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Telling our Professional Stories

Maxine Alterio

A thesis submitted for the degree of
Master of Arts
at the University of Otago, Dunedin,
New Zealand.

1998
ABSTRACT

This research focused on the role reflective strategies have in bringing about change to professional practice. Eight practitioners from nursing, occupational therapy, teaching and real estate professions were involved. Using journalling and storytelling, the relationships between practitioners, professional practice, reflection and change were explored. The research was conducted within a critical social framework using qualitative methodology with data gathered from individual, collaborative and research journals, and from semi-structured interviews during which participants told stories about their practice.

The study found that a range of reflective strategies were required to implement and support change. Participants used journalling and storytelling to achieve different outcomes but even these were not sufficient as dialectic reflection was also needed. In addition, participants found bringing about change in professional contexts had implications for self and for practice. A range of self care and practice preservation approaches was required. Links were also evident between participants' concepts of power, their perceived control over events, and how they initiated and implemented change.
PREFACE

Envisaging, constructing and completing this thesis has been a challenging and insightful undertaking both from a personal and professional perspective. It has also been my way of contributing to the body of knowledge which constitutes professional practice.

Many people supported me along the way. In particular I wish to acknowledge the contribution made by the research participants whose stories and journal entries reflect their passion, commitment and concern for professional practice. Their willingness to share so many aspects of their professional lives enlivened both the process and the study itself.

I would like to thank my primary supervisor Professor Graham Webb for guiding me through the research stages. Graham’s collegial approach together with his ability to engage me in thought provoking discussions enriched the research process.

I was also privileged to have informal supervision from Pamela Wood. Pamela’s support from thesis inception to completion was invaluable. She asked the right questions at the right time, provided me with constructive feedback and was generous with her time and expertise.

Additional thanks go to my ‘critical’ friends: Verona for her reflective insights and Alison for sharing her knowledge and understanding of critical social theory. Both, in their unique way, contributed to the essence of this document. My thanks also go to the Otago Polytechnic Research and Development Committee who funded this research and to Cindy Barnett who used her layout skills to prepare the final document.

Finally special thanks to my family, Lorna, John, Nic, Jo and Kate who have always been interested in, and supportive of, my academic endeavours. Thank you for giving me the time and space to complete this thesis. In addition I would like to acknowledge the significant role my parents played, by instilling in me, from an early age, a love of storytelling. It is something I continue to treasure both in my personal and professional life.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>CHAPTER</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstract</td>
<td>i</td>
</tr>
<tr>
<td>Preface</td>
<td>ii</td>
</tr>
<tr>
<td>Table of Contents</td>
<td>iii</td>
</tr>
<tr>
<td>List of Appendices</td>
<td>iv</td>
</tr>
<tr>
<td>List of Abbreviations</td>
<td>v</td>
</tr>
<tr>
<td>List of Tables</td>
<td>vi</td>
</tr>
<tr>
<td>1 Introduction</td>
<td>1</td>
</tr>
<tr>
<td>2 Review of Literature</td>
<td>7</td>
</tr>
<tr>
<td>3 Design Approach and Methodology</td>
<td>27</td>
</tr>
<tr>
<td>4 Results</td>
<td>41</td>
</tr>
<tr>
<td>5 Discussion</td>
<td>78</td>
</tr>
<tr>
<td>6 Conclusions</td>
<td>114</td>
</tr>
<tr>
<td>Bibliography</td>
<td>125</td>
</tr>
</tbody>
</table>
# LIST OF APPENDICES

<table>
<thead>
<tr>
<th>APPENDIX</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Information Sheet: Participants</td>
</tr>
<tr>
<td>2</td>
<td>Consent Form: Participants</td>
</tr>
<tr>
<td>3</td>
<td>Agreement for use of Transcript: Participants</td>
</tr>
<tr>
<td>4</td>
<td>Agreement to Research Confidentiality: Transcribers</td>
</tr>
<tr>
<td>5</td>
<td>Agreement to Research Study Confidentiality: Supervisors</td>
</tr>
<tr>
<td>6</td>
<td>Summary of Dreyfus and Dreyfus Skill Acquisition Model</td>
</tr>
</tbody>
</table>
# LIST OF ABBREVIATIONS

<table>
<thead>
<tr>
<th>[Italics]</th>
<th>researcher’s adaptations</th>
</tr>
</thead>
<tbody>
<tr>
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<td>pause</td>
</tr>
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<tr>
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</tr>
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<td>(S,2)</td>
<td>story 2</td>
</tr>
<tr>
<td>(I,1)</td>
<td>interview 1</td>
</tr>
<tr>
<td>(I,2)</td>
<td>interview 2</td>
</tr>
<tr>
<td>(IJE)</td>
<td>individual journal entry</td>
</tr>
<tr>
<td>(CJE)</td>
<td>collaborative journal entry</td>
</tr>
<tr>
<td>(RJ)</td>
<td>researcher’s journal</td>
</tr>
</tbody>
</table>
# LIST OF TABLES

<table>
<thead>
<tr>
<th>TABLE</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Dreyfus and Dreyfus Skill Acquisition Model</td>
</tr>
<tr>
<td>2</td>
<td>Participants' Definitions of Reflection</td>
</tr>
<tr>
<td>3</td>
<td>Individual Journals</td>
</tr>
<tr>
<td>4</td>
<td>Collaborative Journal</td>
</tr>
<tr>
<td>5</td>
<td>Similarities and Differences</td>
</tr>
<tr>
<td>6</td>
<td>Bringing About Change in Professional Practice</td>
</tr>
<tr>
<td>7</td>
<td>Constructs of Empowerment</td>
</tr>
</tbody>
</table>
CHAPTER ONE: INTRODUCTION

Professionals continually learn on the job because their work entails engagement in a succession of cases, problems or projects which they have to learn about. This case-specific learning, however, may not contribute a great deal to their general professional learning base unless the case is regarded as special rather than routine and time is set aside to deliberate upon its significance (Eraut, 1994, p.10).

The role that reflection plays in bringing about change in professional practice is currently attracting considerable attention and debate throughout the world. Practitioners from diverse fields are embracing a reflective outlook. Using a range of reflective strategies, practitioners are thinking, writing and talking about their professional lives. Educators and health professionals in particular are using reflective journals to enhance practice, and using stories to act as stimuli to critical thinking and self-evaluation. As Grumet (1991) notes, we are to some degree constituted by the stories we tell to others and to ourselves about experience. However, as Schutz (1970) explains "meaning does not lie in experience. Rather, those experiences are meaningful which are grasped reflectively" (cited by Chamberlain, 1974, p.131).

The role of reflective strategies in professional contexts is the focus of this study. As Staff Development Co-ordinator at Otago Polytechnic, Dunedin, New Zealand, I am involved in assisting academic staff to develop their teaching practice. I work with lecturers who have a range of experience in teaching, from new lecturers who have subject expertise but no teaching experience, through to competent practitioners who have a wealth of knowledge embedded in their teaching practice. I have a particular interest in the role of reflection during the process of change which occurs as practitioners move from novice to expert status. In this study I use the Dreyfus and Dreyfus (1980) Skill Acquisition model which describes five levels of proficiency, and I take note of Benner’s (1984) findings regarding application of the Dreyfus and Dreyfus model in the nursing profession. One aspect of this study was to establish whether participants followed a similar progression to that described by Dreyfus and Dreyfus (1980) and Benner’s (1984) research.

Each person I have worked with has a unique story, aspects of which are shared in our
professional encounters. Much of this valuable data, however, is lost in the myriad of everyday interactions. Capturing this data is a challenge. Using two research methods, journalling and storytelling, my intention was to explore the relationships between practitioner, professional practice, reflection, and change. These two research methods parallel the processes of reflection used by participants. The research design was enriched by drawing on self-reflectivity which acknowledges the researcher's perspective as part of the process. In post-positivist inquiry, knowledge is assumed to be collaboratively constructed by researchers and participants. Reflexivity must therefore be an integral part of the research (Lather, 1988). Given the active role of the researcher and recognising the need to make my assumptions explicit I have declared my research position and given an account of why I chose to work within a critical social framework. The essence of my research findings could not be truly represented without making my position transparent.

I have always derived pleasure from, and been challenged by, the power of reflection. However, reflecting on events in order to understand took precedence over reflecting on events for the purpose of bringing about change. As I delved into the philosophy which underpins critical social theory I shifted my focus for I concur with Carr and Kemmis when they say knowledge is “subjective, context bound, normative, and in an important sense, always political” (1986, p.73). Viewing knowledge as a social product, and always political, and believing that people both constitute and are constituted by their situations, made my shift to critical social theory a relatively straightforward one.

The intent of critical social research is illumination, empowerment and emancipation. Critical social research is designed not only to explain or understand social/political realities but to change them. It is based on the premise that the research design and methodology create the conditions for change and as a consequence the possibility of empowerment for participants. Smith (1993) identified three constructs of empowerment: empowerment as self growth, empowerment as personal/political consciousness raising and empowerment as collective action/struggle. While it could be argued that empowerment as self growth (involving the enhancement of personal knowledge, skills and confidence) could be an outcome of most forms of research, the other two constructs are more dependent on the orientation and design of the research.
Practicing in professional contexts entangles us in particular orientations towards knowledge, power and identity. These contexts are characterised by unequal distributions of power. In my professional role I often hear colleagues describe their experiences of power inequities. I am therefore interested in the views of participants as they reflect on these issues in relation to their own professional contexts. A critical social perspective provides an appropriate framework in which to investigate how participants use reflective strategies to initiate and support change. I envisaged that during the research process, participants would have opportunities to reflect on aspects of their practice, to make changes and to examine the contexts in which these changes occurred.

I consider the justification for my research to be two fold. Firstly there is a worldwide interest in the area of reflection. This is especially evident in literature relating to the teaching and nursing professions, (eg. Allen, 1985; Benner, 1984; Holly, 1984; Schön, 1983). Practitioners from both these professions are included in the study. To investigate the applicability of reflective strategies to other professions (and to extend my own experience) I included occupational therapists, and real estate agents. Four professional groups are therefore involved.

The literature suggests that occupational therapists encourage clients, and students on clinical placement, to reflect on experience. Alnervik and Sviden (1996) contend that a number of occupational therapists use professional journals and storytelling to reflect on their own practice. They also suggest occupational therapists should examine the role reflection plays in developing their practice.

To practice as a real estate agent does not require a tertiary level qualification but real estate agents are members of a professional society (the New Zealand Institute of Real Estate). Some real estate agents use what they refer to as ‘success diaries’ to record positive outcomes related to their work. Keeping a record of successful sales strategies is reinforced in some training programmes with agents being encouraged to return to their diary entries and to reflect on these results. Telling stories about their practice is also part of real estate culture. Reflective strategies therefore appear to have a role in all four professions.

Although real estate does not comply with the criterion for professionalism of a tertiary level qualification, for convenience it is referred to along with the others as a ‘profession’. Real
estate agents are not members of the Otago Polytechnic staff nor are courses related to real estate held at this polytechnic. Nurses and occupational therapists working in clinical settings may have connections with the institution when they supervise students on clinical placements. They are not however, employed as staff members although Otago Polytechnic does offer Nursing and Occupational Therapy degrees. My connection with participants from these three professions is in a research role only.

Secondly, the process of the research itself contributes to greater understanding of the role reflection plays in bringing about change in professional practice. I wanted to find out how participants implemented change, what effect it had on their practice and how different methods of reflection contributed to the process. The research design therefore concentrated on the experiences of participants in practice contexts.

Studies of professional practice examine how people go about constructing and organising what has already been experienced. Donald maintains that our experiences hint “at a process whereby we attribute meaning to what happens to us” (1979, p.17). Our perspectives and experiences as practitioners shift as we live our professional lives and complicate the stories we tell about our practice. Multiple and conflicting meanings permeate the strategies we develop, the convictions we live by and the identities we construct. Britzman suggests that when “such multiplicity is suppressed, so too is our power to imagine things could be otherwise” (1991, p.10). Habermas (1987) also alerts us to the ‘forgotten’ and ‘suppressed’, the connections between knowledge and human interests, especially the ability of individuals to reflect on their situations. Both Britzman (1991) and Habermas (1994) maintain that by using reflective strategies we can raise awareness of our inherited and socially constructed circumstances and begin to consider other possibilities.

I investigated journalling and storytelling as tools for reflection, analysis, self evaluation and as ways of initiating and supporting change. I based my decision to use journalling and storytelling on gaps I perceived in the literature, on personal interest, and on an intuitive feeling that these two methods might reveal different data. As I developed my ideas I became interested in locating the reasons why participants used written (journalling) reflection and oral (storytelling) reflection at particular times. Alnervik and Sviden’s (1996) study of occupational therapists suggests differences in descriptions of treatment sessions depending on whether storytelling or reflection on practice (both oral methods in their study) were used.
I could find no evidence in the literature of studies looking specifically at different reasons as to why practitioners select oral or written reflective strategies. In addition I was unable to find reference to a collaborative journal being used simultaneously by practitioners from different professions. These discoveries influenced how I shaped my research ideas. I was able to cluster them into three areas. As a result the questions this research explores are as follows.

1. To what extent does the Dreyfus and Dreyfus model used by Benner (1984) with nurses parallel the process of professional development as experienced by nurses in this study and by participants from the other professions?

2. How do journalling and storytelling aid reflection?

3. What is the role of reflective strategies in bringing about change in professional practice?

I searched for answers to these questions in four ways. I interviewed participants about specific aspects of their practice, I asked them to tell me stories about professional incidents or insights which led to change, I analysed extracts from participants’ individual journals and from our collaborative journal, and I kept a research journal in which I recorded the entire research process, including my personal reflections. I structured the research by designing a wall map marking out the route participants and I might travel to answer these questions. This map also provided me with a blueprint on which I based the structure of my thesis proposal. A map for each chapter evolved as I became immersed in the study itself. While often interested in going down side roads, I used these maps to keep me focused on the research questions.

There are six chapters in this thesis. The following five chapters address different aspects of the research. Chapter Two consists of a review of literature, organised in two parts. Part One focuses on theory and practice, critical social theory implications, reflection and the reflective strategies of journalling and storytelling, self review considerations, change and power issues. Part Two considers design and methodology aspects, in which I explore the nature of research relationships together with associated power concerns and outline ethical issues pertinent to post-positivist research studies.

Chapter Three outlines the design and methodology I used in the research. I provide a rationale for working within a critical social framework, describe the study and research process and give information about participants. The stance I have taken in this study with
regard to ethics, research relationships and standards of rigour is also outlined.

In Chapter Four I present data and address my first research question. I provide brief participant biographies, draw on interview material, and present two stories from each participant. Data from participants’ individual journals and from our collaborative journal are also included.

In Chapter Five an analysis of data is undertaken. I begin by discussing the major themes which emerged from the study. I explore how participants bring about change in professional practice and I use Smith’s (1993) model to present participants’ current levels of empowerment. I examine how journalling and storytelling aid reflection and I discuss the role of reflective strategies during the process of change. I also consider similarities and differences between participants, and across professions, with regard to the use of reflective strategies.

In the final chapter I explore the implications of using reflective strategies to bring about change to professional practice. I also reflect on my research journey acknowledging movements in my own learning with regard to the relationships I set out to explore. I conclude by identifying areas for future study.
CHAPTER TWO: REVIEW OF LITERATURE

Critical consciousness is bought about, not through intellectual effort alone, but through praxis - through the authentic union of action and reflection (Freire, 1985, p. 87).

This chapter provides a review of literature which influenced and shaped the research. For clarity it is separated into two parts. In Part One I deal with theory and practice issues and outline fundamental aspects of critical social theory. The concept of reflection is then introduced and the reflective strategies of journaling and storytelling are described. Aspects of self review including the role of self in narrative are discussed in relation to the process of change. Risks associated with change are outlined and potential power issues are highlighted.

In Part Two I investigate design and methodology considerations. Research relationships and associated power issues are explored within a critical social context and a range of ethical safeguards are described. The use of the interview as a specific research tool is also investigated.

Part One:

Theory and Practice

While practitioners from the professions involved in this study share the need to develop generic capabilities such as effective communication and problem solving skills, they must also acquire specific knowledge and skills appropriate to their professions. How and where practitioners best acquire and further develop these capabilities is of interest to professionals and to educationalists.

The traditional model of educating aspiring professionals solely within the confines of an educational institution, and separating 'knowing what' (theory) from 'knowing how' (practice), has been challenged extensively (Boud, Keogh and Walker, 1985; Bruner, 1985; Eraut, 1994; Habermas, 1987; Heron, 1989; Schön, 1983). Eraut suggests one of the key factors in the longevity of the traditional model was the belief that “practical knowledge was context bound while theoretical knowledge was comparatively context free” (1994, p.50). He argues that the learning of theoretical knowledge is affected by context and maintains that “a significant proportion of the learning associated with any change in practice takes place in its context of use” (1994, p.37). Eraut also questions the belief that we acquire knowledge for
later use. He suggests that “not only does an idea get reinterpreted during use, but it may even
need to be used before it can acquire any significant meaning for the user” (1994, p.51). Such
a perspective suggests any meaning is likely to be influenced by previous contexts and will
require further intellectual effort before it can be transferred into another context. This view
highlights some of the complexities associated with the nature of professional knowledge. As
Eraut notes, there is increased acceptance that “important aspects of professional competence
and expertise cannot be satisfactorily represented in propositional form and embedded in a
publicly accessible knowledge base” (1994, p.15). Current thinking suggests a much broader
framework is needed.

The notion of reflective practice providing such a framework has appeal because of its
potential for personalised application. It also offers one way to access what practitioners
know and do intuitively but cannot easily share. Polanyi’s (1967) term ‘tacit knowledge’
describes what we know but cannot explain. Argyris and Schôn (1974) revealed discrepancies
between what we think is happening and what is actually occurring when they raised the
possibility of a significant gap between what practitioners think they are doing and why,
(espoused theories), and what they are actually doing in practice, (theories in use). This gap
between account and action, Britzman suggests “is a natural consequence of people’s
perceptual frameworks being determined by what they want or expect to see, and by people
reporting back to them what they want to hear” (1991, p.13).

Attempts to capture tacit knowledge and to find ways of reducing the gap between espoused
theories and theories in use contributed to the development of a reflective paradigm. Schôn
(1983) in particular has highlighted the significance and value of reflection in raising
awareness of tacit knowledge and transforming knowing-in-action to knowledge-in-action.
Reflecting on professional practice is recognised by Schôn (1983) as one method which can
be used to locate differences between espoused theories and theories in use and to initiate and
support change within the work context.

**Critical Social Theory**

Change, or at least a changed perspective which may lead to action, is one of the desired
outcomes of critical social research. Its method is dialogue and the intention is to raise
people’s awareness of their collective potential as active rather than passive agents of history
by exposing distorted components in communication and interaction through critically reflexive discourse (Bredo and Feinberg, 1982). Critical social theory according to Kemmis “presupposes a community of participants/researchers committed to the critical development of their own social life: their practices, their understanding of these practices, and the institutions and situations they inhabit and constitute through their action” (1985, p.155). Critical social theory therefore provides practitioners with a framework in which reflective and critical thinking skills can be developed and applied (Allen, 1985; Mezirow, 1981).

The idea of knowledge as a social product is well documented in nursing and teaching literature (Allen, 1986; Benner, 1984; Britzman, 1991; Eraut, 1994) and is one of the hallmarks of the phenomenological/hermeneutic/interpretive research tradition. Both interpretive and critical research perspectives are based on the premise that “social life is constructed by meaning, by rules, conventions, or habits adhered to by individuals as social beings” (Allen, 1986, p.35). The major difference between interpretive and critical social approaches, and one which contributed to my decision to use critical social theory, centres on the issue of purpose. Interpretive theory seeks to ‘understand’ through communicative action, while critical social theory seeks to ‘reveal’ underlying power relationships and supports the position that knowledge is political (Dixon, 1996).

Fay (1987) argues that there are four conditions associated with critical social theory; crisis, false consciousness, enlightenment and emancipation, and that they are interconnected. A crisis can be precipitated within a professional context when practitioners experience intolerable levels of frustration and dissatisfaction. Practitioners know something is wrong but cannot accurately articulate what it is and why it is happening. Lather defines false consciousness as “the denial of how our common sense ways of looking at the world are permeated with meanings that sustain our disempowerment” (1991a, p.59). When dissatisfaction becomes intolerable practitioners may begin a process of enlightenment by engaging in critically reflexive dialogue. I wanted to determine if participants in this study would bring about change according to these conditions.

Enlightenment according to Habermas (1994) involves a critique of the profession’s ideology. It is also likely that current workplace cultures will be explored with the aim of revealing, understanding and seeking productive ways to neutralise existing power relationships. Through a process of consciousness-raising, the potential for self-transformation is increased
thereby enhancing the ability of practitioners to initiate emancipatory actions. Grundy (1987) stresses that critical social theories are not sufficient in themselves to result in practical action but need to be authenticated by others through a process of self-reflection. Other practitioners must also be able to recognise that the same feelings, experiences and findings are ‘true’ for them. Grundy (1987) refers to this type of knowledge as ‘authentic insight’.

Habermas states that “a radical critique of knowledge as social theory is only possible through an analysis of the connection between knowledge and human interest” (1987, vii). He specifically gives credence to the ability of practitioners to reflect on their professional practice maintaining that “in self-reflection, knowledge for the sake of knowledge comes to coincide with the interest in autonomy and responsibility” (Habermas, 1987, pp.197-8). The critical social perspective therefore suggests a way not only to research, but to explore connections between knowledge, politics and power. Practitioners operating within this framework increase the possibility of praxis. Critical social theory holds firm the concept of praxis, the view that theory and practice are dialectically related, with theory being developed and tested by application in and reflection on practice, and practice viewed as a risky venture which can never be completely justified by theoretical principles (Carr and Kemmis, 1986).

**Integrating Theory and Practice**

Practitioners working within a reflective framework constantly seek ways to integrate theory and practice. The Dreyfus and Dreyfus (1980) Skill Acquisition model suggests one approach to understanding the tension between theory and practice and offers ways of utilising this tension. Dreyfus and Dreyfus developed their model based upon the study of chess players and airline pilots. Benner (1984) has applied the model successfully in the nursing profession and has written extensively on the implications the model has for teaching and learning. To my knowledge it has never been used in relation to real estate or occupational therapy practitioners, nor has it been applied to four professions within the same study.

The Dreyfus and Dreyfus model posits that in the acquisition and development of a skill, a learner passes through five levels of proficiency: novice, advanced beginner, competent, proficient and expert. These different levels according to Benner reflect changes in three general aspects of skilled performance.

One is a movement from reliance on abstract principles to the use of past concrete experience as paradigms. The second is a change in the learner’s perception of the
demand situation, in which the situation is seen less and less as a compilation of equally relevant bits, and more and more as a complete whole in which only certain parts are relevant. The third is a passage from detached observer to involved performer. The performer no longer stands outside the situation but is now engaged in the situation (1984, p.13).

While the novice operates on abstract principles and formal models and theories, the expert uses concrete examples, grasping perceptual distinctions as well as conceptual issues. The expert practitioner does not rely on rules, guidelines or maxims. Drawing on a wealth of experience, a professional operating at this level has an intuitive grasp of each situation. Dreyfus and Dreyfus (1977) describe this state by saying “the performer is no longer aware of the features and rules and his/her performance becomes fluid and flexible and highly proficient” (cited by Benner 1984, p.34). At this point the limits of formalism, that is, the inability to capture all the steps in the process of highly skilled human performance, become apparent (Benner, 1984; Schón, 1983).

There are other significant differences between novice and expert performance, and practitioners also shift between stages, yet as Butler (1994) notes many professional development programmes operate on the premise that if people are presented with new knowledge they will change their current thinking and practice. For the vast majority of people, in most situations, this does not occur. While rule-driven behaviour is an important component in training novices, it will never produce expert performance. According to Dreyfus and Dreyfus (1980) it is through thoughtful lived experience that one achieves expert status. Butler (1994) reinforces this belief and maintains that experiential knowledge is constructivist and dynamic. It assumes that human action will never be captured definitively and permanently by theories and legislation.

Reflection
Numerous theorists and practitioners have advocated the use of reflection as a learning tool and have analysed the processes of reflection (eg. Boud et al., 1985; Butler, 1994; Coutts-Jarman, 1993; Holly, 1984; Mezirow, 1981; Schón, 1983, 1987, 1991; Van Manen, 1977) but definitions of the concept are relatively sparse. Boyd and Fales maintain that "reflective learning is the process of internally examining and exploring an issue of concern, triggered by an experience, which creates and clarifies meaning in terms of self, and which results in a changed conceptual perspective" (1983, p.99). Boud et al, say “reflection, in the context of
learning, is a generic term for those intellectual and affective activities in which individuals engage to explore their experiences in order to lead to new understandings and appreciations” (1985, p.19).

Kemmis maintains reflection can have an emancipatory effect by encouraging practitioners to engage in proactive initiatives within their practice contexts. He differentiates between reflection and passive contemplation. He claims reflection “is a social process, serves human interests, is a political process” and is a “practice which expresses our power to reconstitute social life by the way we participate in communication, decision-making and social action” (1985, p.140). Dilthey’s (1977) notion of reflecting on one’s life as an ongoing autobiographical activity that acts as a sediment for our actions and decisions is used by Witherell (1991) to demonstrate how reflection influences our change processes. She draws our attention to the way personal meanings constantly shift because they are contingent on context, self and others.

These definitions have some commonalities in that the process of reflection involves the self and the consequence of reflection is a changed conceptual viewpoint. It is the reflective process itself, however, which attracts considerably more attention with authors differing in their accounts of reflective levels. Mezirow (1981) proposes seven levels of reflection arranged in a hierarchy from reflectivity which is an awareness of thoughts and feelings through to theoretical reflexivity which involves challenging one’s underlying assumptions, resulting in a changed perspective. Schön (1991) suggests three levels: conscious reflection, criticism and action. Other authors maintain that intuition, defined as understanding without rationale, plays a central function (Benner and Tanner, 1987; Goodman, 1984).

Differences are predominantly in terminology, detail, and the extent to which the process is arranged in a hierarchy. In a review article about reflection, Atkins and Murphy (1993) identify three key stages which are shared by most authors. The first stage is characterised by inner discomfort, according to Boud et al (1985), and the experience of surprise, by Schön (1991). The associated thoughts and feelings arise when there is a discrepancy between what is known and what is happening in a particular situation. The second stage involves processes of critical analysis of feelings and knowledge which Mezirow (1981) refers to as conceptual, psychic and theoretical reflexivity and Boud et al (1985) as association, integration, validation
and appropriation. Analysis at this stage may include the examination or generation of new knowledge. The final stage includes the emergence of a new perspective of the situation. Mezirow (1981) refers to this stage as perspective transformation, a term he uses to describe how we can become critically aware that our assumptions about the environment in which we live constrain the way we see ourselves and our relationships. He suggests we can come to a transformed perspective by either gaining sudden insight or by a series of ongoing shifts in assumptions which enables us to form new perspectives.

These three stages are integrated and the outcome of such reflection is learning. We must be mindful, however, that reflection is not simply an individual process. Like language, it is a social process. It cannot be understood without reference to action or context. When we stop to reflect we do so because something has happened which demands our attention. We look inwards to examine our thoughts and outwards to examine the situation which made us pause thereby considering both internal and external connections.

Kemmis (1985) links types of reflective activity to three forms of thinking: technical, practical and critical. He maintains that technical reasoning focuses on application of specific skills in a stable environment, practical reasoning encompasses a holistic approach, and critical thinking, the most complex level, takes a dialectic approach by addressing the social and historical contexts of an event. Reflection is dialectical in several ways: striving to understand how the actions of individuals (informed by critical reflection) shape history and how the type and content of thought are shaped by history, and considering how individuals’ thought processes are shaped by a social and cultural context, and how the social and cultural context is itself shaped by the thoughts and actions of individuals (Kemmis, 1985). Reflection, as Kemmis (1985) posits, can be described as ‘meta-thinking’ (thinking about thinking) for it has the potential to propel us into further thought followed on occasion by action. Mezirow (1981), however, reminds us that while reflection alone does not ensure change it can contribute to the possibility.

Schön (1991) argues that professionals encounter complex and diverse situations in everyday practice, therefore straightforward rational approaches to learning are not sufficient. He suggests two forms of reflection: reflection-in-action and reflection-on-action. Reflection-in-action takes place in the work context during the incident while reflection-on-action occurs after the event. The distinction between reflection-in-action and other forms of reflection is
its immediate significance for action. There appear to be three main characteristics involved with reflection-in-action: it is to some degree a conscious act, it has a critical function and it results in experimentation. Reflective practice, according to Schönb (1983), stresses the importance of experience and plays down the theoretical component. Knowing and doing are synonymous. Schönb explains:

When we go about the spontaneous, intuitive performance of the actions of everyday life, we show ourselves to be knowledgeable in a special way. Often we cannot say what it is that we know. When we try to describe it we find ourselves at a loss, or we produce descriptions that are obviously inappropriate. Our knowledge is ordinarily tacit, implicit in our patterns of action and in our feel for the stuff with which we are dealing. It seems right to say that our knowing is in our action (1983, p.49).

Eraut maintains that one of the strengths of the Dreyfus and Dreyfus (1980) model is the case it makes for “tacit knowledge and intuition as critical features for expertise in unstructured problem areas” (1994, p.127). Dreyfus and Dreyfus (1980) also accept that experts may deliberate prior to acting under some circumstances, especially when outcomes are of a critical nature or when practitioners have a sense of unease about their original choice of action. Schönb (1983) agrees that practitioners often draw on practical experience in a highly intuitive way. Reflection according to Schönb (1983) is triggered when a situation is somehow different and therefore warrants further thought. In Benner’s (1984) work with expert nurses she found a similar trigger produced an intuitive feeling of unease that something was not right. Like Schönb (1983) these authors acknowledge that reflection or thoughtful deliberation influence our actions. My interest lies in the role reflection plays in bringing about change to professional practice.

Reflective Strategies

By encouraging us to closely examine what we do and why, reflective strategies help to make connections between self and others, to break down barriers to understanding, and to recognise patterns and themes within, and between, particular contexts. A critical aspect of becoming expert according to Benner (1984) is being able to read these contexts and act appropriately. She maintains that understanding the impact of social and professional contexts is as necessary as being aware of the feelings learners experience during reflective thinking processes. While the reflective strategies practitioners use vary according to personal preference, purpose and context, two that are currently attracting attention within professional circles are journalling and storytelling.
Journalling

Recording aspects of one’s personal life in a journal as a way of making sense of complex experiences and associated thoughts and feelings has long been the forte of artists, writers, philosophers, travellers, statespeople and educationalists (like Jean Piaget, Abraham Maslow and Sylvia Ashton Warner) as well as ‘ordinary people’. Holly and McLoughlin (1989) suggest that we should also write about our professional lives. They maintain that it is a “powerful way of documenting and learning from experience” and that journal writing is one tool practitioners can use to make “retrospective self evaluations of their attempts to translate values into action” (p.259). Holly (1989) has summarised the reasons why some educators keep journals as being that there is a permanent record; writing necessitates time out for reflection; patterns, themes and the flow of life become apparent over time; learning from practice can increase awareness, knowledge and confidence; writing appears to bring to a conscious level much that was ‘tacit knowledge’, and writing provides a comprehensive, ongoing data base for professional and collegial development as well being a part of these processes itself (pp. 279-280).

Writing in a journal to reflect on professional practice involves a cyclical pattern of reflection. We write to read, reflect, and write again. By recording critical experiences, and clarifying beliefs, ideas and assumptions in systematic and comprehensive ways, we gather together rich and relevant data which can be returned to and analysed for patterns and themes. Journalling offers a way to document experience over time. We capture the flow of events rather than isolated episodes. Professional journals have the potential to become windows through which we can view our practices and ourselves.

Some writers of journals find it useful to pose questions about specific incidents to give form to the reflective process. What happened? What are the facts? What was my role? How did I feel at the time? Have I reacted in the same way on other occasions? What preceded this incident? Who were the key participants? What roles did each person take? Have I been with this group of people when similar events have occurred? What would I now do differently if a similar situation arose? (Holly, 1984; Rainer, 1978). Progoff (1975) suggests writing as close as possible to the time of the incident and taking time to re-visit data later the same day or at least within the next few days. Holly holds the view that it is useful to use a combination of “writing as close to the time as possible and some time later so that multiple views can emerge” (1984, p.7). She also stresses that there are no hard and fast rules for journal
keeping. Each person finds their own voice in their own way.

**Storytelling**

Storytelling is another reflective strategy which resonates with each person’s unique voice. Stockhausen believes the aim of storytelling is to “capture, code, and validate the (generative) knowledge born of experience, observation and intuition” (1992, p.9). Witherell contends that “the creative use of story and dialogue lends power to educational and therapeutic experiences because of their capacity to expand our horizons of understanding and to provide rich contextual information about human actors, intentions, and experiences” (1991, p.84). Reason and Hawkins maintain that storytelling can be viewed as an aspect of inquiry and once we view it in this way it can be used “to explain or to express: to analyse or understand” (1988, p.79). When we tell stories about our practice we create spaces in which meaning can be constructed. Heron (1981) agrees that all modes of inquiry begin with experiential knowing. Churchman reminds us that “the underlying life of a story is its drama not its accuracy” (1971, p.178). He views the best stories as those “which stir people’s minds, hearts and souls and by doing so give them new insights into themselves, their problems, and their human conditions” (1971, p.93). He sees a direct connection between storytelling and the construction of knowledge. Wilber agrees, and comments that “meaning is established by unrestrained communicative inquiry and interpretation” (1981, p.32). According to Freire (1970) one indication of a liberating process is to encourage people to tell their own stories critically. Eckhartsberg (1981) views storytelling as a way to make connections with one another, with ourselves and with our communities. He says “human meaning making rests in stories. Life making calls for accounts, for story, for sharing. To be human is to be tangled in stories” (p.90). Stories also have the potential to help us make sense of our professional lives. Practitioners share stories in a variety of ways and the same story can be told by different stakeholders in different ways. We can, as Jung (1963) says, ‘dream the dream on’.

**Self Review**

To increase the likelihood of gaining insight through reflection it is essential that practitioners engage in forms of self review. However, self-evaluative processes by their very nature can introduce a degree of vulnerability into the arena of professional practice. As Nias and Groundwater point out, “to gather evidence about, to reflect upon and perhaps to change one’s own professional practice requires self awareness, self-evaluation, self-revelation and
probably creates self-doubt” (1988, p.3). Yet these processes are necessary for on-going development. If we value the concept of development in its entirety, self study, accompanied on occasions by discomfort, is an integral part of professional life.

Writers such as Welty (1984) draw on their own inner journeys to understand the nature and formation of self through their cultural-historical, individual-biographical, and interpersonal-relational patterns.

It is our inward journey that leads us through time - forward or back, seldom in a straight line, most often spiralling. Each of us is moving, changing, with respect to others. As we discover, we remember, remembering, we discover; and most intensely do we experience this when our separate journeys converge (p.102).

Building on Welty’s work, and on the writings of Dilthey, Witherell (1991) draws our attention to the importance of developing “an empathic understanding of human action through examining one’s actions, intentions, and history within the culture, language, and meaning systems in which one exists” (p.90). Others, such as Bruner (1986), Gilligan (1982) and Belenky, Clinchy, Goldberger and Tarule (1986) have stressed the value of subjective, imaginative and metaphorical ways of knowing. Their work suggests, as Witherell comments, that “the self develops and finds meaning in the context of relationship - between self and other selves, subject and object, individual and culture, and between aspects of the self, both across and within the time dimension” (1991, p.90).

All these authors emphasise the central importance of story and dialogue within the process of human development as they pertain to the development of our sense of self and to our relationships with others. It is highly possible, within professional contexts, that story and dialogue also contribute to the development of professional knowledge and impact on our sense of professional self and on our professional relationships.

Change
We expand our understanding of ourselves as practitioners and create the potential for change through our professional relationships, our professional and personal experiences, and how we manage our everyday practice. Freire (1972) stresses the importance of dialogue, Fay (1987) sees education as the key to enlightenment and Mezirow (1981) believes we must become critically aware of how and why the ways we see, think and act influence how we define situations and ourselves in relation to them. Eraut suggests by sharing accounts and
experiences with colleagues we can "broaden awareness of the factors involved in change and possibly expand the tactical repertoire as well" (1994, p.85). Argyris and Schön (1974) recommend actively seeking good quality feedback on one's practice. In addition Smyth (1986) and Van Manen (1977) argue for critical reflection to influence thinking and practice. These authors all agree that we have to reflect critically on the meanings we attach to realities in order to bring about change. By doing so we create the potential for change and therefore increase the likelihood of transforming our professional perspectives.

**Power**

Transformation does not come without risk, as documented by Benner (1984), Brookfield (1993), Chinn (1995), Foucault (1980), Nyberg (1981) and Toffler (1990), each of whom have made significant contributions regarding the concept of power. As a social phenomenon, power has the ability to capture our attention. All of us, at some stage, are likely to experience power inequities in our professional lives. We can, therefore, identify with colleagues when they talk about feeling 'powerless'. Foucault maintains that "power resides in a web of social institutions and practices" (1980, p.185) and it is within this context that I explore the relationship between power and the ability of practitioners to initiate and support change to practice.

Toffler defines traditional power as "the use of violence, wealth and knowledge ... to make people perform in a given way" (1990, p.14) and suggests that power is being transformed because violence and wealth are being replaced by knowledge as its primary source. Nyberg defines it as "the motive and capacity to accomplish plans with others" (1981, p.61). While on the surface Nyberg's (1981) definition appears to be a more egalitarian approach, uncertainty over whose plans are being adhered to, suggests it is a traditional view.

Foucault (1980) maintains that power always exists in relation to resistance, whereas Nyberg (1981) contends that power is always delegated, meaning that if someone has power over us we have in some way consented to this state. Foucault (1980), Nyberg (1981) and Toffler (1990) in varying degrees, all accept the importance of knowledge in the generation of power. Foucault (1980) views power and knowledge as inseparable and mutually generative, Toffler (1990) believes knowledge is becoming the primary source of power and Nyberg (1981) includes knowledge in two of his four identified sources of power.
Marginalisation

Foucault (1980) contends that power always has a cost. According to many nurse practitioners (e.g. Chinn, 1995; Rafael, 1996), one such cost has been the devaluing of feminine attributes such as caring. In order to acquire power some nurses feel they must distance themselves from other nurses and adopt the 'medical model' in order to advance their career. As a consequence other forms of knowledge (e.g. medical) take precedence over caring knowledge. Drawing on nurses’ experiences of what happened when they challenged traditional organisational assumptions and voiced alternatives to the medical model of nursing care, Brookfield (1993) highlights the personal, professional and political risks involved. As he acknowledges, “politically, being critically reflective entails asking awkward questions about the nature of power and control, and calling people to account for their ideas and actions” (1993, p.198). He uses the term ‘cultural suicide’ to describe the process practitioners undergo when they talk and work in ways which enhance the likelihood of change occurring to structures, policies and processes within their organisations. By working to change organisational cultures, practitioners endanger their positions and run the risk of marginalising themselves from the majority of their colleagues. There is also evidence that nursing is marginalised within the health profession itself (Brookfield, 1993; Chinn, 1995).

Horizontal Violence

Another power related concern which has attracted attention in nursing contexts is ‘horizontal violence’ a phenomenon where oppressed individuals behave aggressively towards members of their own group. Hall, Stevens and Meleis define it as “that which is exerted by the marginalised in resistance to the hegemony of the centre” (1994, p.28). The power of the centre is dependent on predominantly unchallenged authority. The existence of marginalised groups represents a threat hence the precarious nature of these groups for as Hall et al suggest “the inner worlds of marginalised persons mirror the contradictions and pressures external to themselves and create the necessity for continual, purposeful introspection” (1994, p.30). Reflectivity then is a key aspect of a marginalised person’s life. Hall et al (1994) remind us, however, of the double edged sword of reflectiveness. On one hand reflecting on one’s marginalising experiences can be empowering in the sense that increased awareness of particular situations can result in more effective strategies. However, it can also heighten political awareness which can be uncomfortable if individuals do not have sufficient support and resources to address inequities. For example, one way hierarchical power suppresses challenges from marginalised people is to “force majority concepts to be expressed in the
majority language, resulting in the devaluing of other voices” (Hall et al., 1994, p.31).

**Enabling Power**

Benner (1984) calls for nurses to ensure their voices are heard by valuing the traditional power of nursing knowledge and also by acknowledging that nursing expertise “is a source of power that can often have a transformative influence on clients’ lives” (1984, p.210). Such an approach, according to Rafael, “illustrates power that moves beyond ‘power over’ to include power that enables others ... and is based on respect for and connection with others and nature” (1996, p.14). Chinn (1995) expands this reconceptualisation of power by stressing how it values the personal power of each person, requires decision making by consensus and is based on respect for diversity among people rather than an expectation of conformity. In contrast to traditional controlling power, which often involves force, enabling power nurtures individuals by recognising that each person is integral to one’s own existence. Furthermore enabling power distributes knowledge so all may benefit. Unlike controlling power, enabling power does not reside in positions so leadership is flexible and can utilise different talents, interests and abilities at any given time. As Rafael notes “enabling power is strengthened by increased awareness of and commitment to exposing controlling forces” (1966, pp.14-15).

These issues have a direct bearing on this study in terms of ethical considerations and the type of support made available to participants during the research process. Brookfield (1993) maintains that while much contemporary writing relating to health professions focuses on the importance of being open to change and using reflective practices to initiate and support change, little is done to promote awareness of the potential personal, professional and political risks involved when questions about the nature of power and control are voiced, and when people are called to account for their ideas and actions. I describe how I attended to these issues in Chapter Three. Given the perceived complexities associated with qualitative research methods, and being mindful of the risks inherent in using self evaluative processes, my planning of this research was guided by a design and methodology review which is now summarised.

**Part Two:**

**Design and Methodology**

Post-positivist research comes with its own challenges. While it supports and encourages innovation it also requires researchers to account for processes, decisions and actions in ways
which are auditable. Post-positivist research is explained by Polkinghorne.

In the post-positivist understanding of science there is no correct method to follow. Science is not seen as an activity of following methodological recipes that yield acceptable results. Science becomes the creative search to understand better, and it uses whatever approaches are responsive to the particular questions and subject matter addressed. Those methods are acceptable which produce results that convince the community that the new understanding is deeper, fuller, and more useful than the previous understanding (1983, p.3).

Science from this perspective lends itself to the use of creative research methods because research is seen as “process not product, as experience rather than work, and as lived rather than done” (Reinharz, 1992, pp.17-18). Reflective practices such as journaling and storytelling are both suited to process orientated inquiry. This form of inquiry also brings different perspectives about the role of the researcher.

**Research Relationships**

The place of the researcher in post-positivist research relationships is still a topic for debate. Current thinking suggests there is a need for the researcher to be part of the research process in every way. Distancing or removing the researcher’s presence is incongruent with participatory research methodologies (Heshusius, 1994). Heshusius believes such efforts leave us “alienated from each other, from nature, and from ourselves” (1994, p.17) because active engagement is part of what makes us human. For Lather a key challenge of critical socially orientated research is how to “maximise the researcher’s mediation between people’s self understandings (in light of the need for ideology critique and transformative social action) without becoming impositional” (1986, p.269). Bishop (1996) has also raised issues relating to research relationships within a Maori context. Instead of setting out guidelines, and therefore constructing boundaries, he suggests a working through issues approach for the particular context within which the researcher is working. Such a perspective recognises, draws on, and values differences.

**Voice**

While researchers operating within a critical social framework openly acknowledge the researcher as part of the research process they do stress the need to minimise the researcher’s voice. One way to reduce this power is to present data as stories. Analyses of individual stories is then likely to have more meaning for participants because their stories will be grounded in their language and context. Lather (1991b) claims that having our stories
available to re-read enables the educative aspect of critical social theory to continue. New
colorations may be made each time a story is revisited. Sandelowski points out that
“narrative analyses reveal the discontinuities between story and experience and focus on
discourse: on the tellings themselves and the devices individuals use to make meaning in

Words and actions, however, have no meaning unless they are contextually based. Nor do we
operate with a sole voice. We have many voices, all contingent, as Britzman acknowledges
“upon the shifting relationships among the words we speak, the practices we construct, and
the communities within which we interact” (1991, p.12). She suggests there are three factors
involved when practices, perspectives and communities shift: the words we use to name
them, the complications associated with trying to achieve simple matches between the names
we use and the things we refer to and, finally, that by interpreting and critically representing
the voices of others we develop yet another voice. Representing research participants’ voices
means more than recording their words for words invariably express relationships, are
enmeshed in more than the current context in which they arise and retain tensions between
what is meant and what is expressed. The challenge, according to Britzman, is to “reconstruct
and critically re-present the voices of others, and in doing so care for their integrity, humanity
and struggles” (1991, p.12).

**Power Imbalances**

Researchers and participants involved in post-positivist research must work together to
minimise power imbalances acknowledging that while the notion of equal relationships is
desirable it is not realistic. Right from the outset the researcher (in the majority of instances)
initiates the study and approaches the participants. This in itself creates a power imbalance.
Foucault (1979) holds the view that participants in critical social based research studies begin
the process less emancipated than the researcher. Campbell and Bunting (1991) also cast
doubt on the possibility of ever achieving equal partnerships. They maintain “almost always
there are members of a research team who have more power than others, and it is equally
likely that the researcher(s) will make more of the important decisions about the process than
will the participants” (1991, p.11). Researchers must therefore be mindful of potential power
imbalance and work with participants to minimise them as much as possible. Using multiple
voices and presenting data as stories contributes to the notion of shared power. According to
Koch, (1994) encouraging shared decision making is another useful strategy.
Interviews

Shared decision making about research methods can provide participants with opportunities for input. In some instances the researcher may specify a particular research method (eg interviewing) but participants can contribute to the decision making process by negotiating the type of interview method used. There are several available ranging from conversation through to highly structured interviews. Researchers must ensure, however, that the interview method selected is compatible with the research design.

Oakley (1981) proposes an interview method of ‘exchange and dialogue’ which addresses many of Lather’s concerns regarding power imbalances. The characteristics of this method involve researchers conveying through actions and questions their genuine interest in each participant’s experience, being respectful of the participant’s ability to share relevant information and being grateful for the each participant’s time and effort involved during the research. The researcher also demonstrates a willingness to answer questions, give information when requested and share meaningful feedback from the research study. When researchers use interviews to gather data, Tripp suggests participants should also have the ‘right to comment’ in two ways.

The researcher interrogates (reads) the interview data, checking with the participants in the study the meanings and attached significances (interpretations) he or she finds in the data; then the researcher encodes those interpretations in a text (report) which may be legitimately interrogated by other readers for whom it also has certain meanings and significances (1983, p.43).

He maintains that adhering to such a process helps to minimise the likelihood of misinterpretation and increases the probability of shared understanding.

Reflective Methods

Research has also highlighted concerns about the methods used to study reflection. It has been found that observational and some interview methods do not always enable practitioners to articulate the knowledge they use nor make explicit the motives behind their actions (Boyd and Fales, 1983; Goodman, 1984; McCaughtery, 1991; Powell, 1989). Schön (1991) suggests reflecting-on-action may be a solution to this dilemma. Florio-Ruane (1991) and Cooper (1991) write about the role of narrative in theories of practice and how practitioners’ knowledge and meaning systems need to be tapped as part of the explanatory process. Journalling is another way to draw upon knowledge embedded in practice but is not fully utilised. Kramer (1983) maintains that by sharing insights from journals in consciousness-
raising ways practitioners can create new knowledge. Kramer (1983) also suggests that collaborative journalling is particularly useful when paralleled with some form of dialogue. Storytelling as Grumet (1991) suggests is another way to impose form on experience. It appears that both journalling and storytelling are useful reflective strategies and may be particularly effective when used in unison. Researchers using these methods, however, have a number of ethical issues to consider.

**Ethical Considerations**

There are several ethical issues crucial to the safety and wellbeing of researchers and research participants involved in studies conducted within a critical social framework. I have clustered them into four main categories: consent, ownership, confidentiality, and support.

**Consent**

Involvement in any research requires safeguards for both researchers and participants. While participation is voluntary, right of withdrawal for participants must form part of any consent form. Scrutiny by ethical bodies must be an integral part of the research approval process. Researchers must ensure potential participants are fully informed of expectations (anticipated involvement), understand the purpose of the research, and are aware of the possible use of the research findings. Supporting documentation must be evident and the conditions must be agreed to by everyone involved. Participants also need to know who will have access to data (eg supervisors, transcribers) and be given opportunities to negotiate how these data will be used.

**Ownership**

From the outset of the research relationship post-positivist researchers have an obligation to negotiate ownership issues with participants about the data they gather. This study draws on data from interviews, collaborative journals and individual journals. Tripp (1983) subscribes to the participants' 'right to comment' approach with regard to transcripts. Dixon (1996) maintains participants and researchers working within a critical social framework must have co-ownership rights and shared power with respect to the process because of the political nature of critical social research. Co-ownership according to Dixon (1996) allows all participants to have copies of their transcripts and to be able to add, alter or delete material if deemed necessary to ensure accurate representations are assembled.
Kramer (1983) suggests a group decision is necessary regarding ownership of a collaborative journal and recommends this decision be agreed on before the journal is in use. Witherell (1991) proposes that when individual journals are given to researchers, participants need to consider how they want to manage this process. She trialed pages in journals being paper-clipped together when participants did not want to share particular entries with researchers. Other options include suggesting participants select extracts, make photocopies for researchers or give them summaries only. All parties must agree to the ways in which journal material is used and confidentiality must be ensured.

Confidentiality
Confidentiality can be maintained by using pseudonyms. Pseudonyms can be assigned by the researcher or chosen by participants. Any data which could potentially identify participants or others should be excluded to ensure anonymity. Participants need to retain ownership of the data thereby maintaining control.

Support
Researchers working within critical social/reflective frameworks need to have support systems in place to ensure participant safety as they reflect on aspects of their practice which have the potential to surface uncomfortable and seemingly threatening insights (Boud, and Knight, 1993; Carr and Kemmis, 1986; Eraut, 1994). Ideally, researchers and participants should negotiate what forms of support will be provided and how they will be accessed prior to the study getting underway. Participants and researchers also need to negotiate access rights in terms of contacting each other throughout the study.

Summary
Like Koch (1994) I recognise the importance of decision trails containing the events, influences and actions of the researcher in ways which can be audited by readers. Striving to capture the cadence of participants’ voices and endeavouring to minimise power imbalances is also important. Being vigilant about ethical issues, achieving a match between research methods and design and ensuring research designs provide scope for negotiation contribute to the adequacy of the whole inquiry process. Participants’ safety and wellbeing must be taken into account throughout the research process and ways to manage discomfort be negotiated to the satisfaction of all involved. One of the design and methodology challenges is to ensure these issues are attended to during research planning, implementing and analysing phases, and
that they are transparent to readers in ways which can be audited, authenticated, and defended.
The processes I used to meet these challenges are set out in the following chapter.
CHAPTER THREE: DESIGN APPROACH AND METHODOLOGY

In the critical paradigm, interactivity is one of the most powerful and therefore potentially beneficial aspect of the research enterprise (Ford-Gilboe, Campbell and Berman, 1995, p.14).

In this chapter I outline my design and methodology approach, give my rationale for working within a critical social framework and describe how I attend to ethical considerations, research relationships and standards of rigour. My research goal was to explore the relationships between practitioner, professional practice, reflection and change. Within professional practice contexts I investigated journalling and storytelling as tools for reflection, analysis, self evaluation and as ways of initiating and supporting change. In addition I examined the different roles of written (journalling) and oral (storytelling) reflection. Drawing on the work of Dreyfus and Dreyfus (1980) and Benner (1984) I also wanted to establish whether the participants in this study followed a similar progression of professional development as those described in their studies.

Using a Critical Framework

When we select our research methods we make assumptions about the nature of knowledge and reveal the way in which we view the world. For example, I have made assumptions about the role of professional practice and the nature of professional knowledge. In the literature, views regarding the role of professional practice vary between cultures, individuals and societies, and these views range from believing that it attempts to understand and explain phenomena to postulating that it strives to predict and control them. The nature of professional knowledge can also be considered from diverse philosophical viewpoints, highlighting differing beliefs and therefore requiring different research methods. The framework in which the researcher operates therefore dictates what aspects of the research will be emphasised.

Critical social research aims to uncover power relationships and contends that knowledge is always political. It was this difference in particular which influenced my decision to work within a critical social framework because it provided an appropriate philosophical basis where I, and the research participants, could use reflective strategies, not only to reveal underlying power relationships, but to initiate and support change. I was also interested in
determining the degree of power participants felt they had in their professional lives.

Participants contributed to this study in several ways, and on a range of levels. They journaled about their practice (written reflection), engaged in semi-structured interviews (reflexive dialogue), and told stories (oral reflection) to demonstrate how they initiated and supported change. Although I decided on the methods of journalling and storytelling participants had input into the interview style we used. They wanted two way, mutually advantageous interaction, a technique resembling Oakley’s (1981) ‘exchange and dialogue’ approach meaning that I was also expected to share my professional experiences, knowledge and learning. This expectation alerted me to be mindful of the influence of the researcher’s voice. While I describe how I attend to this issue later in this chapter, I now explain how my perspective, as researcher, influenced my writing style.

The Researcher’s Perspective

Use of ‘I’

While ‘third person style’ is appropriate for researchers striving to retain objectivity by using theoretical, literature based arguments in their research reports, it is not useful or appropriate when undertaking research within a critical social framework. As outlined in Chapter Two, the epistemological base is different. Knowledge is considered to be socially constructed through reciprocal critique and the researcher is acknowledged as part of the inquiry. Active involvement is a fundamental requirement given that the goal of critical social inquiry is to establish the conditions for “open and unconstrained communication” (Allen, 1985, p.61). For these reasons I have used first person throughout the thesis.

Description of the Study

The purpose of this study was to investigate how practitioners from four professions could use storytelling and journalling as tools for reflection, analysis, self evaluation and as ways of initiating and supporting change within their professional contexts. The study was structured around three questions which are outlined in Chapter One. During the study participants shared their professional experiences, explored triggers for change within their professional contexts and examined the role of reflective strategies. Oral and written data were gathered for analysis.
Participants

Research participants from the four identified professions were approached using a particular form of convenience sampling - snowballing. I chose this method because I wanted to study a small number of participants in depth. Snowballing also allowed potential participants to initiate contact and to decide how that contact would be managed. I initially approached five potential participants who were known to me and who I knew were using professional journals as a means of reflecting on their practice. The method of snowballing then allowed further people to approach me through this first group of potential participants who talked to colleagues about my research interests.

Criteria for participation in the study were:
1. Active engagement in one of the four identified professions.
2. Agreement to contribute to a collaborative journal.
3. Willingness to share professional experiences.

Because I wanted to strive for shared power and co-ownership of the research process, after my initial approach to personally known potential participants, I waited for other people to contact me. They did so by phone and by email. I posted an information sheet (Appendix One) to each person which outlined the aims of the study, the expected time commitment and how the research findings would be used. I also provided some background information about myself and my current professional role. This approach gave the second group of potential participants total control over initiating contact.

I met face to face with each individual who agreed to consider participating in the study. I emphasised that by meeting with me they were not consenting to participate in the study but were merely expressing an interest. The times and venues were chosen by potential participants. At these meetings I answered queries, discussed the implications of signing the consent form (Appendix Two) and raised the possibility of providing support for participants during their involvement in the study. I also stated that this initial meeting was an opportunity for potential participants to get to know me and to decide if they would be comfortable sharing their reflections.

There were ten potential participants (five males and five females) who met the criteria, were
interested in using reflective strategies to explore their practice and were willing to devote the time needed for the study. The group included four teachers who were teaching at tertiary level in four different disciplines, two occupational therapists (one city based and one working in a rural environment), two nurses practising in city based hospital settings and two real estate agents. Two participants withdrew during the initial stages of the study: a real estate agent because of work pressure and time out of the country, and an occupational therapist who accepted a promotion to another city. Eight participants were involved for the duration of the study covering four professions (two nurses, four teachers, one occupational therapist and one real estate agent).

Ethical Considerations

Prior to commencing the study I presented my research proposal to the Otago Polytechnic Research and Development Committee, the Otago Polytechnic Ethics Committee and the University of Otago Research and Ethics Committee. All three committees approved my proposal.

Participation in this study involved two interviews over an eighteen month period, contributing to a collaborative journal for twelve months, writing in individual journals throughout the study and attending a follow-up meeting to negotiate the final draft of each participant’s contribution to the thesis. I endeavoured to ensure that potential participants understood the nature and possible outcomes of the study prior to giving consent. I did this in a number of ways which I describe under the headings of consent, ownership, anonymity and support.

Consent

During the initial face to face discussions queries about information in my introductory letter and in the information sheet were addressed. A small number of potential participants were my colleagues. I was aware of possible power issues given that my role as Staff Development Co-ordinator could be viewed as a senior or management position. This was of concern to one colleague who spent considerable time reading and talking about the consent form. This person asked me the following questions: “Will anyone ever know if I tell you things about the department and some of the people in it? What control will I have over the data you obtain from me? How will I safeguard information that I might want to tell you but not want used in the final report [thesis]?” I addressed these concerns and she agreed to became a participant. I
recorded this participant’s questions and my responses in my research journal.

Six participants read and signed the consent form during the initial pre-research meeting. Four participants requested time to consider their position and took consent forms away with them. Three of these consent forms were returned (signed) within a week. The tenth one took some time to be returned. This person later withdrew before any interviews took place.

Ownership
Participants decided that if they were to withdraw at any time during the study they would have total control over material relating to them (individual journal, interview tapes and transcripts). We discussed a range of options including having all material returned to the participant, the participant selecting which aspects of the material I could use, the material being destroyed or the material being used by me as researcher with the participant’s consent. I recorded decisions relating to each participant in my research journal.

On completion of the study all participants agreed to retain their individual journals, to keep copies of their transcripts and to decide as a group the fate of the collaborative journal. A statement expressing the decision of the group regarding the collaborative journal is recorded at the back of the same journal. This journal is to remain in my keeping but be accessible to participants on request. No entries are to be used in any way without the contributor’s permission. I also agreed to provide an executive summary of the thesis to each participant on completion of the research.

Anonymity
Participants selected their own pseudonyms which have been used in this thesis and in the executive summaries. Each participant retained control over the use of data relating to them. Throughout the research process each participant was given opportunities to examine material relating to them to check for aspects which could potentially reveal their identity. All transcripts of the interviews were returned to participants to add, alter or delete any material deemed necessary.

Participants did not know who else was involved in the study. I had envisaged the possibility of having several group meetings but two participants specifically requested that they not be exposed to group situations, one participant was not available to travel and two participants
were working on different shifts so this idea was abandoned. Anonymity was also maintained in the collaborative journal. Participants used pseudonyms when they made entries and I posted or personally handed this journal to individuals and collected it again after each person had made their contribution. Everyone who had access to the transcripts (transcriber, critical friends and supervisor) signed confidentiality statements.

Support
During the initial face to face meeting with each potential participant I expressed the reality of not knowing where we might travel in our collaborative venture. I stressed the possibility of unsettling and possibly emotional times occurring as we explored aspects of our professional practice. I had no way of predicting what issues might surface. I was aware from reading other critical social studies (Dixon, 1996) that the availability of on-going support to participants was essential so I offered to arrange access to a skilled and qualified counsellor. All participants thought this was a good idea. However, the majority (seven) expressed a preference to discuss their concerns with me. I agreed to be available but stated that there might be times when it was either inappropriate or beyond my ability to support them in particular ways. I suggested that if such situations arose I, and the participant concerned, would re-consider the option of involving a professional counsellor. Participants listened to my concerns and acknowledged that this was a way of ensuring all our safety.

Research Process
Interviews
Semi-structured interviews (incorporating key questions) occurred over an eighteen month period. The time and place for interviews depended on the professional and personal commitments of each participant. My work environment, the participants’ work environments and on two occasions a participant’s home situation were used.

We allowed two hours for each interview. This time frame catered for informal discussion occurring prior to and at the cessation of each interview. All interviews were taped and, apart from a particularly sensitive one, were professionally transcribed and a copy of the transcript given to participants for their consideration.

During interviews participants were able to request that the tape recorder be turned off at any stage. No one exercised this option. However, I was very uncomfortable about the personal
nature of information being disclosed by one participant during an interview and suggested on several occasions that we turn the tape recorder off. The participant declined at the time but after reading the transcript requested that I not use personal details in any part of my thesis. The participant expressed amazement at the degree of frankness which had occurred. I personally transcribed this tape due to the sensitive nature of the material. I also kept in close contact with the participant during this period. I discussed the possibility of involving a counsellor and this suggestion was activated. In addition I alluded to a similar hypothetical situation with a trusted critical friend to check out that the precautions I had taken were sufficient given the circumstances.

I listened to all tapes as I read the corresponding transcripts. I wanted to ‘hear’ the dialogue in context because I feel that tone, laughter, pauses and inflection contribute to the whole. Significant gestures were acknowledged during interviews by describing movements as they occurred.

Participants received copies of transcripts of their first interview several weeks prior to their second interview. Each participant’s second interview began with reflections about the transcript of their first interview. I completed a preliminary analysis of all transcripts from the first interview prior to commencing the second phase of interviews.

**Storytelling**

During both interviews I asked each participant to tell me stories about their practice. My approach was informed by the work Diekelmann (1992) has done with student nurses. In the first interview I asked each participant to “tell me a story, one you will never forget, about something that happened in your practice?” In the second interview I asked each participant to “tell me a story about something that caused you to re-think and change aspects of your practice?” While these two key questions helped structure the storytelling component of the interviews, other stories also emerged. In Chapter Four the two stories from each participant were told in response to the two key questions. However, aspects of the other stories shared during the interviews are included as part of the discussion in Chapter Five.

**Individual Journals**

Each person agreed to keep an individual professional journal throughout the study. Six participants used paper based journals. One participant used an electronic journal because he
“thinks onto a computer” (I,1). This participant also requested that I send him electronic prompts (via email). I was somewhat reluctant to do this because I did not want to influence his reflective ponderings in any way. Eventually we agreed to my occasionally sending him an email with the heading “Any Reflections?” Another participant also decided to use an electronic journal but did not make any entries. Participants varied considerably in how, when, and what they wrote in their individual journals (see Table Three).

**Collaborative Journal**

The collaborative journal was difficult to get going and keep circulating. When I initially tried to circulate it, participants talked about “feeling exposed” (Joseph), “not being articulate” (Mac), “being unsure about what to write” (Sandy) so we agreed to delay circulation of this journal until participants felt more comfortable with the research process. The collaborative journal was in circulation for twelve months in total (the last twelve months of the two and a half year study) with all participants including myself contributing.

**Researcher’s Journal**

I had total control over what, and when, I wrote in my research journal. I wanted to create a document that would track all methodological and analytical decision making processes (thereby contributing to the notion of ‘adequacy’), to record my understanding of the research topic as it developed and to provide me with a ‘safe place’ to note personal reflections. I made entries in this journal for the duration of the study. One area I explored was how I could ensure adequate and appropriate standards of rigour were in place.

**Rigour**

Working within a critical social framework and using qualitative design and methodology requires alternate criteria of rigour to those found in empirical research. Post-positivist researchers maintain this form of research is best evaluated by standards of rigour (sometimes called ‘trustworthiness’) that reflect the adequacy of the whole process of inquiry. Hall and Stevens maintain that “adequacy of inquiry implies that research processes and outcomes are well grounded, cogent, justifiable, relevant and meaningful” (1991, p.161). Koch believes issues of rigour are addressed if the reader can “audit events, influences and actions of the researcher” (1994, p.976). Lincoln and Guba (1985) require credibility, transferability and dependability as minimum criteria. Hall and Stevens (1991) suggest using substantial measures of adequacy including dependability, honesty, reflexivity, credibility, mutuality,
naming and relationality.

I based my decision making approach on the literature, discussions with colleagues who were experienced in post-positivist research and on my own professional judgement of what an adequate, ‘trustworthy’ inquiry should contain. I sometimes struggled with the overwhelming and varied opinions expressed in the literature. Early in the research process I noted in my journal:

Everyone seems to have a different way of approaching this issue (rigour). I’m going to have to read other peoples’ theses and critique them in terms of what standards of rigour are used and then decide what I expect to be present (RJ, July, 1995).

Using a combination of reading, talking, writing and reflecting I clarified that the minimal requirements to ensure adequate rigour for this study were triangulation, credibility, transferability and dependability. In addition, I included mutuality and reflexivity because I am committed to the construction of knowledge as multiple realities. Like Dixon I wanted to assure readers “that the context and voices of all the participants are represented in any knowledge claims that may be made” (1996, p.112). I was also aware that research conducted within a critical social framework must be reflexive in design and methodology.

Triangulation

One way to strengthen adequacy is by triangulation. While the idea of using multiple research methods was introduced by Campbell and Fiske (1959), it was Webb, Campbell, Schwatrz and Sechrest (1966) who came up with the term ‘triangulation’ (cited by Lincoln and Guba, 1985). Triangulation is seen as a way to strengthen the credibility of research findings (Flick, 1992; Lincoln and Guba, 1985; Stake, 1995). Patton suggests the aim of triangulation is to “study and understand when and why there are differences” (1990, p.330). Smith and Kliene (1986) suggest the outcome of triangulation is “different images of understanding” (cited by Mathison, 1988, p.13) thereby augmenting the ‘potency’ of research findings.

Some researchers analyse the same data using different methods. Denzin supports between-methods triangulation maintaining that “the flaws of one method are often the strengths of another and by combining methods, observers can achieve the best of each while overcoming their unique deficiencies” (1978, p.302). Researchers working from this perspective can use the additional information to review their interpretations, cross check how interpretations are made and make decisions regarding their trustworthiness. Triangulation can also highlight
difference, introduce layers of understanding and reveal multiple interpretations.

I was comfortable with Smith and Kliene’s (1986) notion that triangulation could provide different forms of understanding and therefore I triangulated in three ways. I used multiple research methods (storytelling, journalling and interviewing). I employed multiple research processes; individual (journals), one to one (interviews) and group (collaborative journal). I also analysed the interview data in multiple ways. I conducted a preliminary analysis of interview transcripts by categorising chunks of text. I asked a ‘critical friend’ to analyse a cross section of transcripts in the same way. I then compared both sets and refined my categorisation system. Once all transcripts had been analysed I set them aside for a month before applying Burnard’s (1994) word processing four stage transcript analysis method. This second method involved using clean transcripts, removing the ‘dross’, breaking text into meaningful units, developing category systems and grouping similar ideas together. I also asked my supervisor to analyse one transcript which I then compared with my analysis of the same transcript. By involving a critical friend and my supervisor I was able to make refinements prior to proceeding with my final analysis.

Credibility

Credibility is another key standard of rigour. Lather (1988) equates credibility with internal validity, or truth values, for it is dependent on researcher self-awareness. It involves the construction of credible descriptions and explanations of participants’ experiences so they can be understood by other practitioners. A research report is considered credible when “it presents such faithful interpretations of participants’ experiences that they are able to recognise them as their own” (Hall and Stevens, 1991, p.162). Guba and Lincoln consider ‘member checks’ to be “the backbone of satisfying the truth-value criterion” (1981, p.110). Reason and Rowan (1981) argue for recycling analysis at least back through a sub-sample of participants’ transcripts. They maintain such a practice should be an integral part of emancipatory research designs saying that “good research at the non-alienating end of the spectrum ... goes back to the subject with tentative results, and refines them in the light of the subjects’ reactions” (1981, p.248).

I approached the standard of credibility by using what Guba and Lincoln (1981) refer to as ‘member checks’. I recycled my analysis of transcripts back through a cross section of participants. I based my refinements on their comments. I also cross checked these
refinements with the participants concerned. I kept in mind Lather’s claim (1988) that in order for a research report to be credible, participants must be able to recognise their own experiences.

**Transferability**

The term transferability, used by Lincoln and Guba (1985) refers to the degree an inquiry’s interpretations have applicability in other contexts or with other practitioners. It relies on thick description which Geertz describes as “sorting out structures of significance ... and determining their social ground and import” (1973, p.14). Meaning varies according to the pattern of life by which it is informed. Readers make their own judgements relating to transferability in terms of their own experiences by deciding on the degree of what Guba and Lincoln (1989) call ‘fittingness’. Reinharz (1983) reminds researchers to ensure sufficient textual information is provided for readers to make similar judgements. Sandelowski summarises “a study meets the criterion of fittingness when its findings can ‘fit’ into the contexts outside the study situation and when its audience views its findings as meaningful and applicable in terms of their own experiences” (1986, p.27).

I agree it is necessary to provide adequate textual information for readers to make their own decisions about what Guba and Lincoln (1989) call ‘fittingness’. All practitioners’ stories are therefore presented as they were told with only minor changes or additions made to clarify meaning and context. Ideally when reading participants’ journal extracts and their stories readers may recognise aspects of their own practice and engage in critical reflection thereby enhancing their potential for action. If readers outside the contexts of this study view the findings as meaningful and applicable in terms of their own experiences I believe the criterion of transferability will have been achieved.

**Dependability**

In empirical research reliability means repeatability. Post-positivist research perspectives recognise that experiences are unique and emphasise this uniqueness therefore verification through repeatability is not appropriate, useful or possible. Reliability is therefore better conceptualised as “the dependability of the research processes” (Hall and Stevens, 1991, p.160) and “by examining the methodological and analytic ‘decision trails’ (Hall and Stevens, 1991, p.160) created by the researcher throughout the course of the research itself. Koch (1994) suggests philosophical, theoretical, analytical and methodological choices need to be
recorded. Hall and Stevens recommend auditing the inquiry to determine whether “decisions made are congruent with their circumstances and assessing whether interpretations and recommendations are generally supported by the data” (1991, p.160).

Researchers using qualitative design and methodology agree that systematic documentation is required throughout the entire research process. Auditable documentation also attends to the value of honesty. Post-positivist values hold that any form of deception in the research process is unethical and may influence the dependability of data. Participants must be informed about the research purposes and the design in ways that are relevant and understandable.

I wanted to achieve a match between interpretations and data so building dependability into the design was crucial. I followed Hall and Stevens’ method of “examining the methodological and analytic ‘decision trails’” (1991, p.160) throughout the research process. I used my research journal for this purpose which proved invaluable. I was systematic in my approach, recording my concerns, reflections and learning leaps on a regular basis. There were times when everything seemed important and I was overwhelmed by the massive amounts of data and there were other moments when I was confident in my decision making and recording processes.

**Mutuality**

Another aspect of emancipatory research is the criterion of mutuality which acknowledges that participants are peers who have input into decision making processes. One way to monitor the degree to which decisions are shared is via a decision making trail. As Hall and Stevens, note “reduction of power inequalities among researchers and participants is a means for preserving the subjective validity of participants’ statements, affects and behaviours” (1991, p.166). Therefore monitoring power dynamics throughout data collection contributes to overall adequacy of the inquiry. In this study while we jointly decided on some processes (eg interview style and not having group meetings) I made decisions regarding design and methodology. There were transparent decision making trails recorded (partially) in our collaborative journal and (wholly) in my research journal. By monitoring processes and decisions in this way we contributed to the overall adequacy of the inquiry.
Reflexivity

Lather maintains that praxis-orientated research is best served in terms of validity by constructing a design that “demands a vigorous self-reflexivity” (1991a, p.66). Lincoln and Guba (1985) agree that reflexivity is essential to assess validity in post-positivist research. Because the researcher plans and implements a series of decisions throughout the study reflexivity is required throughout the decision making process. Researchers are expected to “examine their own values, assumptions, characteristics and motivations to see how they affect theoretical framework, review of literature, design, tool construction, data collection, sampling and interpretation of findings” (Hall and Stevens, 1991, p.162). In other words our own framework of understanding needs to be critically examined. However, as Acker, Barry and Esseveld points out “an emancipatory intention is no guarantee of an emancipatory outcome” (1983, p.431).

I felt comfortable with these claims and given the philosophical stance underpinning critical social research it was appropriate for me to engage in self-reflexivity in several ways. Throughout the research process I critically examined my own framework of understanding, checked out my perceptions with participants and ‘critical friends’ and presented my ideas at a research forum held at Otago Polytechnic, Dunedin. Written, oral and cognitive modes of reflexivity were used. I recorded the process in my research journal, I contributed to the collaborative journal and I shared my thoughts, feelings and ideas with participants during our semi-structured interviews. The collaborative journal became the vehicle in which I and participants could raise issues, ask questions and make statements for others to comment on. In addition, I frequently clarified my decision making processes by constructing mind maps. These maps marked the route I travelled in this research study.

My reflections on participant responses to a variety of aspects about the study feature in my research journal. One aspect became a major theme. When I began this study I was aware of the potential reflectivity had to become a double edged sword. Hall et al (1994) note that while reflectiveness may produce political consciousness, thereby increasing practitioners’ likelihood of survival and success within their practice environments, it can also have devastating effects for those practitioners who have the ability to be reflective but lack adequate support and resources to address the fragmentation and isolation they may encounter. Some participants described such experiences to me which I later wrote about in my research journal. I made sure formal and informal support for participants experiencing
these dual effects was available so they could safely voice their concerns.

Research Relationships

A Critical Voice

Listening to the voices of research participants enables us (researchers and readers) to enter their practice worlds. Part of my goal in this study was to represent (for the reader's interpretation) the feelings engendered by participants as they told their professional stories. To minimise the power of my voice, as researcher, I presented data as stories, used quotations from interview transcripts and included extracts from participants' individual journals and from our collaborative journal. I wanted readers to decide if what these practitioners were saying about their practice worlds, and their experiences within them, held true from them also. I acknowledge, however, that by selecting quotations, choosing key questions and constructing tables I am imposing some kind of interpretation on what is valuable. While I tried to ensure that the loudest voices emerging from data presented in Chapter Four were the voices of the research participants, what emerged was more a background - foreground distinction. I suspect that my voice reverberates from the background while the participants' voices ring out from the foreground.

Power imbalances

A degree of power imbalance is always present in research relationships. I did, however, attempt to minimise the extent to which it was present in this study. I did this in two ways. I used multiple voices by presenting some data as stories, and I involved participants in the decision making processes as much as was practically possible. Participants themselves made the decision not to participate in group meetings which removed one way of involving everyone (at the same time) in group decisions. Working to a thesis submission deadline also impacted on the degree of flexibility available to us. I acknowledge that while my original intentions were to work more collaboratively, time, participant accessibility combined with physical constraints meant that I did initiate and direct a larger proportion of the decision making that I would have ideally chosen. However, I endeavoured to ensure participants' voices resounded throughout the data presented in the following chapter.
CHAPTER FOUR: RESULTS

JOURNALLING

The connection between writing and thinking has been conceptualised in recent years. Whereas the previous view saw writing as recorded thought, the new perspective sees writing as developing thinking.


Participants’ professional stories and extracts from their individual journals and from our collaborative journal are presented in this chapter. The chapter is divided into two parts. Part One begins with an account of how I used the Dreyfus and Dreyfus (1980) Skill Acquisition model with participants. To address my first research question I discuss the extent to which participants paralleled the process of professional development depicted in this model as used by Benner (1984). Brief biographies together with two stories from each participant complete this section and provide data relevant to the storytelling component of my second research question. In Part Two I present data relevant to the journalling component of the same question which considers how journalling and storytelling aid reflection. I draw on three sources. I examine participants’ individual journals, display their definitions of reflection and describe their journalling processes. I conclude the chapter with an account of how we used the collaborative journal.

Part One:

Dreyfus and Dreyfus Skill Acquisition Model (1980)

Dreyfus and Dreyfus (1980) maintain that their five stage skill acquisition model, where learning is almost entirely gained from experience, emphasises perception and decision making rather than routinised action. They believe their model endorses the contemporary experiential approach to learning which purports that we are all immersed in a continual flow of experiences throughout our lives and that we can learn from these experiences.

Benner (1984) provides the most comprehensive account of the application of the Dreyfuses’ model to professional practice. She used it to analyse data collected from nurses’ accounts of critical incidents captured through interviews. Benner (1984) chose examples to explain and
justify the model as well as to provide insight into the nature of nursing knowledge and expertise. One aspect of her work looked at the implications for teaching and learning in a professional development context.

In this study I wanted to find out the extent to which the Dreyfus and Dreyfus (1980) model as used by Benner (1984) with nurses paralleled the process of professional development as experienced by participants from teaching, nursing, occupational therapy and real estate professions. To address this, my first research question, I provided participants with a summary of the Dreyfus and Dreyfus model (Eraut, 1994, Appendix Six). During interviews I invited participants to place themselves in relation to this model and to provide reasons for their positions. This data is recorded in the following table.
Table One: Participants Positions on the Dreyfus and Dreyfus (1980) Skill Acquisition Model

<table>
<thead>
<tr>
<th>Participant</th>
<th>Novice 1</th>
<th>Advanced Beginner 2</th>
<th>Competent 3</th>
<th>Proficient 4</th>
<th>Expert 5</th>
<th>Reason for Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marie</td>
<td></td>
<td></td>
<td></td>
<td>✔️</td>
<td></td>
<td>I’m probably proficient but I think I have a bigger world view than proficient. I’m more socio-politically aware so I cross over but my knowledge base is proficient. I am able to justify what I do a little more. I no longer have to think about everything. I can go into a room, say hello and do then other things at the same time.</td>
</tr>
<tr>
<td>Meg</td>
<td></td>
<td></td>
<td></td>
<td>✔️</td>
<td></td>
<td>I see the picture holistically now I don’t rely on rules anymore. I use my intuition a lot because I’ve had a lot of experience in various situations in practice. I draw on this experience to help me act. Like driving a car, it just comes naturally. Rather than thinking about what I’m doing. I can look at the scenery.</td>
</tr>
<tr>
<td>Shona</td>
<td></td>
<td></td>
<td></td>
<td>✔️</td>
<td></td>
<td>I am very conscious of not relying on rules and prescribed ways of doing things. I can just do things without thinking why and I know they are right. I can sit down later and tease it out a bit if I’m called upon to do so.</td>
</tr>
<tr>
<td>Sandy</td>
<td></td>
<td></td>
<td>✔️</td>
<td></td>
<td></td>
<td>Initially it was a gut reaction then I realised one of my issues is letting go of that sense of being responsible for everything. When I considered the criteria I decided I was definitely between 3 and 4. Like competent (3) talks about conscious deliberate planning and at proficient, decision making is less laboured so there is a difference between needing to be in control and being able to let go.</td>
</tr>
<tr>
<td>Joseph</td>
<td></td>
<td></td>
<td></td>
<td>✔️</td>
<td></td>
<td>Somewhere between proficient and expert because I seemed to be drifting into automatic, becoming more aware of what I was doing. When I was working at the novice stage I was looking for a role model. As an expert I became a role model for others.</td>
</tr>
<tr>
<td>Sally</td>
<td></td>
<td></td>
<td></td>
<td>✔️</td>
<td></td>
<td>I think I operate at the expert level because of the wide range of experience that I have, not just in one particular area. Dealing with young people in the secondary age group requires different expertise to what is needed to teach adults in tertiary institutions. And because of the feedback I have received from colleagues.</td>
</tr>
<tr>
<td>Mac</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>I learned very early that I do not teach by rules. There is a certain theatrical energy in the way I teach. My baseline is are the students interested and motivated to learn for themselves. My role is to get them to that place.</td>
</tr>
<tr>
<td>Jerry</td>
<td></td>
<td></td>
<td></td>
<td>✔️</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Positions

Seven of the eight participants were comfortable placing themselves within this model and able to justify their positions. Three placed themselves at expert level, two felt they were on the cusp between expert and proficient, one considered herself to be proficient and one hovered between proficient and competent. One teacher, Mac, said he was unable to place himself within this model because his current work situation involved three quite different roles and he believed he operated at different levels in each of them. He thought it unlikely that he would reach expert level in all three roles. Nor did he see himself confined by his work situation as it existed. He thought it was fluid and able to be modified as circumstances changed. He said he considered the Dreyfus and Dreyfus model restrictive because he did not think it took such complexities into account.

Another participant, Marie, agreed with Mac. Although she placed herself as proficient, Marie said in an interview that this position changed depending on the context in which she was working. She gave an example of moving from one area of nursing where she felt proficient to another where she considered herself as an advanced beginner.

While six participants were comfortable positioning themselves within this model, Mac and Marie’s observations suggest it may not fit when:

- contexts change
- a job involves different professional roles
- complexities are not considered.

All participants, however, thought their process of professional development as described in this model and as used with nurses by Benner (1984) progressed in a similar manner. Mac and Marie agreed when they considered one role and one particular context only. Everyone could recall examples of the types of thinking and behaviours associated with each stage they had experienced. There were differences in the rate of movement through the stages but no apparent pattern according to professions. Any differences appeared to be person, rather than profession, specific. Opportunities to work alongside expert practitioners, to use reflective strategies and to have access to mentors who encouraged critical thinking skills were identified by all participants as key factors involved in novice to expert advancement.
Like the nurses in Benner’s (1984) study, some participants were frustrated about their current professional development opportunities. Nurses were distressed over the disestablishment of senior nursing positions. Teachers thought financial constraints were reducing their professional development opportunities. For example they considered funding to attend conferences and courses was diminishing. The occupational therapist was satisfied with her current professional development options although she said balancing professional and personal commitments was becoming more difficult. The real estate agent considered his professional development opportunities were limited both in scope and opportunity. These comments indicate that for some participants there were differences between the professional development opportunities they would like, and in some cases have had access to, and what was currently available. Some talked of their credibility being at stake if they could not present their ideas at conferences. What they had hoped for when they entered their professions is evident in their biographies and stories.

**Storytelling**

Participants’ worldviews influence their practice and are reflected in the stories they tell about their practice. Participants told stories in response to two key questions which I modelled on Diekelmann’s (1992) approach of learning about nurses’ experiences through storytelling. I asked participants to tell me one story about a practice related incident they would never forget and another about something that caused them to make a change to their practice. My reason for asking these particular questions links back to the overall purpose of this study which is to explore how reflective strategies contribute to the change process. Question One requires the storyteller to engage in reflection. Question Two also involves a degree of reflection and in addition requires participants to consider the process of change in the context of professional practice.

**Introducing Participants**

The next section is structured in the same way for all participants. I begin each person’s segment with a quotation to illustrate how they became involved in their profession. I then provide a brief biography followed by each individual’s two stories.
When I applied for nursing I was unsure what it was really about. I was enticed by the option of travel, job security, and having a ball with young doctors. Also everyone said I would make a good nurse - there we had it, destiny! (1,1)

Marie recalled playing doctors and nurses as a child, being well treated by nurses during a period of hospitalisation and thinking, as a teenager, that nursing was a good career option. Her mother and aunt are also nurses which she thinks influenced her decision. “I always played doctors and nurses ... I remember going to hospital ... they [the nurses] were great ... they could roll me over in bed and change my sheets without moving me off the bed” (1,1).

Although Marie was keen to begin training she “hated” (1,1) her first year which focused on theory and primary health issues. At one stage during that year she considered a change of career. “I thought I might just apply for teaching but I never got round to doing that, which I was very glad about after I entered second year nursing” (1,1).

After completing a nursing degree Marie worked in a Sydney hospital. She has since practiced in a variety of contexts. Influences on her practice include role models, mentors and nursing literature. She valued learning from experience, sharing stories about her practice with colleagues and journalling about critical incidents.

When the study began she was working in an intensive care unit (ICU) where death was a common occurrence. One of her roles was to work alongside patients and their families to provide circumstances in which “good deaths” (I,1) were likely to eventuate. Family and patient relationships were of prime concern to Marie. She worked to incorporate families into hospital care schemes in meaningful ways. “My focus is knowing how it is for these people and how this hospitalisation is going to affect them as people” (I,1). Getting to know the patient, their family and loved friends was as important to Marie as ensuring her nursing care was of a consistently high standard.

Caring forms the basis of my nursing practice, it acts as my motivator and is the driving force behind all I do as a nurse. Caring to me is not only that of caring for the patient and the people they love but caring for colleagues and valuing their skills, and caring for the profession of nursing and its future. (I,2)
She demonstrated her passion for nursing by taking on extra responsibilities. She was a nurse educator which involved being a resource person for the patients and other nurses and she organised education sessions for the ward. She was, and still is a member of a nurses’ action group, a forum in which nurses identify, discuss and address issues related to their profession.

Many of the stories Marie shared with me during our interviews involved power relationships in professional contexts. In Story One Marie talked about an experience which involved the death of a patient. Story Two demonstrated changes Marie made to the way she handled doctor/nurse power relationships.

Story One

In my role as a charge nurse I had a patient in his thirties, a solo dad with two young children. He came in with a headache. His mum bought him into hospital. He had a large aneurism in his head, it was compressing his brain stem, he wasn’t very well. For the first ten days the doctors were really wondering what they were going to be able to do for him. The only hope for his survival was to stabilise the aneurism which involved major surgery, cool his core temperature to reduce brain metabolism and secure the aneurism. We had all that booked in. He knew it was his only chance and his mum did and his children did. He was a joy to nurse but I just didn’t feel good about the whole thing because I could see that he could quite easily end up a vegetable or dead.

Anyway we took his mum down to intensive care so she could get a feel for where he would be after surgery which was scheduled for three days time. This nurse that was in charge, I’ll never forget it, she said “no we’re not having him, I don’t know anything about this, what are you talking about, what are you doing here?” She went on and on. I couldn’t believe it. Basically they ignored her [the mother]. She was absolutely devastated. She said “you know those nurses don’t even want to care, they don’t want him and they are going to have to look after him”. We talked it through and I said I would approach the nurse again and that I didn’t think her behaviour was at all appropriate.

The next day I overheard these doctors talking in the corridor saying that his operation had been postponed. I was so angry. When I told the patient’s mother she was devastated and angry, totally blown away by this. I said I would find the consultant and mentioned that he should be able to explain why this had happened. I rang the consultant then waited for him with the mum. After our visit to the ICU she had some concerns that staff were not going to be welcoming and felt this might have something to do with the postponement.

The consultant explained that the ICU wouldn’t have a bed available as they were doing cardiac surgery on Monday instead and on Tuesday they had a guest speaker coming to talk about new liver surgery technique. Apparently the bed was to have been arranged by the other surgeon involved and the theatre manager and they had just
taken it for granted that there would be one available.

The meeting ended without any resolution. The consultant was feeling bad too. He said he would not have told the family the surgery date if he had not thought it was going to take place.

I guess in the back of my mind was the real and frightening thought that maybe the fact that the cardiac patients were being funded by another hospital might have some bearing on the prioritising in this case. I sometimes wonder if the hospital hierarchy forget that they are meant to be caring about the patient not just looking after their own interests. It reinforced for me the real need for nurses to become more political - we’ve done enough of accepting things as ‘just happening’. It’s time to stand up and let our voice be heard (I,1).

Marie left the ward early on the day this patient’s surgery was rescheduled after being reassured that it was going well. The aneurism had been temporarily clipped and he was about to go on the bypass machine for the final part of the operation. When she got back she found he had died in ICU. She was left with feelings of guilt for not being there, outrage at the lack of sensitivity shown to this patient and his family and concern about what else she could have done at the time of the surgery postponement.

I was concerned about my feelings and behaviour towards another colleague. I was concerned that I hadn’t found out the exact details about the postponement or followed up my concerns with the theatre manager and ICU. I realised I acted in an oppressed way, letting the hierarchy do as they please and not valuing my concerns as worthwhile. I guess I didn’t want to look like a trouble maker. I have learned from this experience. I now hope I can express my concerns to the appropriate people. I’ve also learned my opinion is a valuable one (I,1).

Story Two

The other night at work, it was a power relationship again, this doctor came in yelling “give this, give that”. It wasn’t my priority at the time and I told him that. I said I’d sooner get to know my patient first. He was really grumpy. I ended up doing what he said [giving the patient pain medication] just to get him off my back really. But I certainly did tell him I wasn’t happy and that I felt it was important to get to know the patient first. I went home and wrote about it because I was so angry about the way he had treated me when I have the necessary experience and knowledge and wanted to do quite a reasonable thing.

Once I wrote it down and sort of thought about it some more and reflected on it I realised I didn’t need to be so angry but I did need to bring it up with him, to discuss his rationale because I couldn’t understand where he was coming from with it except that he was trying to exert his power over me (I,2).

Marie did discuss the incident with the doctor concerned. She prepared herself by talking to a Charge Nurse first because “he [the doctor] is quite a powerful person” (I,2). Significant
learning occurred for Marie as the result of journalling and talking with a colleague. She described the outcomes of these endeavours:

I guess I’m not so scared of these people any more ... I’ve seen them in their true light. They’re not always right, they can make mistakes too. I realised too that nursing and medicine are totally different ... nurses really do care about the people and I worry that doctors are becoming more and more focused on getting the job done (1,2).

Marie used storytelling on many occasions to describe her practice experiences. She said “by sharing our stories all can learn from them and our practice can be shaped and enhanced” (1,2). She believed that storytelling not only “promotes resolution of our own concerns it also provides our colleagues and peers with valuable learning experiences” (IJE). Marie was adamant that storytelling will remain an integral part of her professional life.
MEG - NURSE

I was socialised into it ... I was always referred to as the caring person in the family ... they thought I would be a nurse. (I,1)

Meg embarked on a career in midwifery but changed to nursing part way into her training. She had a positive attitude towards learning. “I loved all the training. I love learning. I love having the knowledge and building on it each year” (I,1). This passion for learning continued. Meg holds a nursing degree and is currently enrolled in post-graduate study. She articulated an interest in promoting nursing as a profession. “I’m very passionate about the professional issues around nursing, about being a professional, about promoting nursing as a profession and not as a vocation” (I,1).

Meg was on a number of committees and groups to publicise and promote the nursing profession. At the commencement of this study she was working as a Charge Nurse. She recalled two significant changes when she took up this position. She was required to have “a lot more insight into the overall picture” (I,2), and became a “bureaucracy buffer” (I,2) because she was able, to a certain degree, to protect staff and patients from bureaucracy. Her responsibilities included managing a ward to ensure best possible patient care, employing and organising staff, and co-ordinating a staff development programme. She enjoyed interacting within a professional development context. “I really like to work with people to help them identify their goals (I,1).

Presenting a professional image was important to Meg. She worked with staff to develop a ward philosophy. During these sessions she encouraged nurses to tell stories about their experiences in the ward. “We did one [session] on ward philosophy ... caring was the core, everyone made connections. They told stories about how our philosophy fitted with what we do in our ward” (I,2). She was adamant that by sharing stories nurses increased their knowledge and understanding of themselves and their practice. In Story One she talked about making a difference. In Story Two she recalled how she changed an aspect of her practice by stepping back and reflecting on a distressing incident.

Story One

One of the nurses on the ward looked after a man called Grant. He was in our ward
originally with a GI [gastro-intestinal] bleed then it was found that he had Ca [carcinoma] lung. He stayed in our ward for around two months. Cathy looked after Grant during this time. She developed quite a close relationship with Grant and his family which was his daughter. Nearer the end of Grant’s stay, Grant was dying and wanted to stay in the ward because he knew everyone, because he felt comfortable there with the nurses and so did his family. It was the daughter’s birthday and she wasn’t handling her dad dying very well, understandably, she had a full time job, young children and she was coming to the hospital to help care for Grant too so Cathy wanted to do something special. Cathy made a big sign to put in Grant’s room saying Happy Birthday Louise and she baked a birthday cake which she bought in on her day off. Cathy also contacted the rest of Louise’s family, her husband and children, to come in. I thought that made it very special. It made a difference to Grant and his family. It is holistic care. Louise burst into tears, she thought it was just so lovely. It was important to Grant too because the way he was feeling, he was still aware of what was going on around him but he wasn’t able to do anything himself for Louise (I,1).

Story Two

I guess initially I started out in nursing as being rather egocentric. I was there for me, to meet my own career goals and to get experience but I was never really there for the people I was caring for. That’s changed now, the emphasis has shifted from my needs to the needs of the people I care for. You see there was a man I was looking after when I was working in neuro surgery who I wanted to make a difference to. I really tried to do my best for him but he and his wife just didn’t seem happy with my effort. There was an incident one day, they were quite stressed about being in hospital anyway, and they said something quite nasty to me and I took it personally. It wasn’t directed at me personally, they were just really stressed out I think. I felt like running away and crying. Here I was trying to do my absolute best for these people and they just go and be nasty but you know it wasn’t really like that. Anyway I went and wrote down how I felt. It took me a long time going back to this story over and over again to actually realise that I was looking at it from my perspective. I thought my god, this is really significant. I’ve been looking at this from my own perspective. I’ve been looking at it for me, I’ve been selfish, I should have been trying to look at where they were at, at what was happening for them and why. Instead I had been trying to make myself feel good about doing the best that I could do for them. I should have been thinking about how it was for them. That insight was quite significant. It changed my practice a lot (I,2).

During the interview in which Meg told me this story she also explained how she was now aware of the importance of a patient’s spirituality and how she recognised the need to get the ‘right’ person in to work with a patient.

Before I did not help people to meet their spiritual needs. I listen more now and act on what I hear. I make a difference now. I didn’t exactly impose my views on patients before but I didn’t really listen either. Maybe I was imposing how I thought things should be rather than considering that there might be other ways, other alternatives. I had a narrow view of my position in the world and of their [the patients’] positions in the world. I just didn’t think. I hadn’t made links before whereas now I link things (I,2).
The ability to make links, consider alternatives, and see the whole picture became key aspects of Meg's practice. She also acknowledged that intuition, past experience and having a vision for the profession itself were becoming increasingly more important to her.
SHONA - OCCUPATIONAL THERAPIST

It was a bit by chance really ... there was nothing much else to apply for ... I got accepted and just went (I,1).

Shona became an occupational therapist because she did not want to follow the more traditional female professions of teaching and nursing. During the early seventies when Shona was making career decisions there appeared to be few other options available to her. She also remembered being told that she was good with people. During her career Shona has worked in drug and alcohol units and in community physical and mental health units. She also had extensive experience in hospital based programmes. She attributed her move into the mental health area to her mother’s non-judgemental attitude towards people with mental illness and in particular her own experience of being taught by a secondary teacher with ‘manic depression’ [bio-polar disorder] (I,1). “It was largely to do with my mother and her attitude to people ... I was never scared of mental illness ... he [the teacher] came to live with us” (I,1).

Currently Shona works as an occupational therapist in a rural mental health unit. She has been practicing in this environment for five years. She described her professional roles as being a combination of “occupational therapist, nurse social worker ... generic clinician as well as Duly Authorised Officer (DAO) under the mental health act” (I,1) and viewed her practice “as a way of life” (I,1).

She believes her personal self and professional self were “almost totally integrated”, and maintained that ‘if things are important to you in your practice they’re probably also important to you in your personal life as well’ (I,1). She described the integration of personal self and professional self as “something that becomes who you are rather than something you do ... so you can’t remember what you were like before you were that thing and you don’t remember which bits you learned in your training and which bits are part of your personality” (I,1).

Drawing on and valuing experience, becoming less reliant on other people’s views and acknowledging the power of personal learning have contributed to Shona’s professional development. Her professional stories focused on learning and how it impacted on the way
she operated as a practitioner. She frequently described personal learning and the insights which resulted. In her first story Shona recounted how her experience of learning a practical skill lead her to apply adult learning principles when she worked with clients. In the second story she recalled how experience, learning, and reflection contributed significantly to a recent change she made to the way she worked.

Story One

Last year during a course we worked on learning styles and Kolb’s experiential learning cycle. I was very aware of it. I’d been thinking about it and I had just started journalling a couple of weeks beforehand as part of the course requirements. I went to stay on an island for a week. I had a group of clients down there. As part of the course we’d also done a lot of group work. It was something that was very familiar to me, I’d done it before but it was really top most in my mind. I had been journalling about that too. I got over to the island. I wanted to learn how to use the motorboat. I wanted to be independent and go and pick people up and sort of potter around the island. Bill and I started to talk about how he learned stuff when he was a boy and because I was interested we kept on. He talked about the best employer he’d ever had and how he taught him farm work. This guy would say “This is what I want you to do” and then go away leaving Bill entirely on his own and Bill had done what was required. Bill talked a lot about the trust that this guy had in him, how he sensed he could do it and didn’t stand over him or interfere. He just told him what he needed to know and then he went right out of it. Bill said it had a big impact on him and he used the same approach with other people.

I told Bill I wanted to learn how to use the boat and he said “just go down and get it and it will go”. I said I wanted him to come with me the first time. He came down and showed me what to do then I asked him to stay on the boat, to sit and not say anything. I took the boat out and it was fine. We came back and I dropped him off then I went away around the island by myself. It was high tide. I went round the island again at low tide because there are rocks. Next time I went around the island Bill was in the boat so I went over to another island and then I went over to the beach. I varied all the conditions and at the same time I was thinking to myself this is about using the experiential learning cycle. I reflected about it in my journal. I’d got all the information I needed, I’d varied all the conditions, I’d gone away and I’d come back and I’d talked to him about it, de-briefed.

So when this client asked me if he could steer the boat I said he could drive it. I gave him just the information he needed to know at that time to get us over and back but without having to go up against the jetty. He wasn’t very confident and he actually wanted me to do it with him but because I was really conscious of the power of doing something yourself I sat away at the front of the boat and let him do it. When we came back we went up to the house we de-briefed. We talked about how it had been for him and what he’d learned. He started telling me about what he knew about knots and ropes and living by the sea then he went on to actually put them into context in the rest of his life. I wrote heaps about him in my journal because it was just such a good example of using the experiential learning cycle with a client. I’d used it with myself
and then I’d used it with a client and I taught him something. It just worked so well that I couldn’t see why everybody wasn’t using it all the time. It really heightened my awareness about the potential benefits of using adult learning principles with clients. As therapists, and as people in the health profession, we often do too much for people (I,1).

**Story Two**

It’s interesting really. I’ve been talking about this just in the last couple of days with people. My thinking has changed a lot this year and I was conscious that it had changed. I’ve been going along all these years thinking I was a teacher and that I was teaching people skills. That was fine then. It still is to a certain extent but a lot more of what I see I’m doing now and I feel comfortable with and what I think works better and is more appropriate is not that we start at the point of teaching skills. I don’t know if I can explain this properly. But that clients actually do this thing whatever it is and they learn it as they’re doing it. An example of that is a couple I’m working with who have quite severe marital disharmony. They’ve tried Relationship Services, they have tried learning skills in order to learn how to communicate with each other and nothing had worked.

The way I am approaching it is to say ‘let’s in a sense ignore that tension exists and get on and individually and together do things that will give you both some sense of satisfaction, some stimulation and some pleasure. And when you have got those things in place and you’re involved in your own interests and hobbies separately and together then the actual communication will happen easily and without forcing it. Rather than trying to teach them communication skills that will make them want to be in each other’s company. It hasn’t worked for them that way and the more I think about it hasn’t worked for a lot of people. In fact it tends to work around the other way. The interesting thing is really that it brings me right back to the core of Occupational Therapy which is doing things with people (I,2).

Shona was excited about making this change to the way she worked with clients. She felt it shifted the focus away from talking about how to do something to actually doing it. Learning through doing made sense to Shona and she was keen to see if it worked for other clients as well.
SANDY - TEACHER

I always wanted to be a teacher ... I always saw myself in education ... I had a yearning to be in a teaching role (I,1).

Sandy trained in the health science area. Her ambition was to work with people and be involved in ‘transforming their lives in some way’ (I,1). After fifteen years of practicing in clinical settings she moved into an educational environment where she taught occupational therapy students enrolled in a degree programme. While feeling prepared for her teaching role, Sandy found related activities quite a challenge.

I was completely blown away for the first two years by what was involved in curriculum and course design which was quite different from the actual teaching which I felt prepared for. I felt like I had always been a teacher of sorts but the curriculum and course design really extended my intellect in lots of ways (I,1).

Sandy also found herself grappling with other issues many of which revolved around public and private perceptions of the health profession.

A lot of the stuff is about students grappling with their understanding of important concepts upon which their professional practice is based. It’s about the struggle the profession has of finding ways of talking about practice, the way it can be diminished and reframed to make it seem more scientific and therefore more acceptable. The whole student struggle reflects my own struggle as a health practitioner (I,2).

Sandy’s move from practicing in a clinical setting to teaching in an educational environment bought other challenges. Initially she was responsible for developing a communication skills course for first year students. She was aware that “this area was as much about personal development and personal growth” (I,1), as appropriate professional practice so she tried to ensure students “had time to reflect on, and integrate course material” (I,1). She relied heavily on discussion related teaching methods. She has since reflected on the readiness of some students to work in this way. “Actually in hindsight I can see that probably I had the expectation of students being able to reflect but they [the students] weren’t necessarily prepared or able to look backwards or go to a deeper level of analysis” (I,1).

Sandy refined the way she encouraged students to reflect. She still used discussion methods but also introduced structured questioning, journalling and video analysis. The first time Sandy used video as a teaching/learning method was a session she never forgot and therefore is the topic for Story One. In Story Two she recalled how it felt the first time she ‘let go’ and
had students control the learning process. This experience led to significant changes in her teaching practice.

Story One

It’s really interesting. Actually I was wanting to introduce the use of video to the students and I was really aware of ensuring that students felt safe enough to do that. We introduced it in a very low key way to start with to build some safety and some comfort around using video. So I bought the video into the room and said - all I want to do is to video some of the things we were doing, it’s just to look at, not to critique in any way but just to get people used to seeing themselves on video - is there a problem for anyone?’

I never expected that there would be but one student basically said that it was a problem for her personally, that she couldn’t cope with it. I was faced with this situation in class where I needed to find a way to work through this issue because I had my own agenda and the other students were really keen. Here was this one student, so it’s one of those situations where we had to look at it in a way which we might find a compromise or a situation that everyone agrees with in class. Afterwards the student was quite tearful and basically really concerned that she wouldn’t be able to pass the course if she didn’t do this on video. She also interpreted the whole thing because of everything that was her own stuff really. It got in the way of what she was hearing, what she was thinking.

I came away from that class thinking, as I often do in this business, of other ways I would handle a similar situation. It’s one of the dilemmas that comes up in other areas of communication skills, about what is the difference between education and therapy and do we cross borders of getting ourselves into personal stuff and how can we keep it out. I needed time to work through it all. I was feeling really responsible for having made the student feel this way and I knew I just had to have some time out to think about it properly. I’ve often experienced hearing colleagues talk about how we always take responsibility for students and that just sort of went clonk, clonk, clonk - nothing happened.

Anyway I eventually got outside and sat in the sun. I’ve never done this before ever on my own. I took out my journal. I just picked my journal up, there’s hardly anything in it because I’d been putting off using this book that I’d bought. I just wrote and I wrote and wrote. I wrote about what I’d been thinking, what it felt like to be facing this situation, how I was feeling responsible for it, you know all this stuff. It was a very much stream of consciousness then I got to the end and could see the whole thing in a completely different light. There I was taking responsibility for this student who wasn’t actually my responsibility. I mean I had been perfectly safe, more than safety conscious in lots of respects, and had dealt with it in a perfectly appropriate manner but I was still feeling like I shouldn’t have done it, that I’d done something wrong. It was also calling up a comment from a colleague and some other stuff, some work I’d done on another course so it came up as a theme that I am aware of in myself. The whole thing came together and I actually reframed this thing. I was able to move to a completely new place and I thought that was quite neat really (I,1).
Story Two

Last year I was involved in working with students on a week long practicum. I was doing it with another lecturer. Basically we had a sort of guideline of what we needed to do but there were some decisions about how we would actually do it. The students were required to design or plan a celebration. They had a week to create a significant meaningful celebration for them as a group. We had no idea of what they would come up with.

I had to learn to let the process go in ways that meant I wasn’t going to be able to control the way they would achieve the outcomes. We [the lecturers] had to let them [the students] move through the process and not guide them or direct them. So it was quite a worry in terms of how the outcomes would be achieved ... I was nervous about my ability to hold back ... but it was a success ... it was truly a high point for the students.

Having done it once and knowing it can work has given me the confidence to know it is possible again. I experienced the potential and the power of students being responsible for their own learning when the lecturer (me) let go ... I am now more confident that I can work in this way again. This incident significantly changed my teaching practice. I have recently agreed to work on the same project with a different group of students. I know it will be different and I guess the practice bit is knowing how to read those differences and to reflect on them and make some sense of it all afterwards and learn from the experience (1,2).

Sandy is still working on ‘learning to let go’. She maintains that reflecting on and telling these stories have enabled her to move towards resolving this issue.
JOSEPH - REAL ESTATE AGENT

I find real estate the most exciting thing you can do ... it’s so like being a gambler, it’s like being addicted to gambling (I,1).

Joseph worked in a number of farming related jobs before buying his own farm. Economic survival, however, eventually forced him off the land, a situation which caused him much personal anguish and resulted in a change of occupation. He joined a real estate company and worked as an agent. Joseph initially found the transition, from solitary rural occupation to urban working environment difficult. It required a high degree of social interaction which he found quite overwhelming.

As a farmer I could walk out the door in the morning ... walk all day and never meet anyone else. I was working eighteen, nineteen hours a day by myself. When I walked into the [real estate] office there was just a sea of faces ... I basically found a desk in a corner and hid, I hid for a fortnight (I,1).

He went from hiding in the corner to becoming fourth in the company (in terms of sales) within his first year. Motivation to succeed in real estate came after several people implied that he was not suited to the profession. He was determined to prove them wrong. “I learned about the profession ... I talked to successful agents ... I knocked on doors ... I told people a little bit about myself ... I asked for help” (I,1).

Having a mentor was a critical factor to Joseph’s early success. He recalled reading a poster on this person’s office wall saying ‘Real Estate is a Contact Sport’ which made him realise he had to get out into the community and make himself known to people. He also remembered his mentor telling him to think about how the person selling their home might be feeling. “I realised that it’s a very personal thing selling a home, it’s like an invasion of privacy in lots of ways” (I,1).

Joseph found a number of sales involved matrimonial property settlements. A solicitor friend recommended him to clients because he felt Joseph could handle such situations. Joseph described the skills he considered essential in these circumstances. “These people have a lot to talk about, you have to be prepared to give them time and you’ve got to be prepared to listen and you can’t make judgements” (I,2).
By adopting a people orientated approach to his work Joseph was able to enjoy working in real estate. He found he was able to connect with, and help, home owners in ways which made him feel good about himself and his profession. He quickly moved into a management role and became involved in staff training which he enjoyed immensely. “I just love the job [management role], I love meeting people, I love being able to help people” (I,2).

However, a down side emerged. Joseph witnessed colleagues working in ways which disturbed him. All his professional stories had themes of unethical practice or misuse of power. In the first story Joseph had misgivings about his own role even though ‘there were plenty of reasons why it was the right thing to do’ (I,1). In the second story he felt very uncomfortable about the actions of a colleague.

**Story One**

This sale still pricks my conscience. I still remember it although it happened nine or ten months ago. I wrote about it in my journal. I had a house to sell in a suburb. I had other people wanting to buy a house so I put their house on the market so they could buy this first house. I’d been showing them houses for a while. We eventually got an offer on their house for $105,000 which was probably two or three thousand above market value but we work for the sellers not the buyers. This offer was subject to the sale of another house again. They got their house sold but they had to accept market value so they got my people’s house valued and it valued at $100,000. At this stage it was subject to finance but it meant that the people buying the house could not afford it. I got them in a position where we could renegotiate the price. They rung and said “we won’t pay a penny more than $95,000. For me that was totally unfair. This young couple wanted to buy the house, the original owner really wanted the home and I was going to have to use my power as a real estate agent. I get on quite well with people, it gives you a lot of power and this power can be misused. This is one time it was misused in my opinion. I had to go to these people and say I can sell your house but you’ll have to accept ten thousand less. They had about six hours to decide. I said you’re going to have to accept if you want to buy this other property, this is the only thing you’ve got to play with. The guy sat there and he said “we really want the other house so we’ll do what we have to do”. I told him we could turn it down that it wasn’t fair what this other guy was doing. I said I can sell your house for $100,000 but I can’t sell it today. It was to include the dishwasher and the guy said “look there’s no dishwasher in the house we’re going to. We’ll accept the $10,000 less if you take the dishwasher out so I thought that was reasonably fair so I wrote it into the contract and went back to renegotiate with the other guy who said he’d pull out if the dishwasher wasn’t included. I felt so bad about it I went and bought a dishwasher and gave it to this guy. This meant I made about half my commission but I felt what I was doing was unethical. The thing that frightened me the most was having the power to do it. Knowing those people trusted me so much I could go and tell them that (I,1).
Story Two

A situation arose with an elderly lady, she was in her seventies and had never sold a house before. She was not aware of what was happening. She wasn’t mentally unaware but she’d been used to depending on her husband for everything, she had been closeted from society, then he (the husband) died. This young guy who was selling her house had been trained by a guy who is no longer in real estate but while he was he had gone from company to company because of his attitude basically. His boss had a friend who wanted a house cheaply. The house was on the market for between $80,000 - $85,000. This friend made an offer for $70,000 which was a starting figure. I mean with anyone else I would have explained to them that the house wasn’t able to be bought for that but in this case I had no control over the situation. This young guy who had just started was easily directed. His boss told him to get in there and get the contract signed because it was for his friend. His influence was so great that this young guy did exactly that. The old lady was relying on him, she even relied on him for advice on little things like paying bills yet this guy went and told her that her house was only worth $70,000 (1,2).

Joseph was concerned for this client. In this particular situation a solicitor intervened and a more realistic price was eventually achieved. Another option available to dissatisfied clients is to make a complaint to the New Zealand Real Estate Institute but Joseph thought this avenue was seldom taken. He said that ‘people grizzle’ (1,2) but rarely follow through with a formal complaint. Joseph thought the profession needed to be monitored more closely and that legislation needed to be in place to protect clients.

Postscript: Mid-way through the research study Joseph left the profession to take up unrelated employment. He believed that participating in this research study enabled him to stand back and reflect on his professional life. After reading the first interview transcript he said “I never realised how emotional and upset I was about some aspects of my work until I read what I had said in those interviews. It shocked me, made me really start to think about what I was doing” (12). He accepted a position in an industry that he felt had more stringent regulations and government control over the work practices of its employees.
SALLY - TEACHER

There's a kind of innate love inside me for teaching. I feel like I was born with some teaching skills, that they are almost part of my bones (I,1).

Sally began her working life in an office due to financial constraints. However, she retained the hope of going to university. In her early twenties she achieved her ambition of becoming a teacher. She began her career at a boys’ school where she was attached to a unit with both pastoral and teaching responsibilities. Gradually she moved through the school system and achieved a senior management position. She found this role required her to spend time and energy on areas like “lunch passes, detention and discipline” (I,1) which she did not find rewarding. She decided to make a change and acquired a lecturing position at a polytechnic which she found came with its own set of rewards, frustrations and challenges.

There were personal advantages for me in the tertiary area. There’s more time for your own professional development. In secondary schools you’re working on the run the whole time with students. You don’t have time to take a breath and stand back and look at what you are doing (I,1).

In the polytechnic sector Sally had several responsibilities. She taught, co-ordinated several programmes and supported new lecturers coming into the department. “I operate in the curriculum area I love, I can use management skills which I am still developing and I can take up professional development opportunities” (I,1).

One significant change for Sally was being part of an all male management team. She experienced some difficulties with this situation.

It’s an interesting experience to be a member of an all male management team in our department. I’m finding it quite a struggle because the management teams I’ve belonged to before have been all women so there’s a lot of reflecting on what happened before and what is happening now (I,2).

Another challenge for Sally was the need to set up new support systems. This proved difficult because she came into a department undergoing change.

I had to recreate or gain new networks of people whose opinions I valued and who valued my input as well ... I came into a department when there were a lot of staff changes, when people were feeling insecure ... it became fragmented. I felt very lost in the middle of that (I,2).

While Sally struggled with the politics of her position she was passionate about teaching and wanted to achieve a high standard in every aspect of her practice. Her stories were concerned
with misunderstandings. In Story One she recalled a distressing racial accusation made by students. In Story Two Sally recounted a teaching situation where the topic, participants and conflicting expectations provided her with a range of challenges.

**Story One**

It was a dreadful thing, it was to do with race relations. There was a discipline situation where a group of Pakeha and a group of Maori and Pacific Island students were being dealt with. I had always worked very hard for both groups but I ended up in a situation where the discipline was done. One part of it was not handled as well as it should have been, it was never intentional. I was accused of racism along with someone else and there was a complaint laid with the Human Rights Commission and Race Relations. Race Relations wouldn’t have a part of it, it got totally blown out of all proportions. It got to a level where the person in the Human Rights Commission dealt with it rather badly and was actually taken off the case because he listened to everything the students said and didn’t get a balanced perspective on it. I felt like things were out of control. The people who were being accused (of racism) were people who had worked for years giving extra to Maori and Pacific Island students to make sure they had the right opportunities. It impacted quite badly on me. I’m now very cautious in my dealings and I’m almost paranoid about any kind of racial jokes. I won’t be involved in anything that might put me in this position again so I haven’t really come to terms with it (I,1).

**Story Two**

I ran a course on performance appraisal for staff development. I did a lot of reading, planned the programme and identified the material I was going to use. I felt really comfortable with what I was going to do. I checked back with the people who had asked me to facilitate the workshop and found their perception of what was needed was different to mine. Their reaction wasn’t what I expected. I had to be very positive because I wanted to make sure these people would come positively to the session. I had to work very hard, change the whole programme and leave out some things that I thought we would do. During our discussion I also realised that there were some issues relating to the topic that needed to be addressed. I discussed my concerns with a colleague then began preparing a new programme. I asked myself how I could present this session in a way that was positive but at the same time address the issues that people had identified. So I ended up with a programme that was quite different to what I had originally planned. Then when I got to the session I found the nature of the group was different to what I had been led to expect. For the first half of the programme I was able to do what I had planned to do and then half way through I thought this isn’t going to work, they don’t want to do it this way, they want to do it in a different way so I had to adapt what I had done and present it differently. And what happened was I was working on something on the whiteboard and I left a particular area of thought to do after we had done something else and then I made a statement which referred to this point and of course we hadn’t done it. One of the participants said “I disagree entirely with that” and that absolutely blew me away, it was partly the way the person did it. I was happy with the way I recovered because my real inner feelings were kicked but I thought that they probably didn’t realise how much it had
kicked. I guess that was just part of the fact that I had changed the way I was teaching anyway or facilitating. I'd changed the method, I'd changed things around so that the questioning that I used wasn't going to be quite the same. I guess it was just a response to that (I,2).

This incident really unsettled Sally. She did a self review of the session and reflected on her role in the incident and was able to put it in perspective. The incident described in Sally's first story was resolved only when the Human Rights Commission appointed another person to the case. This person came and talked to all the people concerned and came to the conclusion that there was no case to answer. The aftermath had long term effects for Sally. "There were never any apologies, there was a lot of anger and a lot of things were said that should never have been said. I felt like I'd been really kicked in" (I,1).
MAC - TEACHER

I started off on a high school teacher's studentship basically for the money so that I could pay my way through University (I,1).

Mac worked as a secondary school teacher before becoming a lecturer in a tertiary education institution. His position has three roles: teaching, project work and technology development. Enjoying what he does is of major importance to Mac. He is not prepared to waste time doing anything that he does not consider interesting and fun. “I’ve given up apologising for enjoying my work ... it’s as though you’ve got to be under pressure, hating what you do to actually be doing a good job and I don’t believe that at all” (I,1).

An independent, flexible working environment is another essential aspect of Mac’s professional life. His need for autonomy, and enjoyment, by being immersed in situations which required continual learning and challenges, influenced his decision to become involved in project work. “I like the independence ... I like being able to make decisions, try them out, ... create something from scratch ... I’m happy being responsible for what I do” (I,1).

Contact with students and colleagues also plays an important role in Mac’s practice. He likes working in teams where everyone learns from each other. “I also like working with people. I could make more money by doing something else but actually I like the contact with students, I like the contact with staff” (I,1).

He believes enjoying what he does, having a high degree of flexibility and autonomy, and creating opportunities where social interaction is fostered are critical factors for his practice to be professionally and personally rewarding. He tries to create a similar environment for the students he teaches. Obtaining and acting on student feedback, is a critical part of Mac’s practice. “I use it [student feedback] if there are particular issues that come up a couple of times. What I normally do is go back to the group and say these are the issues that have been identified, how do you think we can go about resolving them? We work it out together” (I,1).

In Mac’s first story he described an incident involving staff and a Head of Department. In the second story he explained how he changed his teaching practice to cater for different student needs.
Story One

This was a classic. There were important things to be done and our Head of Department (HOD) didn’t want to do them but they had to be done. The staff were already alienated against the HOD, it was basically passive resistance. If the work didn’t get done it would affect the students so we [staff] decided we would be prepared to take over all the administrative roles to achieve the work. We told the HOD and said “all you need to do is rubber stamp it almost”. We got to this point with an external facilitator. We came to the agreement where this sort of thing could work and the HOD would just be a figure-head. The HOD didn’t want to do the work for the department anyway, the HOD wanted us to do it but the HOD wanted to tell us exactly what to do and have us just go away and do it, no discussions. Anyway we thought we had an agreement between staff, facilitator and HOD. The very next day the HOD said “Sorry but this can only happen if I give specific approval for everything’. So the whole thing was wiped, completely wiped just like that. We were horrified. We were all sure we had come to an agreement as to how the department could work and we thought the HOD was happy with the model as well. It the end it was a complete fiasco, a total waste of time (I,1).

Story Two

What happened was that as the project progressed we developed a way of learning using computers. One particular section, about a third of the whole course needed to use a different model of learning. It was the stuff that had been previously rote learned and stuff before that had been calculation time. Stuff which is learned in simulation, that sort of thing. This was a topic which had always been a problem to teach. I thought of some new ideas where we could perhaps use people’s backgrounds, where we had to find out things from staff and enter words and so on, like a game. I made the whole project a game. It worked for one group of people, they just loved it. I thought this is fantastic. They said it was a real challenge, that it was great. The next group of students were quite different. Their motivation was different. They were inclined towards marks. They viewed it as a game rather than a way to learn ... they were quite anti the whole thing. Basically they told me what they wanted. They said they didn’t want such and such and they would prefer to learn it a different way and so that’s what I did. They [students] drive the whole thing (I,2).

During interviews Mac consistently emphasised his need to have fun and flexibility in both his working conditions and in his teaching practice. Positive and open relationships with students and staff were also important. He described his work as one of his passions and recognised the significance of enjoying what he did. “It was a case of realising that you don’t live forever and that anything you do that is not fun is a waste of your life ... I believe that having a good time is really important” (I,1). Mac was adamant that making changes, investigating new ways of doing things and being open to possibilities invigorated his teaching practice.
JERRY - TEACHER

I was interested in art and in learning. Teaching enabled me to combine both (I,1).

Jerry began teaching in the secondary school system then moved into a lecturing role in a Fine Art Degree programme at a tertiary institution. As a lecturer he had responsibility for developing one of the degree components.

That process [developing papers for a degree] has been sort of experimental all the way ... a really interesting period. A little bit of a flaky period as well. A lot of hard work. I was also experimenting with classes and they [the students] knew they were being experimented with (I,1).

Priorities for Jerry in his teaching role included creating spaces for dialogue and reflection to occur. He attributed this to feeling comfortable himself in learning environments where listening was considered as valuable as contributing to group discussions. He also relied heavily on student feedback. He took particular notice of what students said about the type of sessions which appealed to them. "I'm constantly looking for clues from the class because there are often very subtle clues as well as overt questions or comments that will enable students to connect whatever we are doing with their own thinking about their own practices" (I,1).

He encouraged the use of buddy systems, students working collaboratively and small discussion groups so students learn from each other. Jerry endeavoured to work in ways which kept discussions going and enabled all people to feel they could contribute if they had something to say and if they wanted to say it. Trust, collaboration and dignity were values which Jerry said underpinned everything he did in his practice. He constantly searched for ways to "structure learning activities that actually fostered these values" (I,2). Jerry viewed boundary defining with students as a big issue. "Artists constantly consider boundary issues because the artist is often positioned as a marginal type ... that's what happens in teaching and learning environments anyway" (I,2).

Jerry's stories reflected the importance he attached to boundary setting. In Story One he recalled how a dominant student altered the dynamics of a class discussion. In Story Two he described an incident where a lack of ground rules contributed to a student's confusion during a discussion.
Story One

I can't remember the exact focus of the discussion at the time but it involved a person who had just recently experienced a religious conversion to a fundamentalist Christian church in the community. The student felt that his values and beliefs, associated with that conversion experience, and his new knowledge were appropriate to share with the class. Having myself had some experience with fundamentalist churches and having some sympathy with that student's enthusiasm for new learning and new experiences, I wanted to deal with it in a way that the student's sense of self esteem and the way he valued the experience were maintained. He got one statement out, quite a long statement. I saw some of the students who could be most depended upon to take up any issue and discuss it, I saw them shut down. I saw the steel walls come up in their eyes. Actually what I saw in a couple of them too was fear. And retreat, that sort of psychological and emotional retreat. It was fear more than anger or frustration and that horrified me because that is the ultimate enemy in any group discussion. I can't remember exactly what I did although I think I was diplomatic and firm. I had to fight to get that person to be quiet in the class and also I was very conscious of trying to maintain that person's dignity as well as my own. I said that I would be happy to discuss it with him afterwards. I then outlined my reasons [for intervening].

I thought about it afterwards. I also had opportunity to talk to the student individually. It was important for me to get confirmation about whether I'd handled the situation correctly. I knew educationally I'd handled the situation correctly but there were educational arguments regarding the values that I'd outlined in the course right from the start. Was I acting entirely consistent with those values. It felt like this was a test case on where were the boundaries for those values? This student disagreed that there ought to be boundaries but he understood the boundaries (I,1).

Story Two

I make it clear that I don't privilege spoken contributions over silent contributions. A terrible experience that I had in class made me realise I had to draw up rules for discussion and that we had to talk about the process of discussion and agree to these rules for discussion ... so we drew up some user friendly guides to discussion including the issue that people deal with things in class and not take them outside of the class.

There was an interesting incident with my Stage Two class this year where I took for granted the knowledge of these ground rules. One of the students, there were three students in the class who have come into the course in the second year and they were not in the Art School in the first year, one of those students drew me aside at the end of a session and said 'I'm not quite sure how the discussions are working in this class'. He thought we had got into some problem areas and he wasn't sure how he could orientate himself during discussions. It made me realise that I hadn't gone over the ground rules. I would normally and I have in the past but this time I had forgotten to do it. This student needed that assurance so we talked about the fact that most of the students in the class understood that discussions operate in this way, that there are boundaries, these were things that we had agreed to and he was assured by that. I said 'well next week we'll go over them again, I'll hand the sheets out again, we'll just reinforce those things so we don't take them for granted'. It's always good to remind
people anyway (1,2).

Setting ground rules and ensuring students were familiar with them was a significant turning point in Jerry's teaching practice. Jerry valued difference and recognised learning opportunities come out of constructive discussion. He was interested in the politics of difference. He justified his approach by making his philosophical views transparent to students. "We talk about conflict itself, the notion of conflict, persuasion and force and the way that they are often negatively coded as violent .. we talk philosophically, and in terms of political theory about conflict not being intrinsically negative, that it can also have productive effects" (1,2). Jerry summed up his approach to professional practice by saying he was comfortable with, and competent in, his subject area and had an elastic vision of what was possible for students to achieve when they had control over the learning process. He saw his role as meeting students' learning needs in ways which encouraged trust, collaboration and dignity.
Part Two:

Background

My second research question considers how journalling and storytelling aid reflection. While I address this question in Chapter Five I describe here how I gathered data for the journalling component. During the first interview I asked each participant to tell me what they meant when they talked about reflection (Table Two). I examined participant’s individual journals and asked each person to describe their journalling process (Table Three). I used the same method of analysis I described in Chapter Three for interview transcripts to analyse participants’ individual journals. I also compared the themes participants identified from their journals with the themes I identified in the same journals. Table Four presents themes which emerged from our collaborative journal and purposes it served. These themes and purposes were cross checked by two participants.

Individual Journals

Although participants agreed to share their individual journals with me from the outset of the study they varied in their willingness to actually hand them over. Participants from nursing and occupational therapy professions and one teacher appeared to have no difficulty placing their journals in my care although one teacher commented ‘I don’t know what I will do without it, it keeps me sane’ (Sandy, 1,2). One teacher did not journal at all during the study so there was nothing to receive, one used an electronic journal sending entries straight to me via email and the other needed reassurance that quotations I used could not be identified. After reiterating my commitment to show each participant any text relating to them prior to including it in this thesis, this last teacher, who was concerned about colleagues reading and recognising themselves, gave me her journal.

The real estate agent did not want to part with his original journal although he had been comfortable with the concept up until the moment of handing it over. He then panicked saying “but there are people’s names and addresses in here” (Joseph, 1,2). He also expressed a need to “tidy it [the journal] up” (Joseph, 1,2). He said he did not want to expose his clients in any way nor did he want his journal read in its “raw state” (Joseph, 1,2). We discussed ways to overcome these problems. Eventually he decided to write out another version which would not include the names or addresses of clients. While I was concerned about losing the immediacy, emotion and essence of his original journal I was bound by my agreement to honour participants’ wishes and therefore agreed to this compromise. However, this revised
version did not eventuate and I decided not to pursue the matter.
<table>
<thead>
<tr>
<th>Participants</th>
<th>Definitions</th>
</tr>
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<tbody>
<tr>
<td>Marie</td>
<td>Thinking about my practice, going over an incident that happened, sorting out anything I don’t understand or don’t feel in touch with. Thinking about the language I use if I write a story about the incident. It’s revisiting for clarification and understanding.</td>
</tr>
<tr>
<td>Meg</td>
<td>It’s looking back, working through processes of how things can be understood, or how we can improve something, maybe how we can stop doing something over and over again (repeating patterns). It’s a way of learning, of gathering in and making sense of my thoughts. Looking back and then making changes. I look back at everything, everyone’s actions, not just my own.</td>
</tr>
<tr>
<td>Shona</td>
<td>Thinking about what happened in a particular situation, thinking back over it again ... asking what it felt like, considering the actual reality of what happened, kind of looking at the situation at a deeper level.</td>
</tr>
<tr>
<td>Sandy</td>
<td>Reflection is that time to stop, to look back, to think about, and to integrate and make sense of life experiences.</td>
</tr>
<tr>
<td>Joseph</td>
<td>Reflection is revisiting something. Having another look. Asking questions about how I feel. Checking out my thoughts and feelings.</td>
</tr>
<tr>
<td>Sally</td>
<td>There are different levels of reflection. The level that I operate at most is simply recognising that what I am doing could be improved upon and saying to myself well I’m going to make this change or that change. On a more personal deeper level I look at the pathways I have taken and the influences on my decisions ... it helps me to look at where I’ve been and where I’m going.</td>
</tr>
<tr>
<td>Mac</td>
<td>Thinking about my own thinking but that’s only part of it. The other parts are monitoring my thinking, planning changes and so on.</td>
</tr>
<tr>
<td>Jerry</td>
<td>Thinking about what it is I have done. Or if I am working with students asking them to think about what they have done and why. I encourage students to look at the process they have used, how they arrived at certain ideas.</td>
</tr>
<tr>
<td>Participant</td>
<td>(years) Journal experience</td>
</tr>
<tr>
<td>-------------</td>
<td>---------------------------</td>
</tr>
</tbody>
</table>
| Marie       | 5                         | - Hard covered book  
- Began by keeping alternative page free for reflection  
- Currently writing stories about practice followed by 1 page free for reflection | - Record patient stories  
- Consolidate nursing knowledge  
- Plan patient care  
- Clarify thinking  
- Identify feelings  
- Understand reactions | - Regular entries  
- Revisit entries when I need to understand something, want to work towards making changes in my practice or make connections | - Personal learning  
- Power issues  
- Professional concerns  
- Practice experiences  
- Patient expectations/needs | I began writing factual statements like “I had to ....”. Now I’ve got a real focus. Journaling helps me understand the multiple facets of my practice including how hospitalisation experiences affects people when the role of patient is upon them. |
| Meg         | 5                         | - Hard covered book  
- Both sides of page  
- Messy - use arrows squeeze bits in margins and tape bottom of page | - Learn about self  
- Identify feelings  
- Prepare for change  
- Understand processes  
- Record dreams about practice | - Four stages  
- check for accuracy (day after initial entry)  
- gain overall picture (within three days)  
- make connections (within seven days)  
- achieve “phenomenological nod” (within a month) | - Uplifting experiences  
- Critical incidents  
- Professional issues  
- Problems related to practice | Dreaming, writing it down then reflecting on it (professional issue) bought it into the light and I learned from that if I hadn’t written it down and reflected on it maybe I wouldn’t have dealt with these issues. |
| Shona       | 3                         | - Every second page for reflection  
- Process orientated  
- Heavy emotional content  
- Always at hand | - Learn about self and practice  
- Understand events  
- Delve deeper  
- Clarify and understand feelings | - Frequently - every week  
- Revisit as often as needed  
- Record reflections on each revisit | - Power relationships  
- Interpersonal skills  
- Ways of working with clients  
- Personal and professional learning | I heard nurses were journalling and I wanted to be on the band wagon. It sounded like a good idea, I could see the benefits. I started because it was part of a course requirements. Now I never go anywhere without my journal. I even take it on holiday! |
| Sandy       | 3                         | - Hard covered book  
- Write on every facing page  
- Second page free for reflections  
- Use range of writing styles from stream of consciousness to structured | - Document development as a professional  
- Understand how to share knowledge and skills with colleagues, students, clients | - Up to 2 - 3 times per week  
- Intermittent revisits occur as needed | - Student struggles  
- Professional dilemmas  
- Letting go  
- Professional and personal learning | Writing about a situation enables me to actually move forward, it’s a deliberate active action as opposed to leaving something to fester. |
<table>
<thead>
<tr>
<th>Name</th>
<th>Quantity</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joseph</td>
<td>1</td>
<td>I was struggling in my second year working as a real estate agent. The first year was great. In the second year I just hit the wall. I didn't know what had gone wrong so I sat down one night with an old exercise book and listed all the houses I had sold then I went through and wrote “well I sold this one because ....”. It (journaling) started from there.</td>
</tr>
<tr>
<td>Sally</td>
<td>1</td>
<td>If something is really troubling me I will sit down and write and write and write. It helps me sort things through.</td>
</tr>
<tr>
<td>Mac</td>
<td>1</td>
<td>Talking things through is my preferred way to reflect but I like the idea of keeping a professional journal .... it's just finding the time to write.</td>
</tr>
<tr>
<td>Jerry</td>
<td>15</td>
<td>I talk to students about catching ourselves out. The process at reflection (journaling) is about capturing those shifts, or jumps or contradictions, holding them still to examine them.</td>
</tr>
</tbody>
</table>
Collaborative Journal

There were no pre-determined conditions regarding the use of this journal. Participants contributed in any way they liked. Content ranged from personal reflections through to professional philosophies. Format covered poetry to prose. Entries varied in length, starting at half a page and reaching three pages. Some entries stood alone like two poems Meg entered, others referred to previous entries and some offered fresh insights. An analysis of the journal revealed four themes. It also became apparent that participants used this journal for five specific purposes.

Table Four: Collaborative Journal

<table>
<thead>
<tr>
<th>Purposes</th>
<th>Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>to capture stories</td>
<td>practice related learning</td>
</tr>
<tr>
<td>to share learning</td>
<td>professional philosophies</td>
</tr>
<tr>
<td>to discuss issues</td>
<td>personal learning and growth</td>
</tr>
<tr>
<td>to connect with one another</td>
<td>reflective strategies</td>
</tr>
<tr>
<td>to pose questions</td>
<td></td>
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</tbody>
</table>

One participant described how she thought collaborative journals could be used in professional practice contexts.

This research has shown me that it would be valuable to have a collaborative journal just maybe to say how is the day going, what’s on your mind etc that colleagues could use. It’s a way of capturing stories too, stories that may be valuable to others or ourselves in the future (Marie, CJ).

Marie also described how she felt when she read her interview transcripts. “I read the transcripts and thought far-out, did I really say that? It’s funny how words, ideas, dreams and feelings are so easily spoken. To capture that on paper, read and reflect on them again is an enlightening experience” (Marie, CJ). Sandy agreed. “My understanding and subsequent movement regarding recurring themes in my personal journal became apparent when I read the transcripts of my interviews” (Sandy, CJ).

Sandy shared what combination of reflective strategies were most beneficial to her. “I think the combination of writing (to help sort out) then discussion (to help move on) proved to be the most useful form of reflection for learning about my practice” (Sandy, CJ). Other participants thought that opportunities to talk about written reflections were not always available to them in practical contexts and they concluded that even the power of storytelling was diminished if opportunities to discuss stories were not provided. They raised the issue of
timing and determined that discussions were more useful at the end of a storytelling episode. These practitioners felt any discussion during the telling of a story interrupted the flow and could detract from potential learning opportunities. The idea of structuring discussions as part of the reflective process was raised and generated mixed reactions. Some thought structure would help to focus the discussions and possibly lead to deeper learning. Others liked the idea of spontaneous unstructured exchanges. All participants agreed that storytelling without some form of discussion between storytellers and listeners reduced the potential for learning. McDrury (1996a) concurs and she has devised a reflective process which encourages storytellers and listeners to collaboratively formulate alternative or additional actions, to those described, if similar situations were to be encountered in practice contexts.

While participants shared their learning with each other on a number of personal and professional matters, the collaborative journal also became the vehicle for participants to describe emotional roller coaster rides often associated with reflexive activities. One of Shona’s entries demonstrated this aspect. “Reflection - it helps me uncover different layers of the same topic that can be applied in different ways. Like an onion - good for you but sometimes makes you cry” (Shona, CJ).

Connecting with each other via the collaborative journal was important to group members given that they had no physical contact yet often shared revealing written reflections. These connections happened in two ways. Occasionally a particular participant would respond to an individual entry as demonstrated in Sandy’s entry to Sally. “Sally I could relate to your reflections ... especially the notions of ‘feeling comfortable’ and ‘moving on’ - these are positive outcomes of reflective practice for me too” (Sandy, CJ). At other times the entries were directed at the group. “I would like to meet you all face to face and have the opportunity to discuss these issues and their implications on our professional lives” (Shona, CJ). Sometimes questions like ‘so what can we do to ensure time to reflect is an integral part of our everyday professional activities?’ were picked up by some participants and ignored by others.

Contributors to this collaborative journal said they enjoyed the flexibility it offered both in content and format. Entries suggest that the process of telling a story during an interview, reading the transcript relating to that story, reflecting on the written account then having the opportunity to discuss the story in a subsequent interview was a beneficial reflective process for participants to use. In the next chapter extracts from this journal, together with entries
from participants’ individual journals, and material from their stories told during interviews, are interwoven throughout the discussion.
CHAPTER FIVE: DISCUSSION

The result of a qualitative analysis should be viewed as a representation in the same sense that an artist can, with a few strokes of the pen, create an image of a face that we would recognise if we saw the original in a crowd. The details are lacking but a good ‘reduction’ not only selects and emphasises the essential features, it retains the vividness of the personality in the rendition of the face (Tesch, 1990, p.304).

In this chapter I bring together data for interpretation being mindful that I offer a personal perspective only. Other interpretations will be possible because meaning is always personal and events can have different meanings for the people involved. Meanings can also change with time. I begin by presenting themes which emerged from this study (Table Five). Major themes (those shared by the majority of participants) are: increasing self knowledge, advancing practice, identifying professional concerns and recognising and attending to power issues. Sub-themes are listed under major themes. Each sub-theme, including those specific to particular participants and professions, is discussed separately.

I also consider how participants in this study bring about change to professional practice. In Table Six I present the triggers participants identified as significant precursors to change, note what hindered and helped them, and outline their processes. I also examine how journaling and storytelling aid reflection which addresses my second research question. To address my third research question I draw on these data to discuss the role reflective strategies have in bringing about change in professional practice.

I conclude this chapter by discussing how I used Smith’s (1993) Constructs of Empowerment model to present participants’ experiences of self growth, personal and political consciousness and collective action/struggle (Table Seven). I also consider possible links between where participants are according to this model and how they approach bringing about change to professional practice.

Themes
I identified four major themes from my analyses of participants’ stories and individual journals. I sought endorsement for these themes from a cross section of participants, I
discussed my findings with a ‘critical friend’ and I checked my interpretations with my supervisor. Participants took part in theme identification in an additional way by declaring the ones they were aware of in their individual journals (Table Three).

Table Five: Similarities and Differences

<table>
<thead>
<tr>
<th>Themes</th>
<th>Increasing Self Knowledge</th>
<th>Advancing Practice</th>
<th>Identifying Professional Concerns</th>
<th>Recognising and Attending to Power Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-Themes Common to Participants</td>
<td>♦ Feeling helpless ♦ Letting go ♦ Gaining insight</td>
<td>♦ Gaining a voice ♦ Accessing role models and mentors ♦ Using reflective strategies</td>
<td>♦ Setting boundaries ♦ Balancing process with product</td>
<td>♦ Feeling powerless ♦ Being marginalised ♦ Witnessing and experiencing horizontal violence</td>
</tr>
<tr>
<td>Sub-Themes Specific to Participants</td>
<td>♦ Building confidence ♦ Feeling anxious</td>
<td>♦ Working with unclear roles and responsibilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sub-Themes Specific to Professions</td>
<td></td>
<td></td>
<td></td>
<td>♦ Witnessing and experiencing oppressed group behaviour</td>
</tr>
</tbody>
</table>

**Increasing Self Knowledge**
Participants in this study increased their self knowledge in three ways. They used strategies to overcome feeling helpless, they learned to let go and they gained insights into self.

**Feeling Helpless**
Four participants recalled times when they felt helpless in their professional lives. They shared their examples during interviews, in stories and in their individual journals. Each person described strategies they had developed to overcome these feelings.
Marie, one of the nurse practitioners, said she felt helpless in her professional life when her expectations of her role clashed with the expectations of some doctors. When this happened she said she felt prevented from using her nursing knowledge. Marie’s experience may link with Doering’s notion that the tensions between the two models (nursing and medical) have “limited the recognition, scope and expansion of nursing knowledge” (1992, p.30). For example, in Story Two Marie felt she was expected to ‘treat’ rather than ‘care’ for her patient which was in conflict with her world view. Marie thought there were gender related issues involved and Rafael’s studies on doctor/nurse relationships supports this view. Rafael contends “lack of recognition that ‘caring’ involves knowledge relates not only to the power imbalance between physicians and nurses but also to gender inequities” (1996, p.10).

Marie also talked about another situation where she experienced intense feelings of helplessness. She recalled her emotions when she was transferred from a unit, where she operated in a highly competent manner, to another unit where she felt like a novice again.

Moved into intensive care recently, got shown through all these trolleys, overwhelmed with the knowledge, blown away by all the screens, felt like crying. I’m never going to know anything in this world. How could I have been a Charge Nurse and an Educator in the other ward (IJЕ).

In both situations Marie overcame her feelings of helplessness by journalling. After her experiences in intensive care she wrote, “yes, journalling was good in this situation because I could reflect on feeling like that and say look it’s quite a reasonable way to be in a new situation” (IJЕ).

Meg, another nurse, remembered feeling helpless when despite doing everything she could to ensure a positive hospitalisation for a patient, he and his wife did not appear to appreciate her efforts (S,2). By journalling about the situation and then revisiting her journal entries she was able to view the situation from the patient’s perspective and shift her focus from her own needs to those of the patient.

Another participant, Sally, found herself caught in a web of self protection after being accused of racism (S,1). Without the support of teaching colleagues she felt helpless to defend herself. Feelings of helplessness were still evident when Sally shared this story with me. “I think I’ve shut it away [the racism story] and I don’t know that I have actually dealt with it. What I have learned is the superficial thing, to be careful and cautious and that’s not helpful” (I,1).
However, Sally discovered by telling this story during Interview One, reading the transcript then talking about it again in Interview Two, she was able to reach a point where she could move on. She talked of “finally feeling satisfied” (I,2) that she had done everything possible to defuse the situation. Using a range of reflective strategies helped Sally reach this point.

Unlike other participants in the study, Joseph said “a negative public attitude towards the real estate profession” (I,1) caused him personal concern. “The biggest, the most hurtful thing I’ve found being a real estate agent is the lack of trust” (I,1). He also experienced feelings of negativity towards his colleagues. He felt unable to intervene when he heard about a property sale which he thought was handled “unethically” (S,2). His feelings of helplessness helped fuel his condemnation of colleagues he believed were behaving inappropriately. Joseph tried to instil a code of acceptable practice in the novice real estate agents he trained but said he felt “utterly helpless” (I,2) about public perception of his profession as a whole. He did not find it easy to talk about these professional concerns with his family - “I try to protect them” - (I,1) nor did he use his journal to process how he was feeling. He was unable to let go these feelings until he left the profession which he did during the later stages of this study.

**Letting Go**

Learning to let go was a concern for six participants. These participants were from occupational therapy, teaching and nursing professions. Three had a common connection in having responsibility for students either in the classroom or on clinical placement.

Sandy talked about her tendency to feel responsible for student outcomes. She recalled struggling with “letting go my own expectations and allowing what was right for the students involved” (I,2). By journaling she realised that what the students were organising [a celebratory event] was “right for them - the way they had been brought up” (I,2). From this experience she learned that “meaningfulness comes from shared meanings. To understand the culture and shared meaning is of absolute importance when planning activities. I have seen/learned this more clearly” (I,2).

One of the themes in Sally’s role as a teacher was also a tendency to feel responsible for everything that affected student outcomes. She took on more work (often the work of her colleagues) when she felt the needs of students were being compromised. Learning to let go is still an issue for Sally. She is trying to overcome it by journaling and discussing her
concerns with supportive colleagues.

As an occupational therapist Shona has third year students on placement several times a year. She constantly battled with the dilemma of achieving an appropriate mix of support and challenge within the clinical learning/teaching environment. She expressed her concerns in the following way: “I guess one of the issues for me is can I let a student fail? Is it that it’s difficult to see a student fail or that I believe it reflects on me if someone doesn’t pass?” (1,2). Like Sally and Sandy, Shona questioned where her responsibilities for student learning ended. Letting go in appropriate ways and at appropriate times concerned her as much as finding methods to encourage students to become more responsible for their own learning.

I spent a lot of time over the past three weeks ensuring the student I had was on track. I was aware of times when if I’d left things alone they might not have been done, or done properly. I guess my role as a clinical teacher is to get the best of the student and if that means offering assistance so be it. There is a difference between promoting, enhancing and supporting learning and actually doing it for them (1,1). She is working through this dilemma by journalling about her experiences and talking about them with her colleagues.

Mac, Jerry and Marie also told stories about ‘letting go’. Mac’s example was management related. When he realised his Head of Department was not going to operate in ways which were acceptable to him he made a conscious decision to let go his frustrations and to channel his time and energy into areas which would be personally rewarding to him. He said he was able to let go in this way because he had a well developed sense of self worth, the ability to analyse problems objectively and support from two colleagues.

Jerry felt letting go was just as viable as doing something. He explained:

My willingness to let things go has nothing to do with laziness, nothing to do with sloppiness or low standards or not having applied some sort of rigorous reflective process as an ongoing part of my practice. It has to do with feeling more confident and powerful in terms of my teaching practice (1,2).

He says he has learned to trust his intuition which he feels is partly bolstered by experience. He said he “reflects on his feet” (1,1) and constantly makes adjustments to his practice based on the learning achieved through reflection.

Marie was able to let go her disappointments about current health sector directions when she decided to take a year off. She thought time out would enable her to reflect on the role of
nursing and consider how she can best contribute to the profession. She said once she made this decision she felt immense relief.

**Gaining Insight**

It became apparent during the study that when participants used reflective strategies to stop feeling responsible for someone else’s development, let go concerns or consider their own needs, insight into some aspect of self had occurred. Five participants shared experiences which resulted in a new understanding of self.

Jerry reached a point where he was able to reconcile two parts of himself. “I’m a control freak in therapy. The ‘you can let this go Jerry’ is the therapist side of me talking to the control freak side of me. The control freak side of me says ‘yes I can let that go but I’m not going to let this one go’. I recognise that both are necessary” (I,2).

Meg gained insight into the degree of apathy which had crept into her practice. Even death was commonplace. She gave an example of starting night shift and thinking “don’t ring the bell it will disturb my biorhythms” (IJE). On her rounds she noted that an unfamiliar female patient was likely to die during the shift. As the night progressed she heard stories about this patient.

I learned that Mrs A and her daughter ‘B’ lived together. B was a nurse and lived for two things: work and caring for her elderly Mum. B had two brothers in other cities but never saw them. She was left to care for her mother with no support or assistance, emotional or financial (IJE).

Later in the evening when Meg was sitting at the nurses’ station she heard “a voice of desperation and despair echo around the ward” (IJE). “C’mon Mum take a breath, please Mum take a breath...Oh Mum, Mum, Mum” (IJE). When Meg realised the patient had died she cried because all of a sudden this patient was real to her. “She had been someone’s Mum, could even have been my own Mum” (IJE). This death pulled Meg up and put her back in touch with her feelings. It reminded her of the connections we make in our lives by telling and listening to stories.

Sally gained insight into the way she coped with work loads when she was pulled up by a colleague’s comment.

When I came here [current institution] there was resentment from a couple of people I had to work with. I was in a very difficult situation, full of enthusiasm, working hard,
preparing lots of resources and getting really carried away with things. I suddenly realised one day when a lecturer said “well what am I teaching today?”, I realised I was doing her work as well! (I,1).

Sally was shocked on two counts. Firstly that she had taken so much control and secondly that she had carried another colleague without realising the implications. She talked with her and together they decided on a workable solution.

Shona found journalling about situations which involved a colleague who irritated her, enabled her to detect a pattern in her own behaviour.

I realised [by journalling] that I have difficulty relating to a particular kind of person who may be quite authoritative and quite challenging, quite aggressive, so I’ve been looking at why I react the way I do rather than why they are like that. I was getting upset about it instead of looking at ways to change how I was reacting ... I’ve changed and people say I have changed (I,1).

Shona’s insight into her own behaviour enabled her to interact with this colleague in a different way. This change had a positive outcome for Shona. She said she was less tense around this person and felt more in control.

Once Joseph gained insight into the source of his discomfort (unethical practices within his profession) he made the decision to leave. He now works in an area he thinks has more legislative control over the practices of employees. He was also partly motivated, to leave real estate, by the need to work with people who cared about clients in the same way he felt he did.

Advancing Practice
Gaining a voice, having access to role models and using reflective strategies were viewed by participants as the most useful ways to advance practice. Two nurses and two teachers emphasised gaining a voice. All participants found role models and mentors crucial to their professional development. All participants used reflective strategies to advance practice.

Gaining a Voice
Marie talked about the impact a book by Belenky, Clinchy, Goldberger and Tarule (1986) had for her. She said it clarified a lot of things about the way she worked. She said it also stressed the need for practitioners “to find and use their voice” (I,2). She related to one passage in particular:

There’s a quote, something about the roar on the other side of silence and that impacts
on my practice a lot because it’s sort of like I’ve gained the voice that’s made me think ‘own your practice, gain a voice, have your say, question things, it’s okay to do it’ (I,1).

There were many examples of Marie using her voice in her professional life. However, she found that working in this way came with a cost. During the study Marie moved from feeling disillusioned about the health system, to actively working towards changing it, to taking a year’s leave.

Meg used her voice to mobilise colleagues into forming a nurses’ action group because she felt nurses in her institution were not being heard by managers. This group met on a regular basis to discuss nursing concerns and to devise tactics to address them such as writing letters to the editor of the region’s newspaper. Like Marie, Meg also found there was a personal cost. During this study Meg left her hospital based position and moved into a nurse educator’s role which she hoped would enable her to do more for nursing as a profession than she was able to do in the hospital environment where she believed the medical model was still revered.

Jerry tried to have his voice heard too. The following journal entry sums up his feelings about a decision his Head of School made to do away with a scheme he was instrumental in establishing. “Staggering in belief, and personally undervalued, that the Head of School thinks he can just take it [the scheme] away for next year. He has a fight on his hands” (IJE). This action culminated in Jerry voicing his dissatisfaction in other areas of his practice. He wrote in his electronic journal:

Finding I’m sick of being a course co-ordinator voluntarily. Going for appraisal and a job description change. Hoping the remunerative incentives to be offered will be sufficient to get lecturers back next year and sick to the stomach that they may not be as ‘valued’ as they ought by the purse-string holders (IJE).

Jerry said he choose the areas he fought for carefully and ensured that he not only promoted his discipline but that he had his own needs met as well.

Sally felt unable to use her voice in her department without being shouted down. However, she thought that her voice was heard outside her institution which she found personally heartening. “I have so much positive feedback [outside the institution] on the work I am doing that it has given me a real boost professionally” (IJE). She decided this was “possibly because my style and expertise were appreciated, because I kept learning from those around
me and because I enjoy the ‘leadership’, teaching and facilitating role” (IJ).

**Accessing role models and mentors**

All participants were adamant that having access to role models and mentors contributed significantly to their ability to advance their practice. Jerry remembered the moment when he knew what teaching was about and attributed this to watching “a tall gently spoken teacher walk into a chaotic classroom, perch on his desk and say sh, sh, sh, very quietly” (I,1). When the class fell silent and the students walked to their seat without any signs of fear or intimidation Jerry knew he wanted to work with students in the same way.

Shona used supervision sessions to work through practice related issues. She gave an example of how helpful it was for her to discuss an issue with a skilled and trusted supervisor having already journaled about the incident.

I spent one and a half hours with my supervisor discussing a difficult client/colleague issue. It was really helpful to have written things down in a logical way beforehand. I didn’t get flustered or upset but stuck to the issues. This was a major breakthrough for me. I didn’t feel like I was ratting on a colleague but that I was being sensible and professional in my approach. Journalling [about this situation] had really helped me. I was able to quote my observations and my reflections during the supervision session. I felt good to have shared this stuff with an appropriate person - it takes the weight of responsibility from me - it shares it (I,2).

Shona also acknowledged the early influence of social workers and nurses in her professional advancement although she now differentiates between the two groups.

In terms of nursing I’ve come this whole big circle from thinking yeah we’re on the same track here to thinking we’re on a completely different motorway at times. With the social workers there’s always been much more of a similar ideological sort of thing (I,2).

A visiting nursing scholar was a role model for Marie while she was doing her nursing degree. She remembered listening to this person talk about the power of storytelling and “feel something click inside”(I,2). As a result Marie modelled her practice around this person’s approach even when she was caring for patients who were not able to communicate for themselves. “She [the visiting scholar] is constantly on my mind. I try to make an effort to get the patient’s story from their visitors, who the person is so hopefully I care for them in a way that they would appreciate” (I,2).

Sally talked about significant influences in her professional life. She acknowledged the
generosity of specific people and the learning that resulted from her association with them. I have worked with some very special people who have been mentors really and people who have skills I admire, people skills, a way of handling people and situations. They also have a vision or goals so they’ve inspired me and I’ve found myself beginning to do the same things subconsciously often and then on reflection I realised I had developed new skills, I was able to think things through in different ways (1,2).

According to Joseph the best advice he ever got about the real estate profession came from a mentor he had contact with in his early years. This man stressed the intense emotional feelings many people had for their homes and suggested Joseph took that into account whenever he worked through sales arrangements with clients. This person told Joseph “to make himself human to clients, to talk to them in ways which would increase their confidence in his ability” (1,1), advice Joseph followed.

Sandy valued the contribution role models and mentors had made in her professional life. She said they contributed to her advancement in different ways. Meg also had a number of people who influenced her practice. They included nurse practitioners, visiting health scholars and lecturers who taught her as a student. Like Sandy, Meg recognised that each person had contributed to the development of her practice in different ways.

Mac sought the company and stimulation of two particular colleagues, an example of co-mentoring where all three colleagues bounced ideas off each other, worked collaboratively and contributed equally to work-related enterprises. Mac explained why this arrangement worked so well for him. “It’s partly because of the trust between us all, that’s really important. I can trust either of the other two completely in terms of what they say, what they do and what they really mean” (1,2). While co-mentoring was Mac’s preference he recalled situations earlier in his career where he received more assistance than he was able to give. He believed experience, knowledge and skills should be shared. He acknowledged that there were optimum times for this to happen both in terms of a person’s development and because of what was uppermost on an individual’s ‘need to know’ list.

**Using Reflective Strategies**

Using a professional journal was a criterion for participants’ involvement in this study. Telling stories about practice was also part of the research design. However, participants revealed in their journals and during interviews that they were using additional reflective
strategies. They all engaged in discussions about their practice either with colleagues, supervisors, friends or family members, therefore written, oral and dialectic reflective strategies were all used by participants in this study.

To maintain clear distinctions between these three strategies I refer to dialectic reflection, that is where participants have sought out someone to talk to, as a 'dialectic encounter' which parallels a process Diekelmann described when she discussed reflective dialogues. “Our conversations need to be dialogues in which we hold mirrors up which reflect and call one another forth. Dialogue is engaged listening, seeking to understand and be open to possibilities” (1990, p.301).

Participants varied in the way they used these three forms of reflection. Shona described her reflective approach:

I do a lot of thinking in my head and I do a lot of talking about it. There are particular people I talk to about particular things but generally speaking it’s just having a sounding board present because we can’t always do it ourselves but if there’s someone else there reflective interaction can bring about solutions (I,1).

She also described how she engaged in dialectic encounters:

I began by sharing my perspective with others at work, at first in supervision and then with a trusted co-worker. In this way I am able to establish some reality and perspective on the matter. It gave me a relief valve which works when other people in the team become difficult (I,1).

Shona went through a number of journalling stages. “When I first considered journalling I couldn’t see how I was going to make time for it ... it was only because it was an essential part of a course I was doing that I made an effort. However, I found that once I started it was quite addictive” (I,1). Shona found journalling was a powerful tool which enabled her to make connections which then led to changes in her practice.

When I am in touch with my journal I find myself thinking a lot about my practice, my ability to be reflexive and how it increases consciousness of other people’s behaviour. I have increased my ability to ask others (students, clients, colleagues) questions requiring reflection (I,2).

Shona noticed another change as well. “One side-effect [of journalling] has been my reduced ability to tolerate other people’s limited or non-existent self awareness in regard to their work” (I,2).

Joseph used a combination of journalling and talking to a colleague (dialectic encounter) to
help him deal with a disturbing incident. First of all Joseph talked over his concerns about a
house sale (see Story One) with a colleague which helped diffuse his feelings of anger and

guilt.

I felt so bad about the dishwasher incident I went to see a colleague because I needed
to talk it out with someone. I was so wild that night I wanted to go and get that old
chap and throw him through the window, he annoyed me so much because he was
ripping these people off because he was in a position of power that I should never have
allowed him to get into. I suppose that’s one of the things that annoyed me the most
was his position of power. (1,2)

I asked Joseph if he felt caught in the middle. “Yes, very much so. I felt like I was doing his
dirty work ... You’ve got to be fair with people. I still think of myself as being real you know.
I’m not saying these words because that’s what’s expected of me but because I believe that
what I do is genuine” (1,2).

In the same interview Joseph remarked how careful he usually was about what he wrote in his
journal and how he tried to write about positive things. One this occasion, however, he
changed his pattern. “I wrote about it [the dishwasher story] in my journal. I try not to write
negative things but that time I wrote about the things people are prepared to do to achieve
what they want” (1,2). I asked Joseph why he didn’t normally journal about negative aspects
of his work.

No-one has ever asked me why I write positive things and I don’t write negative
things. I’ve had too many negative things happen in my life. They just keep coming.
If you write them all down you get to a stage where you don’t think there’s any way
out. You get too blocked up with what other people are saying so you’ve got to give
yourself a positive line (1,2).

Journalling about the positive aspects of his work gave Joseph a sense of well-being. He often
referred to his journal as his ‘success diary’ hence the largely positive orientation.

I avoid making negative entries like the plague. I handle negatives at the time but I
don’t want to revisit them so basically the written word is a way of covering up these
negatives. I keep them hidden, tucked away in my filing cabinet upstairs and never
bring them out publicly. I protect myself (1,2).

Joseph’s notion of ‘covering up’ negatives with positive written accounts was in contrast to
other participants who used their journals to reveal and record both positive and negative
aspects of practice.

Mac relied on dialectic encounter to resolve his concerns. Although he agreed to use a journal
during the study he had difficulty meeting this. He did set up a file on his laptop computer
titled ‘My Journal’ but did not make any entries. He explained his reticence by saying he preferred to talk with a close colleague when he wanted to reflect on a situation. He explained how he and this colleague had a mutual arrangement to provide each other with opportunities to explore and reflect on issues related to their practice.

Robert in the office is a very astute person. He can see things very clearly so he’s a good person to talk to. I think about what I think of the situation then talk to Robert and say well this is how I feel, this is what’s happening, this is the way I see it, and then basically we come to a socially constructed agreement on what is actually happening. I do the same for him (I,1).

Sally used a combination of reflective thinking, dialectic encounter and journalling. She found these methods were the most convenient and useful for her. “If it’s not a professional thing I can let off steam at home and no-one knows how angry I was except those who have got me warts and all. If it is professional and I’m wanting to work out some strategies I have two or three mentors outside [the institution]” (I,1). Sally used these reflective strategies to achieve different purposes. “I think and I talk rather than write. I’ll use writing if something is really troubling me. I will sit and write and write and write” (I,1).

Marie also used a mix of reflective strategies: journalling, storytelling and dialectic encounter. She felt they all enhanced her practice and enabled her to stands up for what she valued “I know I can be an advocate if I have to. It’s taking up the challenge ... I’ve got the courage now to express how I’m feeling about a situation” (I,2). Marie also described how she used learning gained by journalling. “I really want to understand so I can feedback information to the patients so I’m beginning to write down the way doctors explain principles and things to me so that I can hopefully decipher it for patients” (I,2).

Meg journalled about “things that are special, things that have happened and things that are horrible” (I,1). She also shared stories about her practice with friends and colleagues. She started a “ward journal” after hearing “the moving stories patients and nurses told one another” (I,1). She was concerned that if these stories were not captured in some way they would be lost along with the potential learning which could occur if they were shared more widely. The ward journal became a place for anyone in the ward to record their stories and to read other peoples’ stories.

Sandy relied on her journal to provide another view of herself and her practice. She used it to
identify tensions, like the conflicting expectations between herself and the institution she worked in regarding post graduate study, and also to detect themes such as feeling responsible for student learning. She also used journalling to organise her thinking.

One of the things I've noticed in reflecting, on looking back at my journals is that I use them at times when there are intense things going on ... the actual writing helped me make some sense of a situation, to get it in concrete form and see it for what it was, to organise my thinking and to see what are issues and what aren't (I,2).

Sandy also believed she benefited from using other reflective strategies such as dialectic encounter and reflective thinking.

While Jerry had the most journalling experience of participants he confessed to being a ‘binge journaller’. During this study he used his electronic journals sparingly and another reflective strategy on a regular basis. He explained: “One of my processes is to think on my feet ... I’m reflecting all the time, in at least three ways. I ask myself - how is this session working, how can I modify my teaching within this context and what are the long term implications for any changes/adjustments I make”? (I,1). Jerry also talked about the tension existing between wanting to make time to reflect and yet needing to survive once the academic year was in full swing. He described this feeling as being “on a treadmill looking for an off ramp”(I,2). He was adamant, however, that when he took time to reflect, his practice and therefore his students benefited.

Addressing Professional Concerns

A number of professional concerns were identified by participants during the course of this study, some shared and some unique to a particular profession or a group of professions. Boundary setting concerned two teachers and an occupational therapist. Process versus product was an issue for an occupational therapist, a teacher and a real estate agent.

Setting Boundaries

Jerry and Sandy questioned their ability to set appropriate boundaries with students. In her first story Sandy recalled how uncomfortable she felt when a student refused to take part in an exercise. “I came away feeling like I had somehow crossed the education/therapy boundary again, feeling really responsible or irresponsible” (I,2). This time Sandy did something about her feelings:

I wrote about it in my journal then [I] discussed [it] with a colleague ... she helped me realise we take too much responsibility for students. She pointed out I had taken four
actions - checked it out, heard the student, worked out a compromise and followed it up afterwards (IJ).

Using the reflective strategies of dialectical encounter and journalling, Sandy decided on three changes she would make if a similar situation arose. “I will be clearer about my reasons for doing it [using the video], how the video will be used and the safety issues involved with doing it” (IJ). She reflected about the boundaries between educational practice and therapeutic relationships and concluded: “I need to stretch their [students] communications comfort zones yet avoid the therapy situation from arising” (IJ).

Shona had similar experiences when she worked with long term clients. One client presented her with the following challenge.

I had difficulty establishing intimacy and long term connections with a client who has anorexia and keeping firm boundaries. The dilemma there is constantly how do you be intimate with someone without them feeling like you’re their friend because you’ve got this boundary, it’s a therapeutic relationship (1,2).

Shona had a student on clinical placement when she worked with this client. She said that although she “usually just knew what boundaries work” (1,2) having to explain what she was doing to this student forced her to articulate what it was that she knew. She also explained to the student how different clients sometimes require different boundary setting approaches. As Shona noted, having to explain this aspect of her practice to a student was useful because “I heard what I actually thought” (I,2).

Jerry found himself in a boundary setting dilemma (S,2) when one student used a discussion session as a platform to express his religious beliefs. Jerry felt responsible for the incident because he had neglected to set guidelines for discussions at the beginning of the academic year. This oversight resulted in a review of the purpose and structure of discussions and was a catalyst for Jerry developing guidelines which set out clear boundaries for class discussions.

In addition to this practice related example, Jerry talked about boundary setting from a theoretical perspective. He explained:

It’s looking at it from that [teaching] sense but also looking at it theoretically, that’s an issue for artists too, constantly to be looking at boundary issues because the artist is often positioned as a marginal type ... I think not to be aware of boundary issues, not to talk about them or deal with them as they arise, would be shooting ourselves in the foot (I,1).

Jerry took these views into the classroom because he believed “students need to know and
understand the effects of asymmetrical power relations” (I,1) which he saw as inextricably linked to boundary issues. He felt an obligation as a educator to raise these issues with his students.

**Balancing Process With Product**

Shona, Joseph and Mac felt *how* something happened, in other words the processes used to achieve a desired outcome, were as important as the outcome itself. They found in their professional contexts of occupational therapy, real estate and teaching there were often mismatches between what was said would happen and what actually took place, an example of what Argyris and Schön (1974) refer to as ‘espoused theories’ versus ‘theories in use’.

Shona accepted that there were different ways of working but felt frustrated when people were not consistent. She explained: “I’m affected at the moment by people I’m currently working with because it seems like they say one thing but do another. If they just said look this is how I am and this is how I work there wouldn’t be the conflict” (I,2). Shona tried to overcome her frustration by focusing on how she reacted to these discrepancies and devised ways to change her reactions. Joseph discovered similar differences between what real estate agents were told in training sessions about maintaining appropriate standards of practice and what actually took place out in the field. Unlike Shona who made personal changes, Joseph became more frustrated.

Mac also became disillusioned when similar situations happened in his department. No matter what strategies Mac and other staff members used to try and alter the situation, nothing changed. Like Shona, Mac had to change how he reacted to the situation instead. He positioned himself in such a way that he was able to transfer to another department during a restructuring exercise.

Striving for acceptable standards of practice in their own professions and witnessing or experiencing unacceptable standards in how other people operated in their workplace concerned these three participants. Of particular concern to all participants in this study was misuse of power in the workplace.
Recognising and Attending to Power Issues

Three indicators of power misuse emerged in this study. Participants talked of feeling powerless, being marginalised and witnessing and experiencing horizontal violence. Participants from nursing, teaching, occupational therapy and real estate professions talked about feeling powerless. Nurses shared their experiences of being marginalised and described how they witnessed and experienced horizontal violence. Nurses also referred to the concept of ‘oppressed group behaviour’ (Roberts, 1983) which is linked to the phenomenon of horizontal violence and they used the terms of ‘being marginalised’ and ‘experiencing horizontal violence’ when they told stories about their practice. Teachers described similar situations but did not use the same language as nurses. One teacher gave an example of what she considered were gender related power inequities. One male teacher described how he thought being male and working in a male way had helped his career. To structure this section I use the categories of: ‘feeling powerless’, ‘being marginalised’ and ‘witnessing and experiencing horizontal violence’.

Feeling powerless

Six participants said there were times when they felt powerless about aspects in their professional lives. These participants came from all four professions involved in the study. When I asked Marie what she thought the most common feelings she had expressed were when she re-visited her journal entries, she identified a particular theme which she described as “just wanting to do more, not being able to, not being able to change the situation. Sort of like feeling powerless or like wishing it could be different, just wishing it could be perfect” (IJE).

Meg experienced times in her practice when she felt powerless to alter the expectations some doctors had about the role of nurses. She described how she perceived the role.

Nurses are not present at a client’s procedure to assist the doctor, to set up his/her trolley, to run around after them. Nurses are present to decrease client anxiety, to have a warm, friendly face, to comfort them, reassure, explain, speak out for the client, be aware of their needs. Not just the procedure needs or medical needs but their spiritual, psychological, cultural and physical needs (IJE).

This experience paralleled Marie’s which she described in her second story. Like Marie, Meg was concerned that the medical model was perceived to be superior to the nursing model. Both Marie and Meg wanted nursing knowledge recognised as different to medical knowledge but equally as important.
Shona described times in her career when she felt powerless because of conflicting philosophies existing between herself and her co-workers. “Differences in philosophies ... that really affects me and I have to work really hard to be positive and do my job” (1,2). Shona devised a range of strategies to help her manage these differences. She pulled back, said no, changed the way she reacted to differences and did more things for herself.

Joseph hit a low period in his career as a real estate agent when he felt powerless to change how some agents in his profession were using “unethical practices” (1,1). He was unable to resolve his discomfort while he remained in this environment.

Sally talked of her difficulties communicating in a male dominated management team environment. She thought there were two factors involved. Firstly she felt some of her difficulties were gender related and secondly she considered that the other team members were resistant to change. “I am part of a management team which is all male apart from me ... I’m finding it quite a struggle ... I said I was finding it difficult at one meeting and it was treated with great mirth” (1,1).

Jerry said he had worked in several educational institutions managed by men concerned with “procedures and traditions (1,1). He found it difficult to go against the status quo in these institutions. However, he devised strategies which enabled him to operate effectively.

You tend to invite obstruction if you ask permission ... If I ask for permission basically I’d be having to convince the people who I was asking for permission that I didn’t like anything about the way they had structured things and I really wanted to turn the whole thing upside down and they would say no.

If I went in saying we should do this, how about it? ... I’m not going to get that other person investing energy in it ... the energy has to come from me. All I need to know is that this person isn’t going to block me and if they are am I prepared to fight because all this going sideways and tinkering isn’t easy. It’s a struggle being ten paces ahead. It’s like chess so what I do is plan ahead and think “this is the big picture”. I know if I present the big picture that person is going to say no. I’m not going to take no so I’ll present a bit first, a bit that seems reasonable but fits within my framework. I know if that bit is agreed to it will provide me with a platform to do the next bit. All the bits have tentacles that reach out all over the place so it’s very difficult for the person to follow the track I have gone down (1,2).

Jerry believed that being male made a difference to how he was treated and influenced what he got away with.

Part of my confidence is that I am male dealing with other men. I know when push
comes to shove I can pull out the most well orchestrated bullying techniques in the world and not be personally invested in them. I can play that game if it's the only option. I will play the game and the other person will come out damaged but they will do what I want. Part of that is because I'm a male. Part of it is also because they are going to respond to me as another male, it's just pulling rank stuff (1,2).

Jerry thought it was harder for women to work in this way. He talked about hearing and reading that “women’s accounts of how they experience the same circumstances is completely different ... they get less support” (1,2).

Feeling powerless significantly affected the way participants conducted their professional lives. While many of them sought ways to overcome these feeling they also noted that when they spoke out against the misuse of power there were ramifications. One consequence was the danger (or freedom) of becoming marginalised.

**Being Marginalised**

Nurse researchers have investigated this phenomenon. Hall, Stevens and Meleis described it as “a concept emerging from a focus on the characteristics, functions and meanings of margins - that is, the borders or edges” (1994, p.24). They explained the ways margins are established: in contrast to a central point, according to the separations they maintain between the internal and external or as a distinction between self and others. These researchers defined marginalisation as “the process through which persons are peripheralised on the basis of their identities, associations, experiences and environments” (1994, p.25).

In this study teachers described their positions as 'on the edge', 'off centre' and 'not mainstream' while nurses used the term 'marginalised'. Jerry deliberately sought marginal spaces to work in. Others like Marie and Meg tried working in a hierarchically controlled environment before taking up marginal positions. Mac also tried to engender change from the centre before he gave up and found alternatives which met his own needs. When he successfully removed himself by transferring to another department his position was still a marginal one but this time he had actively contributed to its construction. Sally found herself marginalised by the hierarchical power structure operating in her department. In her situation authority and control flowed from the centre, that is from the management team.

Nurse participants, Marie and Meg, shared their concerns about what they perceived to be the marginalisation of nurses within the current health sector. Marie expressed her view:
I'm concerned that nurses don't have a political voice and we haven't been grouped together [in recent restructuring into specialised groups]. We're becoming marginalised. I wonder if it's a power thing. Nurses are the biggest sector [in the health system] and we have a lot to say so by separating us more we don’t learn what’s happening in the other areas (I,2).

The recent move to abolish senior nursing positions also concerned Marie. She thought it would diminish, even further, the status of nursing as a profession. “Our senior nursing positions have been made redundant ... expert practitioners are leaving because their only choices are management or education and that’s really sad, sad for the patients” (I,2).

Marie thought nurses had much to contribute but were being denied opportunities to share their knowledge or voice their concerns. She believed that management in the hospital she worked in (for most of this study) did not want to engage in constructive dialogue. “I don’t think they [managers] truly understand how disempowered we feel ... they talk about specialised groups helping to increase communication, let everyone have a say but I don’t actually believe that they want to hear what we have to say (I,2). Marie joined an action group set up for the purpose of uniting nurses. This group gave nurses a public profile and provided support for those experiencing the effects of marginalisation.

Participants differed in the way they viewed their marginal positions. There were differences between female and male teachers and between nurses and teachers. Male teachers, Jerry and Mac, felt they could arrange or change their marginal positions to suit themselves while Sally the female teacher felt she had no control over her marginal position. In addition teachers tended to focus on individual needs, which was different to the way nurses managed their marginalisation. Nurses in this study established a political lobby group, published accounts of their experiences in newspapers and journals, and disseminated information to colleagues.

A difference between Jerry, and the other five participants who talked about feeling powerless, may be linked to the way they perceived power. Jerry had a Foucauldian post-structuralist perspective with power viewed as not only reconstructive but also productive. Rafael says “it [power] is always exercised in relation to resistance and it is at that point of resistance that change is possible” (1996, p.11). Jerry deliberately positioned himself in the margins because he contended, like Foucault, that this was where change was always possible. To some degree Mac also constructed a marginal position for himself, however, he differed from Jerry in that he had previously been in another marginalised position which he did not
feel was of his own making. Marie and Meg also actively worked for change but they were caught in a traditional power environment, described by Toffler (1990) as places where knowledge was taking the place of wealth and violence. They felt unable to promote nursing knowledge in their environments. Shona learned to take better care of herself. Sally wanted to work alongside her male colleagues despite their differences but found herself marginalised because of those differences.

How their marginal positions were established fits the findings of Hall et al (1994). Marie, Meg, Sally and Mac found themselves in contrast to a central point. Jerry deliberatively made a distinction between self and others. Regardless of how an individual becomes marginalised, working in the margins has negative and positive consequences. One negative consequence some participants in this study experienced involved the concept of horizontal violence.

**Witnessing and Experiencing Horizontal Violence**

Practitioners from the nursing profession used the term ‘horizontal violence’ when they talked about aspects of their everyday working lives. Marie described horizontal violence as “a subtle sort of power and control that some people use to make others feel less powerful and not able to reach their potential” (I,2). She gave an example of working in a ward where the Charge Nurse insisted on having total control over the running of the ward.

She set the rules totally, like do observations at this time and everyone who comes in gets this. She reads their reports, she does everything and that shattered me because I thought they’re the nurses in this specialised area so they must have lots of knowledge and skills and yet they didn’t feel empowered to even read their patients notes (I,2).

When I asked Marie why she thought the Charge Nurse worked in this way she responded:

I think she needed to do that because her power was also being taken away. I think she was quite marginalised in what she was doing. I guess the doctors would only go to her which made her feel more powerful that the other nurses but she could have changed that. The doctors also told her off and told her to sort the nurses out if anything went wrong. And I guess she didn’t feel like the nurses any more and really she didn’t want to belong to them because she didn’t think they were as good as she was and yet she could never be as good as the doctors were so she was sort of caught in between (I,2).

Rafael provides one explanation about why some nurses might work in this way. She contends that “nurses, to acquire power, often distance themselves from other nurses and become marginalised” (1996, p.8). She suggests this distancing can take various forms such as valuing some forms of knowledge over others, for example medical knowledge over
nursing knowledge.

Marie and I discussed how this Charge Nurse might be feeling and why she was in this position. Marie told me about Cannetti’s Metaphor of Stings which she said “supports the notion that when people are given commands and are subject to embarrassment, punishment or degradation a ‘sting’ lodges in them. This sting imbeds itself within the person and the only way to be rid of it is to pass it on to someone else” (1,2). Caught between two worlds this Charge Nurse may also be marginalised.

Marie and Meg used rostering as another example of how power can be used in hospitals. In some departments nurses had complete control over rostering. In other departments rosters were used in punitive ways. Both Marie and Meg described situations where Charge Nurses worked in ways they considered inflexible and manipulative. Marie gave the following example:

In some areas you are not allowed to swap [shifts] or you have to go through the Charge Nurse to swap and she can just say ‘no’ without even trying and there’s a lot of power things going on. Even with morning and afternoon teas, like the Charge Nurse might go to lunch with someone but she wouldn’t go with someone else, or it’s “you go to lunch now” and there’s no questioning whether it fits into your care plan for the day (1,2).

Rafael believes power obtained in this way “contributes to professional disunity and lowered individual self esteem” (1996, p.8).

Both nurse participants in this study had experienced autonomous practice environments. They had worked in areas where nurses were valued for their specialised knowledge and skills and treated with respect. They had also worked in environments where power was abused and the contributions of nurses demeaned. The contrast between the two ends of the autonomy/control continuum was particularly distressing for these two participants. Neither felt they could tolerate working in situations where they did not have autonomy of practice. By the end of this study both had left hospital environments and were feeling battered by, and disillusioned with, their experiences in the current health system.

Joseph, while not using the same terminology, witnessed horizontal violence occurring in his profession. He described in his second story how an elderly woman was exploited by an agent who in turn was manipulated by his superior. Jerry experienced episodes of horizontal
violence from his Head of Department until he reached a point where he would no longer accept what was happening and started to “work sideways” (I, 2). Mac gave up battling with his head of Department and focused on his own needs. Shona, with support from her supervisor, found ways to manage a working relationship with a colleague who engaged in behaviour which fits horizontal violence definitions. Sally struggled with her situation but by networking with understanding colleagues she made personal progress.

Sandy was the only participant who did not describe experiences which could be considered to fall into the sub-theme of horizontal violence. She was different to the other participants in several ways: she worked part time, had supportive colleagues within her department and placed herself lower on the Dreyfus and Dreyfus model than any other participant. These factors suggest Sandy was protected to some degree from the volatile cocktail of power and politics as she had not yet reached proficient or expert status, a level where she might be more likely to promote her own views and by doing so come up against various forms of resistance.

Themes Personal to Particular Participants
During this study sub-themes also emerged which were specific to particular participants. Working on ways to increase herself confidence was specific to Sandy. Jerry stressed how anxious he became when two particular circumstances connected with his teaching practice manifested themselves. Discovering a mismatch between her roles and responsibilities concerned Shona.

Building Confidence
Sandy sometimes selected positive teaching experiences she had recorded in her journal to revisit as a way to build up her self confidence. “Friday’s session went really well. I felt at ease and able to work with what came up” (IJE). When she revisited this entry several days later she wrote in the margin “trusting my own knowledge and authority” (IJ). Another example of her increased confidence-in-practice was evident when she wrote, “I am becoming more able to speak my uncomfortable truths to the group” (IJE). This was a change from protecting the students as she tended to do at the beginning of her career. She discovered that the students liked being challenged and did not expect her to be “responsible for fixing everything” (IJE). During this study Sandy exhibited evidence of moving fully into proficient status on the Dreyfus and Dreyfus Skill Acquisition Model because she was able to identify what was important in learning situations, her decision making was less laboured and while
using maxims for guidance she became more confident about her own judgements.

**Feeling Anxious**

When Jerry first began teaching he heard about some research which suggested that teachers, in the first few seconds of entering a classroom, “go through exactly the same stress levels that soldiers did in World War One as they leapt out of the trenches on the charge” (I,1). Jerry certainly found trench talk rife during his early career. He recalled receiving the following advice from another teacher. “Don’t smile before Easter and don’t turn your back on the enemy” (I,1).

Feelings of terror were regular companions for Jerry when he entered the classroom as a novice teacher. He said he now “feels anxious rather than terrified” (1,1) when two particular aspects of his practice present themselves. Firstly when he introduced new material and secondly when he faced a class for the first time. There may be a connection between these situations and the fact that Jerry defined himself as a “control freak” (1,2) for both situations have elements of uncertainty attached to them.

**Working With Unclear Roles And Responsibilities**

Shona found a mismatch between what she was told her job entailed and what she was actually required to do. She was concerned about who was liable if things went wrong.

A lot of people are working in teams like this one and being expected to do more and more, overlap their roles and be mental health workers or whatever. I worry about who is liable if we are disciplined or censured for doing something outside our role because the New Zealand Occupational Therapy Association is trying to focus the occupational therapy role but lots of people are working outside the area because that’s what’s required of them (I,2).

Shona was partly flattered that health management people think occupational therapists are capable of taking on other roles like becoming Duly Authorised Officers (DAO’s) but worried that more and more people were becoming generalists due to the push for a multi-skilled workforce. She thought budgetary, political and current ideological factors were pushing this movement. She accepted that nurses, social workers and occupational therapists had some common skills and overlapped in some areas of practice but contended that “there are different ways of working” and maintained that “occupational therapists are very process driven” (I,2).
One theme in this study was specific to one profession. Nurse practitioners referred to the term ‘oppressed group behaviour’ and gave examples of this behaviour occurring in their workplaces. The phenomenon of ‘oppressed group behaviour’ helps to explain how ‘horizontal violence’ manifests itself. Freire (1972) contends that significant characteristics of oppressed group behaviour are derived from the ability of dominant groups to identify and reinforce the norms and values deemed appropriate for a particular society. The characteristics of subordinate groups are perceived as less desirable. Freire (1972) notes that there is a tendency for both dominant and subordinate groups to internalise the valued norms and rules and to believe that power and control are achieved by assimilating them. Marie’s example of the controlling Charge Nurse fits this perspective.

Feelings of self hatred and low self esteem are recognised characteristics of oppressed group behaviour (Roberts, 1983). These feelings contribute to what Carmichael and Hamilton (1967) describe as ‘submissive aggression syndrome’. The oppressed person feels aggressive but is unable to manifest this in any direct way. Again this description fits Marie’s account of the Charge Nurse who needed to ‘sting’ someone else. As Roberts points out “although there may be much complaining within the oppressed group, self hatred and low self esteem create submissiveness when confronted with the powerful figure” (1983:23). Marie and Meg talked about other nurses whom they also considered fitted this syndrome. Unwilling to draw attention to themselves by joining nurses’ action groups these nurses exhibited behaviours such as unwillingness to share expertise, reluctance to discuss contentious issues and a tendency to want to be invisible.

Fanon (1967) maintains that oppressed people may use pent up aggression within their own group when they become frustrated at not being able to attack or weaken the oppressor which could be why the Charge Nurse in Marie’s story behaved the way she did. Such behaviour may release tension but it can also result in horizontal violence or conflict within oppressed groups. Evidence of internal conflict can then be used as proof that the oppressed person is incapable of autonomous behaviour and self government. Roberts suggests that in reality it “represents a mechanism by which the status quo is maintained through a learned fear of aggression against the oppressor” (1983, p.23). This fear forms the basis of submission to authority. The fear of change, a secondary concern, becomes more pronounced as the process
of oppression continues. Neither Marie nor Meg expressed a fear of change. However, they were both adamant that any change must be beneficial to everyone concerned. In their situation this meant patients, nurses, doctors, managers and administrators. They believed current changes in the health sector favoured managers and doctors and were being implemented at the expense of patients and nurses.

Leadership from within oppressed groups is considered a critical factor for change to occur. Such leadership must be founded on and sustained by continuous dialogue to ensure a successful outcome (Roberts, 1983). Given that senior nursing positions have recently been disestablished, and if leadership can be equated with formal positions, the likelihood of such nurse leaders emerging is diminishing. Marie and Meg believed that abolishing senior nursing positions effectively silenced nurses voices. While it is always difficult for individuals to bring about change to institutional structures, everyone can change aspects of their own practice.

**Bringing About Change in Professional Practice**

In the next section I move my focus to the processes individual participants used to bring about change to practice. In Table Six I present the triggers participants identified prior to making changes, I record what helped and hindered them and I provide a brief description of the processes they used. Using data from Table Six I then identify similarities and differences between participants and across professions.
<table>
<thead>
<tr>
<th>Participant</th>
<th>Triggers</th>
<th>What Helps</th>
<th>What Hinders</th>
<th>Process Used</th>
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<tbody>
<tr>
<td>Marie</td>
<td>• Feeling powerless</td>
<td>• Journaling</td>
<td>• Being fragmented as a group</td>
<td>• Talking over possible strategies with a trusted senior person</td>
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<td>• Talking with colleagues</td>
<td>• Experiencing horizontal violence</td>
<td>• Reflecting on the discussion</td>
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<td>• Telling stories</td>
<td>• Contending with doctor/nurse power relationships</td>
<td>• Deciding on an action</td>
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<td>• Having access to critical thinkers</td>
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<td>• Learning from experience</td>
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<td>• Having role models/mentors</td>
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<td>Meg</td>
<td>• Being concerned about the nursing profession eg conditions, direction</td>
<td>• Journaling</td>
<td>• Experiencing horizontal violence</td>
<td>• Thinking about the situation</td>
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<td></td>
<td>• Feeling disempowered</td>
<td>• Story telling</td>
<td>• Having inadequate support</td>
<td>• Working it through in mind</td>
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<td></td>
<td>• Being fragmented</td>
<td>• Talking with mentors</td>
<td>• Practising without adequate leadership</td>
<td>• Considering long term implications</td>
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<td>Shona</td>
<td>• Feeling frustrated</td>
<td>• Engaging in self talk</td>
<td>• Contending with game playing colleagues</td>
<td>• Looking at all angles</td>
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<td>• Talking with colleagues</td>
<td>• Struggling with budget constraints</td>
<td>• Trusting intuition</td>
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<td>• Valuing experience</td>
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<td>Sandy</td>
<td>• Experiencing a sense of unease</td>
<td>• Having role models</td>
<td>• Lacking confidence</td>
<td>• Putting self care strategies in place</td>
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<td>• Journaling</td>
<td>• Conflicting messages</td>
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<th>Challenges</th>
<th>Strategies</th>
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<td>Joseph</td>
<td>Witnessing the misuse of power, Having a sense of fairness</td>
<td>Engaging in “self-talk”, Writing about it, Enjoying a challenge, Wanting to give the profession a better image</td>
<td>Asking 3 questions, is it physically possible, is it emotionally possible, is it financially possible, Make change if answer is yes to all questions</td>
</tr>
<tr>
<td>Sally</td>
<td>Wanting to constantly improve practice</td>
<td>Creating networks, Having role models/mentors, Journalling, Talking with trusted friends and colleagues</td>
<td>Working in a fragmented department, Experiencing gender related behaviour, Wanting to remain invisible</td>
</tr>
<tr>
<td>Mac</td>
<td>Being bored, Feeling frustrated, Facing a challenge</td>
<td>Working in a team, Having fun, Being autonomous, Using creativity, Teaching enthusiastic students, Meeting challenges, Solving problems, Developing positive collegial relationships, Receiving financial rewards, Working on short term projects</td>
<td>Lacking support, Conflicting expectations, Experiencing mismatches between being listened to and what actually happens</td>
</tr>
<tr>
<td>Jerry</td>
<td>Being blocked, Feeling frustrated, Feeling uncomfortable</td>
<td>Having mentors, Talking with similar minded people, Tinkering with ideas, Working out strategies, Taking risks</td>
<td>Constraining power relations, Asking for permission, Imposing hierarchical structures, Inflexible people</td>
</tr>
</tbody>
</table>
Similarities and Differences

As depicted in Table Six participants had some common triggers and others were specific to individuals. All but one participant implemented change to practice when inner feelings, caused by negative, external situations, reached unacceptable levels. Sally was the exception because her trigger, “wanting to constantly improve her practice”, (I,1) was internal and a positive one. Another participant, Meg had both internal and external triggers. While her negative triggers paralleled the experiences of other participants she also had a positive one, “concern for the nursing profession” (IJE) and this inspired her to work for change at a political level.

Participants had a mix of shared and individual strategies to help them through their change processes. Using reflective strategies and having access to mentors, friends, colleagues, role models and critical thinkers helped all participants. There was a distinction, however, between participants who valued autonomy and those who valued working in supportive team environments. One participant, Mac, thought he could have both by “being autonomous” (I,1) in relation to his department while still “working in a team” (I,1) within that department.

Participants also had shared and individual strategies which hindered their change processes. Feeling fragmented, having conflicting or unclear roles, responsibilities and expectations, and contending with power relationships were shared experiences for the majority of participants. Two female participants said gender inequities were issues for them.

There were also similarities and differences in the processes participants used to bring about change. A range of reflective strategies were evident in all participants’ change processes. However, there were differences. Some individuals engaged in solitary reflection and others involved people in their reflective activities. I also detected differences in participants’ use of language. Some participants used active phrases like “doing it” (Marie, Mac and Jerry) and “jumping in” (Meg) when they described how they implemented changes to practice while others like Sally used passive phrases such as “feeling peaceful if it is right/knowing if it isn’t” (1, 2).

All participants used reflective strategies other than journalling and storytelling. Four additional reflective strategies were used: structured discussion, dialectic encounter, supervision and reflective thinking. Within the reflective strategies used three distinct forms
of reflection were apparent: oral (storytelling, structured discussion, dialectic encounter and formal and informal supervision), cognitive (reflective/critical thinking) and written (journalling).

There were slight variations across professions in the forms of reflection used. Nurses favoured storytelling, journalling and dialectic encounters, (oral and written reflection). The occupational therapist used formal supervision and journalling, (oral and written reflection). One teacher preferred structured discussion and reflective thinking (oral and cognitive reflection), another used journalling and dialectic encounter (written and oral reflection), while the other two used structured discussion, dialectic encounter, reflective thinking and journalling (oral, cognitive and written reflection). The real estate agent focused on dialectic encounter and journalling (oral and written reflection).

These findings suggest a combination of different forms of reflective strategies is helpful. Although journalling (written reflection) and storytelling (oral reflection) were built into the research design of this study they were not sufficient for these participants to implement and support change to professional practice. Dialectic reflection was also needed. It also appears that participants in this study used journalling and storytelling to achieve different purposes. They used individual journals, a private activity, to make sense of aspects or events related to their practice and storytelling, a public activity, to check if their experiences were shared by others. Although personal preference played a role in establishing the degree to which participants either journalled or told stories, the deciding factor was linked to the outcome they required. In the next section I address my second research question which looks at how these two reflective strategies aid reflection.

**How Do Journalling and Storytelling Aid Reflection?**

There were two journalling methods used in this study: individual and collaborative. Participants who used individual journals found the actual process of writing helped them make sense of otherwise fragmented events, feelings and meanings. The collaborative journal served a different purpose. It became a place for participants to write (anonymously) to each other in ways which enabled them to attend to the purposes identified in Table Four. Although writing in this journal was a private activity in that the contributors were unknown to one another, it was also public because of its collaborative nature.
When participants told their professional stories they had often journaled about their experiences first. Storytelling became the public displaying of their private reflections. If, as Van Manen (1990) maintains we measure our thoughtfulness by journaling perhaps by telling stories we display our thoughtfulness for others to comment on and to connect with. By sharing our professional stories we are, to some degree, checking if our experiences parallel the experiences of others. Participants accounts suggest that journaling and storytelling aid reflection in two different ways. Journaling attends to our private need to make sense of our practice world while storytelling enables us to check if what we have experienced matches what other practitioners have discovered. The role reflection plays in the change process, regardless of the forms it takes is now considered.

What is the Role of Reflection during the Process of Change?
When participants read their transcripts they often expressed surprise, and sometimes delight, at the learning or insights they gained by telling a story, reading it later in a transcript, reflecting on why they had chosen to tell that particular story and clarifying its significance in the next interview. Some participants had also journaled about incidents prior to telling their stories. This four stage (five if journaling had occurred) reflective process was used by participants in all four professions. Various aspects of the practitioner: writer, storyteller, reader, philosopher and problem solver appeared to merge thereby creating a state in which change through reflection was possible. The role of reflection in bringing about change in professional practice, was significant in four ways when this process was used. Participants increased self knowledge, advanced practice, identified professional concerns and recognised and attended to power issues.

In addition there were two recurring outcomes. Firstly practitioners demonstrated, in numerous ways, how they transformed ‘tacit knowledge’ into action they could articulate in detail. For example when Shona explained to a student on placement why she worked with particular clients in different ways she found herself “hearing what I know” (1,2). Secondly when participants found themselves working in disharmonious situations and experiencing low professional satisfaction they made reflectively informed decisions to look after themselves. They did this in several ways: putting self care strategies in place, taking a year’s leave, leaving the profession altogether, moving to another department and focussing on areas which increased personal fulfilment. Whatever self care strategies they put in place
participants continued to journal and tell stories about their experiences

Constructs of Empowerment

One topic which participants frequently referred to in their stories and journals involved the concept of power. I used Smith's (1993) Constructs of Empowerment Model to analyse data relevant to this topic because it provided me with an appropriate framework in which to explore such issues. Although Smith (1993) developed and used his model within the context of critical educational research I was able to adapt it for my purpose. I also adapted Smith's (1993) indicators for the three categories of empowerment as self-growth, empowerment as political consciousness and empowerment as collective action/struggle to fit the context of professional practice. My changes are italicised and in brackets.

Empowerment as self-growth

According to Smith "research strategies which empower people within the sphere of self-growth are those which focus on the self-understanding and feelings of worth of individuals" (1993,78). Smith’s indicators of empowerment of self-growth are:
- changes in self knowledge
- increases in self esteem
- strengthening of personal confidence
- growing sense of determination and assertiveness
- the acquisition of specific/work skills.

Empowerment as political consciousness raising

Smith maintains that “research approaches which empower people within the sphere of political consciousness are those concerned with professional growth and participation in education [professional practice] decision making” (1993, p.79). Indicators of empowerment as political consciousness raising according to Smith (1993) are:
- developing scepticism about appearances
- questioning assumptions of neutrality and equality in educational provisions [questioning assumptions of neutrality and equality in professional practice provisions]
- recognising the ‘raced’, classed and gendered nature of the curriculum and schooling [recognising the raced, classed and gendered nature of professional knowledge and education]
- recognising historical and political antecedents to contemporary practices.

**Empowerment as collective action/struggle**

Empowerment at this level requires changes to practices and requires more than a change of beliefs. As Smith asserts “a change in the structures which have significantly conditioned and shaped those beliefs” (1993, p.81) is necessary. Actions designed to change the social matrix are beyond a single individual. Group action is required where people are energised and mobilised, as James (1990) states, to “overcome through political and cultural action, specific oppressive conditions” (cited by Smith, 1993, p.81). Indicators of empowerment as collective action/struggle are:

- authentic participation of the researched in the research; ie the dissolution of the conventional distinction between the researcher and the researched and the incorporation of genuine sharing of perceptions and self-reflections of all participants who have an interest in the outcomes of the research - the development of a shared ideology critique which is integral to subjecting individual and shared understanding to critical review

- a reconstructed and shared theory which forms the basis of a critique of the interests served by contemporary understandings, practice and institutional arrangements

- planning of activities or programmes designed to challenge, resist or transform those conditions which are creating the false consciousness, or alienation, or the oppression of particular groups

- collective strategic action

Using these indicators I devised a table and selected quotations from participants’ interview transcripts to demonstrate where they were in relation to Smith’s (1993) model. Where there were several appropriate quotations I chose ones which best illustrated participants’ positions. I checked my placement of these quotations by seeking input from a cross section of participants, asking a ‘critical friend’ to review my decisions and seeking feedback from my supervisor. I made adjustments as a result of this feedback. In addition I put aside my original attempt to categorise quotations and repeated the same exercise towards the end of the research study. I then compared the two attempts before selecting quotations.
Table Seven: Constructs of Empowerment (Smith, 1993)

<table>
<thead>
<tr>
<th>Participants</th>
<th>Self Growth</th>
<th>Personal/Political Conscious Raising</th>
<th>Collective Action/Struggle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marie</td>
<td>Reading Benner’s work reassured me that it is okay to feel hopeless when moving from one area to another. It gives me the hope and knowledge that I will advance. Clinically with time, experience and reflection.</td>
<td>I’m concerned that nurses haven’t got a political voice. I think nurses have to learn to have a say and that takes time. We have got to know what our practice is first.</td>
<td>I am a member of Nurses in Action a forum where issues are discussed and actions formulated.</td>
</tr>
<tr>
<td>Meg</td>
<td>Maybe I imposed how I thought things should be rather than consider that there might be other ways, other alternatives. Now I listen more and act on what I hear.</td>
<td>I actively promote nursing. I’m very passionate about the professional issues around nursing, about being a professional, about promoting nursing as a profession and not as a vocation.</td>
<td>I initiated an action driven group to have a political voice for health care and nursing. Nurses are good at caring for others but we needed also to care for ourselves so I thought what we need to do is collectively get together and actively do something to nurture the nursing profession.</td>
</tr>
<tr>
<td>Shona</td>
<td>I’m passed caring what everyone else thinks and maybe that is experience</td>
<td>My thinking [about practice] has changed. I am conscious that it has changed and I am able to tell people how it has changed.</td>
<td>I worry that there are a lot of people working in teams like me who are expected to do more and more overlapping of roles. I am questioning who is responsible/liable if we are disciplined for doing something outside our role.</td>
</tr>
<tr>
<td>Sandy</td>
<td>My sense of knowingness is becoming stronger.</td>
<td>It’s been quite useful to have been asked to explain the things I think. … being asked to explain it somehow gives it more validity and credibility.</td>
<td>As a profession we struggle to find ways to articulate what our practice is. This impacts directly on research and the educational process.</td>
</tr>
<tr>
<td>Joseph</td>
<td>I could go through life living in situations, living through them but if I don’t learn something from each of them I’m going nowhere.</td>
<td>I was happy with what I was doing in my practice but I wasn’t happy with what some of the other real estate agents where doing. It was a moral dilemma for me. I think it can only be fixed by legislation.</td>
<td>I am a catalyst for a lot of what happens in our project work. I bring an academic or a philosophical framework to the team. I recognise the value of team work, talking things over, considering what could prevent us achieving what we want.</td>
</tr>
<tr>
<td>Sally</td>
<td>I accept that I don’t always have to be moving forward, that there are times when I can pull back a little and that’s okay</td>
<td>I am much more willing to accept people’s different points of view as I become more practised because it no longer feels threatening to have people challenging me or to disagree with me.</td>
<td></td>
</tr>
<tr>
<td>Mac</td>
<td>I’ve given up apologising for enjoying my work. It’s as though you’ve got to be under pressure, snowed under, hating what you do for it to be a real job and I don’t believe it.</td>
<td>I feel my ideas are listened to. I just don’t feel there is a match between being listened to and what actually happens.</td>
<td>I have cleared spaces in this institutions where I and like-minded people can work to achieve the goals we think are important.</td>
</tr>
<tr>
<td>Jerry</td>
<td>I am a ‘control freak’ in ‘Therapy’. The ‘you can’t let go Jerry’ is the therapist side talking to the control freak side of me. The control freak side says yes I can let that go but I’m not going to let this go. I realise both are necessary.</td>
<td>I think I would invite obstruction if I asked for permission because basically I’d be having to convince the people in power, the people I would have to get permission from that I didn’t like anything about the way they had things structured, that I really wanted to turn the whole thing upside down and they’d say no.</td>
<td></td>
</tr>
</tbody>
</table>
There was evidence from all participants to suggest movements in self growth and personal/political consciousness raising had occurred during this study. However, I was unable to find any data from two participants, one teacher and the real estate agent which met the indicators pertaining to collective action and struggle. There could be several reasons for this difference: the model did not fit these participants’ experiences, they were individually orientated rather than group driven or they were both marginalised in their workplaces to the extent that collective action is impossible.

I also found evidence to suggest a link between where participants were on Smith’s (1993) Empowerment Model and how they approached and managed change. The six participants I placed in the Collective/Action Struggle category approached and managed change by working collectively and being action orientated. The two participants who did not appear to have reached this level yet worked at on an individual basis to bring about make change.

Regardless of where they were in relation to Smith’s (1993) model I do not believe these participants began the study in the state Fay (1987) describes as false consciousness which he maintains prevents enlightenment and empowerment. Rather they acted (or deliberately chose not to act ) when they experienced a range of individual, and highly specific triggers (Table Six). Fay maintains a state of false consciousness is overcome by putting practitioners in situations where they are helped to become enlightened. These participants were using reflective strategies prior to this study. They were already helping themselves to increase their enlightenment possibilities. While the combination of reflective strategies used in the study may have contributed to, or accelerated, the various states of participant empowerment now evident, it is impossible to measure in precise terms what impact participating in the study had for participants. What can stand is the data which is expressed in journal extracts, stories and quotations from interviews. Other practitioners reading this thesis will decide if the experiences, insights and developmental processes described resemble their own and whether the participants’ accounts contributed to the body of knowledge underpinning professional practice. This links back to the notion of transferability which I used as one of my standards of rigour.

Summary
Participants increased their self knowledge, advanced their practice, addressed professional concerns and recognised and attended to power issues. While everyone shared these themes,
other themes of building confidence, feeling anxious, working within unclear roles and responsibilities were personal to particular participants. The theme of witnessing and experiencing oppressed group behaviour was specific to one profession. Six participants made changes to their practice because of negative triggers, one was motivated by negative and positive triggers, and one acted as a result of a positive trigger. Using a combination of reflective strategies and having access to mentors, friends, colleagues, role models and critical thinkers helped all participants. Some individuals engaged in solitary reflection, others involved people in their reflective activities. A four stage reflective process, involving telling a story during an interview, reading it later in a transcript, reflecting on its significance and discussing these reflections in a later interview, proved useful to all participants.

The reflective strategies of journalling and storytelling were found to have quite different roles. Journalling attended to participants' private needs to make sense of their practice experiences. Storytelling attended to participants' need to check whether their experiences match those of other practitioners. Some links were evident between where participants fitted on Smith's (1993) Empowerment Model and how they managed and implemented change. All participants showed movements in self growth and personal/political consciousness. However, two individuals did not appear to fit the collective action/struggle indicators used in this model. While all participants were using reflective strategies prior to being in the study, their participation may have contributed to, or accelerated their current states of empowerment although the extent to which this occurred is impossible to measure. In the final chapter I consider the implications of these findings for professional practice. I also share reflections from my research journal. I conclude by identifying areas for future study.
CHAPTER SIX: CONCLUSIONS

For research knowledge to be useful, people must be able to grasp it (Buchmann, 1983, p.3).

Involving ourselves in research studies to examine our professional lives can be a revealing and often disconcerting experience because we are exploring the very images we hold of ourselves as professionals. What we perceive these images to be may not always match what we find. This being the case it is unlikely that we can emerge from such studies without being changed in some way. This holds true for both researchers and participants. We must also be prepared to experience affective changes when we make cognitive changes involving new ways of working and thinking about our practice. Such possibilities are likely to escalate the more our professional and personal lives are intertwined. As Dadds notes “the more attached we are to our work and the people within it, the more likely that our feelings will be closely implicated in professional self study” (1993, p.287), an observation supported by participants’ experiences in this study. These participants found bringing about change to professional practice had implications for both practice and self.

Implications for Practice
Participants found using reflective strategies to bring about change to practice:

- involved professional risk taking;
- needed a supportive environment;
- called for a range of reflective strategies;
- required an ability to tolerate periods of uncertainty;
- accentuated differences between contexts;
- highlighted inequities.

Implications for Self
As Dadds (1993) maintains there is a definite need to “take human emotions into the professional development equation” for as Harrison (1962) notes “for change to occur the existing network of concepts has to be broken down to some extent in order to be reformed and developed” (cited by Dadds, 1993, p.288). Participants in this study certainly underwent changes which involved a range of emotions and resulted in diverse outcomes. They found using reflective strategies to bring about change to practice had implications for self because the process:
• involved personal risk taking;
• required balancing the ‘need to know’ with the ‘need to defend’;
• necessitated managing emotional outcomes;
• changed personal perspectives;
• increased self knowledge;
• needed a range of self-care strategies.

As researcher, I also underwent professional and personal changes. I increased my knowledge of how professionals learn and what they do to advance their practice, I expanded my appreciation of the power of reflection and I altered my professional developmental goals. On a personal level I found myself examining my life as a whole and exploring possible future directions. These ruminations were captured in my research journal.

**Keeping a Research Journal**

Throughout this study I made regular entries in this journal thereby establishing an auditable account of the research process itself. It also became a holding pen for my thoughts, feelings and fears and was a place I re-visited on many occasions. At the end of the study I discovered it had provided me with a record of development in three ways: as a person, as a researcher and as a professional. I had not been fully aware that it would have such potential at the onset of the study.

Initial entries focused on design, method and process. At this stage my entries were often liberally doused with self doubts, “will I ever be able to make sense of it all” (July 1995). Midway through the research process I noticed a distinct change. I started to challenge ideas that other people had put forward as contributions to the body of knowledge surrounding professional practice. For example I began to question Fay’s (1987) notion of *false consciousness*. Towards the end of the journey my entries focussed on the learning I had gained, particularly in the area of reflection and change management. I discovered other practitioners were also concerned about the direction health and education reform is currently taking in New Zealand and were working individually or collectively for change. I took heart from the way they were managing their concerns and learned from their experiences.

I also became aware of how acutely the process of reading, writing and telling stories about our professional lives highlights inherent complexities. To a certain degree this explains why
we become so absorbed in their construction. Involvement in this study also accentuated the impact change has for us as practitioners when our values and visions do not match those of the power brokers. Reflecting on practice can reveal these differences and may act as a catalyst for initiating change. However, there is a big difference between knowing we need to make changes and actually bringing about those changes. The distance between raised awareness and active transformation is immense. If the possibilities of active transformation are not imagined, however, then that distance remained uncharted. Reflective strategies have a significant role to play in charting these distances. If we are to accurately chart our professional lives, the reflective process, should, as McDrury asserts, “be planned and focus on bringing practice to consciousness so that the experience can be used as the basis for further planning” (1996b, p.45). Using a range of reflective strategies may give us our best chance to ensure that further planning advances both practitioners and the professions they practise in. Practitioners do need to be aware, however, of the personal and professional risks involved when they work towards active transformation.

**Where to from here?**

While I, and the participants, found answers to the questions posed at the beginning of this study, new questions emerged during the research process. They were:

- how can reflection be facilitated in professional practice settings?
- can collaborative journals be used in different forms and for different purposes?
- what is the role of group reflection in professional practice?
- why is the role of dialogue important when we tell our professional stories?

I plan to reflect on these questions as I consider the challenge of possible professional directions. Although captured by the concept of reflection early in my career, I have gained, through involvement in this study, an immense appreciation of its power and potential to put us in touch with, and help us untangle, complex human and professional matters. I have not yet satisfied my need to know more nor my passion to explore the inherent complexities associated with storytelling, journalling and reflection.
Information Sheet: Participants

Telling our Professional Stories

A Research Study by Maxine Alterio

Are you interested in participating in this study?

I would like to interview practitioners about the role reflective mechanisms have in bringing about change in professional practice.

I need to interview practitioners who keep professional journals and would be interested in sharing their story about how they have developed as professionals. Are you interested? Several interviews would be required, each lasting approximately one to one and a half hours. Time and place would be arranged with you.

Please contact me at Otago Polytechnic, telephone number (03) 477 3014 extension 8048, or drop me a note. I can then give you more information. An initial enquiry does not oblige you to take part in this research. It’s your choice. (This research will not proceed until the appropriate research and development, and ethics committees have approved all aspects).
What are the aims of this study?

This study will explore the role reflective mechanisms have in bringing about change in professional practice. I am wanting to find out what it is like for practitioners who keep professional journals to record how they move from novice to expert status.

How will the results be used?

The results of this study will be written in a report which will be available from the Bill Robertson and Otago University Libraries. I will also have copies available for lending and will give “executive summaries” to participants and interested groups. I believe the results will be of interest to practitioners, heads of department and other managers and committees within the professions involved. The results may also be presented in journal articles and at conferences, in New Zealand and overseas.

Who will participate in the research?

I need to interview eight to twelve practitioners from four professions; teaching, nursing, occupational therapy and real estate. I would like to interview practitioners with little professional experience, through to those who have already developed a high level of expertise in their given field.

What will be expected from participants?

Participation will involve at least three interviews, at a time and place convenient to both of us, each of which may last an hour or an hour and a half. Each interview will be transcribed either by me or a clerical assistant. You may ask for the tape-recorder to be turned off at any time during the interview. Apart from the clerical assistant myself and you, no-one else will hear the tapes or see the transcripts, and you will decide if you want the tapes wiped and the transcripts destroyed at the end of the research. I will be using quotations from the interviews in research reports but this will be done in a way that does not identify you. Pseudonyms will be used, unless you particularly want your actual name used. I will not be identifying you to anyone as a participant involved in this research. You may, however, become aware of other participants involved in this study through the people themselves. Your involvement in this research is entirely voluntary and even if you agree to participate, you can withdraw at any time.

Approval for Research

This research will not proceed until the appropriate research and development and ethics committees have approved all aspects. This will include committees from both Otago Polytechnic and the University of Otago.
The Researcher

I am a Staff Development Co-ordinator at Otago Polytechnic. One of my functions is to assist staff improve their teaching practice. I keep a professional journal myself and use reflection to enhance my own professional practice.

What do you do if you are interested in participating?

If you are interested in this research, I will ask you to sign a Consent Form. A copy will be given to you. We will then arrange a time and place for the interviews. I can be contacted by phoning (03) 477 3014 extension 8048, or by leaving a message at extension 8007.

Thank you for considering this research.

Maxine Alterio
CONSENT FORM: PARTICIPANTS

NAME: ____________________________________________

PROFESSION: _______________________________________

POSITION: __________________________________________

I have been fully informed of the research study and AGREE to participate in this research study.

I AGREE to keep an individual professional journal for the duration of this research study.

I AGREE to contribute to a collaborative journal for the duration of this research study.

I CONSENT to having the interviews taped and transcribed.

I UNDERSTAND that:

I may withdraw at any time without penalty.

I have the right to have the tape stopped during any interview.

The transcribers of all tapes will maintain confidentiality.

People acting in a supervisory role for the researcher will have access to the data. Supervisors will maintain confidentiality.

I will be given a copy of any transcript made and have the right to have additions, deletions and alterations made.

I will select extracts from my individual professional journal to be used by the researcher in her final report. I understand that I will retain ownership of my individual professional journal.

I agree to participate in a group discussion to decide ownership of the collaborative journal.

I agree to participate in a group discussion to decide which extracts from the collaborative journal will be used by the researcher in her final report.

I agree to participate in a group discussion to decide who can use what for the purpose of publication and who will be named.

I have the right to decide whether or not my name is used in the report produced.

SIGNATURE: _________________________________________

DATE: _______________________________________________
AGREEMENT FOR USE OF TRANSCRIPT: PARTICIPANTS

NAME: ___________________________________________________________

PROFESSION: _____________________________________________________

POSITION: _________________________________________________________

I have had the opportunity to review and amend this transcript and am satisfied with it in its present form. I consent to the researcher’s use of the transcript for the present study. I understand I will have the opportunity to comment further prior to the publication of the final research report.

SIGNATURE: _______________________________________________________

DATE: ___________________________________________________________
AGREEMENT TO RESEARCH STUDY CONFIDENTIALITY: TRANSCIBERS

I . . . . . . . . . . . . . . . . understand the importance of the confidentiality of the interviews which I have been contracted to transcribe.

I will maintain the confidentiality of all information to which I have access during the transcription of the interviews.

SIGNATURE: _______________________________________

DATE: ______________________________________
Appendix 5

AGREEMENT TO RESEARCH STUDY CONFIDENTIALITY: SUPERVISORS

I understand the importance of the confidentiality of the data gathered for this research study.

I will maintain the confidentiality of all information to which I have access during the transcription of the interviews.

SIGNATURE: ____________________________________________

DATE: ____________________________________________
Appendix 6

Summary of the Dreyfus and Dreyfus (1980) Skill Acquisition Model

Level 1 Novice

- Rigid adherence to taught rules or plans
- Little situational perception
- No discretionary judgement

Level 2 Advanced beginner

- Guidelines for action based on attributes or aspects (aspects are global characteristics of situations recognizable only after some prior experience)
- Situational perception still limited
- All attributes and aspects are treated separately and given equal importance

Level 3 Competent

- Coping with crowdedness
- Now sees what is most important in a situation
- Conscious deliberate planning
- Standardised and routinised procedures

Level 4 Proficient

- Sees situations holistically rather than in terms of aspects
- Sees what is most important in a situation
- Perceives deviations from the normal pattern
- Decision-making less laboured
- Uses maxims for guidance, whose meaning varies according to the situation

Level 5 Expert

- No longer relies on rules, guidelines or maxims
- Intuitive grasp of situations based on deep tacit understanding
- Analytic approaches used only in novel situation or when problems occur
- Vision of what is possible

Adapted by Michael Eraut (1994)
Bibliography


