

## CHAPTER 2

# REFLECTION AND REFLEXIVITY

Chapter 2 continues explaining reflection and reflexivity, and how focusing upon ethical values, acute observation and description, and challenging emotions to reflect upon, can help to make sense of experience. Vivid examples of practitioners' reflection deepen and clarify the explanation.

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, quoted in Hinett 2002, p. v)

There are in our existence spots of time / ... whence ... our minds  
Are nourished and invisibly repaired; / ... Such moments  
Are scattered everywhere. (Wordsworth [1880] 2004, p. 208)

How can we know the dancer from the dance? (Yeats 1962, p. 128)

You are watching a film. An arty one starting with a wide-angle lens: a hawk's eye city view. From this height cars and buildings look like toys, and streets and fields make a pattern: pretty but with little human meaning. People are too small to be seen.

The camera zooms: into focus comes one particular street; people walking and talking, everyday interchanges. Closer and closer up to one building, and one window; we pass through the glass into a big secondary school staffroom.

The mind's eye is likened to film. Reflection creates film like a dialogue with the self (see also Attard 2008). We become film-makers and authors of our own lives to stand back for a critical view; 'I didn't see it as a discussion

## 26 REFLECTION AND REFLEXIVITY: WHAT AND WHY

between me and the lecturer I saw it as a discussion with myself' (Wright 2005, p. 514).

### **A film of professional practice**

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The camera has entered the school staffroom. The atmosphere is stiff and almost silent; only one staff member, head of maths, is humming to himself, the rest look anxious and jumpy. The headteacher enters and the quiet deepens; she solemnly invites the hummer to her room. He follows her, the tension shifts but does not lessen: staff talk in low voices. This tension has been building for months: since the biology teacher began to suspect the head of maths of sexual relations with a pupil.

The camera pans out, circles at hawk level again, zooms. This time it focuses on a terraced house in a narrow street where there are tiny backyards and no front gardens. A distraught mother has run out of the front room, thrusting her dead baby into the health visitor's arms. The tiny body is cold – so cold. The little girl wants to play with 'dolly', thinking the nurse might be kind and let her; Mummy would not. The health visitor is in anguish, knowing the baby has had an autopsy: a horrifying sight unclothed.

The camera takes us now to a high-rise block of flats deep in London's East End: utterly confusing with walkways, lifts which work sporadically and jerkily, and flat numbers assigned by a dyslexic infant. A grey-haired social worker confusedly studies number after number as the wind whistles, blowing crisp packets to reveal hypodermic needles. She jumps as heavy footsteps interrupt the wind's whistle, her heart missing a beat as a dark shape looms.

What do the practitioners in our films do with the distress, guilt, anxiety, horror, anger, humiliation, which they cannot, or do not, express at work? How do they prevent these powerful feelings from draining energy, disabling them from effective practice? How do they learn from their own feelings, turn those negative energies into positive? How do they learn from each other's mistakes and successes, each other's ideas, experience and wisdom? How do they learn to empathise with another through experiences which they will never know? A man will never know childbirth, for example; how does he learn compassion and understanding to support a mother in travail?

Our films zoomed in from the distant and impersonal to the close and intensely human. *Through-the-mirror* writing can focus on the 'rag and bone shop of the heart' (Yeats 1962, p. 201). We move from the grand ideals of practice, to precise stories of individuals who cry and laugh, shout and tremble, and are involved with clients at the thresholds of life and death, at periods of intense change and development. Our professional heroines and heroes come to terms with powerful emotions, learn from mistakes and successes, and develop empathy.

*Reflective practice* concerns how practitioners can examine their own stories closely, look at themselves as heroines and heroes in their own real-life films, and perceive colleagues and clients also as heroes and heroines. They take themselves, problems, grief, anxieties, joys, seriously.

*Through-the-mirror* writing focuses upon detailed stories of practice and life: actions, thoughts, feelings, assumptions, prejudices and engagement with others' point of view. These stories are imaginative creations drawn from experience. Seen as interlocking plots, the problems, anguishes, and joys of practice become comprehensible: to be dealt with creatively and developmentally. The use of the aesthetic imagination provides a screen as wide as life itself, drawing upon all faculties. Attempting to reflect only upon 'what actually happened', and then to subject such an account to rational questions such as 'how might I have done it better?', constrains unnecessarily.

Writing stories, poetry and drama about practice can foster critical reflection upon experience, roles, values and knowledge. Perceiving, recording and discussing life as narrative is a natural human mode, as is understanding of abstract theorised social, cultural and psychological forms and structures. Practice, and its attendant education and research, primarily concern individual people, each of whom, made up of stories of inextricably linked psychological, emotional, spiritual and physical elements, is also inevitably impinged upon by cultural and social forces. Gaining access to all this via narrative can make sense of seemingly unmanageable complexity. Engel et al. (2008) describe how paying attention to narrative enhances medical education.

### **Vital observation of practice**

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All the above film plots were written about, reflected upon and discussed in groups by practitioners. The departmental head's affair with a pupil greatly distressed the teacher who wrote about it. Closely involved with pupil, family, colleagues, community, she felt deeply entwined in the drama, but could discuss it with no one. A confidential reflective was an ideal forum. The story was written in the genre of romantic love, on my suggestion (see Chapter 14). This distance and strong set structure perhaps enabled her to begin. Her Master's in Education sub-group became agog for each episode. Discussions and group support were so valued, the group continued as a special study module the following semester.

The health visitor did prevent the toddler from unwrapping the 'dolly' dead baby; but was distressed at not handling it sensitively enough. The group were able to help her see it through the eyes of the child, and consider carefully how she might have acted rather than just anxiously warding off the toddler.

## 28 REFLECTION AND REFLEXIVITY: WHAT AND WHY

The black man who approached the social worker in the high-rise block courteously asked if he could help her find her way. The group helped her out of feeling intense shame at her assumptions, and enabled her to consider her habitual state of mind on home visits.

### Why practice as screenplay?

Sharing stories with each other must be one of the best ways of exploring and understanding experience. That is, if what we want and need to say is not just *stored*, but held in our minds as *story* (Winter 1988).

Narrative telling is a vital part of our lives: in staffroom, and home kitchen: 'our preferred, perhaps even our obligatory medium for expressing human aspirations and their vicissitudes, our own and those of others. Our stories also impose a structure, a compelling reality on what we experience' (Bruner 2002, p. 89). It is also a 'source of consolation' (Eagleton 1983, p. 185). Stories offer the fictive comfort of structure (beginning, middle and end), and of the closure of our desire. We are involved in an endless search for something lost: God, Lacan's Imaginary, Freud's pre-Oedipal stage, Sartre's 'Being-in-itself', a unity with the mother's body, a sought-after haven where the signified has a direct innate correlation with the signifier:

Something must be lost or absent in any narrative for it to unfold: if everything stayed in one place there'd be no story to tell. This loss is distressing but exciting as well: desire is stimulated by what we cannot quite possess. (Eagleton 1983, p. 185)

We relate to loss or lack in every story because we want good characters to gain their hearts' desires, the bad to founder. We experience joys and tragedies vicariously. Stories reinforce assumptions about what we might desire and what fear, affirming values and principles. We follow Odysseus past the Sirens holding our breath, and when a fair wind brings him back to Penelope, we will him to shoot his arrow straight to prove he really is her husband; we help Dorothy kill the wicked witch of the West. When Tony Archer's son was on trial for political activity (BBC Radio 4, *The Archers*, autumn 1999), people talked about it in my village, not the latest news or football, until they were satisfied the jury had found him 'not guilty'.

Being reflectively aware is similar to what Einstein called 'an appreciation of the mysterious [which] is the fundamental emotion which stands at the cradle of true art and true science' (1973, p. 80). Socrates is said to have observed 'wonder is the beginning of wisdom', because wonder is an open enquiring state of mind when anything might be possible, when startling inspiration appears as a result of no cognitive logical thought. The sculptor Juan Munoz

spoke of an aim of his art 'to make [the viewer] trust for a second that what he wishes to believe is true. And maybe you can spin that into another reality and make him wonder'.

This reality spinning can involve imaginatively entering others' consciousness, empathetically and ethically, as Eagleton points out:

There would seem to be a need for some special intuitive faculty which allows me to range beyond my own sense-data, transport myself into your emotional innards and empathise with what you are feeling. This is known as the imagination. It makes up for our natural state of isolation from one another. The moral and the aesthetic lie close together, since to be moral is to be able to feel what others are feeling. (2008, p. 19)

The culturally refined Nazis have forever disabused us that the aesthetic necessarily makes us act morally. Rather if we can allow ourselves to be in a state of *mindfulness* (see Chapter 1), *negative capability* (Keats 1818), *willing suspension of disbelief* (Coleridge [1798] 1969), then our moral and ethical faculties will necessarily be brought to the creative process. The Nazis called this *degenerate*, and denigrated, expatriated or murdered those who used it.

Listeners' roles are as important as writers': 'It is the joint effort of author and reader which brings upon the scene that concrete and imaginary object which is the work of the mind. There is no art except for and by others' (Sartre [1948] 1950, pp. 29–30). And:

so there is an art of listening ... Every narrator is aware from experience that to every narration the listener makes a decisive contribution: a distracted or hostile audience can unnerve any teacher or lecturer: a friendly public sustains. But the individual listener also shares responsibility for that work of art that every narration is: you realise this when you tell something over the telephone, and you freeze, because you miss the visible reactions of the listener ... This is also the chief reason why writers, those who must narrate to a disembodied public, are few. (Levi 1988, p. 35)

*Through-the-mirror* writers write for *embodied* readers, real people: peer group, supervisor or mentor. My practitioner students say how *re-storying* with colleagues is as essential as initial writing.

Reflective practice allows relationships with students, clients, patients or colleagues to be seen within a range of possible roles. The whole person of the professional relates to the whole client.

The possible roles for professional and client could be seen to be: *I, you* and *her/him*. The client as '*I*' is central to the drama, the subject, hero/heroine: the story told from their point of view. The client as '*you*' is the *other*, while the professional is the teller of the story, whether telling it as '*I*' (first person narrative) or '*he/she*' (third person narrative). The client as '*her or him*' becomes

**30 REFLECTION AND REFLEXIVITY: WHAT AND WHY**

an object: an appropriate role in some circumstances such as research trials when the patient is only a statistic.

This poem explores a family doctor's awareness of patients viewing themselves centre stage, and the way she handles that:

**Performance**

This is your stage.  
 Sit down, compose your face.  
 Lines rehearsed in the waiting room.  
 Family can't hear you –  
 'Leave mum she has a headache.'

Headache.  
 Muscle ache.  
 Spirit ache.  
 Tired all the time.  
 Tired of the time.  
 Too much time.

Let me perform for you.  
 Let me touch you,  
 measure your blood pressure,  
 measure your worth.  
 You are worth my time.  
 When you get home, they'll ask what I said.  
 Rehearse the lines. (Jo Cannon)

What about practitioners' relationship with themselves (me with myself)? A professional wrote in evaluation: 'Writing weaves connections between my work and the rest of my life, between my inner and outer selves, between the left and the right sides of my brain, between the past and the present.' A trainee said: 'This kind of writing has to have material about who we are and what we stand for.' A medical practitioner wrote: 'I'd considered resigning because I'd been struggling with being a doctor and who it turned me into. Reflective writing has helped me see what was happening – share it with others and begin to find a way through.' Storying and re-storying our lives helps us to keep pace with the way we change and develop over time. 'Who I am' does not and cannot remain stable:

It is important to view the self as an emergent and changing 'project' not a stable and fixed entity. Over time our view of our self changes, and so, therefore, do the stories we tell about ourselves. In this sense, it is useful to view self-definition as an ongoing narrative project. (Goodson 1998, p. 11)

*Through-the-mirror* writing helps the writer perceive *the character who is myself* as dynamically evolving, just as the stories this character finds itself

within are neither stable nor definite, but ‘ongoing narrative projects’. This fluidity is contained within the expression human *being*. Words ending with -ing involve movement and change as in *doing* and *playing*.

### Why reflective practice?

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Our stories are inextricably intertwined: with themselves and with those of others. We tell and retell, affirming and reaffirming ourselves in our own and each other’s eyes (and ears). The accounts slip and merge as we tell, developing new twists and losing ones that have served their turn. This urge to recount and re-create each day is strong; but it is easy to devalue our own stories because they are unimportant compared with those of powerful others such as pop stars, surgeons, politicians: we have lost trust in ourselves, and ownership of our stories.

*Through-the-mirror* writing is a way of claiming control by expressing and exploring our own and others’ stories: crafting and shaping to aid understanding and development. These stories are databanks of skill, knowledge and experience: much of our knowing is in our doing. We can learn from our own and each other’s mistakes and successes, each other’s ideas, experience and wisdom, and tackle and come to terms with our own problem areas. Although practice is continually aired – over coffee with a colleague – we do not tell each other the things at our cutting edge of difficulty. We often do not even tell these to ourselves.

Discussing reflective writings in depth enables outcomes of reflection to be taken back into practice, improving and developing (Kolb 1984). Reflection reaches the stage when ‘words can do no more ... / Nothing remains but the act’ (Aeschylus 1999, p. 115). This gives a ‘different way of being’, or as another course participant said: ‘It seems like a new country, one which we’ve all been peering into for a long time.’ This insight facilitates developmental change. Davidson reports using a reflective writing approach within an eating disorders unit:

Through reflection and writing, we can struggle to get a conceptual grip on the situation. With a leap of faith we can open ourselves to honestly experiencing what is going on in our relationships. Even if the resultant understanding and experience is partial, it should yield a point of leverage where something that we can *do* is revealed. And if it transpires what we do does not have the desired result, then at least we have new information with which to enhance our experience and aid further reflection. (1999, p. 122)

Rita Charon (2000c, 2006), general internist and medical professor, reports how sharing reflective writings with patients deepened and clarified understanding; some responded by writing also.

## 32 REFLECTION AND REFLEXIVITY: WHAT AND WHY

I have realised that we have to make the day-to-day parts of our work more enjoyable and varied. Writing, and the reflection it allows, has brought me a real pleasure – that’s why I used to smile and now I can keep that joy and even the intimacy by writing what I’ve felt or seen and its ironies too. (Clare)

*Through-the-mirror* writing can increase confidence and ability, by facilitating and enhancing:

- acceptance of, and increased confidence with, the essential complexity, uncertainty and perspectival nature of professional life
- reflexive critique of personal values, ethics, prejudices, boundaries, assumptions about roles and identity, decision-making processes; taken-for-granted structures
- similarly reflexive critique of professional milieus
- awareness of diversity, and struggle against misuse of institutional power and managerialism
- willingness to explore the interrelatedness of the professional and the personal
- sensitive, fruitful review of ‘forgotten’ areas of practice
- analysis of hesitations, skill and knowledge gaps
- respect for, and trust in, others’ and own feelings and emotions
- development of observation and communication abilities
- constructive awareness of collegial relationships
- relief of stress by facing problematic or painful episodes
- identification of learning needs
- communication of experience and expertise with a wide range of colleagues.

Hoping for answers to conundrums is like searching for babyhood security blankets. Reflective practice leads to further searching questions, the opening of fascinating avenues to explore, but few secure answers. Questions like ‘What should I have done?’ become minor. More questions are thrown up, such as: ‘Why did the maths teacher not hide his relationship with the pupil?’ ‘Perhaps I could have told the toddler a story about the dead baby?’ The social worker’s walkway story was capped by another who turned to face a threatening young gang and asked them the way (although she knew it): they immediately became kids who communicated with her as a person. This supported the social worker to reassess her attitude to seemingly threatening people.

A paradox concerns effective practice being uncertain. We all know colleagues who cannot say ‘I don’t know’. Their effectiveness is diminished by inflexible need to know. In order to acquire confidence, effective practitioners:



- let go of certainty, in a safe enough environment
- look for something without knowing what it is
- begin to act without knowing how they should act.

The essential uncertainty associated with reflective practice and reflexivity make it hard for many. 'Certainty goes down as experiential knowledge goes up ... Pre-service teachers want answers and methods. They want to be certain. They want to know. In pre-service teacher education, working towards habits of uncertainty and puzzlement needs to be undertaken with modest expectations' (Phillion and Connelly 2004, p. 468). Carl Rogers wrote with empathy and wisdom about education, and said:

The goal of education, if we are to survive, is the *facilitation of change and learning*. The only person who is educated is the person who has learned how to learn; the person who has learned how to adapt and change; the person who has realised that no knowledge is secure, that only the process of seeking knowledge gives a basis for security. Changingness, a reliance on process rather than on static knowledge is the only thing that makes any sense as a goal for education in the modern world. (Rogers 1969, p. 152)

Experienced effective practice concerns willingness to have faith in your own knowledge, skills and experience; to trust the process you are engaged in (*through-the-mirror* writing, doctoring, teaching, and so on); to relate to students, clients or patients with respect and unconditional positive regard (Rogers 1969; see also Chapter 3).

Willingness to subject every action and thought to reflection *in action* and self-respectful reflection *upon action* (Schon 1983) is required. Reflection *in action* is a hawk in the mind constantly circling, watching and advising on practice. Reflection *upon action* is considering events afterwards (Schon 1983, see also 1987). Self-respect is needed, while opening up to close observation, uncertainty and questioning previously taken-for-granted areas:

- *actions*: what you and others did
- *ideas*: what you thought; what others might have thought
- *feelings*: what you felt, and what others might have felt.

We live in deeds not years; in thoughts, not breaths;  
In feelings, not in figures on a dial.  
We should count time by heart throbs. He most lives  
Who thinks most – feels the noblest – acts the best. (P.J. Bailey (1816–1902) *Festus*)

'Beween feeling and action there is thought' (Sophocles 1982). Effective actions arise from both feelings and thoughts. Emotions can too easily be marginalised in professional life:

### 34 REFLECTION AND REFLEXIVITY: WHAT AND WHY

There is something rather odd about trying to get help from health workers who have not worked out their own feelings, or who deny them to themselves and others. Where do all those spontaneous feelings go and who is to say what damage they might be doing to the delicate internal workings of our minds if we continue to repress and suppress them ... The key insights and changes in the way I view myself and my professional work have come through self-reflective work. (Heller 1996, pp. 365, 368)

## Ethical values

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Stories do social and political work. A story is never just a story – it is a statement of belief, of morality, it speaks about value. (Goodson 1998, p. 12)

Writing a personal narrative of practice is a moral project. (Arthur Frank personal communication; see also 1995)

What are ethical values? How do we discover those we live and work by? More crucially, how do we appraise and develop them? Values inherent in practical wisdom, along with technical knowledge and skill, are foundations of living and working, according to Aristotle, rather than those laid down by our culture: 'A person's actions are not based on the values law seeks to universalise, but on self-reflective values' (Manickavasagam 2000, p. 4). Values have substance only in practice: we are what we do; actions speak louder than words. Professional integrity can be defined as working according to values coherently integrated within daily practice, but many practitioners might never have defined their own values explicitly.

Values become clearer when events are narrated critically in writing: 'stories ha[ve] a key part in educating us into the virtues' (MacIntyre 1985, p. 216). Narrative communicates ethics in a way nothing else can (Charon 2006), for example without stories the meaning of fairness would be difficult to explain (Watson 2003). A qualitative research study examined how stories can shape lawyers' ethics (Economides and O'Leary 2007): the 'findings were illustrative of the subtle way in which narrative both constructs and reinforces particular understandings of professionalism within legal organisations' (p. 12). They concluded: 'Stories can be used to shape morality in contemporary organisations' (p. 6). Economides and O'Leary observed that stories can also be used negatively (for oppression, dissimulation, lying), and that good stories (powerfully persuasive) can also tend to push out true ones (see Twining 2006).

Practitioners cannot know the myriad effects of their actions, or what colleagues and clients feel and think. *Through-the-mirror* writing can, to some extent, open this up.

The family asked to meet me. Their daughter had recovered from meningococcal septicaemia, and they wanted to know why I hadn't diagnosed it ... My stomach wrenched with anger and frustration. Can't they see? That's the whole point: two doctors a few hours apart both made the same clinical judgment that this was a viral illness. I felt that their criticisms were unfair ...

As the date for our meeting drew closer, that black churning bitterness was still there, and I realised I had to do something ... I decided to ... write the story of the family's complaint from the point of view of the parents. The first line came easily: 'She nearly died you know. Our daughter nearly died.' At that point my perspective on the complaint changed. I felt the parents' fear, and I understood their terror. They had taken their ill child to a doctor and had trusted him to keep her safe ... The child got worse and nearly died. They lost the doctor; they could have lost their daughter.

The complaint wasn't about diagnostic skills or statistical probabilities but about a family trying to make sense of the horror of nearly being ripped apart forever. By thinking about the complaint from the family's point of view, I understood that my role in the meeting wasn't to defend but to listen. (Munno 2006, p. 1092)

Munno's clarity about listening taking precedence over defending his professional judgement lies in his final half-sentence. He reached this conclusion by perceiving from the parents' point of view, using story-writing. His first sentences – 'She nearly died you know. Our daughter nearly died' – changed his perspective on the parents' attitude, and therefore helped him begin to reassess his value judgement as to appropriate action. This remarkable change was enabled by him humbly and honestly putting himself in the parents' position, by harnessing the narrative power of story-writing.

At a senior medical educators' conference (UK Conference of Postgraduate Education Advisers in General Practice, UKCEA) I asked a workshop group to write a list of words about their work: any words. We took some time listening to each list; the items carried such significance. Each then chose one abstract noun (trust, respect, for example) to write reflectively about. They then wrote a narrative about any experience. Allan's abstract noun was *vulnerability*, and he also wrote about missing a diagnosis of meningococcal meningitis, concluding:

I lost some of the confidence I'd had, and have been since more wary of my patients. I sometimes fear my involvement in them compromises my professional judgement and makes me more vulnerable. Perhaps it would be better to be less interested and more detached. Perhaps I would be a better doctor and less 'sloppy' if I maintained a more professional distance.

The group delved deep in discussion about professional responsibility: how relating closely to patients enhanced both clinical practice and personal

## 36 REFLECTION AND REFLEXIVITY: WHAT AND WHY

experience of it, but could increase anxiety. Each participant brought interpretations, perspectives and experience, offering individual insight into the story's implicit meanings, widening understanding. The discussion enabled them to tussle with issues around relationships with patients: relating to them with empathy opened up insight, but entailed vulnerability. Allan found that writing about his loss of confidence and sharing this with trusted peers helped re-establish confidence built on more appropriate values.

On another course, narratives were written as if to be read by children. Lucy Henshall, initially nonplussed, followed my recommendation to write whatever came into her mind, in whatever way. Lucy's story concerned a tricky consultation with a boy presenting with listlessness and stomach pain. By attending carefully to what child and mother expressed, she gave him the confidence to confess his deepening anxiety about his mother's new boyfriend.

His mother, quieter than I had ever seen her, reached over, took his hand and squeezed it.

'It's going to be fine' she whispered, 'We'll work it out together, Bill'.

Bill didn't look quite as small as he went out, and his Mum didn't seem quite so tall and loud either. It was almost as if, while we had been talking, he had grown taller and she had grown smaller so became much closer than before.

Reflecting later, Lucy felt proud of having valued listening and openness, rather than maintaining professional distance. She had made herself vulnerable and open to being trusted with the sensitive kernel of the problem. The task, to write as if for a child, enabled her to re-experience and re-evaluate the event, and therefore to clarify her implicit values.

These examples are from experienced practitioners. Research shows medical education inhibits rather than facilitates the development of moral reasoning (Patenaude et al. 2003a, 2003b). This leads students, the authors conclude, to regard 'the patient as a problem to solve rather than a unique person who is part of society' (2003a, p. 828). The report did not say whether reflective practice and reflexivity was taught, facilitated and encouraged within that medical school: those students surely need it.

### **Challenging emotions**

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Powerful emotions sometimes arise within practice and reflection. Powerful emotions can initially appear to inhibit reflective abilities, however, as Andrew Eastaugh found in research into co-tutoring:

The idea that my emotions are a source of understanding has an exciting and novel ring for me. Exciting because it opens up the possibility ... that the emotional part of me has a value outside my own personal attachment to it ...

It is novel because my experience of the world of learning has been that emotions are, at best, merely the icing on top of the cake, for decoration, self-indulgence and treats, but not the real substance. Too much will make you sick and is unnecessary. At their worst they are a serious barrier to the real business of life – should be pushed aside and ignored. (Eastaugh 1998a, p. 48)

Strong feelings are an indicator of ethical values. People become aroused (positively or negatively) when human values are transgressed, opposed or affirmed (examples of values are respect for my personal boundaries, trust in my professional standing, unconditional positive regard for clients (patients, students) despite race, creed or culture). Reflecting upon emotional situations can help to discover ethical values in practice.

Recognising and working with emotions through reflexivity can significantly develop practice. The deaths of Victoria Climbié (Laming 2003) and Baby P ([www.nhsconfed.org](http://www.nhsconfed.org)) indicate a failure of practice. Climbié's social workers failed to respond to clear indications of abuse because their defence mechanisms protected them against psychological and emotional stresses of working with violent clients (Ferguson 2005; Cooper and Lousada 2005). In our post-emotional welfare state, professionals increasingly have an instrumental role in the delivery of services rather than being themselves agents of change, support and care (Dean 2004; Le Grand 2006; Ruch 2009). MacIntyre (1985) says managers' activities have become value neutral, concerned with rationality, efficiency and confidence, rather than moral debate or awareness. People are viewed as costs, effects or benefits, rather than feeling humans. These metaphors can lead professionals to perceive service users in terms of specific problems or as theoretical constructs rather than unique people with unique needs (Redmond 2006). A further scandal involved abuse of learning-disabled service users ([www.healthcarecommission.org](http://www.healthcarecommission.org)). Another danger of working with violent clients is that workers do sometimes *mirror* the behaviour of clients, and become aggressive themselves (Knott and Scragg 2007).

Anger can prove to be a useful if uncomfortable focus for reflection. Here a senior medical Master's student reflected upon the effect of his reflective practice story-writing and work:

As a result of reflecting upon these incidents I now understand much better how I have been dealing with anger and the effect it was having on me. I felt unable to express anger because I was afraid of making a fool of myself, afraid of losing control and because I want to be well thought of. I feel that if I get angry with someone they will not like me. I want to be liked. I therefore tend to push my anger down inside. I have not been consciously aware of doing this and therefore have not been aware of how much anger I have been carrying. I have therefore not been able to explain the unpleasant feelings I have had when it has begun to rise to the surface.

### 38 REFLECTION AND REFLEXIVITY: WHAT AND WHY

I now know that it is not possible (or necessarily good) to please everybody all the time. I know the difference between telling someone I am angry and expressing the anger itself. I am able to recognise when I am angry, when I am suppressing it and the feelings that this causes. I feel more able to tell people when I am angry with them and that I can do this articulately. (Rod)

A doctor wrote a vehement and dramatic long-term 'diary' about his relationship with his health authority. Reflecting upon it later, he wrote: 'I am much less emotionally reactive in all these management meetings I have to go to, and certainly not as nervous!' Lindsay Buckell's 'expression of my passionate hatred of the current climate of fear and blame' (Chapter 5) is another.

Keith Collett, a GP (family practitioner) trainer, and supervisor for fellowship application to the British Royal College of General Practitioners, encourages the writing of drafts of medical reports, responses to complaints and so on, so that they can be discussed, reflected upon and redrafted:

This is incredibly useful to prevent registrars [interns] overstating support or condemnation for a patient ... They have a chance to reflect on how it will be received by the patient, their relatives, or their solicitor ... I encourage the first splenic draft to be written as I feel it has a healing and calming effect, and offers an opportunity for reflection. Too often dictaphones are used and the resultant text signed and sent without reflective reading. (Keith Collett)

Anger is often viewed as inappropriate, beyond the professional boundary. Reflective practice is an appropriate locus for exploring it, and the other seemingly dangerous emotions.

Discussing each other's work, our focus moves naturally between personal development, professional development and writing technique. We work intensely, sometimes sharing deep emotions, but I rarely experience any tension or sense of effort. (Maggie)

I wrote bits of verse which expressed conflicts of loyalty and fears for the future. I read them out and wept, and the silence of our group carried my emotions. (Clare)

Paula Salvio supports teachers in *empathetic enquiry*, a deeper understanding of ethnic minority students. She says teachers must 'travel into our own worlds' in order to 'travel to those of others', and gain empathetic understanding. This process must involve feelings, as 'emotional whiteout' will disable this travel into both our own worlds and those of others (Salvio 1998, p. 49). Cixous described this as feminine writing:

All the feminine texts I've read are very close to the voice, very close to the flesh of language, much more so than masculine texts ... perhaps because there's something in them that's freely given, perhaps because they don't rush into meaning, but are straightway at the threshold of feeling. There's tactility in the feminine text, there's touch, and this touch passes through the ear. (1995, p. 175)

## Focus on reflection

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### Mark Purvis and the Death of Simon

The grown-ups stand around watching.  
 Grown-ups know what to do.  
 The grown-ups stand around watching.  
 Is that Simon lying on the pavement?  
 He has got blondie hair like Simon's.  
 The grown-ups stand around watching.  
 A boy has been run over, another kid says.  
 Is that Simon lying on the pavement? He *was* walking in front of me.  
 The grown-ups stand around watching.  
 Mrs Bailey puts a blanket over him – but I can still see his blondie hair.  
 She looks at me but before she can turn quickly to the other grown-ups,  
 I can see she's scared.  
 'Send Mark away.'  
 What have I done wrong?  
 The grown-ups know what to do.  
 They send me away.  
 I run ahead alone.  
 Trying to find Simon.  
 I might not recognise him.  
 Pulling kids by their shoulders – no that's not him.  
 I speed up when I hear the ambulance siren.  
 'Simon's been run over.' Pete Williams said.  
 I run away, trying hard not to believe him.  
 How can Pete Williams tell who is lying there,  
 anyhow I saw *him* looking for *his* brother too.  
 Surely I would have recognised my own brother.  
 My teacher says 'Simon will be in his classroom'.  
 But he isn't, so she smiles and cuddles me, warm and soft.  
 'It's alright Mark, they call ambulances for sprained ankles these days.'  
 When he came into the classroom everyone stopped and looked.  
 He didn't have to tell me.  
 I said 'Simon's dead,' and he nodded, unable to speak. (Mark Purvis)

Mark (a GP trainer) needed to write about his little brother's death in a professional development situation to free himself from the way the unexplored memory inhibited his ability as a doctor to cope with child deaths. After he had read the poem to the group and we had discussed it, he wrote this:

I had never before in detail talked about what I was feeling at the time when Simon died. Now I have written about it I can and do talk about it.

#### 40 REFLECTION AND REFLEXIVITY: WHAT AND WHY

Simon and I had had an argument about a fortnight before he died. I'd asked Simon not to walk with me to school. You know what it's like, an older brother wants to be with his own friends and doesn't want to be seen taking care of his little brother. Until I did this writing I felt guilty about Simon's death – that it was my fault for not allowing him to walk with me.

In the past my feeling about Simon's death disabled me for dealing with the death of child patients. Everyone finds it difficult; but for me they used to bring all sorts of things to the surface. I remember one child who died, I was totally disabled and unable to cope with consultations with the parents. I cried with them, and told them about Simon and that I was crying for him.

The writing has made me feel completely different about Simon's death, has made me deal with it in a different way. I can now see I wasn't responsible; though my mother still feels very guilty that she didn't drive him to school that day. The time was right for me to write.

I didn't know I was carrying so much guilt. Now I know I don't need to carry it. I will cope differently now when a child patient dies. (Mark Purvis)

Mark Purvis created the character of 9-year-old Mark in his poem. This enabled visiting that so painful scene, observing this bewildered little boy. The poem is so authentic: the voice of the child so consistently, movingly clear, drawing forth empathy in readers. Yet it is fiction, written by a senior and well respected doctor, not a 9-year-old. Can you imagine Mark being able to *talk* about Simon with anything like this power? Writing enabled a private quiet space for this memory to be revisited.

Poetic form is an enabling device (see Chapter 14), being at a remove and clearly not 'true' even when it tells of life events (as poems usually do, one way or another). Poetry draws on a range of devices – such as repetition ('grown-ups'), and cutting away unnecessary words, as in the taut final stanza – which enable deeply painful events to be communicated.

Film-makers use similar devices, such as holding the camera at child height. The reflective practitioner has to be able to reinhabit their own skin at that time in their lives. They also need to experiment with seeing the world through the eyes of another, a student perhaps. The funny thing is that one *can* re-experience an event, or experience another's vicariously. 'The past is [not] a foreign country. They do [not] do things differently there' (Hartley 1953, p. 1). Jean Cocteau vividly describes how he enabled himself to revisit his past; listen to him holding his own camera at child height:

I thought of going along the street from the Rue Blanche to number 45, closing my eyes and letting my right hand trail along the houses and the lamp-posts as I always used to do when I came back from school. The experience did not yield very much and I realised that at that time I was small and that now my hand was



placed higher and no longer encountered the same shapes. I began the manoeuvre again.

Thanks to a mere difference of level, and through a phenomenon similar to that whereby a needle rubs against the grooves of a gramophone record, I obtained the music of memory and I discovered everything again: my cape, my leather satchel, the name of the friend who accompanied me, and the name of our teacher, some precise phrases I had said, the marbled cover of my notebook, the timbre of my grand-father's voice, the smell of his beard and the material of the dresses worn by my sister and mother, who were At Home on Tuesdays. (Cocteau [1930] 1968, p. 137)

### Re-view

A film or story is a dynamic fresh look through the eyes of more than one actor. Replaying what 'actually' happened is impossible: any retelling is affected by the view of the teller. *Through-the-mirror* can enable exploration of viewpoints and possibilities:

Stories are a lens through which I view the world to make sense of my experiences and those of my colleagues and patients. In writing some of these stories I am able to focus on complex issues that have previously appeared distorted by time and emotions. Metaphors shed light on subjects that I had been unaware of before, patterns stand out in ways that I had not hitherto understood. (Mark Purvis)

In the film *Blow-up*, a photographer notices figures in park undergrowth in a photograph's corner. These indistinct details, blown-up in size, using photographic development (before digital methods), prove to be a body and a gunman. No detail is potentially too trivial or insignificant to write, think and talk about. Vital life-changing details will go unnoticed, unless they are *blown-up* and focused upon.

Many helping professions facilitate others. Practitioners cannot support others if they are not aware and open themselves (Murray 1982). Bringing the personal into the professional can increase empathy between client and professional (Smyth 1996). Aesthetic experience (such as writing) can leap over the seeming gap between the personal and the professional self, and the seemingly impossible gap between the safe and rehearsed story and possibly dangerous retellings. This can only bring greater unity and wholeness of experience to the practitioner or educator, and greater empathy between them and client. Job satisfaction will increase, and work-related stress decrease. Work takes up the most and best hours of our days; personal satisfaction in it is vital, as Primo Levi says:

## 42 REFLECTION AND REFLEXIVITY: WHAT AND WHY

Perhaps the most accessible form of freedom, the most subjectively enjoyed, and the most useful to human society consists of being good at your job and therefore taking pleasure in doing it – I really believe that to live happily you have to have something to do, but it shouldn't be too easy, or else something to wish for, but not just any old wish; something there's a hope of achieving. (Levi 1988, p. 139)

The writing, the essential discussions and the writing of additional stories from different angles with the support of the group, is a creative explorative process in its own right: not a tool in professional reflection. Writing is the vehicle for the reflection: reflection *in* writing; course participants do not think and *then* write. Not only does writing enable the most appropriate reflection, but also, as a participant commented, 'one of the values of writing is that you can freeze the film: reflect upon one frame or a short series, then run the film backwards and review a previous scene in the light of reflections upon a later one. This would be difficult to do in talking: it wouldn't make sense; impossible to do during action.'

I consider writing as a *method of inquiry*, a way of finding out about yourself and your topic. Although we usually think about writing as a mode of 'telling' about the social world, writing is not just a mopping-up activity ... Writing is also a way of 'knowing' – a method of discovery and analysis. By writing in different ways, we discover new aspects of our topic and our relationship to it. Form and content are inseparable. (Richardson 2001, p. 34–5)

The psychologist Oliver Sacks studied people who were missing, or effectively missing, part of their brain, and the bizarre things this led to. In *The Man who Mistook his Wife for a Hat*, he studies 'Dr P' who could see, but had lost 'visual perception, visual imagination and memory, the fundamental powers of visual representation ... insofar as they pertained to the personal, the familiar, the concrete'. Sacks concludes:

Our mental processes, which constitute our being and life, are not just abstract and mechanical, but personal as well – and as such involve not just classifying and categorising, but continual judging and feeling also. If this is missing, we become computer-like, as Dr P was. And by the same token, if we delete feeling and judging, the personal, from the cognitive sciences, we reduce *them* to something as defective as Dr P – and we reduce *our* apprehension of the concrete and real ... Our cognitive sciences are themselves suffering from an agnosia essentially similar to Dr P's. Dr P may therefore serve as a warning and parable – of what happens to a science which eschews the judgmental, the particular, the personal, and becomes entirely abstract and computational. (Sacks 1985, p. 19)

Reflective practice can learn from Sacks's 'warning and parable', and be open to as much of ourselves as is possible. A reflective practice suffering from agnosia will not get us terribly far.

Effective reflective practice encourages understanding and interpretation of principles, justifications and meanings (Morrison 1996). It involves interrogating both our *explicit* knowledge, such as known and quantifiable evidence-based knowledge, and *implicit* knowledge – 'a collection of information, intuitions and interpretation' (Epstein 1999, p. 834) based on experience and prior knowledge (for further analysis of types of knowledge, see Belenky et al. 1997; Eraut 1994). Implicit knowledge is tried and tested, gained initially from experience, observation, or study. Intimately known, its appropriate application is intuitive. This does not necessarily mean it is right, any more than knowledge gained from randomised control trial research (explicit).

Such re-viewing of knowledge and experience can lead practitioners to perceive a need for change. One of my students stated: 'This is not an academic module, but an assertiveness training course'. Asserting yourself inevitably involves challenging social structures.

One of the greatest benefits to a student in a learning situation, or a client with a practitioner, is the sense of their relatedness to the professional: that they are interested, involved, and care. In medicine this has been called the *placebo effect* of the physician as *healer*: 'the attitude of the doctor can make an appreciable difference to the psychological response of the patient who feels the need to be understood and listened to empathically' (Dixon et al. 1999, p. 310). To give clients confidence in us as professionals, we have to be secure and happy enough ourselves in our roles, and not anxious or inhibited.

How can that happen in overworked, overstressed professions, getting less appreciated daily? One of the ways of being an empathetic, effective practitioner is to be reflexive as well as reflective.

## **Making sense of experience**

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Life does not really have a beginning, middle and end (Sartre [1938] 1963): that is the prerogative of literature, of stories of experience. Writing and telling our stories is not straightforward; but if we can have sufficient faith in ourselves, trust in the process, and respectful unconditional positive regard (Rogers 1969) for clients and colleagues to create a beginning, the rest might well follow.

A closely observed event (Wordsworth's 'spot of time'), written about, reflected upon, discussed critically and re-explored through further writings stands metonymically for the whole of that professional's practice. Stories and poems are slices, metonymically revealing the whole of life (for explanation

#### 44 REFLECTION AND REFLEXIVITY: WHAT AND WHY

of metonym see About This Book). Here is a reflective practice group evaluation:

a different way of seeing: many insights, many views  
 a sense of wonder at the creativity of so many people I had seen  
 only as professional colleagues

I am challenged to see others I meet with new eyes.  
 a different way of hearing: many voices, many themes  
 I have been moved by the quality of our listening and by the careful  
 and gentle hearing of my own emerging voice.

a different way of being: many persons, an experience shared.  
 I have found a sense of integration in allowing the creative part of  
 myself which I had stifled to energise my life and work.  
 there is empowerment for deeper living in the shared silence,  
 laughter and tears. (Sheena)

The camera focuses upon a drained doctor at the end of a long week. She reaches into her lowest desk drawer, taking out something which will enable her to cope, to continue to see her profession as growing and worthwhile. It is not a bottle, hypodermic syringe, or pills, but a pad of yellow paper and a pen. She starts to write ...



#### Read to learn

- Bulpitt, H. and Martin, P.J. (2005) Learning about reflection from the student, *Active Learning in Higher Education*, **6**(3), 207–17.
- Munno, A. (2006) A complaint which changed my practice, *British Medical Journal*, **332**, 1092.
- Osterman, K.F. and Kottkamp, R.B. (2004) *RP for Educators*. 2nd edn. Thousand Oaks, CA: Corwin Press.



#### Write to learn

Each chapter ends with *Write to learn*. For straightforward advice, sufficient for the exercises below, see *Write to learn* in Chapter 1, and see Chapter 6 for more advice. Each writing can be shared fruitfully with a group or confidential trusted other, if this seems appropriate once the writer has read and reflected on it first.

**Exercise 2.1**

1. If your work were a book, film, play or radio programme what would it be? A romantic, detective or fantasy novel, diary, roadmap or atlas, telephone directory, DIY manual, *Desert Island Discs*, reality television show, *Strictly Come Dancing (Dancing with the Stars)*? ...
2. Describe it.
3. Reread with positive imaginative insight, add or alter if you wish.

**Exercise 2.2 The film of your life**

1. Write the title of the film of your life (or work).
2. Write the advertising blurb.
3. Write the cast list.
4. Choose a 'character' from this list, write their name on a fresh sheet and fill the page about them.
5. Choose another 'character' to do the same with, if you wish.
6. In this film, which actor will play 'you'?
7. Where will be the shoot location (you can choose anywhere)?
8. Tell the story of one of the scenes in detail.
9. Write the ending of the film (optional).
10. Reread to yourself with attention, alter and add as you wish.

**Exercise 2.3 A spot of time**

There are in our existence spots of time / ... whence ... our minds  
Are nourished and invisibly repaired; / ... Such moments  
Are scattered everywhere. (William Wordsworth, from *The Prelude*)

1. Jot down a very quick list of occasions when you felt nourished, content, affirmed.
2. Choose one, write about it with as much detail as you can remember.
3. Give it a title as if it were a film; write the brief paragraph of film advertising blurb.
4. Read it back to yourself with care, adding or altering positively.
5. Write about another one if you have time.