

## **Beyond reflection dogma**

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### **Abstract**

This paper reports the empirical findings following the innovative group reflections method recommended by Cowan (1998), the surprisingly practical outcomes of the process and of the new realisations of many “forgotten” issues which come to light with this new reading of reflective practice. 114 clinical undergraduate dental students in groups of twelve to sixteen shared reflections with their colleagues on what impacted on their learning during their clinical practice and one clinical facilitator shared reflections with all the students on what impacted on his teaching during their clinical practice sessions. In particular, shared reflections brought to light the need for an additional member of support staff; the case was made to management, and in response to this, a further staff allocation has been made. The group activity contrasted greatly with individual paper based portfolios to encourage reflective practice with which the students were familiar. This is also true for some of the online managed environments for reflective learning that are being currently devised by subject specialists in the profession. There is a current dogma, especially in the health care professions, that reflective practice is an individual activity that largely comprises of incident analysis, carried out alone (RPIIA – reflective practice as individual incident analysis). A check box mentality appears self-perpetuating and cuts off reflection from its academic roots. I describe a whole range of topics which appear to have been conveniently “forgotten”. The rigid clockwise cycle of experience reflection planning and action are often attributed to Kolb (1984), without giving Kolb the credit for adapting the original Lewin cycle. The dynamic across the centre of the circle is forgotten. In a journey around the periphery the focus is upon external events and if assessed, the students’ attempts to please those in authority, rather than the students attempting to identify their own group identity and individual life quest. RPIIA does not fit well with feelings, especially where there has been little inner work to unpack emotions and feelings. There is a danger that the unremitting cycles provide a dogma of order where non-reflective encounters with and ethical response to others is undervalued because it does not fit process. In terms of the novice – beginner – competent creed popular in some literature in associated medical professions “reflection” in this narrow sense is stigmatized as a necessary process for the novice but quite unnecessary for the expert consultant who can intuit what to do. Some of biggest learning points from the Cowan approach, are that to be educational, much is to be gained from dialogue and that some of the most useful reflections are ones that we are willing to share. RPIIA is more likely to produce a compliant student but the Cowan approach may contribute to the well being of an organization fostering some disagreement and controversy no doubt but also cross subjective confirmatory evidence. It is too easily forgotten that useful knowledge is not just packaged information and that learning needs creativity and passion.

## **Introduction**

Reflective practice has generally been described as a psychological lonely affair thinking about what one has apprehended in the outside world. This paper describes a group reflective encounter and the practical unexpected outcomes. Alternative approaches to reaching beyond (RPIIA – Reflective Practice as Individual Incident Analysis) are suggested using group reflective activities whilst advocating also the concepts of personal growth and development of an inner quest.

## **Literature review**

There is a current dogma, especially in the health care professions, that reflective practice is an individual activity that largely comprises of incident analysis (Atkins, 1994; Johns, 1994), carried out alone (RPIIA). For instance a current piloted reflective "e-portfolio" for Dentistry (e-portfolio, 2004) does not stand as a student self-selected offering of materials to occasion a claim to values and objectives but acts as a means of assessment and part self-assessment, and consists mainly as a closely monitored record of activity. A check box mentality appears self-perpetuating and cuts off reflection from its academic roots. Early exponents of reflective practice were attempting to encourage students and lecturers to move from prescriptive learning and ask students to take responsibility for their own learning. Elliot (1976) and Eisner (1979) saw reflection as the icing on the cake, as it were, to the educational process in producing a free thinking "connoisseur". A less prosaic idea about reflection is that it is simply "slowing down our thinking processes to become more aware of how we form our mental models" (Senge et al, 1994). But in RPIIA by tightening and restricting freedom of choice and action, I describe a whole range of topics which appear to have been conveniently "forgotten". The rigid clockwise cycle of experience reflection planning and action are often attributed to Kolb (1984), without giving Kolb the credit for adapting the original Lewin cycle. The dynamic across the centre of the circle is forgotten, the vigorous contrast that can exist set between the opposites, and also the possible harmony and sense of balance that can be achieved. For instance in a situation of "research" learning inquiry there will be a continual grasping towards the concrete and the abstract, whereas clinical practice will make demands for reflection reaching across to active planning (Sweet, 2003). In a journey marked out in RPIIA, just around the periphery of a cycle, the focus can be entirely based upon external events, and if assessed, it will record the students' attempts to please those in authority, rather than the students attempting to identify their own group identity and individual life quest. Whilst a number of professions would equate a high level of ability to reflect on their practice is an admirable aim for expert leaders, there is an interesting anomaly for the professions such as dentistry and dietetics which in particular have been influenced by Chambers (2004) and Chambers et al (2006). They advocate the adoption of the skills based concepts of novice, beginner, proficient and expert (from Dreyfus and Dreyfus, 1986) and transfer them directly and apparently unthinkingly as a pathway for professional development as well. The outcome of using this protocol is an unintuitive situation where "reflection" is stigmatised as a necessary process for the novice and beginner but quite unnecessary for the expert consultant who can intuit what to do. Presumably a good number of consultants are content with not having to take the trouble to reflect and instead take a leap of faith! However, for the student that is put through a course of reflective practice that is not shared or valued by their superiors, there is a danger

that unremitting reflective cycles can provide a dogma of order. Jarvis (1992) warns that "all actions are subject to habitualisation and run the danger of degenerating in to presumption, ritualism and eventually alienation".

The current RPIIA genre of reflective practice does not advocate the strong case for situated learning, where the new environment or situation is the main driver for reflection and subsequent change. Schon's (1963) early work on "displacement of concepts", essentially a situational reflection hypothesis, is currently largely neglected. This early view of Schon's was a reaction to how difficult it is to get people to change their views directly. He discovered that it was easier to change people by moving them to a new situation where their old ideas could not work. They were then willing to modify or displace their old concepts and make changes to their actions and attitudes far more easily, without being directly challenged.

Schon's (1983) later concepts of reflection-in-action and reflection-on-action are well-known. Reflection-on-action, is the most straightforward concept, that of thinking about an event or action after it has occurred. This is what the RPIIA (Reflective Practitioner of Independent Incident Analysis) considers reflection to be and reflection-in-action is neglected. However, have we passed beyond the usefulness of reflection-in-action? Should it be removed or returned into use with greater vigour? Asking "How can one reflect when one is working at something?", Court (1988) says that momentary "times out", which could perhaps be called "reflection-in-action", might better be seen as moments of quick deliberation leading to decision taking: deliberation not reflection-in-action. Heywood (2000) suggests that like a physician we can often be surprised when the evidence is contradictory and/or ambiguous. This is the stage of surprises that causes us to review what has gone before to see how it differs from previous cases. He equates this with Schon's stage of reflection-in-action. But is this a situation of being, for a moment, just conscious of the learning process? Marton and Booth (1997) propose that learning occurs when something is viewed differently. There are also three conceptual candidates in the educational arena that could be seen as instances of reflection-in-action, the first at a micro level and the others at a macro level. First, are the latest "threshold concepts" (Meyer and Land, 2005) with reference to "getting over difficulties in learning" referring to the "lucky ones" who can reflect and the *raison d'être* for the "threshold concepts" enterprise is then to get "the others" to become reflective practitioners skilled at reflection-in-action? Second, can the cry for "constructive alignment" (Biggs, 1999) be seen as a dynamic reflection upon the components of the teaching and learning process so that the whole concept draws itself together in a way that is larger than its constituent parts. The third concept is from the social constructivist school. The reflection-in-action could represent the individual's reaction to enculturation, a preliminary transitory realisation of knowledge and identity. By engaging successfully with the discipline students can make progress through the outer skin of the discipline - or have found a pore or portal as a port of entry. They would meet with surprise as they see the world differently enough to see the outside of the discipline, to find a way in, and make the realisation that they have penetrated the discipline stockade. Bruffee (1993) talks about the importance of peer collaboration so that student groups may develop as intermediary cultures.

RPIIA does not fit well with feelings, especially where there has been little inner work to unpack emotions and feelings. This is where the poverty of a rigid concept of

reflection merely as a rational introspection becomes apparent. Reflection can also be claimed to occur as a response to others in an interpersonal interaction. Heron (1992) values experiential knowledge, which he defines as participation in and resonance with one or more beings, for which Levinas (1991), from a different tradition, says we have an immediate ethical responsibility to act for other persons as we "see their face" on an individual basis. The indoctrinated RPnIIA novice will be trained to follow the cycle around and avoid "non-reflective" (non-reflection-on-action) encounters with this experience of the moment and instead will reflect on the experience and come up with reflected upon propositional knowledge which will result in an ethical response of justice, but without the risk of an intuitive immediate response to an other. This would be undervalued because it does not fit process.

Dialogue is vital to gain feedback from others and this is where debriefing is useful. A debriefing session is held to identify specific problems that occur and the learning needs to be pursued to overcome problems. Debriefing (Ments, 1990) can be used to close the loop and the best reflection takes place at the point of action. This could be in the workplace but commonly in an informal community of practice, and on the Web in particular, affinity spaces (Gee, 2005) have been described where high levels of interaction occur but without complications of membership or fixed status. Action learning is probably the most established group practice method for enhancing the reflection by individuals on the spot in response to questioning (Weinstein, 1999). Forgotten possibilities of group reflection have been brought to the fore by Cowan (1998) as he openly experimented with his students in attempts to resolve difficulties in their learning. Heywood and Biggs agree that Cowan's addition of reflection-for-action is a useful adjunct to Schon's terms reflection-in-action and reflection-on-action. For it is that thrust across the centre of the Kolb cycle diagram from reflection directly for planning that is the primary action of practitioners. Cowan (1998) however, describes a social process, how the main focus of the reflection can be to make public reflections from both teacher and student on what has impacted on their lives at a pre-judgemental level. The immediate value of this is that the activity takes on group energy as the writing is not solely for individual student and vicarious tutor. The degree of "confidentiality" of reflections are made more explicit - they can be set for circulation just within the group or for wider use, especially if the student contributions are anonymised. Possible group reflection modification of the Kolb cycle is presented by Senge (1994) who translates the cycle of individual reflecting, connecting, deciding and doing into the collective cycle he describes of public reflection, shared meaning, joint planning and co-ordinated action, but this is difficult to envisage for anything other than a tightly defined project and further he does admit that in his experience groups often think they can skip stages in the cycle he describes.

One of the most unexploited resources for reflection looks at first sight as a contradiction - that of a group activity where the participants work alone. Ira Progoff researched a group of biographies of creative lives and found that practically each one of them used some sort of reflective journal record keeping. This led to further research on the use of reflective journals in the nineteen sixties with the publication of the Intensive Journal Method in 1975 (Progoff, 1992). Participants in this journal method can initiate their journal by following the book and working alone. Alternatively they can attend a workshop where they also work alone on their journal but have the advantage of a facilitator introducing the various sections of the journal and the positive atmosphere created by non-interfering workshop participants,

working in their own journals. The sections are of a log type for entering data or an exercise type where the logged data is creatively explored and reworked. One advantage of the Intensive Journal is that it does not come with content and is one of the least intrusive journal methodologies so that data is solely that of the individual. The outcome of using the journal can be a comprehensively researched documentation of the inner life of a person as they move through their life-course. It may help that person develop a more robust approach to life that Progoff calls having "inner muscles". Mezirow (1990) indicated that reflection in adults is an inner process and creates change within the person that could result in the transformation of the person. Whilst holding his or her identity the person moves on with a different outlook and a response to events. The Intensive Journal can hold a wide range of reflections, which can include spontaneous elements as reflection-in-action, reflection-on-action and Cowan's reflection-for-action; they can deal with feelings, work, people and life in general. Reflection in depth can invoke "aha" moments, including some like religious experiences that can stand with or without religious beliefs. There are three problems with the depth approach. First is the perceived rather unusual nature of pursuing the inner life quest, which has, in the West, not generally followed a secular reflective route. Second, moments of peace and stillness needed to gain access to inner experience are only too rare and third; it can be time consuming and at times hard work. However, there are few other ways in which reflections drawn from so many quarters can produce a self-balancing approach across time as a resource for living.

#### *Conclusions drawn from the literature*

The literature on reflective practice is very varied and derived from different philosophies. The opportunities for groups of individuals to contribute to an overall reflective issue is of great interest for future developments, which go beyond current reflective practice. The conceptual argument here is that clearly reflection can only be carried out by individuals, but the dogma that a RPNIIA should follow a mandatory cycle of fixed events involving that individual alone is restrictive. With additional suitably directional course materials RPIIA can provide a resource for authority and control that inflicts conformity, rather than the original concepts to which reflective practice espouses: to give the students the impetuosity to take responsibility for their own learning, behaviours and attitude.

A further complication is that the original writings by Schon and Kolb have been selectively plundered in such a way that the original vibrancy and open possibilities have been changed with a stereotyped cycle of reflection; imposed - cast in stone as a truth (Moon, 1999; Hull et al, 1996). RPIIA is usually bolt-on because other educational models do not fit well with it. RPIIA ignores reflection-in-action and keeps firmly to reflection-on-action. Reflection-in-action is something of a tease, summed up by Heywood (2000) as a stage of surprises. But it may be a resource for a number of current educational models destined to improve the student learning experience. Trapped in reflection-on-practice the RPNIIA is unable to deal with acting in the uncertainty of reflection-in-action or take the risk of working with the moment - taking that ethical decision based on the immediate experience as a "Good Samaritan". The RPIIA position is to have to weigh up the pros and cons consider third parties and all that is a considered response instead, to deliver a plan of action at a further stage of the reflective cycle.

The Kolb cycle does not translate to group practice without some difficulty. Some of the most promising developments of moving reflective practice beyond an individual activity can be found where others can give support. Cowan's approach is particularly attractive and effective because it advocates a mutual shared reflections horizontally across faculty and student boundaries and appears to be most effective at resolving matters that involve the group collectively. Action learning provides support for each individual at a time in a small group being questioned by their peers. This appears to be most effective at unravelling personal work matters or projects, but with the additional caveat to act on the reflections. Affinity spaces, which are virtual sites where disparate characters are able to converse about an abiding passion, may again be a useful means of sharing reflections on a very narrow topic of mutual interest. The most demanding and possibly the most productive of ways to take reflective practice beyond its current horizons is journaling. I have described an established paper based system that works particularly well in workshop format. Once the decision has been made to take time out as a retreat, the participants have protected time and space for reflection and the temporary relocation may also contribute to a displacement of concepts.

The RPIIA genre of reflection works about a fixed cycle of processes that occur within a static individual carrying out his work with a focus on the exterior world, mainly the world of work. RPIIA like the skills development concepts of novice, beginner etc. may have a place at the starting block, but should be discarded before the first hurdle! Perhaps rather than just working out from where we are now we should work backwards for what it is we want to achieve and from this select an appropriate model - maybe we want to resolve a specific work issue or be ready to help and respond with a group of colleagues or maybe sits a question of "Know Thyself". A final irony might be that the beyond in "beyond reflection dogma" may be centred within.

### **Research method**

Student evaluation of teaching feedback forms were issued to all students, returned to the university registry by a student monitor and processed to give anonymous results as graphs to closed questions on a Lickert scale and unmodified text on additional open answers. To give a more holistic overview, an innovative group reflections method recommended by Cowan (1998) was utilised. 114 clinical undergraduate dental students in Years 3 and 4 (of a 5 year course) in groups of twelve to sixteen shared reflections with their colleagues on what impacted on their learning during their clinical practice. They wrote down their thoughts at the end of a clinical session towards the end of term and were asked to give their reflections on their clinical skills, what clinical work they had completed and who and what had impacted on their clinical work positively or negatively. Attempts were made here to elicit both analytical and evaluative reflections - what and how well? These groups of students had experienced the start of a new way of group working with a pair of students taking responsibility for running the everyday aspects of the clinic and taking occasional video of interesting clinical cases for debriefing and also experienced the advantages (when it worked) of a new computer appointment booking system for their patients. The hand written comments were typed up by a departmental secretary and circulated to the group. In addition, one clinical facilitator who attended most clinical sessions shared reflections with all the students on what impacted on his teaching

during their clinical practice sessions so that reflections were shared. The results of the three reports were compared and contrasted.

## **Findings and Discussion**

The first section explains what information was obtained from student evaluation of teaching alone. Second, the group reflection exercise entailed asking about issues that had an overall impact on their clinical working. Reflections from a staff facilitator circulated to students leads to an overview of results and discussion.

### *The student evaluation of teaching*

The student evaluation of teaching feedback form concentrated on issues around teaching and included closed questions, about the course content and how well it was organised, how useful the competency requirements in the documentation had proved to be. Questions were asked whether the clinical workload in the course was reasonable and how much clinical facilitation, including that of the students themselves, helped the working of students with patients. The students were then asked about their perceptions of their clinical abilities from helping patients achieve improved oral hygiene to carrying out various operating procedures and how useful debriefing sessions were a useful learning experience. Questions were also directed at obtaining feedback on the academic processes in the course, of the initial brainstorming of the course materials, group presentations as a way of learning, the value of self directed projects directed at helping to communicate with patients better and revision patient scenarios and questions.

Students were also invited to extend their views by responding to the open questions: What were the positive aspects of the teaching? and Do you have any suggestions for improvements? The response was generally positive and focused on issues to do with their perceptions of teaching and learning.

### *Student group reflections*

In the group reflections the students highlighted the new clinical skills they had developed and included the kind of reflections:

I think the most useful thing I've learnt since being on the clinic is how to give oral hygiene instruction to patients. We had never been shown this before and now I can use this on the other clinics as well. Also looking at radiographs has given me more experience in identifying bone levels.

As to facilitation of the clinic they reported some organisational satisfaction but just a few reverted to the usual request to be spoon-fed rather than take responsibility for their own learning:

Most people seem to have patients when they should have. The student presentations have been a very useful way of learning. Students running the clinical sessions seem to be successful. The presentations weren't that useful I thought, I would rather have had lectures, so that I knew that we covered all the information on all the topics we need to know to pass exams and be confident.

It was the impact of having very little nursing support that came up time and time

again:

Non existent, we assisted each other. It is very difficult to find a nurse available to help. At present, just seeing one patient in the morning, it works OK with us assisting each other. I am concerned the clinic organisation will become quite hectic when we see 2 patients each session with no additional nursing support. ...would be good to have one more specifically available to us

Reception work seems a thankless task and unlikely to please everyone:

Today receptionist was very helpful Receptionist lost my patients file on the first session, otherwise I didn't have any troubles. Don't seem to produce accurate information about next appointments. Moody, everything is a bit of an effort. And the computer system used for appointments "Needs some work, some of the appointments are still mixed up."

The findings about group working seemed to indicate how well they worked together:

I like this group everyone seems to get on quite well. ... everyone shared their knowledge with each other. The group gets on well. We all help each other out, and learn from each other. Certain people were more involved than others. Our group works very well together. I feel we are bonded.

*Reflections of staff facilitator circulated to class of students*

The style of teaching that I am trying to develop is based on the idea that it is what the student learns that is of prime importance rather than what is taught by the teacher. This is even truer in the clinical situation where simple answers to fuzzy clinical situations cannot be taught directly...

To be honest, I have found the devolving of the facilitator role testing at times. It is when students individually or in pairs take the initiative themselves; I find that things don't work out exactly as I anticipate, of course... I think that having student facilitators has freed me up with more contact time with individual students assisting their treatment of patients which was not possible before.

Nursing support

It was the early reports back from the student facilitators that alerted me to the fact that we do not have on a regular basis dedicated allocated dental nurses to the student clinic. This has been a feature of the periodontal clinic for many years... I do intend to see if this matter can be resolved to everyone's benefit.

*Comparing feedback forms and reflections*

Shared reflections brought to light the need for an additional member of support staff. The standard feedback form did not deliver this problem as it concentrated on "teaching" and not the overall impact on their clinical working. The value of the shared reflections was that it was able to ask big and more open questions and through the group response, to discover what is the collective view. It was something of a surprise to the staff because the situation had become the norm, in a 40 year old institution and lived with for years. The case was made to management, and in

response to this, a further staff allocation has been made. Apart from positive personnel changes to the clinic the joint reflections also help to create an atmosphere of mutual trust and support between staff and students and an environment for positive change with ancillary support and a new understanding of their value, but with an element of disturbance as ancillary staff find their new extended roles working with students.

## **Conclusions**

Some of the biggest learning points from the Cowan approach, are that to be educational, much is to be gained from dialogue and that some of the most useful reflections are ones that are shared. RPIIA is more likely to produce a compliant student but the Cowan approach may contribute to resolving issues that are important to the whole group and can be resolved collectively and create positive institutional change. Many approaches reviewed are suitable for the short term, however some form of journaling may be a most productive way for an individual to reflect over their life-course and take reflective practice beyond its current horizons.

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