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Introduction

When good ideas become very popular, there is a danger that they also become oversimplified and used in a superficial way, thereby failing to do justice to the complexities involved. And there are lots of complexities involved. This is partly because reflective practice has grown up in different professional disciplines and contexts, each with their own subtle differences and nuances. As Moon comments:

The work on reflection in the context of practice – reflective practice – originated mainly in the professions of teaching and nursing, but there is little integration of these two sources, and relatively few professional educators have crossed boundaries, even if they have been attempting to develop similar attributes in their novices or their trained professionals. It is as if reflection has been viewed through a series of narrow frames of reference, with little overlap. (1999, pp. vii–viii)

To this we can add a significant body of literature relating to reflective practice in social work and a growing literature on how reflective practice can also be seen to apply in a management context. Our aim here, though, is not to explore these differences, but rather to focus on the commonalities: what are the key concepts and themes that help us make sense of reflective practice and the philosophy underpinning it?

However, before examining what is now commonly understood as reflective practice, we first want to clear up some widespread misunderstandings. This will clear the way for developing a more sophisticated understanding of our subject matter and its importance across the various disciplines within the helping professions. Such misunderstandings are both a reflection of the common tendency to adopt an oversimplified and superficial approach to reflective practice and, in large part, a major contributor to the persistence of that unhelpful and dangerously superficial approach.
We begin our discussion of the nature of reflective practice, then, by identifying common misunderstandings and thus, in effect, commenting on what reflective practice is not, before establishing what it actually is.

**What reflective practice is not**

We have encountered a number of misunderstandings over the years about the nature and role of reflective practice, some relatively minor, some quite seriously adrift from what reflective practice is all about. We shall focus here on the major discrepancies and identify why each one of them is problematic.

*A luxury we can’t afford*

A common initial reaction to reflective practice when people are introduced to it for the first time is to express the view that it is a good idea in principle, but not really workable in practice due to the pressures of work – it is seen as ‘a luxury we can’t afford’. This is an understandable response, albeit a mistaken and misleading one. While it is certainly true that levels of work pressure can be very high, perhaps too high on many occasions if the incidence of stress is anything to go by, this does not rule out reflective practice. This is because a key underlying principle of reflective practice is that the busier we are, the more reflective we need to be. That is, the more under pressure we are, the more each of us needs to be thinking clearly and carefully about:

- What are my roles and duties? Am I clear about what is expected of me?
- What are my goals? How will I be able to achieve them?
- What are my priorities? What is the best use of my time?
- What strategies are available to me in order to manage the pressures I face?
- Who can I rely upon to support me? Who can I collaborate with?
- What previous learning can I draw upon to help me cope with my current challenges?

Making the time and finding the space in our minds to do this can be quite a challenge at times, but it is none the less worth the effort to do so,
as having what learning and development expert David Clutterbuck calls ‘reflective space’ is a fundamental ingredient of high-quality practice:

Although people are often working longer hours than a decade ago, they have less and less time to stop and think deeply. In experiments with hundreds of managers and professionals, less than 3 per cent claim to find their deep thinking time at work, and of these, the majority do so by coming in very early in the morning. For most people, however, deep thinking time happens on the journey to and from work, in the bath, or shower, taking exercise, doing the ironing, lying awake at night, or in other parts of their ‘free’ time.

Deep, reflective thinking is as essential to the effectiveness of our conscious brain as REM sleep is to our unconscious. In both cases, we become dysfunctional if our minds do not carry out the essential task of analysing, structuring, organising and storing. When we allow ourselves to enter personal reflective space (PRS), we put the world around us largely on hold.

(2001, pp. 21–3)

We shall return to the idea of ‘personal reflective space’ in Chapter 3. However, for now, we can agree with Clutterbuck that there can be difficulties involved in creating reflective space, but also note that the efforts needed are an important investment of our time and energy.

The discussions in this and subsequent chapters should help in this regard by emphasizing the importance of making time and space for reflective practice and the dangers of not doing so.

**Practice focus 1.1**

Elaine came home from work each day feeling exhausted. What made it worse was that she found it difficult to relax at evenings and weekends, as she felt under so much pressure at work. She had so little time to think that she felt her work was out of control – and that made her feel very uncomfortable indeed. However, all this was to change when she attended a course on reflective practice and was introduced to the principle that the busier we are, the more reflective we need to be. After this she made sure that she focused very carefully on her work pressures, making sure that she stopped to think and plan. She recognized that she had become so busy that she had ‘lost the plot’ in relation to many aspects of her work. By being more thoughtful about her work, she was able to avoid the feelings of helplessness that had slowed her down, demoralized her and led her to waste a lot of time. She found it quite a struggle at first to adopt this new way of working, but after a while she felt much more comfortable and in control. Her morale rose, she made fewer mistakes and she was able to get much more done in the time available. Even though her work schedule was still tough and demanding, she realized that this more reflective approach paid dividends. She was still tired each day when she went home but, as she was more in control of her work, she was quickly able to relax and enjoy her time off.
A magical process

A significant part of the oversimplified, superficial approach to reflective practice mentioned above is the assumption that reflective practice is simply a matter of pausing for thought from time to time. It is mistakenly assumed that engaging in practice, then stopping to reflect on that practice, practising some more and then reflecting some more will somehow produce learning and higher standards of practice – as if by magic. Of course, the reality is much more complex than this. Reflective practice does involve a degree of reflecting on our practice, but in specific ways and as part of a broader process – and not simply a process of pausing for thought.

Learning will not take place and practice will not develop if no connections are made between the thinking and the doing. That is, if we are not able to understand what we are doing and why we are doing it as part of a broader, more holistic picture of our work, the goals we are pursuing and how we are pursuing them. When we look more closely below at what is actually involved in reflective practice, we will be able to see more clearly how simplistic and inadequate this ‘magical’ perspective on reflection is.

A solitary pursuit

Most of the literature relating to reflective practice paints a picture of individual practitioners ploughing their own furrow in terms of developing reflective approaches to their practice. There has been comparatively less analysis or discussion of how people can support one another in shared endeavour or how organizations can support their staff and managers in their efforts – for example, by promoting reflective workplace cultures and making informed and considered practice a standard expectation rather than something only a minority can be expected to achieve. Informed and considered practice is of course an important feature of professionalism and, in those professional groups that have professional registration requirements, an important means of meeting those requirements.

Figure 1.1 The doing–thinking dialectic
However, while the main focus clearly is on individual practitioners, there is none the less a significant and growing literature on, and understanding of, the wider social and organizational aspects of reflective practice (see, for example, Thompson, 2016a).

It would indeed be a mistake to adopt too individualistic an approach to reflection. Reflective practice need not be a solitary activity. As we shall see in Chapter 3, there is much to be gained from people working together towards shared aims of reflective practice and the benefits it brings, and from organizations taking seriously their responsibilities towards maximizing learning and, in the process, maximizing quality of practice. It needs to be remembered that the ‘practice’ we are referring to in the term ‘reflective practice’ includes management practice. That is, we see it as important for managers to make their practice reflective too. This not only makes for better management (in terms of informed decision-making, for example), but also for a more fertile environment for reflective practice across the whole organization.

**Limited to education and training programmes**

A very common misunderstanding is that reflective practice is intended to be specifically a feature of education or training programmes, rather than a feature of good practice more generally. We have encountered many people who have been surprised that we have an expectation that reflective practice should be adopted as an overall aspect of our work, rather than something restricted to gaining a qualification or professional award.

This perception of reflective practice as a limited undertaking can combine with the earlier misapprehension that ‘we are too busy to be reflective’. That is, it is assumed that it is worth the effort to be reflective as part of a programme of studies, but too demanding to be part of everyday practice. Again, this fails to appreciate how reflective practice can, and should, be seen as an *investment* of time, not a time cost. A continuous commitment to reflective practice means not only that we get the benefits of reflection on an ongoing basis, but also that we can develop our knowledge, skills and confidence in reflective practice over time – that is, we can become more expert in the use of reflective techniques and thus get even more value from the efforts we invest.

**An alternative to theory**

A significant element of reflective practice is the process of drawing out learning from our experience, to be able to distil useful learning points that will guide our future practice from our current or recent practice
activities. While this certainly is a key part of the process, it can be misleading to see it in isolation by not taking account of the wider context of which this forms only one part. Without this wider understanding it is easy for people to make the mistaken assumption that reflective practice is an alternative to drawing on theory. If the traditional approach can be characterized as applying theory to practice, then the reflective approach can be seen, according to this mistaken view, as applying practice to practice – that is, drawing out our learning from our practice experiences without reference to theory, research or professional knowledge more broadly.

Such a narrow, oversimplified approach fails to take account of the important role of professional knowledge in shaping practice. Even though we may often not be directly aware of the role of such knowledge in influencing our practice, it would be a significant mistake not to acknowledge the major part it plays. Unless we consciously think about (that is, reflect on) the role of theory, we are likely to fail to see the invisible hand of our knowledge base shaping our assumptions and understandings. But it would be a far-reaching error to confuse ‘invisible’ with ‘absent’. At the heart of reflective practice is the process of becoming aware of the knowledge that informs our practice – making it more visible. This is a point to which we shall return below (see the section ‘Theorizing practice’). However, for now, it is important to note that drawing out the learning from experience should not be confused with the mistaken notion that theoretical concerns are not relevant to practice or indeed to learning.

Displaced by evidence-based practice

In recent years we have seen the growth of another very influential approach to professional practice, namely evidence-based practice (or research-informed, evidence-enriched practice – Stepney and Thompson, 2018). The basis of this approach is that practice should be informed by the best evidence available, particularly research evidence – for example, the results of ‘random controlled clinical trials’ (where some people are given a placebo instead of the actual ‘treatment’ so that it can be established whether the treatment actually works). Unfortunately, some people have made the mistake of assuming that the rise of evidence-based practice makes reflective practice unnecessary – as if to assume that we no longer need to reflect on practice, we simply have to do what the research evidence indicates to be the best way forward.

This shows a significant misunderstanding of both research evidence (and how it can be used) and reflective practice. Research evidence in the
helping professions will often not be clear-cut in terms of giving precise guidance for practice. While research can, and often does, cast light on practice issues, it is rarely the case that the research is so definitive that it gives us a clear path to follow. Even if it did, we would still need reflective practice in order to be able to integrate those research findings into our wider knowledge base and experience so that they can be of use to us. Research, like the professional knowledge base more broadly, is not something that we should follow slavishly or uncritically, as such an approach would leave us very ill-equipped to deal with the complex demands of working with people and their problems across the helping professions.

**The legacy of Schön**

Having considered some misconceptions about reflective practice, it is now time for us to look at what is really meant by the term. To do that we shall look initially at the work of one of the most influential thinkers in relation to reflective practice, namely Donald Schön. He was not the first person to explore reflective practice (for example, Dewey was writing about such issues in the first quarter of the twentieth century – Dewey, 1916; 1933), but his work has played a major role in bringing the subject to the attention of a wide range of professionals and professional educators.

Schön was an educationalist with an interest in how professionals across various disciplines develop their respective knowledge bases and actually use them in practice. He was aware that it is not simply a matter of drawing on one’s knowledge base in a direct or simple way. That is, he realized that a professional knowledge base rarely, if ever, gives direct practice guidance on what to do and how to do it. For example, a knowledge of the law does not tell a member of the legal profession how to practise law, just as a knowledge of the human body, disease processes and so on does not give health care professionals a set of instructions about how to undertake their duties. If there is no direct relationship between professional knowledge (that is, the theory and research base) and practice, what is the nature of the relationship? This was Schön’s field of study; this is what he wanted to make sense of. And it was the notion of reflective practice that he developed to do this.

**The critique of technical rationality**

The idea that theory, or knowledge more broadly, can be applied directly to practice goes under the heading of ‘technical rationality’. Schön
was very critical of this approach as he felt it was far from adequate for explaining the complexities involved:

Technical Rationality is the Positivist epistemology of practice. It became institutionalized in the modern university, founded in the late nineteenth century when Positivism was at its height, and in the professional schools which secured their place in the university in the early decades of the twentieth century.

(1983, p. 31)

Positivism is an approach to the social sciences that naively assumes that human affairs can be understood in terms of scientific laws, in the same way that the natural sciences understand the physical world in terms of laws of nature. Such an approach fails to do justice to the complexity, diversity and variability of human life (see Thompson, 2000, for a discussion of this). Technical rationality is therefore an approach to professional practice that involves trying to establish fixed ways of working, established ‘right answers’ for how to proceed. Schön was able to see that this did not fit with the reality of professional practice, what he referred to as the ‘swampy lowlands’ of practice – a terrain that is messy, difficult and confusing.

It is significant to note that, despite the clear limitations of positivist attempts to apply natural science methodology to the social sciences in general and social work in particular, this approach has manifested itself in some aspects of what has come to be known as evidence-based practice (see the Guide to Further Learning for further information about this). It is also fair to say that, while the growth of interest in reflective practice has contributed significantly to the rejection of technical rationality and its underlying positivism, there are still clear elements of this form of rigid rationality apparent across the helping professions and their associated professional educational systems (Thompson and Pascal, 2012).

As an alternative to this unsatisfactory model of professional practice, Schön preferred to see the professional knowledge base not as a ‘scientific’ source of ‘right answers’, but rather as the cloth from which practitioners tailor their professional response. That is, we cannot expect professional knowledge to provide ‘off-the-peg’ solutions, like a garment in a clothes shop. Rather, it is a matter of the knowledge base serving as a resource (a set of insights and understandings) that needs to be adapted to suit the circumstances. In other words, the reflective practitioner acts as a skilled tailor, using the knowledge base of his or her profession as the cloth from which to cut appropriate solutions to fit the requirements of the specific practice situation. This introduces the notion of professional ‘artistry’. Schön recognized there is a scientific knowledge base (part natural
science, part social science) that can be drawn upon, but also realized that a degree of artistry is needed to make meaningful links between that knowledge base (what Schön referred to as the ‘high ground’ that gives us an overview of the terrain below) and the actual demands of practice (the ‘swampy lowlands’).

**Reflection and action**

A key part of Schön’s work is his distinction between reflection-in-action and reflection-on-action. The former refers to the thinking we do while actually practising, a sort of ‘thinking on our feet’. For example, we may be listening carefully to what someone is telling us and trying to relate that to our specific role in that situation, the problem we are trying to address and so on. In doing so we will be drawing on not only our previous experience, but also our professional knowledge base (see the section ‘Theorizing practice’ below). The latter refers to reflection after the event – that is, where we later review our experience, make sense of it, try to learn from it and so on.

Ideally, reflection-in-action and reflection-on-action should interconnect. That is, our reflection-on-action should refer back to what was going through our mind during the actual practice encounter (reflection-in-action 1), while the next time we are engaged in such practice, our reflection (reflection-in-action 2) should draw on our previous reflection-on-action. This then sets up a cycle in which we integrate the two sets of reflection and thus provide a basis for ‘cutting our cloth’. In this way we are able to facilitate the integration of theory and practice – that is, to make sure practice is informed by theory and theory is informed (and tested) by practice. We shall return to this important topic below.

One aspect of the relationship between reflection and action that Schön does not discuss is what we shall refer to as ‘reflection-for-action’. This refers to planning, being able to think ahead about what we might encounter – for example, to try to anticipate what is likely to happen, what we need to do, what we may need to be wary of (a risk of aggression or violence, for example) and so on. Reflection-on-action can therefore not only refer back to the earlier reflection-in-action, but also look forward in terms of reflection-for-action. This is an important point in relation to our earlier discussion of making time for reflection. Being able to anticipate difficulties and generally plan ahead can make for a very effective use of time. It can also give us a greater sense of control and confidence that will tend to have a positive effect on our morale and motivation – and thereby enable us to achieve more in the limited time available.
Benner, Hooper-Kyriakidis and Stannard write of the importance of forethought:

The most effective clinical forethought is based both on scientific understanding and experiential learning of clinical trajectories. Clinical forethought does not have to be precisely correct to be a useful basis for thinking-in-action; it only needs to be in the right direction or region of the problem and capable of being confirmed or disconfirmed by the actual evolving situation. Clinical forethought works best when it is held tentatively and when it flexibly changes if the patient’s condition unfolds in an unexpected direction. Rigid adherence to what one has anticipated and planned for is a source of error in this habit of thought because it prevents seeing the unexpected.

(1999, p. 65)

What this passage captures is the important point that, while planning or forethought is an important aspect of professional practice, it should not become a rigid adherence to a fixed way of working. As we
shall see below, flexibility and creativity are important parts of reflective practice.

The organizational context

Schön’s work has proved extremely influential over an extended period of time. It is generally characterized by an emphasis on the individual, with relatively little attention paid to the wider context. However, Schön does make reference to the importance of the organizational context of practice:

When a member of a bureaucracy embarks on a course of reflective practice, allowing himself to experience confusion and uncertainty, subjecting his frames and theories to conscious criticism and change, he may increase his capacity to contribute to significant organizational learning, but he also becomes, by the same token, a danger to the stable system of rules and procedures within which he is expected to deliver his technical expertise.

Thus ordinary bureaucracies tend to resist a professional’s attempt to move from technical expertise to reflective practice. And conversely, an organization suited to reflective practice would have features very different from those of familiar bureaucratic settings.

(1983, pp. 328–9)

What this tells us is that the organizational context is an important factor (or set of factors) when it comes to developing reflective practice. As we shall see below, this means that promoting reflective practice will often involve seeking to influence the culture of the organization in which we work in an attempt to make it more receptive to, and supportive of, reflective practice.

<table>
<thead>
<tr>
<th>Voice of experience 1.1</th>
</tr>
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<tbody>
<tr>
<td>When I moved to my current job I thought I was on a different planet rather than just in a different organization. Where I worked before, the emphasis was on simply getting the job done. Raising standards of practice, being able to learn and grow in the job or going for the best quality we could were just not on the agenda at all. I am just so delighted to be in a place now where we are encouraged to reflect on what we are doing and work towards optimal outcomes, not just achieving the bare minimum. It is just so refreshing, and morale here is so much higher. In my old job I always felt I didn’t have time to be more reflective, but the culture and atmosphere here are so much more positive that we actually get much more done in the time available. It’s amazing; so much better.</td>
</tr>
</tbody>
</table>

Stuart, a youth justice worker
Strengths and weaknesses of Schön’s approach

The major strengths of Schön’s work include the following:

➢ It offers a helpful understanding of the relationship between professional knowledge and professional practice, recognizing that both theory and practice have an important contribution to make to learning and development.

➢ It helps us move away from unhelpful, simplistic approaches based on the idea of ‘technical rationality’.

➢ It provides a platform for continuous learning and optimal outcomes as a result of enhanced standards of practice.

However, there are also weaknesses or areas for development that can be identified, not least the following:

➢ There is a predominant (but not exclusive) emphasis on the individual, therefore wider social and organizational factors are not given sufficient attention.

➢ It pays insufficient attention to the need for critical reflection (see below) and an understanding of the key role of power relations.

➢ It focuses on the rational aspects of reflection and practice and thereby neglects the emotional dimension of such matters.

These limitations will be addressed to a limited extent in the pages that follow, but it is beyond the scope of this book to develop a comprehensive evaluation of Schön’s work. For present purposes, our comments here should be sufficient to make it clear that Schön’s work has proved to be a very positive contribution to our understanding, but still leaves many areas in need of further development.

Reflective or reflexive?

Schön and most of his followers consistently use the term ‘reflective’. However, many writers have adopted a similar, but significantly different term, namely ‘reflexive’. We should not allow their similarity to confuse us into thinking they are the same or interchangeable. They are related ideas, but there are also key differences. What, then, is meant by these two terms?

‘Reflective’ is an ambiguous term. It is generally used to refer to reflection in the sense of thinking, as in: ‘I’m not sure about that; let me reflect
on it for a moment’. However, it can also be used in the sense of reflecting in the way a mirror does. Reflective, in this sense, means looking back on ourselves – in effect, being self-aware. Both senses of reflective are therefore very relevant to our usage of the term ‘reflective practice’: it involves both thinking/analysis and self-awareness.

‘Reflexive’ is a term that largely overlaps with this second sense of reflective. Fook and Askeland clarify the idea of reflexivity:

Reflexivity can simply be defined as an ability to recognize our own influence – and the influence of our social and cultural contexts on research, the type of knowledge we create, and the way we create it (Fook 1999b). In this sense, then, it is about factoring ourselves as players into the situations we practice in.

(2006, p. 45)

Rolfe, in discussing reflective practice in nursing, relate this to Schön’s distinction between reflection-in-action and reflection-on-action: ‘Thus, if the practitioner who reflects on action is a reflective practitioner, then the one who reflects in action is a reflexive practitioner’ (2011a, p. 163). By this he appears to mean that reflection-in-action is reflexive (self-aware, tuned into our own role and influence in the process), while reflection-on-action is reflective (in the sense of ‘thoughtful’). However, we would not see it this way. Our view is that reflection-in-action and reflection-on-action need to be both thoughtful and self-aware. We therefore understand reflexive practice to be a dimension of reflective practice. In our view, reflective practice needs to be reflective in both senses of the word: thoughtful (analytical and well-informed) as well as self-aware or ‘reflexive’.

Integrating theory and practice

Traditional approaches to the relationship between theory and practice have tended to portray it as a one-way street – that is, as a process in which theoretical knowledge is applied to practice. We begin with theory and work towards practice. However, reflective practice is based on a different understanding of the relationship between the two, one in which theory and practice are given equal billing – that is, where there is a two-way relationship in which the knowledge base and the practice base are interconnected, neither having more importance than the other. As has been recognized for some years now, theory without practice is of little use and practice without theory can be very dangerous. We therefore need to give closer attention to the relationship between theory and practice, between knowing and doing.
Our concern is with integrating theory and practice – that is, with showing how theory underpins practice and practice informs theory (in the sense that accounts of practice can help to test and develop theory over time).

Practice focus 1.2

Ravinder’s professional training had taught her that people grieve in stages. However, after a few months in her new job working with people who had experienced a major loss, she became very suspicious about what she had learned. She could see little evidence of people grieving in stages. To her it was more a case of grief being a ‘roller-coaster’ ride, going up and down, round and round – quite violently sometimes. As a result of this, she started to read up on contemporary theories of grief. She quickly discovered that simple stage theories had been superseded by more sophisticated understandings of loss. She began to realize that these theories were far more consistent with what she had been witnessing in practice. She recognized that the traditional theory had been quite influential, and yet ironically the more up-to-date theory was more in tune with what was happening in practice. This experience made her aware that there were dangers involved in relying on theory – however well established it might be – that has not been tested in practice. She began to appreciate that the relationship between theory and practice was much more complex than she had initially thought.

In terms of this relationship, Schön makes an interesting point when he states that:

I have become convinced that universities are not devoted to the production and distribution of fundamental knowledge in general. They are institutions committed, for the most part, to a particular epistemology, a view of knowledge that fosters selective inattention to practical competence and professional artistry. 

(1983, p. vii)

By this we understand him to mean that he is aware of the need to develop a much clearer focus on: (i) how knowledge can inform practice (‘practical competence’); and (ii) the skills involved in using such knowledge in practice (‘professional artistry’). Decades after Schön wrote this, we can see that there is now a much closer concentration on the use of knowledge in practice and that the focus on reflective practice has been a significant factor underpinning this shift – although it has to be recognized that we still have a long way to go when it comes to integrating the worlds of knowledge dissemination (for example, universities) and knowledge use (for example, professional practice).
The knowledgeable doer

The ‘knowledgeable doer’ is a term widely used in nurse education. It refers to a practitioner who is, to use our terminology, able to integrate theory and practice. Although it has its roots in nursing, our view is that it is a concept that can apply across the helping professions and not just within health care settings. It is a helpful term in so far as it captures the idea that knowing and doing need to be connected. It can be linked to the philosophical term ‘praxis’, which is used to mean a fusion of theory and practice. It involves recognizing that theory and practice are two sides of the same coin – they do not exist in a pure form, independent of each other. Theorizing is an activity in itself and thus a form of practice in its own right, while practice is inevitably based on a theoretical knowledge base (a set of concepts that help us make sense of our experience), even though we may not always be aware of this (that is, we often take our theory base for granted). Griseri offers helpful comment in this regard:

By ‘praxis’ I mean a personal theory-in-action that someone uses to get on with their life. Long before anyone learns anything about the formal theory of dynamics, they may learn how best to throw a stone so that it will skim along the top of a still pond.

(1998, p. 213)

This helps us to understand that ‘theory’ need not be formal theory. Rather, the term ‘theory’ is used to refer to those concepts that we build up into a framework that helps us make sense of our lives in general and our work in particular. This framework forms the basis of our understanding and thus of our knowledge base. That knowledge base comprises both formal and informal knowledge (that is, knowledge gained from formal educational sources as well as from our life experiences). However, an even more important distinction is between open and closed knowledge. It is to this that we now turn.

Theorizing practice

We mentioned earlier the traditional approach to theory and practice is to begin with theory and then seek to apply it to practice. Thompson (2017) challenges this notion and argues that it is wiser to begin with practice and then to ‘theorize’ that practice by drawing on our professional knowledge base as required. This idea of ‘drawing on knowledge’ fits well with reflective practice.
Reflective practice, as we noted earlier, involves thinking, but not just any sort of thinking. It refers to thinking that helps us make sense of our practice, what is required of us, how best to respond and so on. As such, it is thinking that draws on knowledge. In a sense, all thinking draws on some form of knowledge, but the key question that concerns us here is: what type of knowledge are we drawing upon – open or closed?

Open knowledge is the type of knowledge that we have an explicit awareness of. It refers to situations where we are drawing on an explicit knowledge base, where we know precisely what knowledge we are using and why we think it is appropriate. For example, in dealing with someone who has been traumatized, we may be drawing directly on theory and research relating to the effects of trauma on individuals (hence the notion of ‘theorizing practice’). Such knowledge is open to challenge and scrutiny, so that any flaws in it may become apparent, thus allowing the knowledge base to be improved and developed over time. Similarly, if we are openly aware of the knowledge we are using, we can increase that knowledge over time – we can continue to learn.

Closed knowledge, by contrast, is the type of knowledge we draw on implicitly, without any direct awareness of it. It arises in situations where we have acquired knowledge, but we are not sure what we have acquired or how we acquired it. For example, in dealing with someone who is agitated, we may calm them down very well, but without knowing how we did it or where we gained the knowledge of how to do so. Such knowledge is not explicit, and is therefore not open to the same level of scrutiny or challenge as explicit knowledge. And, if we are not aware of what knowledge we are using, how can we build that knowledge up? How can we continue to learn and get even better at it?

We can see, then, that open knowledge has distinct advantages over closed knowledge, although the latter is not entirely without its uses. The differences between the two can be summarized as follows.

**Open knowledge is:**

- informed;
- sensitive;
- creative;
- rewarding;
- challenging of stereotypes and discriminatory assumptions;
- a sound basis for working in partnership;
- empowering (of ourselves and others);
What is Reflective Practice?

Open knowledge is a basis for reflective, mindful practice, while closed knowledge runs the risk of being the basis for dogmatic and mindless practices. The value of focusing on developing open knowledge is therefore quite clear, as these comments from Karvinen-Niinikoski make clear:

Open expertise recognizes uncertainty and, instead of claiming to be the only one to possess proper knowledge and professional skills, it will be ready to question communication and even polemics as well as a willingness to negotiate and reconstruct expertise according to the different contexts of action.

(2004, p. 25)

In a similar vein, Gardner, Fook and White discuss ‘open-mindedness’ which fits well with our use of the term ‘open knowledge’ or Karvinen-Niinikoski’s ‘open expertise’:

Open-mindedness [is] an attitude of mind which actively welcomes suggestions and relevant information from all sides . . . The worst thing about stubbornness of mind, about prejudices, is that they arrest development; they shut off the mind from new stimuli. Open-mindedness means retention of the childlike attitude . . . Open-mindedness is not the same as empty-mindedness. To hang out a sign saying ‘Come right in; there is no one at home’ . . . But there is a kind of passivity, willingness to let experiences accumulate and sink in and ripen (Dewey 1916: 174–5).

(2006, p. 228)
What we are advocating, then, is openness in three senses:

- **Open knowledge**: the explicit use of knowledge that is open to challenge and scrutiny and that will grow and develop over time as opposed to closed knowledge that is potentially dogmatic and a barrier to learning.
- **Open-mindedness**: in the sense used by Gardner, Fook and White of not having fixed or preconceived ideas – allowing scope for creativity; and
- **Openness to learning**: being willing to learn from not only our mistakes, but also from what we do well.

### Voice of experience 1.2

I find it very difficult working with Steve. He is a very experienced practitioner and he clearly has a lot to offer, but I worry sometimes about how closed he is to new ideas or to learning. He seems to have such a macho attitude that seems to say 'I've seen it all, done it all and there's nothing anyone can teach me.' I think it's only a matter of time before he gets himself into serious difficulties one way or another.

*Jen, a social worker in a multidisciplinary drugs and alcohol team*

### Using knowledge critically

Theorizing practice by using knowledge is clearly, then, an important part of reflective practice. However, as some of our earlier comments indicate, it needs to be a *critical* use of knowledge – that is, one that:

- (i) does not accept the situation at face value and looks beneath the surface to see what assumptions and forms of reasoning are influencing the circumstances (critical *depth*); and
- (ii) locates what is happening in its wider social context – that is, sees what processes are occurring at a micro level as part of a more holistic social and political picture at the macro level (critical *breadth*).

The critical use of knowledge therefore involves elements of both depth and breadth.

Moon refers to Proctor’s (1993) emphasis on ‘criticality’ in reflective practice:

> On this view, reflective practice is the process of looking back in a critical way at what has occurred and using the results of this process, together with professional knowledge (with technical and ethical aspects), to tackle new situations. (1999, p. 59)
This helps us to understand that a critical perspective is one that can help us to develop a fuller understanding of the situations we face so that we are better equipped to deal with them. A critical perspective is a key part of what has come to be known as ‘critical reflection’, an important topic that is worthy of closer attention.

**Critically reflective practice**

Some writers (for example, Fook and Askeland, 2006) draw a distinction between reflective practice and critical reflection. However, while respecting the important contribution of such writers, we prefer not to draw such a distinction, as, in our view, an approach to reflective practice that does not adopt a critical perspective would produce poor-quality practice and, in some respects, dangerous practice – for example, by unwittingly reinforcing patterns of discrimination. We therefore use the term *critically reflective practice* to emphasize that a critical ‘edge’ to both reflection and practice is an essential prerequisite. We also feel it is important to use the term ‘practice’ (that is, critically reflective practice, as opposed to simply critical reflection) to emphasize that reflective activities need to be directly part and parcel of the practice world and not an activity limited to educational programmes one or more steps removed from the day-to-day activities of practice.

**What do we mean by ‘critical’?**

By critical we do not mean being unappreciative (‘Lin was critical of Carol’s efforts’), nor do we mean it in the sense of referring to a crisis point (the ‘critical moment’). Rather, we mean it in the sense of an approach that is characterized by questioning and not taking things for granted – especially social arrangements that are based on inequality and disadvantage. As we noted above, it has both breadth and depth.

In relation to the depth aspect, Taylor provides helpful comment in stating that

> According to Bandman and Bandman (1995: 7) critical thinking is ‘the rational examination of ideas, inferences, statements, beliefs, and actions’. They clarify their definition by stating that critical thinking includes scientific reasoning, the use of the nursing process, decision-making and reasoning about issues. Adding further specifications to the definition, they make it clear that critical thinking is reasoning in which we analyse the use of language, formulate problems, clarify and explicate assumptions, weigh evidence, evaluate conclusions, discriminate between good and bad arguments, and seek to justify those facts that result in credible beliefs and actions.

(2006, p. 105)
Members of other professions can substitute ‘helping process’ (Thompson, 2015a) for ‘nursing process’ without losing the value of the points being made.

However, what Taylor is referring to here is only one part of criticality in the sense in which we are using it. While it covers the ‘depth’ element of a critical perspective (looking beneath the surface to see what assumptions and reasoning are being relied upon), we also need to consider the ‘breadth’ dimension – the wider sociopolitical aspects of the situation. Dolan, Canavan and Pinkerton give us a good indication of what this needs to entail:

Gambrill, citing Brookfield, argues that reflection becomes critical when it has the purpose of unmasking how power underpins, frames and distorts processes and interaction. She also argues that critical thinking questions assumptions and practices that seem to make our lives easier but actually work against our long-term best interest.

(2006, pp. 19–20)

This important passage highlights the breadth aspect by introducing the key concept of power but, in addition, refers to the depth aspect by highlighting that we also need to look at underlying assumptions.

**Beyond atomism**

The point was made earlier that Schön’s work is predominantly individualistic in its focus – that is, it pays relatively little attention to the wider social context of professional practice. Moon refers to the work of Morrison (1996) which is:

critical of the lack of concern for the social, political and ethical awareness and the emancipation that can emanate from reflective processes as described by Schön. Smyth (1989) supports this view. He describes the vision of professionals as a concern with the ‘micro aspects’ of a situation, as opposed to ‘macro concerns’ of political and ethical issues or the wider generalizations that might be made from events in professional practice.

(1999, p. 50)

Atomism refers to the philosophical notion of regarding society as simply a collection of individuals, with little or no acknowledgement of the role of wider social processes and factors (Thompson, 2018a). For example, an atomistic understanding of crime would see it as purely a matter of individual (im)morality and would take no account of poverty,
cultural and peer pressures, economic pressures, the significance of drug or alcohol problems or other such macro-level issues.

A critical approach to reflective practice is one that goes beyond such atomism and takes account of the wider social picture – in relation to, for example, racism, sexism, ageism and other such forms of discrimination. A critically reflective practitioner is therefore someone who is not only self-aware, but also socially and politically aware – able to ‘tune in’ to the bigger social picture that plays such an important part in shaping people’s lives, the problems they experience and the potential solutions to those problems. This is all part of theorizing practice, drawing not just on technical knowledge but also a wider understanding of the context of our practice.

Transformative potential

In terms of critically reflective practice, an important thinker is Mezirow (1983) who writes of ‘perspective transformation’. By this he means the way in which processes of reflection, when genuinely critical, can result in different understandings of a person’s situation. This is parallel with the basis of narrative therapy in which people who have been disempowered by their circumstances (experiences of abuse, for example) can be helped to develop a more positive understanding and outlook by being supported in ‘co-constructing a new narrative’ – that is, being helped to create new meanings or understandings that are more empowering (for example, by transforming a negative ‘victim’ narrative into a more positive ‘survivor’ narrative).

Such a transformative perspective is also often referred to as an emancipatory approach – that is, one that helps to free people up from restrictive aspects of their social circumstances (discrimination, stigma, poverty and so on). Moon again offers helpful comment:

Emancipatory interests rely on the development of knowledge via critical or evaluative modes of thought and enquiry so as to understand the self, the human condition and self in the human context. The acquisition of such knowledge is aimed at producing a transformation in the self, or in the personal, social or world situation or any combination of these.

(1999, p. 14)

Critically reflective practice can play a crucial part in trying to make sure that professional practice is geared towards positive, emancipatory outcomes, rather than reinforcing existing patterns of inequality and disadvantage (Thompson, 2018b).
Even though he was black himself, Marcus had given very little thought to racism in relation to mental health when he began his psychiatric nurse training. However, when it came to the point where he was required to spend some time on the wards as part of his training programme, he was amazed to find out that such a high proportion of the patients were from a minority ethnic background. He was also taken aback when, in having discussions with some of the black patients, he could see the significance of racism in terms of how their problems had developed and how they had subsequently been treated by both professionals and the general public. However, what surprised him most was that, when he read the files relating to the patients he had been talking to, he could see no mention of racism at all. Such matters did not appear to have been part of the assessments carried out by the psychiatrists, the nurses, the psychologists or the social workers. As a result of this he started to read up on racism and mental health. He started to appreciate that, while he had seen no specific evidence of personal racism on the part of any of the professionals, the almost total failure to recognize the significance of racism in black people’s lives and their experience of mental distress was in itself a very worrying feature of the mental health system.

Thompson (2016a) discusses three different approaches to reflective practice: immanent, transitive and transformational. It is the third of these that fits well with Mezirow’s notion of transformative potential:

- **Immanent reflection** Immanent is a philosophical term that refers to things that are self-contained, in the sense that they make no outward difference. Immanent reflection therefore involves thinking that has no impact; it does not bring about any change – it is thinking for thinking’s sake.

- **Transitive reflection** This is the opposite of immanent reflection; it is reflection that brings about results. It makes a difference and takes us forward. It is therefore a worthwhile use of our time.

- **Transformational reflection** This goes a step beyond transitive reflection:

  This refers to where we not only bring about a positive change because of our reflective activities, but actually go beyond this to transform the situation. For example, if we are regularly encountering a certain problem, transitive reflection may come up with a way of dealing with that problem whenever it arises. Transformational reflection, by contrast, could potentially radically transform the situation so that the problem concerned no longer arises.

  (p. 140)

Clearly, it is transformational reflection that we should aim for wherever possible, while recognizing that there will often be times when we will have to settle for transitive reflection.
Conclusion

This chapter has set the scene for the following chapters by clarifying what we mean by reflective practice, and in particular, critically reflective practice. It has explored various aspects of the topic, many of which will be revisited and expanded upon in the pages that follow. It has also, we hope, given a clear picture of the complexities of reflective practice and the dangers of adopting a superficial or simplistic approach to the issues involved.

So, to return to the question that forms the title of the chapter (*What is reflective practice?*), we would find it difficult to improve on the helpful summary of some of the main elements involved provided by Brechin, Brown and Eby:

Reflection is the ability to think and consider ‘experiences, percept[ion]s, ideas [values and beliefs], etc. with a view to the discovery of new relations or the drawing of conclusions for the guidance of future action’ (Quinn, 1998, p. 122). In other words, reflection enables individuals to make sense of their lived experiences through examining such experiences in context.

Reflection, although a cornerstone of reflective practice, is not the only skill needed. Reflective practice is more than just a thoughtful practice. It is the process of turning thoughtful practice into a potential learning situation ‘which may help to modify and change approaches to practice’ (Schober, 1993, p. 324). Reflective practice entails the synthesis of self-awareness, reflection and critical thinking.

(2000a, p. 52)
Having clarified our basic approach to reflective practice, we can now move on to explore three key dimensions of our topic: the cognitive, affective and value dimensions. These form the subject matter of Chapter 2, and so it is to these that we now turn.

Points to ponder

➢ What do you understand by the term critically reflective practice?
➢ How has the concept of theorizing practice furthered your understanding of the relationship between theory and practice?
➢ Do you consider yourself to be a ‘knowledgeable doer’? On what basis have you made this assessment?

Exercise 1

Choose a piece of work where you have been involved as a practitioner. If you are not involved in direct practice, then feel free to construct an imaginary scenario. With reference to what you have read in this chapter, identify what you did, or could usefully have done, in relation to:

a. reflection-for-action
b. reflection-in-action
c. reflection-on-action
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