

# Reflection: a blind spot in psychology?

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Reflection hasn't just had a poor press in psychology. Over the past 60 or so years, it has had almost no press at all. If you examine a typical introductory psychology textbook, you won't find the word 'reflection' in the index.

Yet this was not always the way. The concept of reflection flourished in the days of William James and Sigmund Freud. 2500 years earlier, Buddha had identified self-reflection as the key to self-understanding.

In the last century, it was the growth of behaviourism and experimental psychology, which seems to have sent reflection into exile. The problem was that (i) reflection is a purely internal process, and (ii) is out of reach of the experimenter's best attempts to bring it under experimental control.

It appears in lots of forms and guises - we can reflect on past, present or future; on ourselves, on others, on the world; we can reflect on our experiences; we can reflect on our reflections on our experiences; we can reflect on our reflections on our reflections on our experiences and so on *ad infinitum*. In short, reflection is a behavioural scientist's nightmare - almost impossible to define tightly, and well nigh uncontrollable.

## Reflection and the development of therapist expertise

These unruly features might suggest that reflection is highly deserving of its enforced exile. However, when those of us working in psychology from a scientist-practitioner perspective stop to examine our professional practice, an awkward question arises: we spend our therapy hours, supervision hours and teaching time asking clients, trainees, clinicians - and, when we have time, ourselves - to reflect. Why? On what empirical grounds? Is there anything in the psychology research literature which suggests the value of reflection? The answer is very little.

## SPECIAL ISSUE:

Reflective  
Practice

Reflection  
Practice

My initial interest in the process of reflection was stimulated by personal experience of using reflective processes during my training as a cognitive therapist. Later, I read the observations of Beck (1995), Padesky (1996), and others, suggesting personal experience of cognitive therapy (CT) techniques was one of the best ways to learn about CT. For instance, Padesky (1996: 288) wrote: "To fully understand the process of the therapy, there is no substitute for using cognitive therapy methods on oneself."

At the time, I was designing a university-based CT training course. So a personal experiential component was included, which came to be known as self-practice/self-reflection (SP/SR). In SP/SR, trainees practise CT techniques on themselves, either on their own or with a 'co-therapist'. Following self-practice sessions, trainees reflect in writing on their experiences. Written reflections are central to their learning process, enabling them to look in depth at the implications for themselves, for their clients and for cognitive theory. SP/SR is not designed to be personal therapy; its primary function is as a focused training technique (Bennett-Levy, 2003).

## Outcomes of SP/SR

From the start, research into the impact of SP/SR was undertaken collaboratively with the trainees. Our initial aim was to map the outcomes of SP/SR: how did it impact on trainee skills and knowledge? Later, we became interested in understanding what learning mechanisms could account for its apparent effectiveness.

The outcomes research is reported in Bennett-

Levy (2001, 2003). In brief, we found that SP/SR had a self-reported impact at three levels - conceptual, practical and attitudinal:

1. *Therapeutic understandings*: for instance trainees describe enhanced understanding of the role of therapist and change processes (see Bennett-Levy *et al.*, 2001, for more precise details).
2. *Therapist Skills* (Bennett-Levy *et al.*, 2003): for instance therapists report that they are better at communicating the conceptual framework of CT, and establish a stronger therapeutic bond.
3. *Therapist Self-concept* (Bennett-Levy *et al.*, 2001): for instance trainees report that they have greater belief in CT, having experienced some of its effects internally, and have greater self-confidence as a therapist.

### Process of SP/SR

From a process perspective, trainees were reporting a 'deeper sense of knowing' CT practices as a result of SP/SR. They were suggesting learning was 'deeper' when comparing SP/SR to other training techniques such as didactic learning, or role-plays with simulated clients. To give an example, one trainee commented:

Although I already knew that emotions are a result of our interpretations of events, this situation gave me a good example of that from my own experience. So rather than just 'knowing' about this phenomenon I 'realised' it - the difference between understanding the concept at a head level and gaining an unquestionable, full-bodied experience of understanding.

Qualitative analysis of trainee observations about the learning process indicated that the deeper sense of knowing is arrived at through two quite different modes of information processing: what we termed Experiencing from the Client's Perspective, which is equivalent to SP (self-practice), and Reflecting on Experience, which is equivalent to SR. In study interviews and written reflections, participants were asked to describe these two processes, and the ele-

ments of them which were most important in achieving change. They described the processes quite differently.

The important elements of Experiencing from the Client's Perspective were (1) its personal and emotional nature; (2) its doing/experiencing quality; and (3) the unique perspective afforded by being in the client's chair. For instance, regarding its emotional nature, a typical response was that of one participant who noted that 'it was striking to realise that nearly all of the exercises forced one to access feelings and memories from deeper layers than if one was just thinking on an everyday level'.

On the other hand, the important elements of Reflecting on Experience involved (1) internal cognitive strategies such as persistent self-questioning and following trains of thought; and (2) facilitative environmental supports, such as writing and group reflections. The effect of these strategies and supports was to externalise and objectify experience from a detached analytic perspective - a very different processing mode to the emotional, subjective, experiential nature of Experiencing from the Client's Perspective. For instance, one trainee noted 'SR takes me outside the process of just doing it and makes me think about what I am doing and why I am doing it'. In the language of cognitive science, reflection was providing a metacognitive perspective on trainees' internal processes.

The experiential and reflective processes appeared to contribute separately and additively to the deeper sense of knowing. Self-reflection was therefore central to the subjectively experienced benefits of therapists undertaking SP/SR on themselves as part of their training.

### Accounting for the impact of SP/SR

What theories from experimental psychology could account for the apparent impact of SP/SR? At a stretch, the literature could provide some explanation for why the personal, experiential component of SP/SR was perceived as so valuable. Experimental research indicates that superior recall is obtained from self-referential materials, from emotional materials, and from materials which are enacted (Baddeley, 1997). Hence, it is reasonable to suppose that experiential learning is better retained in memory.

But what about reflection, which participants say is so important? As noted above, experimental psychology has rather little to say on the subject. In contrast, the adult education literature over the past 20 years has persistently emphasized the importance of reflection (Kemmis & McTaggart, 2000; Kolb, 1984; Schön, 1983). It is only now that practitioner disciplines such as education, medicine, nursing and psychology are focusing on processes of training that we can recognise that experimental psychology has had a blind spot for one of the principal modes by which human beings learn and understand things for themselves and about themselves.

### **Reflection and the development of wisdom**

Other research on therapist development has also indicated the key role played by reflection. In particular, studies by Skovholt and colleagues have suggested that continuous professional reflection is what distinguishes expert therapists from average therapists: 'A therapist and a counsellor can have 20 years of experience or one year of experience 20 times. What makes the difference? A key component is reflection' (Skovholt, Rønnestad & Jennings, 1997: 365). Furthermore, social psychological research has shown that the process of self-reflection is central, not only to the development of clinical wisdom, but of life wisdom more generally (Staudinger, 1999).

And what about our clients? Reflective processes appear to be fundamental to our clients' progress in therapy. In all types of therapy, therapists ask clients to reflect on recent and past experiences; to re-evaluate; and to draw new conclusions. Some schools of therapy continue to use the term 'reflection' to describe these processes, while others (e.g. cognitive therapy) use terms such as testing, problem solving, evaluation, and cognitive restructuring, to describe elements of the process.

### **Reflection: a central mechanism in human learning**

Regardless of the precise terms used, the key point is that, for humans, reflection is a central process for learning about the world and ourselves. The

capacity to mentally represent past, present or future events, and to reanalyse, re-evaluate, and find new meanings in them at one day, five years, or 50 years distance from the original event, is one of the cognitive skills that almost certainly distinguishes us from the rest of the animal world (Wheeler, Stuss & Tulving, 1997).

Experimental psychology has given us a variety of learning theories: for instance, classical conditioning, S-R conditioning and social learning theory. But by sending reflection into exile, it has overlooked arguably the most important mechanism by which humans learn from their own experience: self-reflection.

In summary, it is argued that reflection is the blind spot of psychology. A long overdue task is to build psychological models of the reflective process, to identify when and how reflection is most useful and for what outcomes, and to determine the key learning mechanisms. We also need to distinguish between reflection, which has been construed as a positive quality in this article, and processes which at first acquaintance appear similar, but seem to involve very different modes of processing - rumination, self-absorption, and negative self-focus. The latter have all been identified with negative affective states in the research literature (e.g. Sakamoto, 2000).

As psychologists, we need to come to grips with, nurture and promote reflection, and to do the necessary research. Reflection needs to take its place alongside classical and operant conditioning in chapters on human learning in introductory psychology textbooks. In a rapidly changing world, the opportunities for reflection are fast diminishing. Yet if reflection is the primary means through which humans acquire wisdom and expertise, a sophisticated psychology of reflection has never been more needed than now.

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