in the clinical area by the clinical assessors and the personal tutors, thus encouraging honesty required in the reflective process ‘blame culture’ whereby students are afraid to reflect fully in case there is retribution from the clinical area would be eradicated.

In support of the previously mentioned use of the personal tutor in relation to guided reflection in a group setting, the student participants in particular requested that these sessions take place specifically at the end of each placement. It was perceived that reflection with their peer group immediately following placement would be of great benefit.

**Table 56:** Extracts from the Raw Material.

**Pre-reg student** - *“More one-to-one supervision with mentors”.*

**Pre-reg student** - *“Change the document and just have a reflective diary”.*

**Post-reg student** - *“...it might become more natural if it’s followed up by being in a placement areas”.*

### **Course Review**

The final category noted by staff participants was that of a complete review of the course. This was not at this point elaborated upon, but it was stated that they would wish that the three year training programme was branch specific to mental health through years 1-3, not as it is currently 1 year general foundation and 2 years branch specific, and that we had a school of nursing.

**Table 57:** Extracts from the Raw Material.

**Staff** - “Well, I have an innovative idea that we should have a three years mental health training course!”

**Staff** - “...School of Nursing...”

**Staff** - “Yeah, the School of Nursing...”

**Staff** - “...attached to clinics! I think that would work!”

**Staff** - “I think it would work too but we are trying to, sort of, re-introduce mental health to year one. I’m arguing that if it’s supposed to be generic it should cover all four branches, not just adult. So, we’re...”

## 5.5 SYNTHESIS OF THE FINDINGS

It is at this juncture that the information contained in the previous discussion will be utilised to inform point;

- a) A profile of reflection from the perspectives of both students and lecturers.

This profile will be contrasted against my own description of, and essential ingredients for successful reflection. It was important for me to determine following discussion of the findings whether I would alter my description of reflection and what I perceived as the essential ingredients.

The following table presents a profile of reflection as it could be perceived by the staff and student participants combined, following review of the previous discussions, next to my own description that was formulated on review of the literature and from my own observational experiences.

**Table 58:** Extended Descriptions of Reflection

Study Participants	Researcher
<p>Reflection is an essential, but complex form of analysis that supports lifelong learning, <u>a type of therapy that allows the development of self both personally and professionally. It is a natural and transparent process that is not outcome orientated, supporting and enhancing the development of self-awareness, confidence and empathic regard for another individual, keeping you safe in your practice.</u> Reflection can occur when</p>	<p>Reflection is engaging in a process that allows the reflector to frame and reframe their reality that is being experienced <u>moment by moment. It requires us to become our own person-centred therapists, understanding ourselves in relation to experiences we are about to have, are having or have had, empathically and with accuracy, then stepping beyond the self and using this knowledge gained to understand</u></p>

<p>writing, conversing with another or when having a moment of quiet introspection before, in or at the time of an event. <u>In order to reflect the individual needs to be honest, possess a level of confidence, have an open mind, sense of humour, is capable of empathic regard for oneself and another, and is able to be thoughtful.</u> To be reflective requires the skills of critical analysis, communication both verbal and written and the ability to source knowledge if the right knowledge is not already known.</p>	<p><u>how we may then have impacted on those around us.</u> For this process to be fruitful <u>we must leave arrogance and complacency at the door, be actively engaged in mindfulness, consciously aware of the self in the moment, open to learning and using the new knowledge gained to develop ourselves personally and professionally.</u> When fully engaged in the reflective process the experience can be humbling as we realise we are perhaps not what we assumed ourselves to be, yet also rewarding as we confirm that our best may have at that time been good enough.</p>
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By viewing the two extended descriptions side by side it is possible to see the differences and the similarities in our perceptions of reflection, the parts underlined are where I perceived the similarities between the two. Although the wording is not identical the meaning underpinning the wording I observed to be of a similar nature.

It would seem that both descriptions viewed reflection as a type of, or similar to 'therapy', a therapeutic process that is natural and fluid. It would appear that both definitions would perceive reflection as important, not only personally but professionally, and that certain personal attributes are required in order to reflect effectively. Empathic regard for oneself and others featured in both definitions and therefore can possibly be viewed as important in the reflective process.

However, on review of both descriptions subtle differences emerged. Study participants saw reflection as an essential component of lifelong learning that was



actually a complex process, whilst my description referred to reflection as an engaging process rather than essential and complex. Whilst both definitions viewed reflection as *natural, fluid*, and a *moment to moment* experience, my description viewed the *moment to moment* experience as a way of seeing reality from a multitude of perspectives, *framing* and *reframing* seamlessly; whereas the study participants broke reflection down into the more static components of reflecting pre / in / on action, and being natural in that static moment. The final most discerning differences in the two descriptions are that the study participants acknowledged the need for not only skills of critical analysis in order to reflect effectively but those of communication both verbally and non-verbally and the ability to source new knowledge if the knowledge needed is not already known.

In light of this information I altered my own description to reflect and incorporate some of the differences between the two. The new extended description of reflection now includes acknowledgment of the term *essential, framing* and *reframing* remains as a form of expression for reflecting *pre / in /on action* and is felt to be a more appropriate way of highlighting the natural aspect of the process. I have however further included the recognition of the need for the skills of critical analysis and communication. The following table presents the revised extended description of reflection as a result of my own past observational experiences, information taken from the literature review and findings from the study.

**Table 59:** Resultant Extended Description of Reflection

Reflection is an essential, engaging process that allows the reflector to frame and reframe their reality that is being experienced moment by moment. It requires us to utilise skills of communication, to become our own person-centred therapists, understanding ourselves in relation to experiences we are about to have, are having or have had, empathically and with accuracy, then stepping beyond the self and using this knowledge gained to understand how we may then have impacted on those around us. For this process to be fruitful we must leave arrogance and complacency at the door, be actively engaged in mindfulness, consciously aware of the self in the moment, open to learning and sourcing new knowledge if the knowledge is not already known to us, using the new knowledge gained to develop ourselves personally and professionally and be critically analytical. When fully engaged in the reflective process the experience can be humbling as we realise we are perhaps not what we assumed ourselves to be, yet also rewarding as we confirm that our best may have at that time been good enough.

In light of the new extended description of reflection I then reviewed the “The Ten Essential Ingredients for Successful Reflection”. In order to create this new model of reflection I not only had to recollect the experiences I had with reflection, teaching and learning how to become effective at reflection but also to take into account my own learning from analysis of the literature. The literature review allowed me to appraise what has been written on reflection, researching other researchers’, and practitioners’ stance on reflection allowed me to give extra weighting to information by highlighting and, expanding of content that was deemed appropriate, useful and congruent with my own assumptions. It allowed me to discard information that was deemed not useful by those with experience in this field in order to create my own new synthetic model of reflection.

The next step was to review this new model against the raw material from the study participants. It can be observed immediately that one element had been missed that was highlighted by the study participants, which was the skill of communication. Interestingly the literature also did not dwell on the need for communication as skills for successful reflection. Therefore in light of the findings I have altered my ten essential ingredients to accommodate communication so the ten are now eleven as per table 60.

**Table 60: The Eleven Essential Ingredients for Successful Reflection**

ACADEMIC SKILLS	Reflecting is not a vivid description of an event, a situation, an experience, but a review of the experience either prior to, during, or after in a critically, analytical manner. This critical analysis is supported by knowledge and the ability to bridge the theory – practice gap. New knowledge is often then amalgamated with the old and current knowledge, from which the person then synthesises a new way of being, or expands and enhances the current way of being.
ATTITUDE	The driving force of successful engagement with the reflective process. The practitioner needs to be humble to the process, be open, honest, and have the willing and motivation to understand and learn.
ATTITUDINAL QUALITIES	The practitioner needs to be brave, courageous and confident in order to support the honesty required in the process. Kindness, compassion and offering unconditional positive regard to oneself supports openness.
COMMUNICATION	The practitioner needs to be able to articulate themselves in a verbal and nonverbal manner, whether this is only to themselves or to another person. They need to have the communication skills that allows them to act as their own internal supervisor, the skills of Socratic questioning, empathic responding are needed.
EMPATHY	The practitioner needs to want to understand themselves in relation to their experiences accurately. They need to use the skills of

	empathic questioning and responding to allow for deeper analysis of their thoughts, feelings and behaviour in relation to what they are reflecting on. A Socratic dialogue with oneself. Not only this they need to also be able to use their empathy to understand how others are perceiving them and the experience they in.
KNOWLEDGE	The practitioner in order to evaluate and reflect upon what they are experiencing in the clinical setting needs to have a level of knowledge that they can refer to and evaluate their experience against. If they do not have the existing knowledge, they need to know how to source the knowledge so that they may bridge that theory – practice gap, and enhance their ability to understand the experience they are reflecting on, prior to, in action or on action.
MINDFUL	The practitioner needs to be cognisant of themselves. Their surroundings, their behaviour, thoughts, and feelings. An acute awareness of the experience they are having or have had moment by moment and in the context of others.
PERSON-CENTRED	Reflection is about the subjective experiences of the person reflecting. The reflector can grow and develop personally and professionally if they create the climate that allows them to get to know themselves better and as a result understanding is developed, with understanding comes self-awareness. Being person-centred with oneself requires the reflector to be able to hold that internal dialogue that allows for deep understanding.  Facilitators and teachers of reflection need to be person-centred in the classroom in order to foster the climate that enables honest reflection from the students. Facilitators and teachers need to be engaged in critical reflection themselves.
PROCESS ORIENTATED	Reflection is not about the outcome / output, but about the process that takes place when reflecting. Reflection may not always be so smooth as to guarantee a definitive outcome. As much learning can take place from the process as can occur from the result.
SELF-AWARENESS	The practitioner needs to have a current level of awareness of self, a perception of how they perceive themselves to be. It is this current knowledge of self that is the basis for the reflective process. Self-awareness allows the individual to be honest about how they

	perceive themselves to 'be' in the experience, it is this existing knowledge of the self that is also agreed, challenged, developed and overturned, in and by, the reflective process.
STRATEGIC	The practitioner must be cognisant that every decision they make as a result of reflection has a 'ripple effect'. The actions they take from the reflective process will not only impact upon the practitioner reflecting but on those around them.

Ultimately as a result of this study there is a new extended description of reflection and a revised model of essential ingredients for effective reflection. The next section will detail the recommendations for future practice that emerged from the discussion of the findings.

## 5.6 RECOMMENDATIONS FOR FUTURE PRACTICE

It is at this point that the research will list the possible recommendations for future practice. These possible recommendations fall into three categories; aspects of teaching and learning that should be continued, aspects that should be discontinued and aspects that should be introduced.

### Aspects for Continuation

1. Continue with the current guided reflection offered by personal tutors to individual personal students at the conclusion of each clinical placement, and ensure that personal tutors have the time to do this.

2. Continue with the threading of reflection throughout all modules and ensure that the reflective discussion that takes place in the classroom of second and third year modules happens in first year modules.
3. Continue with ensuring the clinical assessors hold reflective conversations with the students in practice.
4. Continue to support and promote informal group reflection with peers.

#### **Aspects to Discontinue**

1. To discontinue the rigid, didactic teaching of reflection in the first year of the programme.
2. To discontinue using lecturers to teach reflection from different branches of nursing.
3. To discontinue teaching reflection in large groups.
5. To discontinue teaching reflective cycles as the only way to reflect.

#### **Aspects to Introduce**

1. To use the clinical assessors more effectively when the students are on placement, in relation to the reflective conversations and supervision that need to take place.
2. To provide the personal tutors with time to conduct reflective practice groups with students from the same cohort.
3. To enhance the role of the personal tutor when the students are in clinical practice.
4. The lecturing team need to thread reflection throughout all modules and indicate in timetabled sessions and in class when reflection is taking place.

5. To develop a teaching strategy that focuses on enabling the student to gain the skills required for reflective practice.
6. To develop a teaching strategy that focuses on enabling students to enhance the personal attributes needed for reflection in particular that of self-awareness.
7. To review that teaching strategy so that it focuses on reflection as process orientated and naturalises the teaching of it.
8. To demonstrate a greater level of humanism in the classroom that recognises the individuality of the students.
9. To review the reflective piece as part of placement documentation and introduce a reflective diary.
10. To ensure a climate of safety that cultivates honesty.
11. To have a three year branch specific nursing programme.

However as a note of caution in relation to these possible recommendations, it needs to be remembered that this was a relatively small study conducted on a small scale, contextual to the university where the study took place and does not profess to be representative of the entire student nurse population or mental health lecturing staff for Scotland, England and Wales. The overall proposal here would be to use the work and the recommendations as a basis for further participatory action research, where techniques of consensus building are used to get staff and students to agree on a course of future interventions they can try out and evaluate. These recommendations could represent the basis for a proposal or a bid in relation to faculty development.

The following chapter will offer general conclusions to the research including addressing the limitations of the study. It will review if any new contributions have been made to the body of knowledge and will offer ideas for future research.



# **CHAPTER SIX: CONCLUSION**

## **6: INTRODUCTION**

This chapter will conclude the thesis, review its contributions to the existing body of knowledge, offer recommendations for future studies and acknowledge the limitations of this piece of research.

### **6.1 THESIS SUMMARY**

This thesis supports a review of the pedagogical methods that underpin the teaching of reflection and reflective practice to undergraduate, pre-registration mental health nursing students as part of their mental health nursing programme at the university. A requirement of health regulating bodies such as the NMC has meant that reflection has become a curriculum element in order to ensure that nursing students are able to meet the competencies that pertain to reflective practice, to gain entrance to the professional register. However the need for a revision to the pedagogical methods for teaching reflection emerged from exploration of the staff and students' teaching and learning experiences of reflective practice within the university setting. It was evident that student participants felt that the teaching methods employed by some of the lecturers at the time of conducting this study, did not support the learning about reflection that needed to take place in order to become an effective reflective practitioner. It seemed that the staff participants would concur, recognising not only the need to alter teaching methods that are employed in the first year of the diploma programme, but to expand the teaching of reflection to support the development of personal attributes "soft skills" that are required for reflection. However, it appeared that the participants laid the blame for the student's lack of understanding reflection fully on each other. Staff, it would seem, wished to blame the students' lack of

motivation, students' it would seem, wished to blame staff for poor teaching. Both staff and students were in agreement that reflective practice is an important and essential aspect of being a nurse practitioner.

This study utilised a person-centred approach to research that is congruent with the underpinning philosophy of nursing care. This approach created the climate for the staff and students to have a voice and feel free to express themselves in relation to their teaching and learning experiences. Although there were technical differences in the participants' understanding of the term reflection there was on the whole congruency with the literature's representation of what reflection is especially in relation to Schön, Bolton, and Johns' presentation of reflection. The study demonstrates that the participants are able to offer comprehensive definitions of reflection that are congruent with the literature. They recognise there are skills and personal attributes required for reflection, but that they are unsure how to actually apply these definitions in practice and gain the skills required. That the teaching methods utilised at this particular university were perceived as the reason behind this.

The results of this study supported a new description of reflection developed by myself as the researcher. Supporting and enhancing also the model of reflection referred to as the Eleven Essential Ingredients that derived from an amalgamation of the literature review, observational experience I have had and the voices of the participants.

## 6.2 GENERAL CONCLUSIONS

The concept of reflection and reflective practice has been extensively discussed in the literature (although not an exhaustive view of the literature). We can see that there is a broad consensus of opinion of what reflection is that mirrors the voices of the participants. Reflection will remain and continue to play a very large and important part in the training of nursing students.

We can determine from the literature that it is a complex notion with many facets. A weakness of the literature is the lack of empirical evidence as to how to teach nursing students to become effective reflective practitioners. The lack of literature on how to teach this notion of reflection, is mirrored by the reports from the student focus groups of the poor quality of the teaching they have received throughout their training, and the recognition from staff that they are not offering the students what they need in order to become effective reflective practitioners, and that they don't really know how and at what level to initiate the teaching of reflection. However this thesis demonstrates that a lack of evidence from the literature on how to teach reflection has not hindered the students' and staffs' awareness of what needs to occur to support effective reflective practice. Student participants were clear in their articulation of what they need from the lecturing team to support their endeavours to become effective reflective practitioners, and staff appear to be aware of what needs to change in their practice to enable this notion to occur for the student body.

The four focus groups that took place supported the literature's view of the importance of reflection, mirrored the literature in the many different definitions and

understanding of reflection that emerged and concurred with the literature in relation to the skills required for reflection. However, this study has highlighted the skill of communication as an important skill to have for the person reflecting and for the person acting as facilitator. This is a skill that underpins nearly all the methods, models, modes of reflection identified in the literature but a skill that seems to be taken for granted as inherent in all of us rather than highlighted as a skill that needs honing and developing and is not an innate part of human nature.

Furthermore this research has emphasised the need for reflection to be an integral part of teaching, and should not be perceived as something to add on. It has also provided a clear idea of what students need from teaching teams to become effective reflective practitioners. However, it needs to be acknowledged that the review of the literature is that it does not really source much of its information beyond that of the nursing sphere, and it could be said that this is a weakness of the review. However, it is felt that these findings although contextual to the university, in which the research took place, could be useful to not only other branches of nursing, but any discipline that requires their students to reflect. That the recommendations laid down in this thesis could possibly be used towards the formulation of bench marks for any setting that teaches reflective practice.

### **6.3 LIMITATIONS OF THE RESEARCH**

The main limitation associated with this research relates to the ability of the findings to be generalised across different university settings where health care is taught and different branches of nursing and health care disciplines. This is owing to the fact that the study was purposefully conducted with unique student cohorts in a particular single university setting. That is to say these findings may prove useful to other health care practitioner education providers, but courses and students do differ from one educational setting to the next and no one programme will be entirely the same.

The diploma programme that the research was conducted on is also being phased out and currently has its last cohort of students. This means that should the recommendations be put into action, an evaluation of how it has affected the diploma programme specifically will not be possible, neither will it be possible to evaluate with the same students who took part as these students have since left and are now qualified nurses.

This was an exciting process for me, utilising the person centred approach which underpins my work as a nurse as a research approach was a novel experience. However an experience that was comfortable for me because of my familiarity with the approach. What I would do differently is to have a co-researcher who would play a passive role during the collection of data, involved in the whole process from start to finish. Passivity would end once the data had been collected and analysed as discussions could then take place as to the objectivity of my understanding of the voices of the participants. I feel a co-researcher could have helped eradicate any

possible researcher bias that may have occurred even following fairly extensive bracketing. I also would time manage myself better as a major weakness of this research is to check out my understanding of the raw material by asking the participants if they felt I had understood them correctly. This would be classed as accurate empathy, something I did not allow time for.

#### **6.4 THE CONTRIBUTIONS TO KNOWLEDGE**

This section will illustrate the general contributions to the knowledge that I have made by undertaking this person-centred enquiry into the teaching and learning experiences of members of the mental health lecturing team and, pre and post registration student mental health nurses.

This research supports reflective practice concepts as detailed in the literature, and through review of the study participants voices has produced a new extended description of reflection. Furthermore, analysis of the literature, my own experiences and hearing the voices of the study participants has created a new synthetic model of reflection, *the eleven essential ingredients for successful reflection*, and requests a different pedagogic approach to the teaching of this concept at the university where the study took place. Therefore areas where contributions to the knowledge I feel have been made are:

- A refinement of the definitions of reflective practice.
- A new synthetic model of reflection.
- Recommendations towards a different pedagogic approach to the teaching of reflective practice.

- Supporting a new research framework

### **A Refinement of the Descriptions of Reflection.**

It has been demonstrated in chapter 5 that the staff and students perceive reflection and reflective practice to be important to them and this importance has two facets.

- a) Reflection and reflective practice is perceived as important for personal development in relation to gaining self-awareness and;
- b) For professional development in relation to their clinical practice.

Reflection and reflective practice is viewed as a natural, transparent, developmental process that is more diverse than ceremoniously ritualistically reflecting on practice. Reflective practice as known in the literature is perceived as more than a one dimensional concept by the participants of the study, and it is recognised that reflective practice is shaped by an individual's own understanding and perceptions of reflection.

We can see from the extended description/ profile of reflection how the participants combined understand reflection. As we know from the literature reflection is difficult to describe in one description and we can see that characterisations of reflection are often static, broad and relate to one concept of reflecting; 'reflecting in action', 'reflecting on action'. The extended description of reflection that occurred from combining the profile of reflection gained from the participants with my own of reflection, offers a more diverse, individualistic way of viewing reflective practice. This description offers a less static view of reflection than that offered in the literature,



allowing for reflection to be really about the person reflecting, fluidly, it is not prescriptive and acknowledges the free ideas associated with reflecting. The extended description does not perceive reflection as task orientated, or outcome generated and is closely aligned with Bolton's (2010) notion of 'through the mirror writing', although it does not prescribe the mode of reflection. It is felt that this description is more useful to the student nurse and other disciplines engaged in reflective practice as it is not time oriented or limited to particular incidents, but promotes lifelong learning.

As a result nurse lecturers / educators will need to take into account the individuality of the student when teaching reflection and will need to cease teaching a 'blanket' model, one size fits all method of reflecting.

### **A New Model of Reflection.**

Having reviewed the literature we have become familiar with many of the models of reflection. These models of reflection are often presented in the guise of a reflective cycle, a staged approach, or as Johns (2000) offers, 'a mode of being' or the 10C's of reflection and Bolton's (2010) through the mirror writing. Johns' and Bolton's being the most useful. However as we have seen from the results of the research, to reflect we need to understand reflection, we need to have the right attitude and we need to have a combination of skills. So far there appear to be very few models of reflection that take all this into account. Therefore the model of reflection devised by myself and refined following review of the research material, 'the eleven essential ingredients for effective reflection', offers us a new model. It offers us a model that

takes into account the attitudes required, the skills, and our own individuality by not prescribing *how to*. It tells the reflector what is needed for effective reflection and allows the reflector to review their attitudes, and skills in light of these requirements highlighting areas for development.

### **Recommendations Towards a Different Pedagogic Approach to the Teaching of Reflection and Reflective Practice.**

The research has highlighted a real need for a new method of teaching reflection and reflective practice. It has already been acknowledged in the literature that reflective cycles such as Gibbs (1988) are limited and often undermine and prevent reflective practice from reaching its full potential, a potential detailed by the likes of Dewey, Schön Johns. Yet it is clear from the research that reflective cycles are being taught as some of the only methods for reflecting and are being taught in a manner that is perceived as didactic, lacking in situational context, the theory being divorced from the practice which is perceived as unhelpful, lacking recognition of individuality in the reflector and not supportive of the true meaning of reflective practice.

There is also a perceived lack of empirical research representing the students' and lecturing staff's voice about how they wish to see reflection and reflective practice taught. Although contextually suited to the university in which the research took place, the recommendations for future teaching practice adds new knowledge to the literature and are also helpful to other educators teaching reflection and reflective practice.

## **Supporting a New Research Framework**

It has been clear throughout this research that the philosophy of person-centred humanistic practice as developed by Carl Rogers has provided the research framework for this study. The ideas and beliefs of this approach are perceived as useful to understanding study participants in a research context as they are to understanding patients in a therapeutic setting. The original idea for a person-centred framework for research was developed by Mearns and McLeod (1984), whom were looking to identify research methodology that was appropriate to understanding study participants from their own unique frame of reference and would have methods and techniques that would be advantageous when needing the full co-operation of the study participants, or when the researcher aims to probe deeply and personally. They utilised the ideas and beliefs underpinning person-centred philosophy as a basis from which to conduct a study into an evaluation of flexible schooling. They then reflected on this research and as a result postulated five characteristics required for person centred research. However it would seem that this study may be one of the first studies to actually employ these five characteristics (please review chapter one and three) not only as a framework for research, but as the methods for gathering data.

This was an exciting process, not only is mental health nursing underpinned by the person-centred approach and as such our communication and therapeutic alliance with service users is heavily influenced by Carl Rogers' work, but Rogers himself did not apply his own principles in this manner when researching the effectiveness of this approach in the counselling setting. He tended towards the use of quasi-experimental design, measurement and control of variables (Mearns and McLeod 1984). However,

this approach relies heavily on the researcher's ability to create the right climate and adopt the five characteristics. This is not something that is done without an already perceived level of skill in this approach and not something that can easily be replicated by a fellow researcher wishing to follow in my footsteps. The five characteristics are on the whole aspects of attitude, and attitude is difficult to measure and copy. I did find this approach as a research framework comfortable to utilise and supportive and respectful of the study participants which is one of reasons I feel there was such frankness in the discussions.

## **6.5 RECOMMENDATIONS FOR FUTURE RESEARCH**

This section will suggest and discuss areas that have been highlighted because of this research that would benefit from further study.

### **Further Enquiry into the Perceptions of the Staff and Students' Understanding of Reflection and Reflective practice.**

At the time that this research was undertaken the programme that the participants came from was the pre-registration diploma in mental health nursing. This diploma programme has now been phased out and we are in our final year. The programme has been replaced with a new degree programme and the whole structure of the course has been reviewed in light of changes required by the Nursing and Midwifery council (2008). I feel that a further person-centred enquiry into the learning and teaching experiences of these students in relation to reflection and reflective practice once the programme has completed a full cycle would be of benefit. The results from this further study could then be compared and contrasted against these results to

determine if the new programme of teaching has resulted in any significant changes. If the programme of teaching in relation to reflection brings about similar results to this study then it will be apparent that the pedagogic approach needs a review. I also feel that this study could be replicated with other health professions, branches of nursing at this and other universities, so that staff can review their practice when it comes to the teaching and learning of this subject.

### **Action Research.**

It would be exciting and useful to take a faculty approach towards the development of the teaching of reflection utilising the recommendations for future practice that have derived from this study, and then undertake a retrospective study that enquires into the outcomes from action implementation. Participatory action research would be an exciting project, bringing people together with different power status such as the lecturing staff, students and clinical partners to put the recommendations into practice and to evaluate them. This could start out small and through the process of the *self-reflective spiral*, implementing the plans, observing, reflecting, re-planning, and further implementation, observing and reflecting (Taggart, 1991), we may be able to agree a description and model of reflection and create a new faculty wide policy on teaching reflection and reflective practice, and the initial work has already started with this study.

### **Skills and Attitudinal Qualities.**

It was apparent from review of the literature and the findings of the research that certain skills and certain personal qualities are needed in the individual for successful reflection to occur. A weakness of the literature review was that it did not enquire deeply enough into how as educators we can enable and support the students to develop these skills and personal qualities needed for reflection. Therefore further enquiry into this would be of great benefit. It would also be of value and great interest to undertake another person-centred enquiry into how lecturing staff feel that they can teach the skills of reflection and facilitate personal growth in the students.

### **Assessing Reflection**

It would appear from the study that a developmental need on behalf of the lecturing staff from the perceptions of the students is that of assessing reflection and marking it. It would be of great benefit to further explore the literature in relation to the assessing and marking of reflection and further review staffs understanding of this and pursue research that takes a developmental role within the faculty.

It is felt that this has been an exciting and incredibly useful piece of research that has not only utilised a new framework for research, but has generated ideas and principles in relation to teaching reflection that could be viewed as new developments for the faculty of health.

## **6.6 FINAL REFLECTIONS**

I felt that it was important for me to thank anyone who has taken the time to read this thesis. I hope that it has proved as interesting to read as it was for me to research. I was apprehensive about collecting data, unsure as to whether anyone would want to become involved, unsure as to the quality of the data I was going to receive. I believe that at the time although reflection and reflective practice has always been something that I personally have been very interested in, I did not believe that others may have a similar level of interest. So I was surprised and thrilled by the interest shown in my study and richness of the discussions that took place within the focus groups. I now feel that the person centred approach is not only a highly useful therapeutic tool when engaging service users in the clinical setting but I truly believe it has proven itself as a framework for research.

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## **Appendix 1:**

### **CARL ROGERS THEORY OF PERSONALITY AND THE FULLY FUNCTIONING PERSON – ADDITIONAL INFORMATION**

In the 1959 landmark paper as previously titled he refined his theory of personality, firming up his propositions and developing others. This paper articulates that there are ten propositions to Rogers's theory of personality and for the purpose of this discussion I will be acknowledging the 10 propositions and offering a summary of each to attempt to explain the basic principles. Not only is this discussion important in developing my ontological assumptions, but also it helps in understanding where my epistemological assumptions derive from and helps to justify the methods used in data collection for this study.

#### **The 10 propositions:**

##### *A. Postulated Characteristics of the Human Infant*

- The infant experiences his/herself as the centre of reality.
- The infant has an inherent tendency to actualise, maintain and enhance itself (actualising tendency).
- The infants' behaviour is goal directed in an attempt to actualise, or meet the needs as she/he experiences them as part of her/his reality. The infant behaves as an organised whole to meet this purpose.

- The infant engages in an organismic valuing process. Experiences are valued in relation to whether they help the infant maintain and enhance its organism positively. Those that help the infant achieve its actualising tendency are classed as positive experiences and those that don't are negative.
- The infant will engage with positively valued experiences and will avoid those negative ones.

### *B. The Development of the Self*

- The infant's experience at some point becomes differentiated and symbolised in an awareness of being, awareness of functioning. This could be described as the self-experience.
- The awareness of being and functioning through interaction with the environment, particularly that composed of significant others becomes elaborated into a concept of self.

### *C. The Need for Positive Regard*

- As the awareness of self emerges the individual develops a need for positive regard. This need is universal in human beings.
- Whether it is an inherent or learned need is irrelevant.
- It is reciprocal, in that when an individual satisfies another's need for positive regard, he necessarily experiences satisfaction for his own need of positive regard.
- It is potent, in that it is associated with enhancing the actualising organism.

#### *D. The Development of the Need for Self-Regard*

- Individual develops a learned need for self regard. Thus the individual can experience positive regard or loss of positive regard independently of transactions with any social other.
- The individuals can become in a sense his own significant other.
- Like positive regard, self-regard, which is experienced in relation to any particular self-experience or group of experiences, is associated with enhancing the actualising organism.

#### *E. The development of Conditions of Worth*

- When self-experiences of the individual are discriminated against by significant others as being more or less worthy of positive regard, then self-regard becomes similarly selective.
- When a self-experience is avoided (or sought) solely because it is less (or more) worthy of self-regard, the individual is said to have acquired a condition of worth.
- If an individual should only ever experience unconditional positive regard, then no conditions of worth would develop.

#### *F. The Development of Incongruence between Self and Experience*

- As the self develops into a recognisable entity, it too has a tendency to actualise, to maintain and enhance itself (self actualisation). But because the self may contain material introjected directly from the evaluation of others, the self may actualise in a different direction to that of the organism.

- Individual awareness tends to be dominated by self-related experience. In other words, the self becomes the focus of attention, through which all experience is processed.
- Experiences which run contrary to the conditions of worth are perceived selectively and distortedly as if in accord with the conditions of worth, or are in part or whole denied to the awareness.
- However psychological tension occurs when the individual behaves in a manner that is not in harmony with its self-structure. This disharmony occurs because of the introjected material usually from significant others, contained within the self-concept. These experiences that are incongruent to the self may not have been symbolised accurately.
- Consequently some experiences now occur in the organism, which are not recognised as self-experiences and are not accurately symbolised, or organised into the self-structure in an accurately symbolised form.
- The more disharmony there is between the self and the organism as a result of introjects, the greater the likelihood of incongruence between self and experience, and a greater chance of psychological tension.

#### *G. The development of Discrepancies in Behaviour*

- When an individual has behaves in a manner that is consistent with their self-concept, the experience is then in harmony, or congruent with its self-structure. These behaviours can enhance, maintain and actualise the self-concept. These behaviours are accurately symbolised.

- As there is incongruence between the self and experience, so incongruence can also occur between two types of behaviour. Behaviours that are consistent with the self-concept mean that the individual is aware of this behaviour. Behaviour that is consistent with the rest of the organism means that the individual may not recognise these behaviours as self-related and therefore may not 'own' them. The individual may perceive these behaviours in a distorted or selective fashion in order to be congruent with the self.

#### *H. The Experience of Threat and the Process of Defence*

- Experiences, which are incongruent with the self, not only may not be symbolised accurately, but they are also experienced as threatening to the integrity of the self. The essential nature of this threat is that if the experience were accurately symbolised in awareness, the self-concept would no longer be a consistent gestalt, the conditions of worth would be violated, and the need for self-regard would be frustrated. The experiences would imply that the self-concept was 'wrong', and since this is the effective centred of the self-structure, the whole of the self would be under threat.
- The process of defence is a reaction, which prevents these events from occurring.
- Threatening experiences are dealt with in two ways. They can fail to come into full awareness (they are denied symbolisation to experience), or the

experiences are changed, distorted so that they remain consistent with the individuals' conditions of worth.

Up to this point the theory of personality applies to every individual in a lesser or greater degree. In the following sections certain processes are described which occur only when certain specified conditions are present.

### *I. The Process of Breakdown and Disorganisation.*

- If there is a large or significant degree of incongruence between the self and experience and if a significant experience demonstrating this incongruence occurs suddenly, or without a high degree of obviousness, then the organisms process of defence cannot operate successfully.
- As a result anxiety is experienced, as the incongruence is perceived. The degree of anxiety is dependent upon the extent of the self-structure which is threatened.
- This experience is accurately symbolised in the persons' awareness, and the gestalt (or whole) of the self-structure is broken. A state of disorganisation results. Such a state of disorganisation creates tension between the concept of self and the experiences which are not accurately symbolised or included in the concept of self, is expressed in a confused regnancy.

In the situations described under G to H a process of integration is possible, a process which moves in the direction of increasing the congruence between the self and experience.

#### *J. The Process of Reintegration*

- In order for the process of defence to be reversed – for a customarily threatening experience to be accurately symbolised in awareness and assimilated into the self-structure certain conditions must exist.
- There must be a decrease in the conditions of worth. There must be an increase in unconditional self-regard.
- The communicated unconditional positive regard of a significant other is one way of achieving these conditions.
- The consequences of the above are that the individual is less likely to encounter threatening experiences; the process of defence is less frequent and its consequences reduced; self and experience is more congruent; self regard is increased; positive regard for others is increased; psychological adjustment is increased; the organismic valuing process becomes increasingly the basis of self-regulating behaviour.

Here we have regarded Rogers postulations in relation to his theory of personality, this theory addresses in some detail the presentation of the person coming for help as incongruent and the process of gaining congruence. I will now be acknowledging what Rogers termed as the theory of the ‘fully functioning person’ in order for understanding to be gained as to what Rogers suggested would be synonymous with



'the end point of optimal psychotherapy'. (Rogers 1959). Although Rogers acknowledges that this theory contains nothing new from what has been covered in his postulations as discussed, he felt it worthwhile to spell out this theoretical concept in its own right.

### **A Theory of the Fully Functioning Person:**

- A. The individual has an inherent tendency towards actualising his organism.
- B. The individual has the capacity and tendency to symbolise experiences accurately in awareness. To keep his self-concept congruent with his experience.
- C. The individual has a need for positive regard.
- D. The individual has a need for positive self-regard.
- E. Tendencies A and B are most fully realised when the individual experiences unconditional positive regard from significant others, and the pervasiveness of this unconditional positive regard is made evident through relationships marked by a complete empathic understanding of the individuals frame of reference.
- F. If the conditions under E are met to a maximum degree, the individual who experiences these conditions will be a fully functioning person. Who will have at least these characteristics:
  - 1. He will be open to his experience
  - 2. All experiences will be available to awareness.
  - 3. All symbolisations will be accurate, as the experiential data will allow.

4. His self-structure will be congruent with his experience.
5. His self-structure will be a fluid gestalt.
6. He will experience himself as the locus of evaluation.
7. He will have no conditions of worth.
8. He will meet each situation with behaviour, which is a unique and creative adaptation to the newness of that moment
9. He will find his organismic valuing a trustworthy guide to the most satisfying behaviours.
10. He will live with others in the maximum possible harmony, because of the rewarding character of reciprocal positive regard.

(Rogers 1959)

## **Appendix 2:**

### **PHOTOGRAPHS AS A REPRESENTATION OF KNOWLEDGE**

#### **Context of the Discussion**

Some readers of my thesis may question the relevance of and why I would include this part in my final thesis. Objectively I can understand the readers possible questioning of inclusion, subjectively I strongly felt that this discussion represents a piece of the research puzzle and enables me as the researcher to, through storytelling critically analyse my own perceptions, thoughts and feelings that will only serve to aid my ability to offer unconditional positive regard to the research process.

Part of my EdD was to engage in a module on Cultures and Contexts and it was through these sessions that I began to realise the importance of space, design, structure and the link with and impact on teaching, individualism, innovation, conformity and students. It's important to note that whilst I was attending these sessions the new university building to replace our old structure was finished and ready to accommodate staff and students. Analysing the spatiality of classrooms, the structural design of buildings made me acknowledge my apprehension regarding the new building and question myself as to why I would feel a sense of trepidation. The rich discussions we had in the classroom with my peers made me realise that if the new learning environment was making me feel this way then how was it going to impact upon the students and their learning?

I ultimately made the decision that if I was going to research learning styles of students, their learning needs and reflective practice, I would need to acknowledge and reflect upon the physical environment that would accommodate the students and act as their learning space for the duration of their studies. As a consequence I have decided to utilise this paper to analyse photographic evidence and reflect upon my perceptions surrounding the new building and now that I have taught in the new space, to reflect upon the impact it has had on me as a lecturer and how it may impact upon the students who attend. In the following sections I shall be referring to specific sets of photographs that I have taken in order for the reader to make the link between theories about my own perceptions and reality. It is important to acknowledge that this is a personal, subjective account and I am not expecting every observer of these images to respond to them in the same manner that I have. As Grosvenor et al (2004, pg.2) suggest, "photography constitutes a site of production and representation, and that a photograph must be read not as an image but as a text and as with any text it is open to a diversity of readings". Peim, (2001) in his paper on 'The history of the present: towards a contemporary phenomenology of the school', discusses the importance of acknowledging that how we perceive 'things' what we call 'them', how we distinguish 'them' from other 'things' determines partly what and how those 'things' are. In relation to the new university build, its definitive identity will/may be ultimately determined by how it is perceived by the people who use it, which may not be the original identity given to it by those who designed it.

## **‘Corporate’- Photographic Evidence Set 1**

“The buildings made the teaching method” (Seaborne 1971. pg1).

“Organisational structures drove teachers into adopting certain instructional strategies that varied little over time. By structure, I refer to the way school space is physically arranged; how content and students are organised into grade levels; how time is allocated to tasks; and how rules govern the behaviour and performance of both adults and students” Cuban (1984).

In discussing Victorian school design and the physicality of the classroom both Seaborne (1971) and Cuban (1984) have highlighted the significant impact that physical structure and architectural design of schools and classrooms has on the teachers individual and unique ability to be innovative in their teaching practice. Seaborne (1971) refers to the structure of the building dictating the teaching styles and methods that the teacher can adopt, whilst Cuban (1984) supports this by way of referring to how the physical structure and the way the schools space is arranged and designed will in effect control not only the students behaviour but the teachers as well. What I am signifying here is that not only does structure/design influence innovation in teachers practice but it could control the behaviour of the teacher and the manner in which teaching occurs. It is possible that structure can lead to conformity, as I have felt within the new building.

To understand the nature of the preceding comment and why I felt this way, I would now like to discuss the context of this particular discussion. At the time of writing this paper I had been an employee of the university for nearly 7 years and during this time I have been witness to the spending of millions pounds on a brand new purpose

built building for the faculty of health. The new build was to replace almost completely the old building that I had been lecturing in for the first two and half years of my career. From the moment that I began to see the new building take shape I felt what could only be described as apprehension towards having to teach in it. On reflection I can see that this was because the structure and colour scheme of the outside of the building was so far removed from what I have experienced of university buildings as a student and what I was used to teaching in that it filled me with dread. The new build towered above the old build; its design was I felt, grey, drab and imposing. Not particularly what I would class as inviting entry. To aid in understanding I would like to refer to the first set of three photographs that I have taken. The first picture shows you the outside of the old building. Not overtly aesthetically pleasing, but the plainness of the outside, the greenery and the flyers on the window I felt ensured that there is an almost unassuming, homely quality to the place that is inviting not intimidating. In relation to the new build, the height, the design/shape and the colour scheme all add to a building that I perceive as imposing, intimidating and lacking in character and originality. Almost how I would imagine corporate office blocks to be, rigid, conformist! Having not felt that the exterior of the building was particularly welcoming or inviting I was left with trepidation as to whether the interior would reflect the exterior. Maybe I was struggling with being wrenched from my comfort zone, but I felt like the design of the building was trying to produce in me, or us as lecturers something that didn't exist, like a new image, corporate, sober, and a sense of conformity to the point of removing any notion of individualism.

## **‘Perceptions’- Photographic Evidence Set 2:**

Rousmaniere (2004, pg.10) on visiting her niece at college, as she is walking around the campus found herself reflecting subjectively about the meaning of educational spaces. From her introspection of looking at educational space she identified the notion that “prior experience creates a kind of double-lens viewing, one that is refracted by memory, emotion and contemporary experience”. Here she is suggesting that our own personal meanings that we attach to educational spaces are based upon our own past experiences of being part of an educational space (perhaps as children studying), and the experiences we are having everyday of educational environments. For myself that would suggest that the meanings I attach to the photographs that I have taken are based upon experiences of child hood, teenage and adult education, linked with my experiences daily of being an educator.

I would now like to refer to the photographs that are in set 2. These two specific photographs are of my old office. You may notice that the size of the office is rather small and cramped but actually accommodates two of us. My office is part of what used to be old nursing student accommodation, so in actual fact my office once was a bedroom. The school building, the landscape of the school, the spaces and places within, the décor, the furnishing and features has been called the third teacher. A beautiful, comfortable safe and inclusive environment has, throughout the history of the school architecture, generally been compromised by more pressing concerns, usually associated with cost and discipline (Edwards et al, 1998). When I view my old office I feel that perhaps more pressing concerns perhaps were given priority over teacher comfort. These rooms were available for accommodating staff as students no

longer stayed in them. My assumptions are that rather than create a new office block to save funds for the new build we were ushered into these cramped quarters.

Two and a half years after I started at the university and the new offices were ready. The school of defence nursing have moved to the new accommodation, as will do the adult nursing department within the next few months. As for the mental health division, we were told at that time that we were to move to the other old campus seven miles away from our base and we would be having floating offices that will remain in the old nurse's accommodation. So even though we have had to cope with the noise and dust pollution for the past two and a half years, mental health will never be able to use the new build, or become an integral part of the new environment. I felt aggrieved.

My theories for this happening concur with Edwards et al (1998) theory of discipline and cost compromising the beauty and comfort of the physical environment, to also include culture as a factor. It felt to me like the mental health team were being ousted in order to preserve the integrity of the faculty of health. Nursing for me is not dissimilar to being in a children's playground, where sub divisions between the different fields of nursing were real for me during my training and in my professional career. I have always felt that mental health has been often perceived as the softer discipline and almost not 'real' nursing. Mental health nurses from a purely observational point of view also in my experience tend to be out spoken, can be perceived as rebels by others, the most likely to be round the back of the bike sheds smoking.



We have to remember that these are personal theories of mine, my view of the world as I see it, if I refer back to Rousmaniere (2004, pg.10) has been refracted by memories, emotions and contemporary experiences none of which you as the reader share with me, so may perceive my theories to be incorrect. But the purpose of this discussion is not to get the answers right or wrong but to explore my own perception. If I now refer back to the two photographs, irrespective of the cramped space, what I see is an office of a homely quality. You can see the tea and coffee on the cabinet, you can see my personal pictures surrounding my computer which I feel will denote to students a person who is a human being and not afraid to show and share her real self. The office also allows for a certain amount of confidentiality to be maintained due to the fact that only two of us share it. This means that students can feel comfortable discussing personal issues and I feel that I can really give students my full attention and allow them to feel like they are important to me. If I were a student I would feel at ease in this office. I suppose the negative aspect of having a 'cosy' office is the reliance I have to have on my ability and confidence to be assertive should the need arise. I have no desk or austere décor to hide behind. I have to rely on myself. But again I would suggest that this means that I can be real with my students. The offices in the new build are to be shared by anything from four to eight lecturers. We are not allowed to hang anything on the walls and there are no tea and coffee making facilities. The composition of the offices means that there is very little privacy. The new offices are in complete contrast to the one that I currently occupy and on reflection I would prefer to stay where I am.

### **Implications of Design on Behaviour- Photographic Evidence Set 3:**

I would now like to refer to the photographic evidence labelled set three. This set of photographs takes the viewer inside the old building and inside the new building. In these photographs I am trying to show the viewer the quite distinctive differences between the corridors of the old build and those of the new build.

The first two photographs show the observer two different corridors in the old building. As you may be able to see, they are fairly narrow. They are painted with standard magnolia and make no attempt to be ostentatious, pleasing to the eye, or something that they are not. These are just corridors. The lack of aesthetically pleasing décor prevents perhaps the student or staff member from loitering. These corridors do not encourage loitering, or social interaction. They encourage movement, flow, almost 'business as usual'. The only time you may stop might be to briefly examine the notice board. However the notice board is almost an idiosyncrasy to a corridor designed to keep the flow of traffic moving. The notice boards are very 'busy' with material, and may require a certain amount of your time to actually search through the chaos to find something relevant to yourself. However when I look at these pictures I am reminded of noise and chatter, bumping into lots of students as I rush from class to class, but managing the odd hurried hello and smile. I am reminded of rushing to class and having difficulty getting down the corridor because of the notice boards being crowded with students, preventing the flow of traffic. But my memories are pleasant, happy, busy, and efficiently friendly. (These photographs were taken during the students' annual leave, but you may be able to imagine them filled with students).

I would now like to refer you to the remaining photographs in this set. What I perceive when I look at them is something that has gone out of its way to be different from the old. The corridors are at least double the width and at the intersections have massive spaces not actually utilised by anything. Down several of the corridors are floor to ceiling windows with long benches for the students to sit and watch the world go by. However having sat on one of those benches, the only view out of the window is of the other side of the grey building. I personally would not sit there for long! The design of the corridors with the width and space encourages a feeling in me of lack of control, a more laid back attitude; less business like which I feel is only compounded by the rather bright ostentatious colour scheme. Colours like greens and purples have been used to highlight different sections of the building along with neon, fluorescent lighting at the entrance to each section. The difference between the old and the new is so striking to me that I feel the university is trying to attract students by almost undermining its old traditionalist attitude and making the inside of the new build look more like a nightclub in a city centre than a university setting. The problem here is that we are almost reframing the students' reality, as out in the hospitals the whole notion of nursing practice is based on a certain amount of conformity. This may ultimately come across as confusing for the students as one moment they are out in clinical placement expected to conform, to be on time, to be professional, to act in a certain manner, to wear a uniform or have a dress code and yet, they come back to university 6 weeks later to a design that to me offers the perception of relax, come and go as you please, and we wonder why students are late into class and do not take lessons seriously. To support my concerns an editorial written in the Journal of Advanced Nursing by Watson (2000) has suggested that there are concerns about

the competence of student nurses since their education has been moved out of the NHS Trusts and into the university setting. The editorial felt that students are ill prepared for life as a qualified nurse and that their clinical ability was lacking because there has had to be a “dumbing down” of their education to fit into the university setting. This may yet be compounded by design and structures of buildings that promote lack of conformity and professionalism.

#### **‘Control / Conformity’ Photographic Evidence Set 4 and 5:**

I now wish to take you inside the classrooms of the old and new building to highlight the difference between the two and I wish to demonstrate the difference between the interiors of the new classrooms with the new corridors.

I would like to refer you to the first photograph in the set. This photograph depicts a typical classroom in the old building. As you may be able to see the room is quite large with plenty of room for movement and lots of light. The design and structure of this classroom allowed me as the lecturer to be quite innovative in my practice. Being able to move around, move the chairs and tables allowed me to use different types of teaching methods and one that I employed a lot was group work. These rooms were large enough to accommodate groups without encroaching on each other’s space. Having this amount of space allowed me to encourage students to move their chairs so they could create their own learning environment. I wanted the students to be able to take some ownership of their own learning and altering their environment to one that was more suitable and unique to the particular group of students, one that I felt

would encourage collaboration with me as the lecturer. They were all adults and I wanted to treat them as such.

I would now like to refer to the other three photographs in the set. These photographs show the two types of classrooms that we have in the new build. One type is very long and narrow and will accommodate up to eighty students and the other type is short and wide and will accommodate around 20 students. The contrast between these classrooms and the old classrooms is quite striking. Although the tables and chairs are not fixed, there is no room to move them so group work becomes almost an impossibility. To me the design of the new classrooms is one that promotes conformity, does not allow the students or staff member to 'own' the space. There is no room for movement and the teaching space is very cramped as you can see from the photograph of the lecturer at the front of the classroom. In these classrooms students and staff are inextricably linked whether you want to be or not. "The work lives of teachers are shared with objects which help configure and define their work and identity, and are part of spatially constituted subcultures. These subcultures are manifested through the material physical environment". McGregor. (2004, pg 349). On viewing these photographs and having now experienced working in the new classrooms, my perception is that the hierarchy are trying to push staff into a way of working that conforms to their perception of how lecturers should be, which does not really allow for innovative practice in the classroom setting. It doesn't really allow for individuality and personality, but really confines us to returning almost to the old style of pure didactic teaching.

It is also important to note that the interior of the new classrooms is so far removed from the corridors of the new build that it is difficult to imagine that they are part of the same design team. It would be interesting to find out how this actually impacts upon the students. From the long, open corridors that promote and encourage a culture of individuality, a more laid back attitude allowing for individuality, they enter cramped, conventional classrooms that almost demand obedience. The messages we are sending them as an institution really are not consistent with one another.

Photographic evidence set 5 keeps us in the classroom but instead of analysing the space I want to discuss the lecturers' equipment. The first photograph shows the equipment that we had to work with in the old building. Here you can see a portable flip chart, portable OHP and a portable power point. You may conclude that this is not the most sophisticated of equipment but from my own experience it did allow for flexibility in teaching practice. I was able to use a combination of teaching styles, in accordance with what I was teaching and the needs of the group that I was teaching. If I now refer to the second two photographs you will see quite a difference in the equipment that we have been provided with. Everything is fixed to the floor. We are unable to alter or move the equipment around. The equipment is not only new but also new technology for the lecturers. We have no OHP or portable power point as the fixed computer serves both functions. We have no flip chart and we were told quite clearly that flip charts would no longer be available to us. The new equipment is kept under lock and key, so before each session we have to go to the resource room and sign the key in and out. Should anything go missing then who had the key last will be held responsible. The design of the new equipment, lectern that the

equipment is situated in, the static microphones and the lack of flip chart paper again dictates to the lecturer how they will and will not lecture to the point of where we will even stand. Again promoting what I feel is a very conformist attitude from the hierarchy. Individuality and uniqueness are much harder to achieve in the new build than in the old build. As McGregor (2004, pg. 349) suggests, “the material technologies of the classroom are inextricably linked with the pedagogic practices that constitute it, and the prevailing view of what counts as knowledge”. My perception is such that those who manage the faculty of health have a particular idea of how lecturers should perform and by controlling our environment they are forcing us into a particular image that they hold of the lecturer.

What is interesting following a period of time after I first wrote this, we now have flip charts back in the classroom, although we have to ask for them and seating is now arranged in sets as for group work whether we like it or not.

## **Conclusion**

“Every teacher knows that the world of the school is a social world. The human beings, who live together in the school, though deeply severed in one sense, nevertheless spin a tangled web of interrelationships; that web and the people in it make up the social world of the school. It is not a wide world, but for those who know it is a world compact with meaning”. (Waller, 1932, preface).

My intention with this discussion was to examine my perceptions of the students learning environment and to utilise photographic evidence as data in producing knowledge about the cultures and contexts of contemporary learning institutions. My

analysis has demonstrated that the social world of the school, the perceptions people hold of their environments is more than just a total sum of the individuals who inhabit that environment, but that the structure and design of the building, the learning and teaching space and the perceptions individuals hold of these add up to the social world of the school. I have often thought that 'structure can lead to conformity', having analysed the photographs and explored my own perceptions I would like to reaffirm this opinion and suggest that the new building and the way it has been designed suggests a uniformity and has inadvertently pushed the staff into a certain way of working, that had there been discussions about such ways of being and working, we may well have been opposed to them.



### Appendix 3:

#### BLOG: REFLECTION: SUCH A BEAUTIFUL NOTION!

Posted by [Nicola Clarke](#)

March 3, 2009

Reflection - "a beautiful notion" may not be how you would describe this term!

Reflect, reflect, reflect, was all I heard from my tutors during the first three years of my nursing degree. I remember telling my friend 'if they ask me to reflect one more time I think I am going to scream'. I could not get my head around what I was being asked to do. Why was it so important that every essay I wrote had to be reflective? As a consequence of my ignorance you can perhaps realise that most of my assignments barely scraped a pass and I was perceived as not the brightest of nursing students.

Then I met my last and final clinical assessor as a pre-registration nursing student, who opened my eyes to the wonderful world of reflection. I was fortunate enough to spend my 4th year in the company of a nurse who could see beyond my inability to pass assignments well and saw a student nurse with a brain who really wanted to learn (honestly!).

Every day after placement we would spend an hour going through the service users we had seen that day. I was asked questions about how I felt in different situations that had presented themselves to me. Not just what was good or bad, but if I was anxious we looked at why I was anxious and where had that anxiety stemmed from.

If I felt confident about something we followed the same process. I was asked about why I had chosen a particular course of action, why was I concerned, where was my evidence for that intervention for that particular patient? What could I take away from today that would help me in the future, but importantly what had I learned about myself? During the course of my last year I grew in confidence as a practitioner and as a person. My assignments went from low level passes to A grades.

The difference between my attempts at reflecting on my own for assignments and my reflections with my clinical assessor was remarkable. I now realise that what my assessor was helping me to do was reflect 'on action', a retrospective contemplation of practice undertaken in order to uncover the knowledge used in a particular situation, by analysing and interpreting the information recalled, [Schon \(1983\)](#). But not only that my assessor was offering me 'guided' reflection. [Johns \(2000\)](#), acknowledges that there are limits to reflecting alone and that guided reflection with a second person can allow the reflective process to become more meaningful. Students and practitioners often bring situations of emotional disturbance, grounded in such feelings as guilt, anger, anxiety, distress, conflict and inadequacy to guided reflection. The guide is there to help the student/practitioner to find meaning to the event, in order to understand and learn through and from it. As a consequence I matured and developed as a human being. I got to know myself better and became a healthier and more productive practitioner.

[Burns and Bulman \(2000\)](#) suggest self-awareness is the foundation skill upon which reflective practice is built. I am not suggesting that final year taught me everything I

needed to know about myself to be the perfect practitioner or human being, but what it did do was open my eyes to the wonderful world of reflection and raise my self-awareness to a point that I no longer stumbled through life hitting the same road blocks over and over again. I still run into things every now and again but never the same thing twice!

I am not sure that self-awareness is something that we can teach our students but I do feel that our job as tutors and as clinical assessors is to offer the students the time and process that I was offered to help the student get to know themselves better and develop into good/healthy nurses.

I urge students to not shy away from reflection and to demand more from your personal tutors and clinical assessors.

I would enjoy hearing your thoughts on this.

### [Mental Health Nursing](#)

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### **Comments**

Comment by ..... on March 5, 2009 @ [12:27 pm](#)

Reflection is all about looking at a past situation and learning lessons from it and whilst we give this the term 'reflection', realistically it is a normal facet of being an

adult. Unfortunately though, we as adults and nurses prefer to stick with routine and so avoid any deviation from the norm.

Reflection is common sense. But the problem with common sense is that it is not common.

Comment by ..... on March 9, 2009 @ [2:33 pm](#)

A very interesting and useful article Nicola.

I very much agree that we should be given more time, or some time allocated, to reflect on our time in placement and discuss any problems and issues, we did so once in our 2nd year; the unfortunate lack of time, which i struggle with my personal tutor, he doesn't give the time for reflection. All well and good writing reflection pieces whilst on placement if you cannot share your feelings.

Comment by **Nicola Clarke** on March 10, 2009 @ [9:14 am](#)

Yes I can understand your predicament. Maybe you could utilise your clinical assessors more in the reflective process, especially if they are willing to take the time out to guide your learning. Another option that has been discussed in the literature is reflection with your peers. Getting together as a group should anyone be willing and reflecting on your experiences and guiding each other might also be useful. Perhaps there may be a lecturer around who may help you with this process!!

Comment by ..... on March 11, 2009 @ [11:22 am](#)

Although i feel that as a student if you feel you need help to enhance your reflection skills that should be made available, I also feel that on the other side are the students

who are competent enough to, as ..... says 'use common sense'. It is often these students who reflect well and do not need to explain the whole process of how they did it. It can be very frustrating to enter lectures where you are belittled and made to feel stupid, because you do not know the differences between the different models of reflection, or you have missed one of the minor questions the model requires you to answer. Straight away the student feels outcaste from the learning process.

These models should be more of a guide/tool rather than the be all and end all of reflecting, as let's be honest how many of us in practise, reflect in action thinking to ourselves, 'now let me see have I thought about everything John's model requires' It just doesn't happen and to made to feel like these models are the law, it deters the student from reflecting, as they think they have to use these models, and as they don't know them, they simply do not reflect, they feel like they won't be able to do it properly so why do it at all!

Rather than testing us on how well we can identify and use a model surely the emphasis should be on whether you can reflect effectively, learn from it and make changes.

Comment by **Nicola Clarke** on March 12, 2009 @ [8:15 am](#)

I think you make a very good point. From my research into this area the students seem to be getting more from their reflection when it is done in a more natural manner rather than always for the purpose of assignments. However, if the

assignment is well thought through then it can be a very useful learning tool for the student.

Comment by ..... on August 25, 2009 @ [12:57 pm](#)

As I prepare to settle into the three year process of seeing a new group of personal students through their mental health nursing course this post and comments really resonates with me and my experience of trying to support students in developing their reflective skills.

Often the required written reflections submitted with the 'end of placement' document barely compare to the depth, richness and sophistication of analysis students reveal as I question them further face to face about their experience upon which they have chosen to reflect. The process we engage in, should time allow, seems to open their thinking far more than a solitary reflection did, so reflecting 'with' someone is invaluable as a learning process.

As time and experience progress, usually confidence in expressing their own thoughts and feelings grow, reflective skills show a dramatic improvement. I suspect without the these conversations (either with me with someone on placement) and/or supporting the student in the frequent admission of the personal discomfort about revealing 'oneself' and fear of judgement in doing so, then reflection remains a chore or an impoverished experience, reducing the personal and practice growth.

I am happy to say that I never cease to be amazed and impressed by the ability and humanity of people who struggle with issues and succeed in finding their 'moral compass' on an issue as a result of reflection.

Appendix 4:

REFLECTIONS REGARDING STAFF FOCUS GROUP

why

**Pre-Action**

Can't wait to get this over and done with. Really anxious, I think I am wasting their time. They may see this as a trivial pursuit. They make not take me seriously, why should they. What if they have nothing to say, are they taking part this just to make me happy or because they feel they have to?

→ need to look at this where is my anxiety coming from?

why would they not take me seriously

I hope some good stuff comes out. If I can forget my anxiety and facilitate ok then hopefully there should be stuff to work with.

could members of our team really hear nothing to say?

**On-Action**

I found it very difficult not to contribute. I felt myself wanting to take part. Maybe I should have done. Observations, staff veered from the question. Often took them some time to get to the point of what they wanted to say. There was a tendency to go off at tangents. Very interesting discussions and interesting to hear the differences in view points and understanding.

Could have gone on with the discussion for longer.

→ why did I stop myself contributing? what did I think would happen?

Once we got started my anxieties and pre-judgements faded, it seemed that the staff genuinely wanted to discuss the issues I was asking them about.

I had to deviate from some of the questions laid out and I had to use different ways of phrasing and asking questions to keep the group on track. There was lots that I wanted to say and discuss but felt I could not as the researcher. I didn't want to inhibit their response or influence their responses; I did really find myself wanting to take part. Maybe if I had I could have analysed their responses and whether I did influence the discussion.

→ feeling of inadequacy  
→ maturity

## **Appendix 5 a**

### **FOCUS GROUP QUESTIONS – PRE-REG STUDENT PARTICIPANTS**

#### **Opening Questions:**

3. Tell me who you are and if you don't mind what you most enjoy doing when you are not at university?
4. What do you most enjoy about being a student nurse and what do you least enjoy?

#### **Introductory Questions:**

1. What is the first thing that comes to mind when I say Learn?
2. What is the first thing that comes to mind when you hear the terms reflection and reflective practice?

#### **Transition Questions:**

5. What is your understanding of reflection and reflective practice?
6. Are there different ways in which to reflect?
7. Is reflection helpful to you as a student nurse?
8. How important is it to be an effective reflective practitioner?



**Key Questions:**

5. When and how do you learn reflection at the University?
6. What is your opinion of the way in which reflection has so far been taught to you here at the University?
7. Do you feel that the way in which reflection is taught here at the University meets your learning needs?
8. Please discuss what you require as a student from the teaching staff here at the University that will help you to become an effective reflective practitioner. Please make a list of your requirements / needs?
  - 4a) what do you feel is the most important requirement?
9. Can you please discuss the skills you feel are required in order to reflect effectively then make a list of these skills?
  - 5a) which do you feel is the most important Skill?

**Ending Questions:**

1. All things considered if you had the chance to influence the way in which you are taught reflection here at the University what if any, changes would you make?
2. Me to summarise. "How well have I captured what you have said here"?
3. Me to go over the purpose of the research, then ask, "Is there anything we should have discussed or mentioned that we didn't."

## **Appendix 5 b**

### **FOCUS GROUP QUESTIONS: POST-REG STUDENT PARTICIPANTS**

#### **Opening Questions:**

1. Tell me who you are and if you don't mind what you most enjoy doing when you are not at university or working?
2. What do you most enjoy about being a nurse and what do you least enjoy?

#### **Introductory Questions:**

1. What is the first thing that comes to mind when I say Learn?
2. What is the first thing that comes to mind when you hear the terms reflection and reflective practice?

#### **Transition Questions:**

1. What is your understanding of reflection and reflective practice?
2. Are there different ways in which to reflect?
3. Is reflection helpful to you as a qualified nurse?
4. How important is it to be an effective reflective practitioner?

### **Key Questions:**

1. When and how did you learn the art of reflection?
2. What is your opinion of the way in which reflection is taught to you as a student nurse?
3. Do you feel that the way in which reflection was taught to you met your actual learning needs?
  - 3 a) Did any of what you were taught in your training about reflection help you when you qualified?
  - 3 b) When do you feel you learnt the most about reflection, pre or post qualification?
4. If you were a pre-registration student now please discuss what you think you might require from the teaching staff here that would help you to become an effective reflective practitioner. Please make a list of your requirements / needs?
  - 4a) what do you feel is the most important requirement?
5. Can you please discuss the skills you feel are required in order to reflect effectively then make a list of these skills?
  - 5a) which do you feel is the most important Skill?

### **Ending Questions:**

1. All things considered if you had the chance to influence the way in which you were taught reflection what if any, changes would you make?
2. Me to summarise. "How well have I captured what you have said here"?
3. Me to go over the purpose of the research, then ask, "Is there anything we should have discussed or mentioned that we didn't."

## **Appendix 5c**

### **FOCUS GROUP QUESTIONS STAFF**

#### **Opening Questions:**

1. Tell me who you are and if you don't mind what you most enjoy doing when you are not teaching
2. What do you most enjoy about your job as a lecturer and what do you least enjoy?

#### **Introductory Questions:**

1. What is the first thing that comes to mind when I say Teach?
2. What is the first thing that comes to mind when you hear the terms reflection and reflective practice?

#### **Transition Questions:**

1. What is your understanding of reflection and reflective practice?
2. Are there different ways in which to reflect?
3. Is reflection helpful to you personally?
4. How important is it to be an effective reflective practitioner?

**Key Questions:**

1. When and how do you teach reflection at the University?
2. What do you feel impacts or affects you're teaching of reflection at the University?
3. Do you feel the students understand what reflection is and the importance of it?
4. Can you please discuss the skills required in order to reflect effectively then make a list of these skills.
  - 4a) which do you feel is the most important Skill?
5. Please discuss what you require as a lecturer in order to help your students to become effective reflective practitioners. Please make a list of your requirements / needs?
  - 5a) what do you feel is the most important requirement?

**Ending Questions:**

1. All things considered if you had the chance to influence the teaching of reflection here at the University what if any, changes would you make?
2. Me to summarise. "How well have I captured what you have said here"?
3. Me to go over the purpose of the research, then ask, "Is there anything we should have discussed or mentioned that we didn't."

## **Appendix 6:**

### **Understanding the Data: Focus group with 2<sup>nd</sup> Year Pre-Registration Mental Health Nursing Students**

#### **Stage one**

Stage one of the process focused upon immersing myself in the discussion by listening to the taped focus groups and reading and re-reading the transcripts of the sessions. Stage one is where the focus is on the literal reading to gain a sense of the whole, listening to the tapes enhanced the sense of the whole and allowed me to reflect in greater depth on the actual sessions. Here I was offering the raw material unconditional positive regard. Accepting it for what it was telling me, meeting the data as an equal.

#### **Stages Two and Three:**

Stages two and three then required me to discriminate units from the participant's description of the phenomenon being studied and to articulate the psychological insight in each of the meaning units. I have termed these units, underlying themes. Stages two and three are where I as researcher am attempting to be empathic with the raw material. I am attempting to understand what the material is saying to me so that I may present this as a theme.

Data understanding starts from the 2<sup>nd</sup> of the students' introductory questions, as these questions are deemed as pertinent to the research enquiry.

The data in italic and bold is where I as the researcher have used empathic skills of paraphrasing, summarising, clarifying and asking open questions to check my

understanding and to enable the participants to correct my understanding and to explore the discussion in more depth.

**Instinctual reaction on hearing the terms reflection and reflective practice**

<b>STAGE 1: Literal Reading / Own Words</b>	<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>
<p>Just every time we finish placement we have to think of something to write about!</p> <p>Writing down our experiences</p> <p>I had, on my last placement, everything I had to do was reflect, reflect, reflect; so a lot of those work observations but I haven't been taught it very well. what I do and encouraging it and questioning...</p>	<p>Writing at the end placements.</p> <p>Observations on placements and reflecting.</p> <p>Poor teaching of reflection.</p> <p>Questioning of personal actions.</p> <p>Constant reflection in relation to placements.</p>

**Internal perception of the terms reflection and reflective practice**

<b>STAGE 1: Literal Reading / Own Words</b>	<b>STAGES 2 and 3 Discrimination of Units / Transporting the Contents-underlying themes</b>
<p>My understanding of reflection is to look back at what you have done in the past...negative, positive and what can be learnt from it...</p> <p>Yeah I think it's like a structured diary of some particular thing, so I would write it like I would write a diary and write exactly how I felt at the time.</p> <p>but also write it down as soon as you can, straight after the incident because I've had to do that and leave it and forget what's happened...analysing the good and the bad.</p>	<p>Looking back on good and bad experiences and analysing them in order to learn from the experience.</p> <p>Writing down experiences as they have happened in the form of a diary.</p>



## Ways in which to reflect

STAGE 1: Literal Reading / Own Words	STAGES 2 and 3: Discrimination of Units /Transporting the Contents-underlying themes
<p>Yes...reflection in practice and reflection... after it has happened Gibbs, Cole...</p> <p><b><i>And is it about writing or, if you were asked to reflect on something would you talk it through with somebody or would you write it down?</i></b></p> <p>I would just write it down, as in the cycle, because they're all really structured, how did you feel at this point, what did you do at this point so it's really structured and tells you what to write. I think it's a lot more easier...really because you almost explore every angle of how you felt and why you did what you did and what you could have done better and you could also have the other person ask questions as well to get into</p> <p><b><i>... So, you can reflect in writing by yourself and you can reflect with somebody else by telling them your experiences. If you were reflecting in practice or on practice, how would you do that? Would you talk that through with your mentors at the time of you doing it?</i></b></p> <p>Yeah...reflecting in practice and on practice...members of the group is good. However, it is good writing it down so that...but when it is documented it can go...but the only side effect of it is when you reflect by talking...but when you're writing down you are limited because...the grammar and all those ambiguous areas...</p>	<p>Use of reflective cycles Reflecting on and in action. Reflecting with someone else, reflecting with someone independent to the situation. Writing it down, but there are limitations, but other people can learn from written reflection. Reflecting with a group.</p>

<p><b>Ok. So, you're actually saying as well though that you do actually document your reflection, somebody else could learn from your reflection as well.</b></p> <p>Yes.</p> <p><b>So somebody else could learn from your experiences so we're thinking about writing down reflection on your own, documenting reflection, sharing with others, talking it through with somebody else. Who would that other person be, if you're going to talk through your reflections?</b></p> <p>I'd talk about it to someone outside the situation because then they can give you outside ideas</p> <p>Because on my last placement there was the whole idea of pre-group and then after-group and the after-group was structured ten/fifteen minutes depending on the group and that was a reflection. It was like everyone bringing, because we all could have a different idea of what happened today so everyone has a different idea of what happened in that situation and then, obviously there are different levels of qualifications</p>	
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**Is reflection helpful to you as a student nurse?**

<p><b>STAGE 1: Literal Reading / Own Words</b></p>	<p><b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b></p>
<p>Yes, yes.</p> <p>I think it's quite a private, it's quite a private thing and it's your very own experience and you can't say that feels wrong...it's just human, being in touch with what you do but you also get the chance to put it in detail, ask how and why such and such happened, so it's a good way of analysing how you are as a</p>	<p>Yes.</p> <p>Personal / intrinsic.</p> <p>Enables analysis of the person in order to gain self-awareness.</p> <p>Allows the offloading of</p>

<p>person and how you deal with situations, so learning about yourself in the process.</p> <p>Like I said in my last placement it was always about reflecting in that grouping and there'd be sometimes where you'd have a situation and we weren't allowed one-to-ones with them but you had groups of them so you had people in the group that were the residents as well and the couple of incidents that I've had, situations that I didn't know what on earth was happening...so I would have very emotional upheaval so unless I, I'd of gone home with that all weekend I would have...but if you can offload and reflect on what's happened with somebody that's been there or understands it then, Oh yeah I am a human being after all".</p> <p>and also to understand lots of things, you better yourself...you do have feelings and the residents have feelings, the residents have feelings.</p> <p>I was also going to add to that as well that having worked in a really stressful situation as a student coming in I think that we're all in an advantage that if there was an incident on the ward or wherever you are and then you get everybody's viewpoints and people that are dealing with all that stress at the time, we kind of are outside and can bring something in that they've missed...</p> <p>I think it's really important. I don't realise certain things about myself at all until I write them down. I don't like to just share my feelings when I'm around other people who I've just met on placement; I find it a little bit uncomfortable but when I'm writing it down obviously I'm on my own and it all just comes out and then afterwards I read it and I think oh yeah that is me, I should really not be like that or I should be like that and I'm glad that I did do it that way. So, I think it's really good to build your self-awareness.</p>	<p>stressful situations and experiences.</p> <p>Better yourself.</p> <p>Reflective writing is good for those who do not like to talk about how they feel.</p>
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**When and how do the students learn reflective practice at the university?**

<p><b>STAGE 1: Literal Reading / Own Words</b></p>	<p><b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b></p>
<p>We have a module on it every year.  that's questionable because there's a couple of colleagues,  I can't remember who it was now but they challenged the  lecturers and said, "We're mental health students and we  do things differently and you're teaching it in an Adult  (<i>Nursing</i>) setting" and we have some feedback that is  related to our mental health practice and they've actually  gone completely ballistic at us.  But they haven't taught us how to develop...  Yeah, I think it was not clear but that was the idea...like you  do something in practice...  No, they don't make it clear enough.  and the lectures are very much boring and you just don't,  you're just sat there and they're telling you a load of  information and you just don't know when to put it.</p> <p><b><i>And, in theory, the module suggests that it teaches you  how to reflect at the other level but what you're saying  is, in actual fact, it doesn't teach you how to reflect at  the level that they want.</i></b></p> <p>It's not aimed; it's not relevant to us  It's always relevant to Adult Branch  And I said that and they weren't happy  If I could sum up, my personal way of summing up PPD  because I haven't been to all of the lectures but everyone  else...predominantly Adult based and they do know that  there's different branches so we're always trying to say that  to them but predominantly Adult, generally Military-based,  we've had two military operations and we've come out of</p>	<p>Through the different modules  each year.  Formal teaching in the PPD  module.  The teaching is not clear.  The teaching of reflection is  biased towards the adult  branch.  Information overload becomes  boring.  Students not taught how to  apply the information about  reflection at different levels.  Students feel they don't want  to attend the lectures in  relation to the PPD module.  Not getting the information  they need from the lectures.  Some students reflect with  their personal students, but not  all students' experiences this.  Personal tutor lottery.  Reflecting informally with each  other.  Indirectly throughout other  modules where the students  are challenged on their ideas  and beliefs, involving them in  the learning process.</p>

that lecture each time saying, "Well, we're not going to come next week because none of us have got a clue what on earth, how to reflect, we've got an assignment that we've got to do and I've gone and read books, but from the lectures...

**Ok. So, where else besides PDP do you reflect?**

My personal tutor

Well, mine told me to put more references in...if there was a point in there that I wanted to think about a bit more then to just read up on it.

And my personal tutor goes through my reflections with me, like the reflections from the IPL events but you have to do it in your portfolio and she goes through them and says, "Well, what do you mean by that?" and just clarifying it so it goes over it again in my mind.

sometimes you can share what you have done...

**Does everybody's personal tutor reflect with them?**

No

**So, that's not a formal thing. So, PPD is the formal thing, personal tutor depends upon what personal tutor you've got.**

And we've got each other, haven't we because we offload on each other all the time.

little bit confusing, just as my colleagues have said because the first one we did, we understood it much more than the second one we did because the second year, to me, I was taught that reflection was looking back...negative actions and positive actions, if you have done it positively...the bad

part is...I realised this practice is bad from my mentor, from the books I have read from...to improve my competencies...I don't need to measure the negative aspects of it which, to me personally, I don't agree with.

you can't always reflect on the good things, you know, you have to be able to reflect on the bad things as well.

I was just going to say any good situation that we write about, everything's got negatives, like you can always say, "I should have done this better, I could've done that better", no matter, nothings perfect, you can always say...

I suppose if they're bringing in the negatives, because what happened to me was I'd said there was a potential...and because my mentor was right by me when I brought that up and she went, "Ooh" and jumped on me like a ton of bricks but to learn from that and realise that yes you have made an error and you won't do it again. Yeah, it's negative but you know you've just got to be careful.

***So besides the PPD and besides some of you through your personal tutors and getting some support with your reflection which would be classed as guidance reflection are you taught about reflection in any other module? Is there any other way that you learn reflection from this university?***

I think in different modules you have different lecturers that, sort of, indirectly make you reflect anyway. It's part of the way they teach and certain things like certain modules they challenge you to reflect yourself as well because it's just a better way of understanding how you are really and how you interact and stuff.

A good example is the rehab module that we did at the start of our second year, it was always like, "Why are you doing that, why are you doing that?" It was like, "Why are you doing something like that? Are you sure that's what you

should be doing? And it makes you think “Oh yeah, should I be doing that?”

And I think that gives you so much of a greater understanding of how and why you do things and especially how you make other people feel when you’re talking to them as well because you get a feel of how to react and how they respond back to you.

If I had personal development lectures taught that way we’d all understand it more because they have it all very research-based and it’s all really up in the air whereas when it’s taught in the other modules they put it to real life situations and we can understand it a lot more. It’s in effect ‘dumbed-down’ so that we can understand it a lot more.

think it’s taught in a way whereby they challenge us... Yeah, it’s more involved.

it makes you think whereas the PPD one is more like timeless...they don’t ask us, they don’t challenge us...

Yeah, they don’t involve us. T

they expect us to do it the way they want.

***So, what I’m trying to grasp is if we have four more teaching reflection and PPD some of you get support and guided reflection via your personal tutor but that’s not standard across the board and some of you, well all of you, in some of the mental health modules that you’ve had, and perhaps are going to have and the ones you’ve definitely had, have actually had almost like reflection underpinning the philosophy of the module but it’s not been a formal “This is reflection”, it’s more like being, it’s just taken as a fact that this is what you’re going to do in this module and you’ll be thinking about what you’re doing. So it’s actually about the way the module’s taught that’s actually enhanced your ability to reflect.***

**Internal frame of reference on the way in which reflection has been taught to the participants so far.**

<b>STAGE 1: Literal Reading / Own Words</b>	<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>
<p>I think it's just coincidence that mental health branch is the actual mental health modules...lectures are challenging us as students and human beings; that sounds really bad but talking to Adult branch people as well but we've all come out the other side with the research and with the evidence but how you actually do it and how you actually, the more questions you ask you still come out...</p> <p>It's not very accessible.</p> <p>It's not interesting</p> <p>Not clear</p> <p>They don't involve students in it; they just tell you what you should be doing. They don't say "How do you feel about that"?</p> <p>And it's almost like a teacher thing, it's about, you're at school, we're the teachers, we know best and you're just going to learn from us, you're going to sit down and be good and just learn from that and I'm sorry but people don't learn that way.</p> <p>I think they've had a lot of stress as well because I remember the first few lectures, most of the lectures, we've had a lot of stress in setting up this website, this is how the website works and then you get home and you can't access it; I felt so sorry for her but you couldn't actually get to where you wanted to get and I think because of the stress of setting up this new MOODLE site everything else fell by the wayside.</p> <p>Boring.</p>	<p>Not accessible or interesting.</p> <p>Lack of student involvement.</p> <p>Role of the teacher is hierarchical, don't question.</p> <p>Lack of understanding of how the students learn.</p> <p>Lecturers poor performance due to stress.</p> <p>Boring.</p> <p>Rubbish / dreadful.</p> <p>Some personal tutors understand the students more so are able to enhance reflection.</p> <p>Some personal tutors offer their students no more than a few minutes of their time.</p> <p>More personalised and humanistic approach to reflection when threaded throughout the mental health modules, less intimidating for the student.</p> <p>PPD module does not cater for mental health students, the groups are too large and taught by staff who do not connect with mental health students.</p>



Not clear.

Not useful.

Rubbish.

Dreadful.

I think it is just the way it is presented...get the students more involved.

***So, for those of you who had, I suppose, an informal teaching of reflection via your personal tutors, what do you think of that?***

That's really useful because it goes; it's normally a while after you've written an assignment so it refreshes it in your mind and makes you think, "Oh, did I mean that?"

I think personal tutors have more of an understanding of how you're like as a person so they question it in a way that you understand it, it depends how well your personal tutor knows you but they will just make you sort of see it much more clearly and making it less complex.

I just get a couple of minutes if I'm lucky and that's it.

I think it's because it's a one-to-one situation and that's why...

***And what do we think about the way it's threaded into some of the mental health modules that you've actually had?***

It's just more humanistic because I think with the PPD everybody, well the majority of people in there have felt like school kids and they felt really naughty we haven't understood and 'got it' but we come into your lectures or someone in our mental health side or every other lecture and it's like you feel like a human being, you feel like, "I am an adult, I am a student, no matter what age I am".

I don't feel ashamed about asking if I don't understand.

Exactly and also I think its quite a big difference that all

<p>the PPD lectures that we've had they're all with the Adult students and the Military students and their big lectures, whereas all of our mental health ones and all the other lectures they're all smaller groups.</p> <p><b>Ok, so it's more personalised</b></p> <p>Yeah so you don't feel so stupid about putting your hand up and saying "I don't understand" because you've only got twenty people there.</p>	
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**Meeting the learning needs of the participants?**

<b>STAGE 1: Literal Reading / Own Words</b>	<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>
<p>No.</p> <p>It should be taught in smaller groups.</p> <p><b><i>is that teaching in such big groups in regards to reflection doesn't meet the learning needs of you, that it actually needs to be on a more personalised level where you don't feel silly to put your hand up; that's what you're saying, isn't it?</i></b></p> <p>Yes.</p> <p>I think all the other lectures are in a small group so when you go to a big group its so often very much out of reach and you feel so much alienated because you're surrounded by so many people and you feel that if you put your hand up to ask I'm going to be seen as the stupid one.</p> <p>I suppose the Adult groups are used to that because all their lectures are with a lot of people so they are</p>	<p>No.</p> <p>Groups too large, to learn reflection.</p> <p>Feelings of alienation.</p> <p>The large group lectures in the first year are attended because students feel obliged to go.</p> <p>Meeting with personal tutors who go through the students' reflection of placement is very useful and meets learning needs, but this does not happen often enough.</p>

probably used to that, whereas our lectures...are they not?

No because I've spoken to my colleagues in the Adult Branch and they feel exactly the same as us that when they get into their groups they still, I don't know I feel like I've got to go, I have to go but I feel guilty if I do go or I don't go because I'm supposed to learn something and I haven't learned anything so I don't want to go next week but I feel obliged to go.

***And we are saying that in relation to reflection; that bigger groups don't work?***

Yeah.

***So, for those of you who get it via your personal tutors, do you feel that that meets your needs?***

Yeah.

it's not that often...the one I have with my personal tutor is if I come back from placement she asks me...I give it to her and she reads through it and asks questions

Yes, yes, because if there's any mistakes she corrects me.

The only bad thing about that is the fact that it is only when you have another placement meeting or the end of your meeting so you only see them two or three times a year to do that.

***Ok. So that small bit you get off them, which is not on a regular basis, meets your learning needs but are we saying that what would meet your learning needs more is if it was more regular?***

## Student requirements from lecturers to become effective reflective practitioners

<b>STAGE 1: Literal Reading / Own Words</b>	<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>
<p>On placement you get your diary and, like I said, my placement were more into reflection so I was talking with one of the other students who travels an enormous distance from Sheffield and he does a reflective diary and has three visits of supervision from a supervisor at the university and then he also has three supervisory, I think, I think it's three a month, he gets regular visits anyway with his supervisor, with the...and mentor placement and he just keeps this reflective diary and I looked at that and thought how fantastic would that be for us because none of our personal tutors come and visit us at placement; I'm speaking for myself, I'm not sure about anyone else and you do get regular one-to-one's then and then they'll talk to your team and talk to you and get a whole load of feedback and then the stuff that bogs them down, I think it bogs you down with stuff that you can't always use, it's not always relevant and then you get your assignment. My mentor was saying well it's all NVQ-based and that's gone to the wayside now and there's a lot of stuff that isn't relevant and I just thought a reflective diary...</p> <p>Is a reflective diary something where every day you would reflect on an event that happened that day?</p> <p>It could be all kinds of events. He's not...the student and there's a group, there's about two or three different, there's psycho-drama, art therapy and something else and he'll have those three groups within the week so he'll do a diary of that event or he'll attend the other groups within the things as well.</p> <p>I personally would want one-to-one supervision on a</p>	<p>Use of a reflective diary that is gone through on a regular basis with personal tutors and mentors in the clinical area.</p> <p>Regular group meetings</p> <p>Personal tutors visiting students in placement, meeting with the mentors as well so three way reflective meetings.</p> <p>Smaller teaching groups.</p> <p>Less regiment in the lectures and more room for fun and individuality.</p> <p>Less criticism on reflective essays and more encouragement as the students find this demoralising on reflective essays.</p> <p>Small word limits on reflective assignments are not helpful.</p> <p>More clarity on what staff are looking for when marking reflective essays especially in relation to the PPD assignment.</p> <p>Students are confused.</p> <p>Teaching of reflection needs to be clearer, what is a good reflective essay and how do students write a reflective piece.</p>

regular basis with my personal tutor.

***So, actually having, what you need from us is somebody who, from your personal tutor perspective, to see you on a much more regular basis and go through your reflective journal with you?***

Yeah, that would be really good on placement is if your personal tutor came to you on placement and sit with your mentor as well and then they can talk about how you've been doing on placement, rather than me saying "Yeah, I've done this", someone there is saying, "Actually they did this".

***So, more regular meetings with your personal tutor, not just on placement, but more regular meetings all the time, feeling more supported, somebody who actually will purposefully come and spend time going through your reflective diary with you and what you're saying is there's also then with regards to specifically to placement your personal tutor seeing you more often with your mentor; to almost have a mini-group reflection because it's about you and how you're getting on.***

Because at the minute I know...the personal tutor has to come and see you once a year on placement; I don't think that's enough.

But I also suppose in an ideal world, I mean we get three interviews on our placement with our mentor and I would guess that in an ideal world you'd have three separate visits from your tutor because my mentor on the last day said, "I've got to write this in your document. I don't like ticking the boxes", he said, "I don't want to tick your boxes, I want to talk to somebody about you and how

Students feel that just because they are taught reflective cycles that they should now know how to write reflectively.

The teaching of reflection should be less theory based.

you've got on."

Smaller teaching groups

And for the lecturers to stop being so regimental; just chill out and make it more fun!

Yeah and write more encouragement from reflective essays because I feel like I've ripped out all what I was doing and for it just to be ripped to shreds, as if it wasn't a valuable...I just felt demoralised.

***Ok, so more appropriate feedback with regards to reflective essays, even if you end up failing the essay. You want more supported feedback when it comes to writing reflective essays.***

Yeah. I think they seem to forget that they're meant to be writing about how we've reflected, not what we've reflected on and whether we did good or not.

because now a lot of people are confused, I am a bit too...because like what I've said, when we talk about reflection we reflect on different type of things, positive and negative writing and even though you can relate...this is what I have done which is bad and he realises that what he has done, it's not quite good enough and in the essay ...though I realise this thing is wrong, you know how to correct it, this is what I've done, this is what I've done and this is the result of it...this is what it is. So, based on this one when next I am practising I am going to lose it because...

I think if you make yourselves available.

The formal assignments that they have to do every year for this module, I think it's really silly how they put a word limit on it because when I'm writing a reflective assignment I'm not thinking about a word limit, I'm writing down how I'm feeling. That shouldn't have a word limit.

I think they should have a minimum word limit but I don't

think there should be a maximum or something  
But as long as people don't write 100 words...  
...but then if that's how they, but no-one's going to write a  
ridiculous amount of words,  
because my reflective assignments go down in how good  
they are because I'm thinking I need to add this extra bit  
in there but I can't because it's not long enough but then if  
that's all I've felt and everything, how can I make it  
longer?  
I find that I don't get to reflect like I would want to and I  
just feel like I've only just touched upon it.

***are we saying that the word limit can hinder you?***

Yeah, because you're always thinking I need to get it to  
the word limit so you lengthen it out a little bit and a  
reflective assignment is how you should be feeling so I  
just want to sit and write. I don't want to have to think I  
need to write until I get to that point.

But...actually do it because we weren't actually told, like  
you do in your assignments, in our mental health lectures,  
"This is the assignment, this is how you do it, this is how I  
want it structured". So guidelines that we can follow to  
mirror the fact that if we follow that, that's fine but we  
didn't get that in PPD or the lectures.

***So, what you need from us is more structured  
guidance and what about the teaching about what  
reflection is?***

I didn't really feel there was any teaching.

No.

But we don't know how to actually do a reflection piece.

We've probably got different views and opinions on that.

There wasn't clear teaching.

***Ok, so there's no clear standardised teaching of actually how to write a reflective piece.***

I think because they give us the reflective cycles they think we should just therefore automatically know how to do it.

We weren't allowed to use certain, because I wanted to use, my personal tutor had advised me to use Gibbs and you're not allowed to use that except in the first year.

Yeah that's one thing; nobody still knows why you can't use Gibson's in the 2<sup>nd</sup> year and they never explained. Ok, they explained the fact that you're in level five and not level four because you're 2<sup>nd</sup> year but they didn't say how to do it.

***So we've looked at some things that you require from us; one is smaller groups, the way it is taught needs to be much clearer so you have a much clearer understanding of actually how to write a reflective essay, more time with personal tutors to possibly go through reflective diaries and more personal tutors on placement perhaps with mentors and really a much clearer and we're talking different styles of teaching as well so it's taught in a way that's more understandable and more appropriate to what reflection is, which is actually a personable humanistic thing.***

It should be taught less theory-based.



**Students Perception of the Skills required in order to be an effective reflective practitioner**

<p><b>STAGE 1: Literal Reading / Own Words</b></p>	<p><b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b></p>
<p><b>Ok, so what I want you to think about now is what skills do you think you need in order to be an effective reflective practitioner? Think ahead and think well I'm really good at being an effective reflective practitioner; what skills do I need.</b></p> <p>Self-awareness. Good written and verbal communication skills. Ability to control your emotions. Being able to actually make improvements next time, like after reflection and coming out of it knowing what you're going to do differently the next time because there's no point reflecting if it's not going to change something...</p> <p><b>So what kind of skill would you say that is?</b></p> <p>You need to be able to positively criticise yourself because...</p> <p><b>Is that confidence skills then?</b></p> <p>...yeah because some people when they criticise themselves its like, "I can't do that" instead of saying that you should be able to say I'll do it better next time. You need to be able to do that.</p> <p><b>So are we saying, what we actually need is in order to be able to make change or confirm it's ok or actually it</b></p>	<p>Self awareness Good written and verbal communication skills. Able to use the insights gained from reflection. Ability to positively criticise yourself. Confidence. Pro-active Motivated to make change. Experience. Grammar and writing skills.</p>

<p>wasn't very good but there's nothing I can do about it or yes this was a really bad incident and I need to reflect on this deeply you have to have the confidence to be able to do it.</p> <p>Yes.</p> <p>Pro-active.</p> <p><b>So the skill of actually being pro-active and motivated. What do you think is the most important skill?</b></p> <p>Self-awareness and confidence.</p> <p>I don't think there is an important one. You have to have all of them to be able to reflect effectively.</p> <p><b>Ok. So we have to be confident, we have to be self-aware, we have to be pro-active, motivated.</b></p> <p>Experienced.</p> <p><b>...theory and practice.</b></p> <p>You can practice for years, you can have experiences, but you're still going to come across things that will challenge you...</p> <p>Grammar and writing skills.</p>	
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**Influencing the teaching of reflection here at the university?**

<p><b>STAGE 1: Literal Reading / Own Words</b></p>	<p><b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b></p>
<p>The formal lectures.</p>	<p>Formal lectures need to be</p>

<p>Change the document and just have a reflective diary.</p> <p>More one-to-one supervision with mentors.</p> <p>And tutors.</p> <p>More support, feeling more supported by the university as a whole.</p> <p>More visits on placements; make it compulsory...transition period...</p> <p><b><i>Ok, so much more support of moving from level four to level five, from first to second year, understanding of the different levels.</i></b></p> <p>Which we did do on the first year didn't we after our first ever placement we did get it, and we should have that every time.</p> <p>That lecturer, that woman with the glasses and she just reflected on our first placements and how did you get on and what's your next placement and guiding us through them.</p> <p>Yeah, that was good.</p> <p>Yeah, it was.</p> <p>I don't think...piece of reflection but I realise that we were not taught how to use this effectively...more or less like a reflective...and I use it in my document and there was a question that was asked, this question...what do you learn from it, it was a piece of reflection but you are not taught how to use it...</p> <p><b><i>Ok, so you want to be taught how to actually use the evidence to actually, in effect, make your reflections better</i></b></p>	<p>changed.</p> <p>More time with mentors and personal tutors for guided reflection.</p> <p>More placement visits by the personal tutor.</p> <p>Changing of the placement documents to a reflective diary.</p> <p>More support in moving from level four reflecting to level five.</p> <p>More group reflecting at the end of placements, with tutors.</p> <p>To be taught how to use the literature and evidence when reflecting.</p>
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### **Stage Four:**

Stage four required me to synthesise all of the transformed meaning units into a consistent statement regarding participants' experiences. This has been referred to as, the 'structure of experience' (Giorgi 1983), and requires further demonstration of empathic understanding. I have also termed this 'essential themes'.

### **Instinctual reaction on hearing the terms reflection and reflective practice**

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
Writing at the end placements. Observations on placements and reflecting. Poor teaching of reflection. Questioning of personal actions. Constant reflection in relation to placements.	<ul style="list-style-type: none"><li>• Clinical placement.</li><li>• Quality.</li><li>• Personal actions.</li></ul>

### **Internal perception of the terms reflection and reflective practice**

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
Looking back on good and bad experiences and analysing them in order to learn from the experience. Writing down experiences as they have happened in the form of a diary	<ul style="list-style-type: none"><li>• Review and analysis of experiences.</li><li>• Written reports.</li></ul>

### Ways in which to reflect

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
<p>Use of reflective cycles</p> <p>Reflecting on and in action.</p> <p>Reflecting with someone else, reflecting with someone independent to the situation.</p> <p>Writing it down, but there are limitations, but other people can learn from written reflection.</p> <p>Reflecting with a group.</p>	<ul style="list-style-type: none"> <li>• Reflective cycles</li>   <li>• Writing.</li>   <li>• Conversation.</li> </ul>

### Is reflection helpful to you as a student nurse?

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
<p>Yes.</p> <p>Personal / intrinsic.</p> <p>Enables analysis of the person in order to gain self-awareness.</p> <p>Allows the offloading of stressful situations and experiences.</p> <p>Better yourself.</p> <p>Reflective writing is good for those who do not like to talk about how they feel.</p>	<ul style="list-style-type: none"> <li>• Positive value.</li>   <li>• Personal attributes</li>   <li>• Intrinsic therapy.</li>   <li>• Expression.</li> </ul>

**When and how do the students learn reflective practice at the university?**

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
<p>Through the different modules each year.</p> <p>Formal teaching in the PPD module.</p> <p>The teaching is not clear.</p> <p>The teaching of reflection is biased towards the adult branch.</p> <p>Information overload becomes boring.</p> <p>Students not taught how to apply the information about reflection at different levels.</p> <p>Students feel they don't want to attend the lectures in relation to the PPD module.</p> <p>Not getting the information they need from the lectures.</p> <p>Some students reflect with their personal students, but not all students' experiences this. Personal tutor lottery.</p> <p>Reflecting informally with each other.</p> <p>Indirectly throughout other modules where the students are challenged on their ideas and beliefs, involving them in the learning process.</p>	<ul style="list-style-type: none"> <li>• Negative value – 1<sup>st</sup> yr didactic teaching</li> <li>• The modular programme.</li> <li>• Guided reflection.</li> <li>• Peer reflection.</li> </ul>

**Internal frame of reference on the way in which reflection has been taught to the participants so far.**

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
<p>Not accessible or interesting.            Lack of student involvement.            Role of the teacher is hierarchical, don't question.            Lack of understanding of how the students learn.            Lecturers poor performance due to stress.            Boring.            Rubbish / dreadful.            Some personal tutors understand the students more so are able to enhance reflection.            Some personal tutors offer their students no more than a few minutes of their time.            More personalised and humanistic approach to reflection when threaded throughout the mental health modules, less intimidating for the student.            PPD module does not cater for mental health students, the groups are too large and taught by staff who do not connect with mental health students.</p>	<ul style="list-style-type: none"> <li>• Negativity directed towards the 1<sup>st</sup> yr.</li> <li>• Positive value-guided reflection.</li> <li>• A positive value-year two mental health modules.</li> </ul>

### Meeting the learning needs of the participants?

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
<p>No.</p> <p>Groups too large, to learn reflection.</p> <p>Feelings of alienation.</p> <p>The large group lectures in the first year are attended because students feel obliged to go.</p> <p>Meeting with personal tutors who go through the students' reflection of placement is very useful and meets learning needs, but this does not happen often enough.</p>	<ul style="list-style-type: none"> <li>• Negativity.</li> <li>• Positive value.</li> </ul>

### Student requirements from lecturers to become effective reflective practitioners

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes</b>
<p>Use of a reflective diary that is gone through on a regular basis with personal tutors and mentors in the clinical area.</p> <p>Regular group meetings</p> <p>Personal tutors visiting students in placement, meeting with the mentors as well so three way reflective meetings.</p> <p>Smaller teaching groups.</p> <p>Less regiment in the lectures and more room for fun and individuality.</p> <p>Less criticism on reflective essays and more encouragement as the students find this demoralising on reflective essays.</p> <p>Small word limits on reflective assignments</p>	<ul style="list-style-type: none"> <li>• Clinical supervision.</li> <li>• Teaching process.</li> <li>• Academic process.</li> <li>• Group reflection.</li> </ul>



<p>are not helpful.</p> <p>More clarity on what staff are looking for when marking reflective essays especially in relation to the PPD assignment. Students are confused.</p> <p>Teaching of reflection needs to be clearer, what is a good reflective essay and how do students write a reflective piece.</p> <p>Students feel that just because they are taught reflective cycles that they should now know how to write reflectively.</p> <p>The teaching of reflection should be less theory based</p>	
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**Students' perception of the skills required in order to be an effective reflective practitioner**

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes:</b>
<p>Self awareness</p> <p>Good written and verbal communication skills.</p> <p>Able to use the insights gained from reflection.</p> <p>Ability to positively criticise yourself.</p> <p>Confidence.</p> <p>Pro-active</p> <p>Motivated to make change.</p> <p>Experience.</p> <p>Grammar and writing skills.</p>	<ul style="list-style-type: none"> <li>• Academic skills</li> <li>• Personal attributes</li> </ul>

**Influencing the teaching of reflection here at the university**

<b>STAGES 2 and 3: Discrimination of Units / Transporting the Contents-underlying themes</b>	<b>STAGE 4: Structure of the Experience / Essential Themes:</b>
<p>Formal lectures need to be changed.</p> <p>More time with mentors and personal tutors for guided reflection.</p> <p>More placement visits by the personal tutor.</p> <p>Changing of the placement documents to a reflective diary.</p> <p>More support in moving from level four reflecting to level five.</p> <p>More group reflecting at the end of placements, with tutors.</p> <p>To be taught how to use the literature and evidence when reflecting.</p>	<ul style="list-style-type: none"> <li>• Didactic teaching.</li> <li>• Role of personal tutor.</li> <li>• Placement documentation.</li> <li>• Peer reflection.</li> </ul>

## **Stage Five**

Stage five required me to reassess the summarising category system or essential themes against the original raw material; this is classed as accurate empathy. The accuracy although not verified by the participants is verified by the original raw material.

### **Instinctual reaction on hearing the terms reflection and reflective practice**

<b>Essential themes</b>	<b>Messages from the data</b>
<ul style="list-style-type: none"><li>• Clinical placement.</li></ul>	The messages from the data indicate that there is a emphasis placed on reflection in relation to the clinical placements the students have as part of their course.
<ul style="list-style-type: none"><li>• Quality.</li></ul>	It would appear from the data that the students feel that they have not received enough teaching on how to actually reflect appropriately.
<ul style="list-style-type: none"><li>• Personal actions.</li></ul>	The data indicates that the students are encouraged to question their practice in the clinical area, but do not fully understand how to do this effectively.

### **Internal perception of the terms reflection and reflective practice**

<b>Essential themes</b>	<b>Messages from the data</b>
<ul style="list-style-type: none"><li>• Review and analysis of experiences.</li></ul>	The messages from data indicate that the students understand reflection as a way of looking back at positive and negative experiences and learning from these experiences.
<ul style="list-style-type: none"><li>• Written reports.</li></ul>	The data indicates that the students perceive reflection in diary format. A way of writing down exactly how you feel at the time of an experience.

### Ways in which to reflect

Essential themes	Messages from the data
<ul style="list-style-type: none"> <li>• Reflective cycles</li> </ul>	<p>The data places great emphasis on the students' use of reflective cycles as ways in which to reflect. They feel that it provides a structured format from which they can analyse their feelings, in their practice and after practice has been experienced. The cycles that were referred to were Gibbs and Cole. The students did not go into any detail on the actual content of structure of either of these cycles.</p>
<ul style="list-style-type: none"> <li>• Writing.</li> </ul>	<p>The messages from the data indicate that students perceive writing as a primary method of reflecting. They use the reflective cycles to structure their writing. The data suggested that the students felt that this method would allow others to learn from their experiences but that the method of writing could be hindered by concentration on grammar and other areas.</p>
<ul style="list-style-type: none"> <li>• Conversation.</li> </ul>	<p>The data reveals that reflecting verbally with another person or in a group setting was found to be very useful. They felt that the other person could ask questions that would help the student to reflect more deeply. Information offered also suggests that the students found it useful to reflect as a group (student cohort) post placement. Group reflection was perceived as a way of bringing together different experiences and ideas that would engage each student in deeper approach to reflection thus also learning from each other.</p>

**Is reflection helpful to you as a student nurse?**

<b>Essential themes</b>	<b>Messages from the data</b>
<ul style="list-style-type: none"> <li>• Positive value.</li> </ul>	The essential message from the data was that 'yes' reflection was helpful to the participants in their remit as student nurses. Not one participant said 'no'.
<ul style="list-style-type: none"> <li>• Personal attributes</li> </ul>	The data indicates that reflection can develop 'you as a person' inferring that it can develop and enhance self-awareness. The message here is that reflection can help you learn about yourself. Reflecting as a group can bring in different view points and help to view experiences from a different perspective.
<ul style="list-style-type: none"> <li>• Intrinsic therapy.</li> </ul>	The data indicates that reflection is useful in helping the students to 'offload' difficult experiences. Enabling the students to manage effectively emotional upheaval that may have been absorbed from the clinical area.
<ul style="list-style-type: none"> <li>• Expression.</li> </ul>	The message from the data indicates that reflecting in written form is a useful form of expression for those who do not wish to verbalise their experiences with others. This form of expression links back to the development of self-awareness and enables the students to learn more about themselves.

**When and how do the students learn reflective practice at the university?**

<b>Essential themes</b>	<b>Messages from the data</b>
<ul style="list-style-type: none"> <li>• Negative value – 1<sup>st</sup> yr didactic teaching</li> </ul>	The messages from the data indicate that there is didactic teaching of reflection experienced during the first year of the course but this was not perceived positively. The data suggests that great emphasis is placed on teaching reflection from an adult nurse

	<p>branch perspective and that this did not correlate appropriately with reflection from a mental health nurse perspective.</p> <p>The data suggests that they are taught the different reflective cycles in the modules in the first year but that they are not taught how to use these cycles effectively and develop their reflective technique.</p> <p>The data indicates that the style of teaching reflection in the first year is hampering the students' motivation to attend lectures.</p>
<ul style="list-style-type: none"> <li>• The modular programme.</li> </ul>	<p>The messages from the data indicate that from the start of the second year reflection is threaded through the modules in an indirect manner that has enhanced the students' ability to reflect. Module leaders running second year modules appear to engage the students in informal guided reflection. Students are asked to develop on their contribution to discussions in lecturers that challenges the way they think and feel about situations and helps them to examine their unique standpoint on a deeper level.</p>
<ul style="list-style-type: none"> <li>• Guided reflection.</li> </ul>	<p>The data indicates that students receive a form of guided reflection from their personal tutors at the end of each placement. Personal tutors take the student through their experiences on placement and the reflective pieces written about their experiences on placement. Personal tutors are enquiring about the students experiences by engaging in discussion that requires the student to take a deeper look at them. The data suggests that the students found this a very useful way of learning more about how to reflect. However the data clearly indicates that this was not standard practice and not all students had the same experiences with their personal tutors.</p>
<ul style="list-style-type: none"> <li>• Peer reflection</li> </ul>	<p>The data indicates that 'offloading' with peers occurs on a regular basis and that this is an informal way of</p>

	enhancing the reflective process and learning more about reflection.
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**Internal frame of reference on the way in which reflection has been taught to the participants so far.**

<b>Essential themes</b>	<b>Messages from the data</b>
<ul style="list-style-type: none"> <li>Negativity directed towards the 1<sup>st</sup> yr.</li> </ul>	<p>The messages from the data indicate that the formal teaching of reflection in the first year of the course is perceived as not accessible, unclear and boring. The students feel that the way in which reflection is presented is rigid and lacks involvement of the students. The data suggests that students are not encouraged to challenge, question or demonstrate a deeper level of thinking in the actual taught elements.</p>
<ul style="list-style-type: none"> <li>Positive value-guided reflection.</li> </ul>	<p>The data indicates that the students feel very positively about the guided reflection offered by some personal tutors. The one to one basis allows the students to be more open with their reflection and because the personal tutors have some knowledge of the student as a person it is felt that this then enhances the reflective process. This is not standard practice.</p>
<ul style="list-style-type: none"> <li>A positive value-year two mental health modules</li> </ul>	<p>The data indicates that a positive value has been placed on the informal teaching of reflection in the year two modules. The information refers to the process in year two modules as humanistic, and more personalised due to the fact that teaching is in smaller groups. The message from the data is that students felt able to ask questions without fear of judgement from lecturing staff or peers.</p>

### Meeting the learning needs of the participants?

Essential themes	Messages from the data
<ul style="list-style-type: none"> <li>Negativity</li> </ul>	<p>The messages from the data indicate that learning needs of student are not met. Students feel alienated, and the groups situation in which they are taught are too large to learn how to reflect appropriately.</p>
<ul style="list-style-type: none"> <li>Positive Value</li> </ul>	<p>The data indicates that one to one process offered by some of the personal tutors meets the learning needs of the students and enhances their ability to learn about and reflect. The down side is that this does not occur on a regular basis.</p>

### Student requirements from lecturers to become effective reflective practitioners

Essential themes	Messages from the data
<ul style="list-style-type: none"> <li>Clinical supervision.</li> </ul>	<p>The data indicates that students would like regular meetings with their personal tutors and that all tutors should offer guided reflection and not just at the end of placement meeting.</p> <p>The data suggests that students would like their personal tutors to visit them more regularly in the clinical area to join with the student and the clinical assessor in a three-way reflective meeting, not just in the academic setting. The use of a reflective diary kept by the student would enhance this process</p>
<ul style="list-style-type: none"> <li>Teaching process.</li> </ul>	<p>The messages from the data indicate that the students would like to see less regiment in the formal lectures pertaining to reflection especially in the first year of the course. The teaching process needs to be more suitable to thinking about reflection from a particular nursing branch point of view i.e. mental health.</p> <p>The data suggests that smaller teaching groups would be viewed as favourable, and a concentration</p>



	<p>on developing the students ability to reflect and write a reflective assignment rather than just focusing on reflective cycles.</p>
<ul style="list-style-type: none"> <li>• Academic process.</li> </ul>	<p>The data indicates that the students would gratefully receive a greater level of guidance on reflective assignments required of them in the first year. There appears to be concern that the marking and feedback is not always consistent and that some lecturers are actually marking the experience described rather than the students reflection on the experience. This has led students confused as to what and how they are supposed to be writing reflective assignments. Students are told not to use Gibbs reflective cycle in the second year but they are not told why and how to move to a higher level of reflection.</p> <p>The information highlights the need from the students' perspective for more sensitivity on behalf of the lecturer when providing feedback on reflective assignments. Students felt that their reflection was being hindered by the critique offered on their reflective work and felt demoralised.</p> <p>The data also highlights the need for formality of word counting in reflective assignment to be reviewed. A low word count was deemed as a hindrance to reflection.</p>
<ul style="list-style-type: none"> <li>• Group reflection.</li> </ul>	<p>The data indicates that regular group meetings to that had a reflective focus would be useful but this was not elaborated on.</p>

**Students' perception of the skills required in order to be an effective reflective practitioner**

<b>Essential themes</b>	<b>Messages from the data</b>
<ul style="list-style-type: none"> <li>• Academic skills</li> </ul>	The messages from the data indicate that an ability to write in an academic manner is essential.
<ul style="list-style-type: none"> <li>• Personal attributes</li> </ul>	<p>The messages from the data indicated that besides written skills certain personal attributes were required. These included a level of confidence that would enable you to view yourself critically and make the required changes. An ability to remain in check of your emotions and a level of self awareness that would allow you to positively criticise yourself.</p> <p>The information indicated that a pro-active attitude was essential in order to reflect and that a level of experience about what you are reflecting on is helpful</p>

**Influencing the teaching of reflection here at the university**

<b>Identified themes</b>	<b>Messages from the data</b>
<ul style="list-style-type: none"> <li>• Didactic teaching.</li> </ul>	The data indicates that the formal teaching sessions need to be reviewed in light of what has been discussed previously. A greater emphasis on moving from level 4 writing to level 5 reflective writing is deemed as essential.
<ul style="list-style-type: none"> <li>• Role of personal tutor.</li> </ul>	The data indicates that the role of the personal tutor needs to be enhanced so that there is greater involvement of the personal tutors especially in the clinical area and that guided reflection offered by the personal tutor should be made compulsory.
<ul style="list-style-type: none"> <li>• Placement documentation.</li> </ul>	The data indicates that the students do not find the placement documents helpful in relation to reflection and that these should be replaced with reflective

	diaries.
<ul style="list-style-type: none"><li>• Peer reflection.</li></ul>	The message from the data suggest that needs to be greater use of peer reflection at the end of each placement

## Appendix: 7a

### Invitation to take part in a study.

Dear Member of staff.

I would like to invite you to take part in a person-centred enquiry on the subject of reflective practice. As we all know reflection is a big part of your daily lives as mental health lecturers. Nearly every session you teach, or every assignment you mark requires the student to think reflectively! I am assuming that there are many differences of opinion regarding the ability of the students to reflect and of the teaching of reflection here at the university.

I wish to understand your experiences of teaching reflection, your perceptions of reflection and guiding students through the reflective process, in some depth. I am therefore asking that you spare some of your time to come and talk to me about this issue. If you are interested I can provide you with an information sheet that will give you all the information that you need to know before making the decision to take part.

Please contact me if you wish to know more.

Nicola Clarke.

Tel:.....

Email.....

## Appendix:7b

### Invitation to take part in a study.

Dear Student.

I would like to invite you to take part in a person-centred enquiry into the subject of reflective practice. As we all know reflection is a big part of your daily lives as student nurses. Nearly every session you attend, or every assignment you write requires you to think reflectively!

I wish to understand your experiences of being taught, and practising reflection in some depth. I am therefore asking that you spare some of your time to come and talk to me about this issue. If you are interested I can provide you with an information sheet that will give you all the details that you need to know before making the decision to take part.

Please contact me if you wish to know more.

Nicola Clarke.

Tel.....

Email.....

Appendix: 8

**A Person-centred Enquiry into the**  
**Experiences of Teaching and Learning**  
**Reflective Practice in Pre and Post-**  
**Registration Mental Health Nurse Training**

**Participant Information Sheet**

Version 2

05//02/08

## **Welcome to a Person-centred Enquiry in Reflective Practice**

My name is Nicola Clarke and I am a senior lecturer in Mental Health here at..... I would like to invite you to take part in a research study. Before you decide you need to understand why the research is being conducted and what it would involve for you. Please take time to read the following information carefully. Talk to others about the study if you wish.

### **What is the purpose of the study?**

The purpose of the study is to find out what your experiences of reflective practice are, and what your understanding of reflective practice is. Whether it's experience of being taught how to reflect or experiences of teaching reflection to students. My aim is to find out what as students you feel you need from lecturers in order to become effective reflective practitioners, and what as lecturers you feel you require in order to teach reflection.

### **Why have I been invited?**

If you are a student here at the university, then you have been invited because it is your experiences as student mental health nurses regarding learning reflective practice techniques that I am interested in finding out more about.

If you are a lecturer here at the university, then you have been invited because it is your experiences as Mental Health lecturers having a remit to guide your students through reflection and teach reflection that I am interested in finding out more about.

### **Do I have to take part?**

The simple answer here is NO.

It is up to you to decide. I will describe the study and go through this information sheet, which I will then give to you. I will then ask you to sign a consent form to show you have agreed to take part. You are free to withdraw at anytime, without giving a reason. This decision will not affect your experience as a student or as a lecturer here at the university. I will however need to use the information you provide up to the point of withdrawal.

### **What will happen to me if I take part?**

*Student Participants:* you will be asked to take part in one focus group. This is where the participants will come together to discuss topics, share ideas generated from preset questions that will be given to you on the day. The group will last for no longer than 1 ½ hours and this is not examined. The session will be taped so that I do not forget anything important that you discuss. So in summary, as a participant you will be required to meet with me on one occasion.

*Lecturer Participants:* you will be asked to take part in one focus group. This is where the participants will come together to discuss topics, share ideas generated from preset questions that will be given to you on the day. The group will last for no longer than 1 ½ hours. The session will be taped so that I do not forget anything important that you discuss. In summary as a participant you will be required to meet with me on one occasion.



**N.B All sessions will be arranged at a mutually convenient time and on university premises to cause least disruption. You will not be expected to miss lectures or teaching.**

**What will I have to do?**

If you agree to take part all you will have to do is attend the focus group and possibly the interview with me. You will then be expected to share your opinion, ideas and thoughts through discussion with the rest of the group and myself.

**What are the possible disadvantages and risks of taking part?**

As the topic of study, is non emotive, non sensitive and requires only that you share ideas there are no risks or disadvantages of taking part.

In the likely hood that an individual shares information that may put their group or community at risk (i.e. criminal activity) the risk to them is that I may have to share this information with an appropriate third party.

For the lecturing staff taking part, as the mental health division does not employ vast numbers of staff, there is a risk that you could be identified by your voice. I have however taken steps to counteract this by ensuring that a person independent to the university transcribe the tapes. Only that person and myself will then have access to them. The transcriptions will not contain any identifying details about you.

### **What are the possible benefits of taking part?**

I cannot promise that the study will benefit you but the information I get from this study I anticipate will provide recommendations for the future practice of teaching reflective practice here at the university.

### **What happens when the research finishes?**

Once the field research has been completed, I will be going through the data extracting information that will help me to put together recommendations for future practice. I will then have to write this up as my thesis for the Educational Doctorate. Once the final document has been examined you will be able to view the results either by request to me or, the final thesis will be in the University Library. However you may request to see the transcripts from your own focus group or interview at anytime from the moment they have been typed up.

### **What if there is a problem?**

Any complaint about the way you have been dealt with during the study or any possible harm you may have suffered will be addressed. In the first instance I would request that you voice any concerns you have to the researcher

Nicola Clarke. ....

In the case where the complaint is not resolved you can follow the complaints procedure for Birmingham University where the researcher is a doctoral student or for the university where the researcher is a member of staff.

**Will my taking part in the study be kept confidential?**

YES. I will be following ethical and legal practice and all information about you will be handled in confidence. Processes for handling and storing of data will follow the Caldicott principles and the Data protection Act 1998.

*Confidentiality:* all sessions will be completely confidential. I do not need to know any identifying information and in signing the consent form you will also be agreeing to maintain the confidentiality of the members of your focus group. Students will only be known by what year they are in regarding their diploma programme, and lecturing staff will be referred to as 'mental Health lecturers'.

*Taping of the sessions:* all sessions will be taped. No one but me as the researcher and an independent individual transcribing the tapes will have access to the information. The tapes will be kept at my home address in a locked draw for a minimum of 5 years; they will be labelled as Lecturing staff or students year 1, 2, 3 or post grad. If there is anything that is discussed that you feel is of a sensitive matter you can request that it is removed from the transcripts. In signing the consent form you will also be agreeing to allow me to use the information gained from the focus groups and the one to one interview with me.

**Who is organising and funding the research?**

This study requires no extra funding and is being organised by myself.

**Further information and contact details.**

*Researcher:* Nicola Clarke

**Thank you for taking the time to read this information sheet.**

**Regards**

**Nicola Clarke**

**Appendix: 9**

**CONSENT FORM**

Study number: ..

Participant Id number for this trial: ..

**Study Title:** A Person-centred Enquiry into the Experiences of Teaching and Learning Reflective Practice in Pre and Post-Registration Mental Health Nurse Training

Please tick the Box

1. I confirm that I have read and understood the information sheet dated version for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at anytime without any reason, that this will not affect my status at the university.

3. I agree to maintain confidentiality of those involved in my focus group.

4. I agree to the information provided by myself in the focus group and one to one interview to be used for the purposes of this study.

5. I agree to take part in the study

Name of participant:.....

Signature:.....

Date:.....