

REFLECTIONS ON...

Reflections on reflective practice

► ELIZABETH ANNE KINSELLA

KEY WORDS

- Professional development
 - Professional practice
 - Reflection

Elizabeth Anne Kinsella, M.Ad.Ed, B.Sc. (O.T.), is a Ph.D. candidate in the Faculty of Education at the University of Western Ontario, 1137 Western Road, London, Ontario, N6G 1G7. She is also a consultant specializing in professional development and reflective practice. E-mail: Kinsella@sympatico.ca

ABSTRACT

In recent years, a wide range of professions have adopted 'reflective practice' as an approach to professional development, and many professions have made it a mandatory dimension of their membership credentialing process. Despite the fact that it has been widely taken up in the professional world, there are many different conceptualizations and ideas about what it is. In this paper, six theoretical underpinnings of reflective practice are considered, and suggestions are made about how we can begin to incorporate reflection into our own practices.

RÉSUMÉ

Au cours des dernières années, une large gamme de professions ont incorporé la «pratique réflexive» dans leur approche du développement professionnel et de nombreuses professions en ont fait une composante obligatoire du processus de reconnaissance des compétences préalable à l'adhésion des membres. Bien que cette approche ait été largement adoptée dans le milieu professionnel, de nombreuses conceptualisations et idées sont proposées pour décrire et définir la pratique réflexive. Dans cet article, l'auteure examine six fondements théoriques de la pratique réflexive et suggère des manières dont les ergothérapeutes peuvent graduellement incorporer la réflexion dans leur pratique.

In response to an increasingly complex world, many professions including occupational therapy have begun to adopt reflective approaches to professional development. These approaches have generally been grouped under the rubric of 'reflective practice'. Reflective practice has been variously defined as "a dialogue of thinking and doing through which I become more skilful" (Schön, 1983, p. 31), as "a means by which practitioners can develop a greater level of self-awareness about the nature and impact of their performance" (Osterman & Kottkamp, 1993, p. 19), and as an approach in which "actions are carefully planned in relation to the theory known to the professional and consciously monitored, so that outcomes of the action will be beneficial to the patient" (Jarvis, 1992, p.177).

Although reflective practice is often depicted in a general or simplistic manner, it is indeed a broad and complex notion. Six considerations are presented here as a way for occupational therapists to think about and begin to develop reflective practices. Adopting a reflective approach has the potential to empower occupational therapists to take thoughtful and meaningful action in practice (Kinsella, 1998). I suggest that therapists can begin to develop reflective practices by looking at their professional development in new ways (Kinsella, 2000). For instance, therapists can learn from practice experience, examine conceptions of knowledge, think about contexts of practice, explore assumptions in practice, become aware of theories of practice, and work to develop praxis – a link between reflection and action.

Learning from our experiences

As occupational therapists we are constantly engaged in experiences with our clients, their families, our colleagues, our communities, and the health care system. The relationship of experience to knowledge was noted long ago. Kant (1965) wrote, in his critique of pure reason in 1781, that there can be no doubt that all our knowledge begins with experience. In the 1930's, educational philosopher John Dewey drew attention to the link between learning and experience. Dewey (1938) believed that "all genuine education comes through experience" (p. 25). He stated that "just as no man lives or dies to himself, so no experience lives or dies to itself. Wholly independent of desire or intent, every experience lives on in further experience" (p. 27). As occupational therapists we can think about the experiences that we have in practice as resources for genuine learning, learning which lives on and has implications for future practice experiences.

Kolb (1984) has extended these ideas by proposing that learning from experience occurs in a cyclical fashion, in what he calls an experiential learning cycle. From this perspective, we begin with a concrete experience, we reflect on it, we conceptualize/theorize about the meaning of the experience, and we test out our new understandings in the world of

practice through our actions. In this way our experiences become avenues for new learning, and for the development of our professional expertise.

Although we may not be aware of it, we are constantly engaged (to a greater or lesser extent) in this process of learning from our experience. For instance, an occupational therapy student recently observed that his supervising therapist spent a 'surprising' amount of time talking to, and working with an emotionally distraught client, despite pressing caseload demands. This experience caused the student to reflect on his role, and what it means to be a therapist. He noted that the therapist's actions caused him to think about what is involved in a therapeutic relationship, and opened new possibilities for how he would behave in his own practice. In the future, when this student faces a similar situation in his own practice he will likely test out behaviours and continue to move through the experiential learning cycle. By making the steps in this learning cycle explicit we can become more aware of what and how we learn from practice experience, and we can optimize our learning in this regard.

Ways of knowing

A focus on learning from experience presupposes that there are many ways in which we come to know, and that different kinds of knowledge are important for practice. In the past, the emphasis in health care has been on technical, rational and scientific knowledge, however there is currently a growing recognition that professionals from all walks of life need to develop knowledge that is broad and multifaceted (Schön, 1983, 1987). As well as technical knowledge, it is suggested that professionals need to develop practical knowledge, social, political and economic knowledge, and self-knowledge (Clarke, James, & Kelly, 1996). One way of fostering these 'other ways of knowing' is through reflection (individual and collaborative). Furthermore, professionals possess knowledge that is *explicit* - that which we can say, as well as knowledge that is *implicit* - that which we cannot say but which is revealed in our actions (Argyris & Schön, 1992). Reflective approaches suggest that it is important to examine our actions in practice in order to discover this implicit knowledge which influences what we actually do in practice.

Beyond the types of knowledge that we possess, Greene (1988) points out that no matter what the situation, our knowledge is always insufficient/partial. She suggests that this is partly why there can be so much 'anguish' associated with our choices. This recognition is relevant for practice. As reflective practitioners it is important to recognize not only the ways in which we come to know, and the multifaceted types of knowledge that we develop, but also that there are limitations to what we can know within any practice

situation. Thus, in practice we reflect on our knowledge, and choose what Cervero (1992) calls the wisest action, given our limitations.

Contexts of practice

Every individual is situated within a particular and unique cultural, social, economic, political and personal context (Peters & Lankshear, 1996). Canadian occupational therapists recognize this contextuality in our practice framework, as described in *Enabling occupation: An occupational therapy perspective* (Canadian Association of Occupational Therapists, 1997). Failing to consider contexts can have serious implications for practice. For example, one therapist focused her intervention on independence in self-care skills with a client who had recently become a quadriplegic (Parham, 1987). In this case the client, a professor, had no intention of performing these time consuming tasks; he planned to hire an attendant who would expedite the process, thereby freeing him to pursue what he considered to be more stimulating and professional activities. In another context, the therapist's actions may have helped her client, however, in this instance the therapist's interventions were meaningless to the client. As occupational therapists we are constantly challenged to reflect on contextual factors as they relate to the world of our practice, and the lives of our clients.

Townsend (1998) has pointed out that sometimes the contexts of our practices overrule our 'good intentions' as occupational therapists. By reflecting on the ideological factors, and the politics that inform our workplaces, we can become what Giroux (1988) calls transformative intellectuals. We can begin to rethink and reform the traditions that may prevent us from becoming active reflective practitioners (Giroux, 1988). Reflection on practice thus leads us to a closer examination of the contexts of our clients' lives, the contexts of our practices, and the systemic factors that influence both of these. The insight that we gain through reflection can provide a foundation for our actions, as we advocate for our clients and for systemic change.

Exploring assumptions

We also reflect on practice by exploring the assumptions that we bring to the workplace (Brookfield, 1992, 1995). Each of us carries what may be compared to a 'suitcase' filled with the 'baggage' of our assumptions. This 'luggage' influences how we perceive the world and those in it. If we don't unpack the suitcase and look at what is in it, we remain unaware of its influence on our behaviour. If we examine our assumptions on a regular basis however, we are more likely to recognize how they influence our practice. For instance, have you ever assumed that a client would act a certain way based on his/her diagnosis, level of education, socio-economic status?

In what ways do you bring assumptions to practice? Examining one's assumptions may sound like common sense, however it is surprising how infrequently many of us actually do this.

It is difficult work, and sometimes we don't like what we find. Nonetheless, this type of reflection has the potential to raise our self-awareness and to help us to understand our behaviours in the practice arena.

Theories of practice

According to Argyris and Schön (1992) we each develop a theory of practice that consists of our espoused theory and our theory-in-use. An espoused theory is what we are able to say about what we believe and do in practice - it is like a philosophy of practice, the guiding principles for how we wish to live out our day-to-day work life. We can consciously articulate our espoused theory of practice. Our theory-in-use is different, as it is contained within our actions. We may not be able to articulate it, we may not even be conscious of it, however it is reflected in what we do. As an example of theories of practice, a manager may say that she believes in a participatory style of management, yet in practice she may tell everyone what to do. In this instance she is espousing one theory, and yet demonstrating a different theory-in-use through her actions. Reflective practice asks us to examine both our espoused theories and our theories-in-use in order to grow as professionals. As we examine our behaviours in practice, or ask others for feedback on what they see us doing in practice, we can come to understand the implicit theories that are revealed through our actions. By acknowledging contradictions between what we say and what we do, we can work to change our behaviours to bring them into line with what we say we believe. Sometimes we come to recognize the need to change our espoused theory of practice, whereas sometimes we recognize the need to change our behaviours. At other times this exercise raises awareness of systemic barriers to our practices, which compel us to take action in a larger realm, perhaps to change work environments, to become more political, or to advocate for broader changes in the systems in which we work.

Praxis

Praxis is the place where reflection and action meet within the individual (Freire, 1989). It is also the place where theory and practice meet. Praxis represents a dynamic coming together of these apparent dichotomies. When we take praxis to our workplace, we are acting out of an informed consciousness. If we engage in activity without reflection, we may be participating in meaningless activism (Freire, 1989); whereas if we reflect without action we are not bringing our awareness into the world. In order to transform, to grow, to be

dynamic practitioners, we need to develop praxis, a balanced coming together of reflection and action, and we need to work from this location in our practices as occupational therapists.

Conclusion

Reflective practice is an approach to professional development that has the potential to benefit therapists, as well as clients and communities. Reflective practitioners think about their experiences in practice and view them as opportunities to learn. They examine their definitions of knowledge, seek to develop broad and multifaceted types of knowledge, and recognize that their knowledge is never complete. Reflective practitioners are concerned about the contexts of their practices and the implications for action. They reflect on themselves, including their assumptions and their theories of practice, and take action grounded in self-awareness. Finally, reflective practitioners recognize and seek to act from a place of praxis, a balanced coming together of action and reflection. It is suggested here that therapists can begin to move toward an informed, conscious, reflective practice by integrating the following principles into their daily lives.

Ten actions of a reflective practitioner:

1. Recognize your practice experience as an avenue for learning.
2. Think about and reflect on the meaning of your practice experience on a regular basis.
3. Recognize 'other ways of knowing' as important for good practice and as a legitimate focus for your professional development.
4. Work to develop your self-knowledge, political, social and economic knowledge, and practical knowledge, as well as traditional technical/scientific knowledge.
5. Constantly examine your client's context, the context of practice, the cultural context, and the systemic contexts in which your work occurs.
6. Critically reflect on the ideologies that inform the systems in which you work, and take meaningful action to advocate for positive change; envision new possibilities!
7. Examine the assumptions that you bring to your practice.
8. Articulate your espoused theory of practice; recognize it as a dynamic growing entity.
9. Frequently compare your espoused theory of practice (what you say) with your theory-in-use (what you do).
10. Develop praxis: Action informed by reflection.

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