Reflective Practice: Implication for Nurses

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Abstract: Reflective practice is a frequently used but inadequately defined concept in nursing. This may be attributed to the inadequate conceptualisation of the process of reflection. This paper agreed that now is an appropriate time to critically examine the notion of reflective practice and maintains that there is a need for more robust debate and research into the nature of reflection in nursing. Although reflective practice has been identified as a valuable tool to help nurses recognise their own strengths and weaknesses, even though many still find it difficult to embrace. This article dispels some of the myths surrounding reflective practice and offers examples on how it can benefit nurses both on personal and professional level. The study however observed that reflective practice is associated with learning from experience, and is viewed as an important strategy for health professionals who embrace lifelong learning. This paper extensively examined the attraction of reflective practice to different interest groups and concludes by examining the implication of reflective practice for nurses.

Key words: Knowledge, Nurses, Health professionals, Practice, Reflection

I. Introduction

The term ‘reflective practice’ carries multiple meanings that range from the idea of professionals engaging in solitary introspection to that of engaging in critical dialogue with others. Practitioners may embrace it occasionally in formal, explicit ways or use it more fluidly in ongoing, tacit ways. For some, reflective practice simply refers to adopting a thinking approach to practice. Others see it as self-indulgent navel gazing. For others still, it involves carefully structured and crafted approaches towards being reflective about one’s experiences in practice. Reflection is the examination of personal thoughts and actions. For practitioners this means focusing on how they interact with their colleagues and with the environment to obtain a clearer picture of their own behaviour. It is therefore a process by which practitioners can better understand themselves in order to be able to build on existing strengths and take appropriate future action. And the word ‘action’ is vital. Reflection is not ‘navel-gazing’. Its aim is to develop professional actions that are aligned with personal beliefs and values.

The concept of reflective practice was introduced by [14] it involves thoughtfully considering your own experiences as make the connection between knowledge and practice, under the guidance of experienced professional within your discipline. [13]. A reflective practice model would enable learners and novices within a discipline to compare their own practices with those of experienced practitioners, thus leading to development and improvement. [10] defines reflective practice as a set of abilities and skills, to indicate the taking of a critical stance, an orientation to problem solving or state of mind” . In essence, it is a readiness to constantly evaluate and review your practice in the light of new learning (which may arise from within the context of your professional practice) Reflective practice is "the capacity to reflect on action so as to engage in a process of continuous learning", which, according to the originator of the term, is "one of the defining characteristics of professional practice"[13]. According to one definition it involves “paying critical attention to the practical values and theories which inform everyday actions, by examining practice reflectively and reflexively. This leads to developmental insight”.

Thus it is imperative for nurses who actually are the heart of any hospital to get themselves acquainted with the knowledge of reflection because reflective practice is often seen as the bedrock of professional identity. Nurses therefore need to continue to reflect critically in their practice as reflective practice will fulfil its potential to help them make sense of the uncertainty in their workplaces and offer them courage to work competently and ethically at the edge of others and chaos {5}.

1. The concept of reflection

Reflection is the examination of personal thoughts and actions. For practitioners this means focusing on how they interact with their colleagues and with the environment to obtain a clearer picture of their own behaviour. It is therefore a process by which practitioners can better understand themselves in order to be able to build on existing strengths and take appropriate future action. And the word ‘action’ is vital. Reflection is not ‘navel-gazing’. Its aim is to develop professional actions that are aligned with personal beliefs and values. There are two fundamental forms of reflection: reflection-on-action and reflection-in-action. Understanding the
differences between these forms of reflection is important. It will assist practitioners in discovering a range of
techniques they can use to develop their personal and professional competences.

**Reflection-on-action**

Reflection-on-action is perhaps the most common form of reflection. It involves carefully re-running in
your mind events that have occurred in the past. The aim is to value your strengths and to develop different,
more effective ways of acting in the future.

In some of the literature on reflection [15], there is a focus on identifying negative aspects of personal
behaviour with a view to improving professional competence. This would involve making such observations as:
‘I could have been more effective if I had acted differently’ or ‘I realise that I acted in such a way that there was
a conflict between my actions and my values’.

**Reflection-in-action**

Reflection-in-action is the hallmark of the experienced professional. It means examining your own behaviour
and that of others while in a situation [13, 14]. The following skills are involved:

- Being a participant observer in situations that offer learning opportunities;
- Attending to what you see and feel in your current situation, focusing on your responses and making
  connections with previous experiences;
- Being ‘in the experience’ and, at the same time, adopting a ‘witness’ stance as if you were outside it.

**Process of Reflective in action**

**Mindfulness**: purposefully pays attention to ones thought and feelings.

**Meditation**: this requires the belief that knowing oneself can foster compassion.

Singing and music.

Dance and movement.

**Reflective questions**

The following is a set of questions that could be used to assist your thinking

What was I aiming for when I did that?

What exactly did I do? How would I describe it precisely?

Why did I choose that particular action?

What theories/models/research informed my practise?

What was I trying to achieve?

What were the reasons for doing that?

How successful was it?

What criteria am I using to judge success?

What alternatives were there?

Could I have dealt with the situation any better?

How would I do it differently next time?

Skills needed for reflective practice

- Self awareness
- Description
- Critical analysis
- Synthesis
- Evaluation

**II. Importance Of Reflective Practice**

Reflective practice is important for everyone - and nurses in particular, for a number of reasons.

- First, nurses are responsible for providing care to the best of their ability to patients and their families. They
  need to focus on their knowledge, skills and behaviour to ensure that they are able to meet the demands
  made on them by this commitment.
- Second, reflective practice is part of the requirement for nurses constantly to update professional skills.
  Keeping a portfolio offers considerable opportunity for reflection on ongoing development. Annual reviews
  enable nurses to identify strengths and areas of opportunity for future development.
- Third, nurses should consider the ways in which they interact and communicate with their colleagues. The
  profession depends on a culture of mutual support. Nurses should aim to become self-aware, self-directing
  and in touch with their environment.
Purpose of reflection

- To consider the process of our own learning – a process of meta cognition
- To critically review something - our own behaviour, that of others or the product of behaviour (e.g. an essay, book, painting etc.)
- To build theory from observations: we draw theory from generalisations - sometimes in practical situations, sometimes in thoughts or a mixture of the two
- To engage in personal or self development
- To make decisions or resolve uncertainty.
- Empower or emancipate ourselves as individuals (and then it is close to self development)

III. Models Of Reflective Practice

Broad frameworks for reflection have been offered by theorist for nurses to choose from such as follows:
- Benner and Wrubel (1989)
- Gibbs (1998)
- Kolb (1984)
- John Dewey (1933)
- Ghaye and Lilyman 2006
- Driscoll 2000

Many if not all, of these fundamentally encourage nurses to engage in reflective practice.

The Johns model identifies particular area of reflective practice:
- Describing an experience significant of the learner.
- Identifying personal issues arising from the experience
- Pinpointing personal intentions
- Empathising with others in the experience
- Recognising one’s own values and beliefs
- Linking this experience with previous experiences
- Creating new options for future behaviour
- Looking at ways to improve working with patients, families, and staff in order to meet patients’ needs.

Meanwhile Gibbs (1998) proposed a reflective cycle that starts with describing a practice event and then cycling through the following stages in turn:
- Identifying your feelings
- Evaluating the experience
- Analysing the experience
- Drawing conclusions ,including alternative actions, that could have taken drawing up an action plan for the future

Another model of reflection was according to Bloom (1964) who identified different levels of thinking processes, which he presented in a hierarchy.

Process Explanation

Knowledge: Recognition and recall of information -describing events

Comprehension: Interprets translates or summarises given information - demonstrating understanding of events.

Application: Uses information in a situation different from original learning context -

Analysis: Separates wholes into parts until relationships are clear – breaks down experiences

Synthesis: Combines elements to form new entity from the original one - draws on experience and other evidence to suggest new insights.

: Involves acts of decision making, or judging based on criteria or rationale makes judgements about. There are other models that can help you to structure your reflective writing and which you may find more helpful.
IV. The Three Step Approaches To Reflective Practice

**Stage 1:** Identify the situation for which you require answers.

**Stage 2:** Put yourself in a dreamer mode. Come with a picture as possible as a vision, without any editing. Stay with whatever presents itself to you.

**Stage 3:** Now take up the role of realist. Draw up a plan to achieve the dream, without any criticism or amendment to it.

**Stage 4:** Give the action plan to the critic and ask this person to identify those areas that need further development and to package these concerns into a series of questions to give back to the dreamer to answer.

**Stage 5:** Repeat stage 2-4 until are unhappy and are at rest.

V. Benefits / Advantages Of Reflective Practices

- It enhances self esteem through learning.
- It facilitates integration of theory and practices.
- It encourages holistic, individualised and flexible approached of caring.
- It developed individualised theories of nursing which influence practices and generate nursing knowledge.
- It leads to acceptance of professional responsibility.
- Provides opportunity for rapid and progressive refocusing of work activity.
- Enables nurses to understand and explore the Nature and boundaries of their own role and other health professionals.
- It enhances opportunity to practice and improved skills
- It also promotes opportunity to evaluate their own performance, to acknowledge their strength, and to identify own learning needs and ask for help.
- It encourages nurses to make a conscious attempt to identify and learn from what is happening.
- It allows nurses to view clinical situations from different perspectives.
- It motivates nurses to be a more self-directed learner
- It enables nurses to identify their own learning needs
- It fosters responsibility and accountability
- It allows nurses to apply appropriate theory into nursing practice
- It helps nurses to improve decision making
- It helps nurses to review both positive and negative experiences
- It encourages critical thinking
- With experience, the reflective practice develops from descriptive to a more critical and analytical practice.
- It increases diversify and the development of autonomy and skill.
- It provides a tool or mechanism through which they can communicate and justify the importance of practice and practice knowledge.
- Encouraging nurses to reflect promotes professional development, which will reflect in better care for the patients (Gustrad and Fargerberg 2004)

Disadvantages of reflective practice

- The process can be manipulated to meet the expected outcomes of the practice.
- Reflective practice may cause psychological stress.
- I usually reflect on negative issues.
- I feel frustrated when I am not able to solve problems that were identified during reflection.

VI. Barriers To Reflective Practice In Nigeria

**Time constraint:** Time constraints were noticeable barriers in most settings in order to modify their perspective and transform their reflective abilities, time is an important factor. The changes will not happen overnight (3).

**Lack of mentor support:** According to[6] it is important that mentors provide "sufficient time for students to process their recalled their events" as well as structured safe environment for learning to occur.

**Nurses’ limited power to initiate any changes:**[8] conducted an interpretative research study with 16 practicing nurses in England to explore how reflection is viewed by nurses within their daily ward. Nurses felt reflection was a way of enhancing their professional knowledge, but it was of limited value due to nurses ‘limited power to initiate any changes. A major barrier discovered was the power relationship between nurses and physicians. The researchers found that nurses felt belittled and devalued by those with more power. This
was considered a major barrier because it prevented nurses from discussing their thoughts and ideas, and impeded the dissemination of important knowledge.

**Lack of awareness and lack of culture in reflecting among preceptors and nursing staff in certain clinical placement:** with proper support preceptors are able to guide students through reflection and in turns have an enhanced understanding of the students experience, build trust and challenge students\(^\text{[12]}\)

- **Uncertainty of using an unfamiliar learning approach**
- **Lack of supportive environment**
- **Lack of motivation and commitment:** Finding incentives and the personal dedication to reflect are also issues in the literature on reflective practice.

### VII. Recommendation

- Students must have a positive attitude towards the outcome of reflecting.
- Acknowledging the barriers that exist with reflective practice will help to make the necessary changes for positive outcomes and success.
- Reflective practice should be incorporated into nursing curriculum.
- Nurse educators must try as much as possible to provide good mentoring for their students in a good atmosphere.
- Additional research also needs to be conducted regarding implementing workshops or conferences educating preceptors in proper reflective practice and the impact it has on student’s reflective practice outcome
- Nurse educators are being called upon to develop nurses who are reflective practitioners.
- Recognition of individual learning styles can help to overcome some barriers to developing the skills of reflection. For instance, some learners are more likely to be comfortable with group and paired verbal reflection whilst others see the one-on-one interactive journal less threatening, so it is helpful for lecturers to provide opportunities for both experiences whilst professional reflective skills are developing in students.

### VIII. Implication For Nurses

Reflection is an essential attribute for the development of autonomous, critical and advanced practitioners \(^\text{[8]}\). According to \(^\text{[3]}\), Reflective cycle should be continuous cycle in which experience and reflection on experiences are inter related. Studies have shown that nurses who take the time to reflect on their daily experiences provide enhanced nursing care, have better understandings of their actions, which in return develop their professional skills \(^\text{[6]}\). Reflective practice is the ability to examine ones actions and experiences with the outcome of developing their practice and enhancing clinical knowledge. Reflective practice affects all levels of nursing, from students to advance practice nursing students, as well as practicing nurses. Research has shown the relationship between student nurses and their mentors is vital. In order for reflection to be effective openmindedness, courage and a willingness to accept and act on, criticism must be present \(^\text{[2]}\). Nurses therefore are in better position to know that reflection is a critical thought practice. Purposeful reflection provides an opportunity to examine nursing practice and identify new knowledge \(^\text{[3]}\). Reflection is a professional motivator to move on and do better within practice with the goal of learning from experiences and examining oneself \(^\text{[2]}\). Reflection has the opportunity to enhance clinical reasoning while having a positive impact on patient care. Reflection is an ongoing practice within the field of nursing. There will always be room to develop and mature professionally.

However it is important for nurses to note that the few practical approaches and techniques for reflective practice that have been discussed are far from being a complete guide to the process of reflection. Much depends on factors such as motivation, time, career commitment and commitment to patients and families. When nurses strive to identify the goals of their developments, they will have a focus for reflection and subsequent actions. Nurses develop a feel for what they do “practically and bodily so that it becomes part of the knowing process” but cannot always be verbally expressed. “We know more than we can say.” Nurses need adequate way to express themselves reflection has the potentials to prove such means. Therefore working on personal and professional development need not to be chore if there is access to varied and informative techniques.
IX. Summary And Conclusion

Reflective practice is a key skill for nurses. It enables nurses to manage the impact of caring for other people on daily basis. Reflective practice can be defined as the process of making sense of events, situations and actions in the work place. A range of model is available for nurses to use to support reflective practice in clinical practice. Effective reflection can take place individually, in facilitated groups, or a mix of both. Reflective Practice is associated with learning from experience, and is viewed as an important strategy for health professionals who embrace lifelong learning. Due to the ever changing context of healthcare and the continual growth of medical knowledge, there is a high level of demand on healthcare professionals' expertise. Due to this complex and continually changing environment, healthcare professionals could benefit from a program of reflective practice. In the field of nursing there is concern that actions may run the risk of habitualisation, thus dehumanizing patients and their needs. In utilizing Reflective Practice, nurses are able to plan their actions and consciously monitor the action to ensure it is beneficial to their patient. The act of reflection is seen as a way of promoting the development of autonomous, qualified and self-directed professionals. Engaging in Reflective Practice is associated with the improvement of the quality of care, stimulating personal and professional growth and closing the gap between theory and practice.

It’s often been suggested that the only way to move beyond technical, rational model of education where theory informs practise is to provide nurses with opportunity to engage in reflective practice. [14] with this it will be possible to create a learning environment in which theory inform practise. [16] Illustrated the application of a reflective model in practiced that to be engaged in reflection, nurses must actively draw back on their past experienced, described the experienced and walk through the attitudes and emotions relatives to the experience, make sense of new ideas and information.

Therefore reflection is the activity by which experience is capture, thought about and evaluated. Reflection in action is defined by [13] as the ability of professionals to think about what they are doing while they do it. He regards this as a key skill. He asserts that the only way to manage the indeterminate zones of (professional) practice is through the ability to think on your feet and apply previous experience to new situations. To practice evidence based nursing it is imperative for all nurses to engage in reflective practice.

References