Barriers to learning from reflection:
a study of the use of groupwork
with post-registration nurses

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There are few studies which describe the use of groups to facilitate reflection and even fewer which evaluate the effectiveness of such groups. Much of the literature discussing the techniques used to facilitate reflection suggests that learners willingly engage in such processes and find them enjoyable. This paper reports on a qualitative study of the use of groups to develop learning through reflection on a part-time post-registration diploma programme for nurses. The findings suggest that there are many barriers to learning which must be overcome before practitioners can use the opportunities to reflect on and learn from their experience. It is also contended that such learning may not necessarily be an enjoyable experience. The findings suggest that previous educational experience and the current culture in which nurses and midwives work, impose tremendous barriers to reflecting on, and learning from, experience. In particular these affect the willingness of learners to expose themselves to the judgement of others and their ability to be open to taking responsibility for their own learning. Other barriers to learning in groups are the effects of other group members, their commitment or resistance to shared learning, the ways in which group members interact with each other and facilitation styles.

**Keywords:** nursing, post-registration education, critical thinking, reflective practice, groups, group work, learning, barriers, dynamics, supervision

**INTRODUCTION**

This paper presents some of the findings from a study evaluating the use of groups to facilitate the development of reflective practitioners on a 2-year part-time post-
registration Diploma in Professional Studies in Nursing Programme (DPSN) for nurse and midwives delivered at a college of higher education in the south of England. The inclusion of a reflective practice module of 36 hours per year in the DPSN arises from the movement in nursing towards learning from experience and reflection in supervision and in profiling activities. Much professional education is limited to exploring technical aspects (Schon 1983) and the purpose of this module was to provide practitioners with a valuable opportunity to reflect on their practice in a supportive and safe environment and to explore and develop other forms of knowledge through perspective transformation (Mezirow 1981).

The reason for using groups to facilitate reflection, rather than individual methods such as diary-keeping, or one-to-one tutorials, was because of a belief that group processes and group dynamics would be more powerful ways of generating insights and understandings of complex professional issues through the sharing, support, challenge and feedback offered (McGill & Beaty 1995) and because of lack of evidence for the use of reflective diaries being able to take students beyond the preliminary stages of a reflective learning cycle (Platzer et al. 1997b).

What is perhaps unique about our approach is that no formal assessment of learning occurs within the module. Accordingly no credits are attached to the module. The reasons for avoiding formal assessment of learning arise from a desire to allow students to take risks and to explore aspects of their practice for which there may be no adequate theoretical explanation or formal body of knowledge. If the module was assessment driven, through perhaps the submission of a written reflective diary, it was felt that students would be constrained in their opportunities to really learn from experience through reflection. There has been a great deal of concern in the nursing profession that where reflective abilities are formally assessed, then students launder diaries and write down whatever they think it is that teaching staff expect, rather than truly exploring and reflecting on their own experience (Wallace 1995).

However, it is possible that if a part of the curriculum is not assessed, then students may not value the learning opportunity or may not take responsibility for their own learning. If students are to learn from their experiences by exploring and sharing them in a group, it requires the students to take that responsibility as adult learners. It also requires that the groups are facilitated by someone who treats the students as adult learners. The findings from this study suggest that one of the main barriers to learning in this setting was the previous educational experience of learners which made it difficult for them to engage in an adult learning process. This was further compounded by their socialization as nurses and the culture in which they work which does not always foster the kind of openness that shared learning requires. These barriers can be overcome although it is not clear why some groups are more effective than others. However, even in groups that have become effective it takes time to overcome the barriers to reflective learning and it can also be a very uncomfortable process. Questions are raised as a result of this study about the need for structure and clarity of purpose so that students can engage voluntarily and perhaps more knowingly in this process of learning.

**LITERATURE REVIEW**

There has been a growing interest in the development of reflective practice in the nursing profession in recent years. Gobbi (1995) attributes this to the influential work of Schon (1983, 1987) in the teaching profession, and a shift towards a more student-centred pedagogy in nursing. The regulating bodies in the nursing profession have embraced this need for a more reflective practitioner with the English National Board for Nursing, Midwifery and Health Visiting Education (ENB 1994) advocating that student nurses should use reflection to learn from experience (Jarvis 1992). In addition, professional guidance, for qualified practitioners, advocates the use of reflection to support professional activities such as self-appraisal, profiling and clinical supervision (National Health Service Management Executive [NHSME] 1993, United Kingdom Central Council for Nursing, Midwifery and Health Visiting [UKCC] 1995, 1996). These bodies suggest the use of group work, amongst other techniques, to facilitate such learning through reflection and there is a considerable amount of literature and theory supporting the use of groups, and discussion, to facilitate reflective practice (e.g. Boud et al. 1985, Johns 1994, Stockhausen 1994).

The drive towards learning from reflection in nursing relates to the nature of nursing knowledge and professional practice. Meerabeau (1992) has argued that expert knowledge is frequently difficult to articulate and others have argued that professionals are guided by implicit theories (Argyris & Schon 1974, Draper 1990). Reflection is a way of valuing and making such theory more explicit (Davies 1996, Marks-Maran & Rose 1997). Such reflection should enable practitioners to review their practice and make adaptations and changes to their practice (Gray & Pratt 1992). A number of models have been developed to describe the processes and stages of learning from reflection, many of which advocate the use of groups and discussion to facilitate the later stages of such learning. It is surprising then, that a literature review (Platzer et al. 1997b) showed that very little research has been devoted to the process or outcomes of groups and discussion to facilitate reflective learning from experience.

Studies which have evaluated the effectiveness of using groups to develop reflective practitioners often do not state explicitly what stage of the reflective learning cycle has been promoted, or confound the effects of groups with...
the use of diaries and journals (Platzer et al. 1997a, 1997b). There is some evidence that groups can be a powerful way of promoting reflective practice (e.g. Snowball et al. 1994, Graham 1995) but there is also evidence that there are many barriers to such learning taking place. These barriers include previous educational experience (Mountford & Rogers 1996), the effects of poor facilitation and lack of challenge (Miller et al. 1994), the effects of particular group members who may be critical or dominating (Wade 1994), personal problems and lack of self-worth (Miller et al. 1994), lack of a clear structure or agenda (Fish et al. 1991) and factors influencing memory such as anxiety (Newell 1992) or hindsight bias (Jones 1995), may limit the extent to which practitioners can learn through reflection. A further barrier to learning through reflection is that many students do not value personal knowledge and their role in the construction of expert knowledge (Johns 1994, Mountford & Rogers 1996).

This study aimed to evaluate the effectiveness of groups which were set up explicitly to develop reflective practice. The purpose of the groups was to provide support and challenge (Miller et al. 1994, McGill & Beaty 1995) so that students could move beyond the early stages of the reflective learning cycle of describing events and feelings, to the later stages of constructive feedback which enable the student to learn from experience (Platzer et al. 1997b).

THE STUDY

Method

Groups were set up during the second year of study for the DPSN in which attendance was voluntary and there was no formal unit of assessment. When the groups were established the members were encouraged to negotiate ground rules in order to promote an environment which felt safe. Students were also encouraged to keep these ground rules open for negotiation. The facilitators stated explicitly that they would not impose a structure and that the group itself was free to decide its own agenda each time it met, but the purpose of the groups was to explore and reflect on their own practice in order to learn from experience. The facilitators attempted to adopt a deliberately non-directive and non-authoritarian stance following the ideas of Burnard & Chapman (1990).

Data collection and analysis

Each of the 30 students participated in an in-depth, qualitative interview about their experience in the reflective practice group after they had completed their programme of study and/or their participation in the groups. The interviews were semi-structured and students were asked about their previous experience of education, and their views on and experience of the whole programme of study and the reflective practice groups in particular. They were also asked about the effects of the facilitation styles, group membership, structure and discussions of learning and professional practice. Further questions related to whether or not students felt that they had consented to participate in the groups and whether or not they could know what they were consenting to before they had experienced it. They were also asked to what extent the organization they worked for encouraged reflective practice. In addition to the interviews some of the reflective practice groups were audio-taped to provide additional observational data.

The individual interviews and group sessions were audio-recorded and transcribed. They were then analysed using a qualitative software analysis package (QSR NUDIST version 3). The data were coded and categorized as themes emerged. The main issues to emerge were barriers to reflective learning and factors which facilitated learning and changes in practice. The first of these is reported here and the factors which facilitated learning are reported in an earlier paper (Platzer et al. 2000).

FINDINGS

The students varied in terms of how much they attended and participated in the group processes and each group varied in terms of the kind of issues which members seemed to be willing to address. The main themes to emerge from the interviews were the effects of previous education and socialization as a nurse, and the culture of the organization in which they worked, which made it difficult for many nurses to engage in a process of shared learning from experience. Related to this theme was an over-riding sense of vulnerability and fear of exposure which prevented many nurses from openly discussing their practice in a critical manner. There were also group effects in that the commitment or resistance to shared learning by other group members significantly affected an individual’s learning opportunities. An individual who was open to learning from experience could be prevented from doing so by other group members. Conversely, the commitment to shared learning could enhance opportunities for individuals whether or not they were initially committed themselves. Other effects arose from facilitation styles and the contributions of particular group members.

There was considerable variation in the extent to which the groups and sub-groups developed in Bion and Tuckman’s terms to the point of ‘working’ or ‘performing’ (Bion 1961, Tuckman 1965). It was the observation of both students and facilitators that some groups had more clearly developed to the point of becoming a working group whereas others never did and remained at an earlier stage of group development. Each of the themes which emerged from the data will be discussed in more detail, supported by quotes from the interviews with the students.
Previous education and training

The students had completed their training anywhere from 1 to 20 years prior to studying for their diploma. Most of the students said that their previous education and training had not encouraged them to think critically or to reflect and their comments suggested that they had been taught according to a dualistic model where knowledge is regarded as the accumulation of facts. Many students said that their previous experience of education had been mainly rote learning and they had not been encouraged to think or discover things for themselves. The following quotes highlight many of the student’s previous experiences, some of which were quite recent:

I recall having my prescribed textbooks... and they were the only ones you read and if there was something in another book that disagreed with what you were reading in your prescribed books you certainly never mentioned it — you reckoned that book was probably wrong — you know you didn’t question things the same way so [this course has given me] a much broader horizon.

Most of the students were expecting this traditional model of education when they began their diploma programme and the more adult-centred approach caused a lot of confusion and conflict. Most of the students were expecting to be lectured to and did not expect to do supplementary reading or to have to be self-motivated. Many students found the change to a more adult-centred approach to education very daunting:

I found it quite a big step for me really from traditional training which really didn’t encourage you to think or question.

This is more self-directed — it’s adult centred — this is very different so that was a big hurdle.

These expectations about how the course would be taught had obvious implications for how students would view group work where the facilitation style was unstructured and un-authoritarian. Many of the students were initially confused by this style of teaching although most did adapt eventually:

When you’ve done other sort of nursing courses you’re spoon fed this information and these are the facts — go and assimilate them — this is what you need to know, but on this it was more like ‘What do you think?’ — ‘Where do you stand on this sort of particular issue?’ — it made you think and discuss as a group, we gelled quite well I thought as a group — we certainly had quite good discussions about things — it was very different and very different from my SRN which was a bit of a ‘do it yourself’ course really.

Commitment and resistance to shared learning

Previous educational experience sometimes led to a continuing expectation that the teacher should take responsibility for the students’ learning. Students frequently commented that even though certain learning strategies seemed to be a good idea they would not participate in them or use them unless they were made to by the tutor. The following comments were made in relation to attendance and participation in the reflective practice groups:

Well it’s one of those things where you think is a good idea but unless someone makes you do it you’re going to do your best to avoid doing it.

Although all students had been offered the same explanations about the purpose of the groups and the voluntary nature of their participation, they gave very mixed responses when asked if their participation in the groups had been voluntary. Students who were in groups which did not work well, or those whose individual participation was limited, tended to say that they had been coerced into the groups whereas those who had been in working groups felt that their participation had been more voluntary:

Yes it was laid down — the facilitator was quite clear — we were supposed to sit down and set the parameters of what we actually wanted within the group so it was quite clearly sort of said ‘You are this group, you can control what you talk about — you can state whether or not this is to remain confidential within your group, not to go outside the room’, whatever, you know.

I think we were probably shoved into it — I remember initially thinking I don’t think I’ll go I don’t like the sound of this — I think we were expected to go without really having clear guidelines especially the first week I can remember thinking I can’t bear this I really can’t understand what this is — I just didn’t understand it so I did feel as if we were a bit coerced into going along with it — however, we were told that if we didn’t want to we didn’t have to.

It is clear that there was a considerable amount of resistance to the group work and this could exert a group effect. An individual might be committed to sharing their experiences in a group in order to learn from them, but the group could stop that process. Conversely the make up of a group could be enabling:

It was sort of professional things really we tended to talk about, no I can’t think of anything personal and that’s really why I couldn’t understand why people were so sort of hostile about it — nobody had to bare their soul to the group you know and if you didn’t like it you could always leave there was never anybody barring the door — I can’t think that anybody was sort of attacked on any issue.... there was a feeling if you didn’t like it you didn’t even have to come if you really didn’t want to and maybe if you didn’t want to participate you might have been better not going because there was one of them there was only four of us there for it and I thought sometimes the four of us had quite a good session with some of the others who weren’t there.

The times that I did interact I think I interacted well but when we got outside even if I’d had a good session there was so much sort
of animosity against it you know they might not discuss what was said but they’d say what a right lot of crap that was what a waste of an hour... you can't enjoy it if you know your colleagues want to get away or aren’t interested... I could have gone on and on... because it was interesting to me, but the other girls were sat there sort of like this, tapping their foot raising their eyes and you knew that they just wanted it over. I could have got a lot more out of it perhaps than we did but because the rest of the group weren’t that interested — I sort of hung back and then I realized there was a lot better things I could do with my time, so I just didn’t bother going anymore.

Individuals could demonstrate a lack of commitment to group reflection by not attending, not participating or preventing participation by others who were more committed. It is interesting to note that in the groups which worked and where individuals felt that they had gained something from their participation members felt a commitment to each other to attend rather than an obligation to the tutor:

We were motivated to make it work and I think that helped... we gelled together quite quickly and worked at it to make it work... [we] could see the benefit of it.

I perhaps missed maybe two or three at the most but it was like that drive to think 'Well you’re letting everybody else down within the group but if you aren’t there well people can’t perhaps reflect as good with two or three people as they can when everybody's there' — it was a bit of like not great pressure but... you felt you had to attend because of everybody else and what you could give for them and what they could give for you as well and certainly in your own practice what you could actually gain from it.

Vulnerability and exposure

Some of the comments by students suggested that the culture of the organization they worked in, and their socialization as professional nurses and midwives, made it difficult to expose themselves to potential criticism. Certain students never felt sufficiently safe to reflect on some aspects of their practice or it took a long time to develop a sense of trust whereby students felt able to explore their practice without feeling that they should have always done things according to the book. To a certain extent this reticence was a concern about confidentiality. The setting of ground rules had not convinced people that confidentiality would be kept.

However, most students said that they did feel certain that confidentiality would be kept and their concern was much more about feeling that they would be seen as unprofessional if they explored aspects of their practice which they were unsure about. It was not so much a feeling that others would be judgemental as this too had been addressed by most of the groups when they set up their own ground rules. They did not feel that others would put them down or say anything negative but they did nevertheless feel that they would be judged by others and by themselves. They felt that they would be seen as unprofessional or would not be respected and that they would be ashamed. Students found it particularly difficult to discuss aspects of their practice about which they were unsure. These areas of uncertainty are those which need to be explored in order to develop reflective practitioners. A group needs to be able to provide this challenge so that students move to the later stages of the reflective learning cycle:

To start with it was very difficult because nobody wanted to discuss anything and nobody wanted to give out anything that was — I don’t know I suppose about the bounds of accountability — practices that they’d maybe learnt and how they were taught by the book so to speak and because of that it took us a little while to get the feeling although we were closed as a group — to be within the group you perhaps were going to give something that might make you look not small as a nurse but maybe the people would look on I don’t know....I don’t know what the word would be — certainly not see you in high esteem as a professional nurse. I think that was quite difficult and sometimes you’ve said things and you think ‘Should I have really said that?’.

I suppose [it’s difficult] to admit that you don’t know that knowledge and perhaps you should.

These feelings of vulnerability extended into some students’ feelings about the way in which the groups were facilitated. Many students commented that they felt as though they were being psycho-analysed and when a confrontational style was used by one facilitator many students said this effectively stopped them from participating in the groups. However, in other groups even when the facilitation style was un-authoritarian the probing questions were experienced as quite threatening:

I think at times you thought it was maybe a bit abrupt because you really felt as if you were on trial — that your practice was on trial to some extent — but it did actually make you think about what and how you were doing things and whether it was the right way and sometimes when you could see people stumbling you could actually give an answer or chip in as such — so the person on trial as such didn’t feel as bad and it may be did make other people participate more than they would have been if she hadn’t been so abrupt.

Dominant individuals who always gave an opinion or advice could have the effect of silencing other members of the group:

There was only really one that was a little bit sort of could be a little bit aggressive I don’t mean aggressive more... quite sort of like opinionated and sort of you know if you don’t go along with this then you’re not all that you should be sort of thing... I would feel uncomfortable if I responded in the wrong way... she would have made me feel uncomfortable. I would have felt as if I’d got
something wrong you know whereas in actual fact it's not a question of right or wrong... I might sort of just be quiet... I think eventually I just shut up, because I thought 'Oh no I know my opinion and I don't need to convince the others about it' and I let them just let them think what they think but disagree.

Another factor was that some students felt that their own contributions were not important enough to merit attention by the group. This could have been a consequence of some individuals actually reflecting in the group and raising the stakes so that others felt less willing to participate:

I think as we went along from week to week we felt more at ease with it and we chatted more easily about issues from work and a lot of the time the midwives did talk about case histories — which I mean it was interesting to all of us really and I think sometimes you sort of think 'Oh what I've got to say is not quite as interesting as that it's not quite as mind blowing, and sort of like life threatening or life saving whatever' you know than what they're doing.

Also many students commented that if they were in groups of about 10 students the group was too large to feel safe enough to explore potentially threatening issues. A group size of about six seemed to be preferred and more effective.

Structure
Students gave very mixed responses about whether or not they felt the groups needed to be more formally structured and many students appeared to want the facilitators to lead the group's agenda to reduce discomfort and embarrassment. However, the views of students whose groups had worked were very different. They could see that imposing a structure would have prevented the groups from developing in the way that they did, although they did say that setting their own ground rules and working out how to use their group had been very uncomfortable. They could also see why the facilitation style was unstructuring and un-authoritarian, whereby the tutor attempted not to impose interpretations or dominate the sessions:

Yes [we wanted more structure] — we really didn’t understand what was meant by it — reflective practice was new to all of us and we certainly felt that we were floundering — I don’t think our group ever really developed as it should do.

You just felt that if you weren’t going to say anything [the facilitator] would sit there in silence as well which is you know what she didn’t want to hear the sound of her own voice did she, so I’m not saying that’s not right I’m just saying that’s when you first start in reflective practice or even this last year it’s easier when somebody makes it easier for you.

I think initially we wanted [the facilitator] to say ‘Yes that’s right, very good’ type of thing or ‘No you’re way out of court you need to relook at things’ and I think that was difficult because you want somebody either to back you up or say ‘No I don’t agree with that’ but... you know why she didn’t do it because she wanted everybody else to step in as opposed to her giving the answers all the time. Yes at times she did give us feedback and maybe things we didn’t know anything about she’d give to the group whereas at the time it was very difficult because you were sitting there thinking ‘Come on give us some feedback’ but looking back at it you know why she didn’t.

I think we had a rough idea but nothing too concrete and I think as our group developed we took it the way we wanted to take it... with a formal structure — yes it’s an informal group but we... formed its own boundaries... I don’t think it would have worked as well if we were told we were going to talk about certain issues.

DISCUSSION
The most striking finding from this study is the overarching effect of nurses’ and midwives’ previous educational experience on their ability to engage in and be open to an adult-centred learning opportunity. This effect is undoubtedly compounded by the continuing effects of working in a culture where openness to ideas, challenge to authority and subjecting one’s own actions to honest scrutiny is not encouraged. The confusion and conflict created by initial attendance on a programme of study in higher education was repeated when students were offered the opportunity of setting their own ground rules and having an open agenda to reflect on their practice in groups during their second year of study, despite having been exposed to the culture of higher education for one year. Where students had been able to make the shift to a culture of adult learning, they were more likely to be in groups or sub-groups which were ‘working’ or ‘performing’ (Bion 1961, Tuckman 1965) and this was expressed in terms of a commitment to each other as learners rather than an obligation to a tutor perceived to be in authority. The findings are consistent with Wade’s research (1994) in which fear of criticism and judgement prevented participation in discussion. They are also consistent with Mountford and Rogers (1996) work on the effects of traditional education. One major implication from this study is the need to bring opportunities in education closer to practitioners’ employment settings so that the ethos of education has some influence on the work culture. It is possible that formal models of clinical supervision in practice settings, in partnership with educational institutions, could help to overcome many of the barriers to learning identified in this paper.

One way in which students reacted to the conflict was a form of passive resistance which may relate to Johns’ observation (1994 p. 119) that many practitioners would prefer to stick to routine and ritual practice ‘than face the
effort of curiosity, reflection and commitment'. Many students stated quite clearly that they would not participate in learning opportunities unless they were made to and that they wanted the reflective practice groups to be led in such a way that it would be easier for them. Other forms of resistance were actively to silence group members who were attempting to use the group to reflect on their experience through clear body language signals during the groups or by taking members aside after groups and censuring their participation. Another strategy which could prevent the groups from developing was where one member dominated and flouted agreed ground rules by acting in a judgemental way and professing advice.

It is clear from the analysis that students had very different interpretations of the initial guidance they were given and the extent to which they felt that their participation was voluntary. They were also unclear about what kind of structure could have ameliorated this, but to concur with Franks et al. (1994) it seemed that a different kind of structure was needed. The use of McGill and Beaty's framework (1995) may have helped to clarify both structure and content and may also have prevented certain students from giving advice which restricted other members from exploring difficult issues, through more explicit adherence to ground rules. This would be a useful avenue for further research as it may provide structure without taking away responsibility for learning from the students. One limitation of this study is that the facilitators of the groups were involved in the evaluation of the groups and this may have restrained the students' participation in the groups in some way as well as their responses in their research interviews at the end of the programme.

It would also be useful to explore further factors which make a difference to the extent to which groups develop, given that the facilitation in this study was reasonably consistent. We also need to find ways of conveying explicitly to students what the barriers to participation and learning are so that they may be overcome, without taking responsibility for this process away from the learners. Perhaps the greatest error is unwittingly to mislead students into thinking that the process may be fun or comfortable and the final words should go to the student who identified this:

... and then I thought 'Well if I can gain from people teaching me what the better route would be then you have to go through a bit of anguish yourself, give something to the group so that you can actually get something back yourself' — but certainly the very first few groups it was very difficult... I think the people that were in the group I was in were quite enthusiastic to try and... the 6 months to start with were probably hell and the next 6 months you actually gained something from it and you knew what it was, and I think at the end of it we'd have liked the group itself to have continued outside of college.

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