Reflection and problem/enquiry-based learning: confluences and contradictions

Stefanos Mantzoukas*

In this article I review the historical and philosophical underpinnings of reflection and problem/enquiry-based learning (PBL/EBL). Consequently, I analyse and relate them to the delivery of the nursing curriculum in higher education. From this analysis a series of confluences and contradictions emerge between the two philosophies. Most importantly, an epistemological contradiction is identified in the production, development and assessment of knowledge. Hence, this article concludes to the assumption that reflective and PBL/EBL teaching strategies should not be conflated and be regarded as similar teaching methods. Furthermore, it is argued that the reflective epistemology of learning can seriously be devalued if these contradictions are not realized by nurse educators. Lastly, it is concluded that nurse educators are required to position themselves with regards to their preferred educational epistemology and accordingly deliver their modules. In this way, the aims of each strategy will be best achieved in the nursing curriculum.

Introduction

Reflection has become a keyword in defining the aims and outcomes of the curriculum in higher education and nursing education is no exception to this. The concept of reflection has been widely embraced by the nursing profession and it has been incorporated in the majority of nursing modules. At the same time, the nursing curriculum has moved from traditional teaching styles to more student-centred approaches, such as problem/enquiry based learning (PBL/EBL). These two fundamental alterations in the nursing curriculum have wittingly or unwittingly led to implicit or explicit assumptions that reflection and PBL/EBL can successfully be merged to the point that they can be used interchangeably and eventually create the reflective nurse practitioner.

This paper shares both my personal concerns and part of the literature’s cautions on the taking for granted the notion that reflection and PBL/EBL in higher education

*Archimandriou 60, 45221, Ioannina, Greece. Email: smantzoukas@hotmail.com
are interchangeable concepts, while at the same time underestimating the lurking perils and pitfalls that such an uncritical approach may produce. In the rest of this paper I will analyse the historical and philosophical orientations of both, reflection and PBL/EBL as to unveil areas of confluences and contradictions. Thus, suggesting that while there may be a potential for blending elements of the two teaching and learning strategies, nevertheless there ought to be an awareness of the fundamentally different, if not antithetical, epistemological stances that may pose controversies, limitations and restrictions in the teaching process.

The history of reflection and nursing

It was in the 1980s that higher education pondered upon the potentials of reflection for educating professionals with most eminent the work of Donald Schön. Schön (1983, 1987) in the starkest terms, demonstrated in his writings that formal theories and laws taught at universities were not sufficient for educating professionals and up to a point he considered them counterproductive. Therefore, Schön radically proposed that university education of professional practitioners should refrain from teaching theories and laws in a didactic manner and instead should focus on developing those abilities that would enable students to identify individual problems in complex, uncertain, unique and conflicting situations. Hence, Schön went on to propose the need to restructure tertiary education and suggested that students ought to be facilitated in implementing reflective methods to analyse their unique, complex and conflicting practice situations. This would eventually empower students to frame and name the problematic issues and accordingly confront each problematic issue in a unique and holistic manner (Schön, 1983, 1987).

Schön’s work on reflection has been highly influential for practice-based disciplines, such as nursing. The concept of reflection entered the nursing vocabulary with the transfer of nursing education into the university sector and the introduction of Project 2000 (UKCC, 1986). Furthermore, throughout the 1990s nursing statutory and regulatory bodies have advised and required the development of lifelong learning via the use reflection (ENB, 1994; UKCC, 1997). Following these professional requirements, nursing universities accordingly adjusted their educational curriculum to incorporate and facilitate reflective learning for both pre-registered and post-registered courses (Davies & Sharp, 2001; Hannigan, 2001). The notion of reflection has become essential for the nursing curriculum in the UK and students are in one way or another evaluated and assessed upon their ability and potential to be reflective learners (Jasper, 1999; Davies & Sharp, 2001; Hannigan, 2001; Cadman et al., 2003). The basic premise of nursing education is that individuals do not dispose an inert, unpremeditated and habitual inclination towards reflection, but rather like any other professional activity reflection requires a conscious and intended cultivation in the educational setting (Gelter, 2003). Hence, the intent of the nursing curriculum is to facilitate and allow space for students to rehearse the conscious cognitive activity of transforming experience into a learning situation via reflection.
In summation, reflection for practice professions, as nursing, has become both the subject to be learnt in the curriculum and the object that can be used by students to learn from the curriculum what is required in order to become fit for practice. Following from this, a series of models, learning cycles and frameworks have been developed to tune the student into a reflective mode of thinking and a variety of tools, such as reflective journals or diaries, reflective portfolios, reflective learning contracts, individual reflective supervision and group reflections have been devised to support students in their reflective endeavour (Johns, 1996; Davies & Sharp, 2001; Rolfe et al., 2001). Perhaps the most basic principle underlying these techniques is the anticipation of reflection as a learning process that enables the development of critical thinking and problem solving potentials, which can promote informed, knowledgeable, and safe practice. Eventually, the overall aim is to shift the culture of nursing to a professional disposition established on the systematic and rigorous utilization of reflective practice based on local and contingent knowledge, highly relevant to practitioners, educators and researchers in their everyday practice (Burnard, 1995; Johns & Freshwater, 2005).

The epistemology of reflection in nurse education

The restructure of university education that Schön (1987) made reference to included an epistemological shift that would substitute the positivistic ‘knowing that’ of technical rationality with the ‘knowing how’ of the reflective practicum. Bines (1992) refers to this epistemological shift as the substitution of ‘technocratic education’ of passive transmission of knowledge with ‘post-technocratic education’ where the students actively deconstruct the practice setting and creatively construct their own individual learning. Van Manen (1995) views this educational shift in epistemology as the departure from theoretical and pretheoretical forms of knowledge to knowledge constructed on personal style, intersubjectivity and the potential of doing ‘good’. Lastly, Rolfe et al. (2001) argues for a shift from the traditional learning model where the ‘learner learns about practice, usually from those who profess to know more about it than she does’ (p. 171) towards the ‘experiential learning model’ where the experiential learner predominantly learns from and in practice.

The shift of higher education to a reflective epistemology refers to the process of facilitating students in taking action and doing good through the systematic analysis and interpretation of unique situations and the implementation of emergent (micro)theories to resolve individual and unique cases (Rolfe et al., 2001; Avis & Freshwater, 2006; Rolfe & Gardner, 2006). In simple terms, the reflective epistemology abandons the notion of a single and definitive right answer to professional problems. Instead, students are adequately equipped and empowered to create and construct their own answers for their own problems. Moreover, and possibly more poignant, is that for the reflective epistemology problems never present themselves as well-defined and clearly formed concepts, rather the student (and future practitioner) needs to acquire the knowledge, skill and craft of defining and framing problems.
However, all the above imply that the lecturer as the beholder of ‘correct’ knowledge or of the single ‘right’ answer becomes somewhat an outmoded and suspect value and remains largely redundant (Rolfe et al., 2001; Smythe, 2004). Hence, the core element of reflective epistemology is the decentralization of both knowledge and authority from the lecturer to the students. This epistemological shift in education slips unavoidably in a Lyotardian and Rortyian scepticism with regard to grand theories and true knowledge passed down in a didactic form. If knowledge is created by the individual, as purported by reflection, rather than found or waiting to be discovered, then all types of knowledge can be equally valid and no knowledge has any privileged positioning over any other type of knowledge. Even the knowledge of the lecturer is not privileged over that of the student.

This indeed is a quite remarkable and revolutionary concept, since the students may not only create their own knowledge that may contrast to the knowledge of the educationalist, but at the same time, acquire an inquiring mode with regard to the educationalist’s knowledge. On the other hand, the educationalist has no privileged understanding or delimiting authority, but s/he too is just another inquirer. What the educationalist then can at best hope is to be a fairly competent inquirer as to function as a role model for the student. Thus, demonstrating to the student not the finished product of thought, but the evolving and developing process of thinking and in this way facilitate students to construct, gain access to and critically explore their own experiences and thoughts (Rolfe et al., 2001; Smythe, 2004).

It seems that the reflective epistemology of teaching is simply a further and, in many ways, minor adaptation of Derrida’s concept of deconstruction, where the intent is not to identify the single truth and the absolute or correct knowledge, but to undo the established truths and types of knowledge, revealing in this way their hidden interdependences (Butler, 2003). Reflection in essence deconstructs both theory and experience to unveil the privileged concepts and the central hierarchies in which they are ordered. Furthermore, reflection goes on to suggest that this ordering may not necessarily be the ‘right’ order or the most fitting or even the most likable to the individual. Therefore, each individual wishing to enter into the reflective learning process should use new vocabularies, make experiments, get new responses from situations and finally evaluate these new responses (Romer, 2003).

In this way, reflection subverts the notion of a commonplace to which all human knowledge or experience can arrive. For the reflective epistemology there is no possibility of such a commonplace, which the positivistic paradigm terms as objective, value free and universal knowledge and that is because knowledge cannot by any means represent reality or truth. According to Rorty (1989) ‘sentences can be true, and that human beings make truths by making languages in which to phrase sentences’ (p. 9). Thus, truth or reality in order to become knowledge have to be filtered and consequently actualized by language, but language unavoidably is a human creation and always bears the individual’s understanding or potential to handle it. It is what Derrida succinctly captured in his notorious aside that ‘there is nothing outside the text’, only more text that we use to describe or analyse that to which the texts purport to refer (Butler, 2003).
Hence, shifting tertiary education to a genuine reflective epistemology requires to substitute the concept of ready made knowledge with the liberating and illimitable possibility of creating knowledge. The aspiring objective is not to fill the heads of every student with identical, replicable and ‘factual’ knowledge, but to provide the means and mechanisms for every student to produce their own individual and personal knowledge.

This however, gives rise to a set of complications for tertiary education not least of which is the assessment of the appropriateness and legitimacy of such knowledge. Multiple narratives and subjective interpretations do not lend themselves to the evaluative means of independent standards as required by current academia (Bourner, 2003). Moreover, the a priori explication of learning outcomes by the curriculum is incommensurable with the notion of reflective knowledge. No one should or can predetermine what the outcomes of the individual student narrative will conclude at. This becomes even more emphatic in the work of some reflective scholars who support the notion that reflective knowledge may as well be fictional knowledge and yet qualify as valid and legitimate knowledge (Rolfe, 2002a; Hargreaves, 2004). Furthermore, the redistribution of power and control has also featured in the writings of various authors as a possible hindrance in the implementation of a reflective epistemology (Rolfe et al., 2001; Diekelmann, 2001). Lastly, but certainly not least, reflective knowledge runs a real risk of marginalization and devaluation within the current climate of evidence based practice and that because such knowledge rarely features even at the bottom end of most hierarchies of evidence (Rolfe, 2003).

The history and epistemology of problem/enquiry-based learning

At first reading of the literature on problem-based learning (PBL) and enquiry-based learning (EBL) it appears that these are two different and distinct teaching techniques. However, on a more detailed reading it becomes apparent that they both share the same philosophical orientations and educational intentions, and their differences are a matter of semantics or artificial divisive techniques as to overtly discern the professional boundaries amongst various disciplines (Galsper, 2001; Price, 2001). Long et al. (1999) concur with this view by stating that nursing schools like to profess that ‘clients have needs that must be met rather than problems that need to be solved’ (p. 1744). The latter concept is one that conforms with the biomedical philosophy, whereas the former with the caring philosophy of nursing. In the rest of this article PBL and EBL will be treated as similar teaching techniques, because the intent is to critically discuss their philosophical and historical orientations and their relation to reflection, rather than the semantic variations as they are expressed by the different disciplinary perspectives.

The PBL concept of teaching is usually traced down to the McMaster University School of Medicine in Canada in the mid 1960s. It was at this university that medical educators first made the observation that there was an excess of theoretical content taught to medical students. Moreover and probably more importantly, they observed that these vast volumes of abstract theory were not translated by students into practice.
knowledge and applicable skills in the clinical settings. On the contrary, these large volumes of pre-clinical teaching inhibited students’ sense making capabilities of complex clinical situations and blurred their clinical judgements. Lastly, a notion of incongruence emerged between what was taught and what was eventually required by the curriculum and professional bodies, since the vast amounts of abstract theory did not produce the skilled and fit for practice medical practitioner required at the completion of the course (Morales-Mann & Kaitel, 2001; Price, 2003).

It became apparent to these medical educators that their teaching style had to change and merely delivering great quantities of theory was not sufficient to prepare fit for practice professionals. Therefore, the introduction of PBL aimed at replacing the vast amounts of abstract theory with a series of scenarios drawn from real clinical situations that would be presented to students as problematic cases that would require solving (Wilkie, 2000; Price, 2003). In this way students could rehearse the thought processes that they would undertake, if they were confronted with a live patient, but without actually exposing patients to inexperienced students. The various patient problems were presented in such a way, as to acknowledge students’ learning to date, to fit in with the other subjects of the curriculum and to encourage the development of skills, such as communication, critical thinking and decision-making (Price, 2003). The assumption was that the PBL educational technique would create inquisitive students able to efficiently gather information and to effectively analyse that information to assess problems and eventually, appraise the overall situation to develop a future action plan.

In the 1970s and 1980s PBL spread to a variety of other medical schools and to different continents, such as Europe, USA and Australia. In the 1980s and 1990s practice disciplines, such as law, engineering, education, social care and other health professions were quick to perceive the benefits of employing PBL in the delivery of their courses (Wilkie, 2000). In specific, the nursing profession anticipated that PBL would deal with the identified theory/practice gap and would develop critical and reflective thinkers, good communicators, problem solvers and lifelong learners (Glen, 1995; Biley & Smith, 1999; Blackford & Street, 1999; Wood, 2003; Rees, 2004).

However, nursing, like other health and human disciplines, expanded the concept of PBL from the initial stringent medical orientation by incorporating theories of humanistic psychology, theories of adult learning, experiential learning and deep learning theories (Quinn, 2000; Suhre & Harskamp, 2001). Some departments went even further and changed the name from PBL to EBL to indicate the more sensitive nature of health care practice (Wilkie, 2000; Price, 2003). Hence, in the latter part of the 1990s in the UK a series of modules were developed implementing PBL/EBL methods of teaching (Blackford & Street, 1999; Morales-Mann & Kaitell, 2001; Alexander et al., 2002).

Confluences amongst PBL/EBL and reflection

The underpinning philosophy of PBL/EBL was deemed to be not only desirable for delivering the nursing curriculum, but it also seemed to be compatible with the notion
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of reflection and reflective learning so highly valued by the nursing profession. A series of authors argued the point that PBL/EBL as a teaching and learning technique can develop and enhance the skills of critical reflection (Wilkie, 2000; Williams, 2004; Basile et al., 2003). Hence, it is inferred that reflection and PBL/EBL can harmoniously co-exist in the delivery of the nursing curriculum in higher education.

More importantly, PBL/EBL and reflection are viewed to be very much similar teaching and learning techniques to the point that they may be used interchangeably to imply the same teaching style. They both share the notion of self-directed learning, they both aim at bridging the gap between theories taught at university and practices employed in the ward reality, they both appreciate that the hub of the educational process is the critical thinking student and they both reject the ‘bucket theory’, where the students’ heads are perceived as empty buckets awaiting for the lecturer to fill them with knowledge. Moreover, these commonalities have led to the conviction that PBL/EBL is in some ways nothing more than a further and in some ways better technique for implementing reflection and for developing the reflective practitioner (Cadman et al., 2003; Price, 2003). Therefore, it is viewed by some that reflection can most successfully be taught, learned and evaluated when it is incorporated in the PBL/EBL educational philosophy.

Equally important is the notion that the PBL/EBL philosophy can assist reflection in bypassing some of the critique regarding the validity of reflective knowledge in tertiary education. In particular, it is considered that the PBL/EBL philosophy validates reflection within the organizational demands of higher education. The PBL/EBL strategies, whilst arguing for flexible and self-directing learning, nonetheless remain well structured and organized mechanisms for delivering modules that fit in with the requirements and overall aims of the traditional curriculum (Wood, 2003). The integration of PBL/EBL with the traditional university curriculum is clearly demonstrated by the various PBL/EBL programmes developed in nursing departments, where the aim is to construct scenarios in such a way as to meet the learning requirements of the traditional curriculum (Blackford & Street, 1999; Williams, 1999; Morales-Mann & Kaitell, 2001; Suhre & Harskamp, 2001). In cases, where the PBL/EBL scenarios do not achieve the aims and outcomes of the traditional curriculum, then a series of strategies are undertaken to improve the programme by including more direction in facilitated group work and by increasing the module content to ensure that certain information is covered (Williams, 1999). Overall, it is acknowledged by educationalists that the PBL/EBL philosophy of teaching must have a set of predetermined learning outcomes that need to be achieved if the module is to be successful (Bechtel et al., 1999; Alexander et al., 2002; Rees, 2004).

Thus, for PBL/EBL philosophy there are definitive learning outcomes to be met by the PBL/EBL technique and these outcomes need to be predetermined by the curriculum just as was the case with traditional models of teaching. The fact that module outcomes should be explicitly presented and clearly stated is not something that the PBL/EBL philosophy contests. What is contested is that some of these predetermined and specific outcomes are best achieved if PBL/EBL philosophy is applied, rather
than traditional teaching strategies. Therefore, the majority of nursing schools are implementing hybrid and/or single-strand PBL/EBL modules. These PBL/EBL modules include a series of ‘fixed resource sessions’ (FRS) or ‘parallel resource sessions’ (PRS) that have the format of structured traditional lectures aiming at transmitting and purporting the knowledge that is essential but difficult to grasp by the PBL/EBL format (Wilkie, 2000; Suhre & Harskamp, 2001; Morris & Turnbull, 2004). Furthermore, PBL/EBL is not uniformly implemented throughout the whole programme, but rather is employed within only one module or one year, preferably the last year for students to initially acquire the necessary knowledge passed down by the traditional lecturing format (Wilkie, 2000; Morales-Mann & Kaitell, 2001).

Hence, PBL/EBL philosophy fits well with the requirements of the current curriculum structures that have predefined aims and at the same time as already demonstrated it seems to incorporate to some degree the notion of reflection. Therefore, unlike the reflective epistemology of education that would require the restructuring of the entire educational curriculum, PBL/EBL can become part of the current curriculum structures and satisfy the current requirements of professional bodies of quality control, while at the same time incorporating reflection in delivering modules and potentially developing future reflective practitioners.

Conflicting issues amongst reflective philosophy and PBL/EBL philosophy

The notion that PBL/EBL can incorporate reflection and therefore potentially integrate reflection with current educational strategies and philosophies is an appealing prospect and a persuasive argument for those indoctrinated in the dominant positivistic concept of education. This in a way becomes a technique for bypassing most of the difficulties relating to the validity and credibility of reflective knowledge as viewed by the traditional technocratic curriculum. From a positivistic perspective the PBL/EBL philosophy is viewed as a favourable, valid and authoritative way of producing knowledge. This has to do largely with its close affiliation with the authoritative discipline of medicine and its focus on evidence based approach to solving problems. The very fact that PBL/EBL includes reflection in order to refine the problems in the teaching process and to define what is best evidence has consequently rendered reflection an important and therefore possibly valid aspect of education in the eyes of the dominant positivistic paradigm of teaching.

The problem, however, of coalescing reflective epistemology with the PBL/EBL philosophy is not the dominant positivistic paradigm, but reflective philosophy itself. While it is accepted by the advocates of reflective epistemology that PBL/EBL philosophy shares some commonalities with reflection, nevertheless it is understood to seriously depart in other areas. Most importantly, PBL/EBL educational strategies cannot be viewed as a method for assimilating reflective epistemology in mainstream positivistic models of teaching.

For instance, the PBL/EBL philosophy deviates from the reflective epistemology in the very important issue of problem formation. Reflective writers both inside and outside nursing have argued that the aim of a reflective epistemology is to restructure
the educational process, whereby the learning journey commences not by teaching a series of theoretical propositions, but by forming problems from individual practice experiences (Schön, 1987; Rolfe, 2002b). In fact, it may be argued that one of the most important aspects of reflective epistemology is that of problem identification and problem formation, which in essence has spurred the development of reflective theories and which is known as a process of naming and framing of the problematic situation.

This process of problem formation is something that the current PBL/EBL philosophy does not seem to accommodate for students. PBL/EBL scenarios do not only have well-formed and well-defined problems for students, but at the same time they have well-formed and well-defined solutions which all students will need to arrive at in order for them to successfully complete such a module (Blackford & Street, 1999; Morales-Mann & Kaitell, 2001; Alexander et al., 2002). This however negates from the student the learning potential of identifying the problematic situation, of framing the problem and eventually of constructing a unique solution for the identified problem. Furthermore, students do not construct a unique solution for the problem, but discover the solution the lecturer has already created. This is what Milligan (1999) is arguing when he states that ‘the pre-selection of problems/scenarios/vignettes removes from student an important element of choice process’ (p. 550), which for Biley & Smith (1999) is a way to devalue reflective learning, since ‘the [PBL] process is reduced to a task-orientated approach where the same steps are taken, in the same order, in each scenario, to find the right answer’ (p. 1211).

In other words and from a reflective perspective, the PBL/EBL educational strategy does not develop those skills necessary for identifying and framing clinical problems, but instead students are provided with readymade problems. The creative and self-directed element of shaping problems and constructing solutions is substituted by the task-orientated attempt to follow a series of steps to uncover what the lecturer thinks is the right solution. Hargreaves (2004) concludes her argument on reflection denoting this very notion when she writes ‘what I think students do is learn to produce a narrative that they and their assessors each recognize as a legitimate reflection of an idealized professional scenario’ (p. 201).

The fact that PBL/EBL scenarios include prefabricated knowledge that students should acquire and that educationalists should beforehand clearly explicate in the form of curriculum aims and outcomes contradict the fundamental concepts of reflective epistemology. Indeed, Hargreaves (2004) explicitly points this out, when she states that reflection ‘does not sit comfortably with the alignment model, which is predicated on a degree of certainty and control over the learning experience of the student’ (p. 197). Similarly, Rolfe (2002b) argues that the way reflection has been incorporated in the nursing curriculum in essence has distorted the whole reflective project. He goes on to suggest that ‘reflective practice has lost its way, that it has been reduced from a radical alternative to technical rationality into merely an adjunct to it, a tool to be applied in order to meet the mandatory requirements of nurse education’ (p. 28).
Hence, this contradiction between reflection and PBL/EBL strategies stems from the antithetical philosophical stances that each display with regard to knowledge production. For the reflective epistemology the concepts of truth, knowledge and evidence are not perceived as fixed entities, corresponding to some pre-existing truths and/or realities irrelevant of the human condition and free from their temporal and contextual factors (Lincoln & Guba, 2002; Mantzoukas, 2004). On the contrary, the reflective epistemology is positioned amongst the constructivist and participatory paradigms that view reality and truth as culturally framed, arising from a negotiated agreement between the subjects of a certain community (Lincoln & Guba, 2002). Furthermore, reflective epistemology purports that knowledge derives primarily from activities that have practical (and not theoretical) objectives.

In contrast, the PBL/EBL techniques, in spite of their rhetoric, are positioned amongst the positivist/post-positivist paradigms of knowledge production. The notion of a pre-determined reality and truth encapsulated in objective and correct knowledge formations that can be developed into a set of aims and outcomes to be measured at the end of modules, if acquired by students, has explicit positivist/post-positivist connotations. PBL/EBL is being criticized more and more for paying mere lip service to the process of learning and it is argued that the underlying intention of the PBL/EBL educational strategy is the final product, rather than the process (Biley & Smith, 1999; Milligan, 1999; Rees, 2004). It seems that this criticism has to do with the notion that PBL/EBL remains in line with the positivistic/post-POSITIVISTIC paradigms regarding knowledge formation, knowledge validation and knowledge evaluation. It is just that it has changed the tools for achieving the aims of these paradigms.

Thus, merely incorporating reflection in PBL/EBL nursing modules becomes epistemologically incommensurable, or rather, and more simply, the basic assumption and knowledge claims of the two learning approaches are contradictory and possibly mutually exclusive. Lincoln and Guba (2002) call into question the commensurability of axiomatic opposing paradigms or philosophies and argue that opposing paradigms or philosophies cannot be retrofitted to each other in ways that make the simultaneous practice of both possible. It eventually would lead in one school of thought dominating over the other. This seems to be the case of reflection and PBL/EBL where the radical nature of learning by reflection seems to be dissolved to fit in with the requirements of traditional curriculum aims as they find expression in the PBL/EBL philosophy. Hence, reflection appears to have not only lost its direction, but also lost its status and self-determination (Rolfe, 2002b).

**Conclusion**

What I have argued thus far, then, is that whilst PBL/EBL strategies of teaching in tertiary education include the notion of reflection, nonetheless they conceive reflection as a tool and not as a new epistemology of teaching and learning. In fact, it has been argued in this article that the epistemological orientations of reflection and PBL/EBL are antithetical and up to a point incommensurable. Therefore, it becomes
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incongruent and contradictory for nurse educationalists to assume that because they are using PBL/EBL methods of teaching that they are developing at the same time the reflective practitioner. That is not to say that there are no benefits from implementing PBL/EBL techniques of teaching, but rather that there are no benefits for the development of the reflective capabilities of students.

The realization from nurse educationalists that PBL/EBL and reflection are in essence different techniques of teaching and learning with different epistemological bases and therefore with different goals, will distil both the confusion and the contradictions in their teaching. Seen in this way, educators that anticipate reflection as a unique philosophy of thinking and practicing will be able to pursue a reflective curriculum in which they can achieve their aim of developing reflective practitioners. On the other hand, educators that view PBL/EBL philosophy for teaching as more suitable will not confuse themselves or their students with the epistemological intricacies of the reflective paradigm. Instead, for these educators reflection will be anticipated as a tool or as the means of looking back on what has gone before. In essence, the word reflection in this case could easily be substituted by another term such as that of introspective analysis to indicate the means of reviewing previous knowledge.

Notes on contributors

Stefanos Mantzoukas is Lecturer in Nursing at the Institute of Health and Human Sciences, Thames Valley University. He currently teaches pre-registered and post-registered nursing courses utilizing reflective and enquiry based learning strategies. Stefanos completed his Ph.D. conducting a research on the utilization of reflection in daily ward reality of nurses at the University of Portsmouth, in 2002 and has since published and presented on issues that can promote the use of reflection in nursing practice, nurse research and nurse education.

References


