An Exploratory Study of Nurses' Perceptions of their Action Learning Experience

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Abstract

Each year, the College of Nurses of Ontario (CNO) requires all registered nurses and registered practical nurses in Ontario to complete a Reflective Practice learning activity. In doing so, nurses are expected to perform a self-assessment, identify a practice problem or issue, create and implement a personal learning plan, and evaluate the learning and outcomes accomplished. The process and components of CNO's Reflective Practice program are very similar to an Action Learning activity.

The purpose of this qualitative research was to explore the perceptions of 11 nurses who completed at least 1 Action Learning activity. Data analysis of their comments provided insight into their perceptions of the Action Learning experience, perceptions of the negative and positive characteristics of various activities within the Action Learning process, and perceptions of barriers or challenges within this experience. The author concluded that participants perceived their Action Learning activities to be a positive experience because the process focused on practice problems and issues, enhanced thinking about practice problems, and achieved practice-relevant outcomes. However, the results indicated that self-directed learning and journal writing were difficult activities for some participants, and some experienced negative emotional responses during reflection. The research concluded that barriers to implementation of Action Learning include a lack of understanding of the process and a perceived lack of support from employers.
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I am extremely grateful to the 11 nurses who took the time to complete the email interview. This research could never have been accomplished without their willingness to share their perceptions of their learning experiences, including their problems, pitfalls, as well as achievements. I believe that, as professionals, we all have an obligation to give back to our colleagues and fellow professionals. I am certain that the insight gained through this research is the participants’ way of giving back to other nurses. They must remain anonymous, but to each I express my heartfelt thanks as well as the thanks of nurses or other professionals who may benefit from reading this research.

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CHAPTER ONE: INTRODUCTION

This is an exploratory study of nurses’ perceptions of their Action Learning experience. Professionals, including nurses, are expected to engage in ongoing learning opportunities in order to maintain current knowledge and skills. As Cervero (1989) states, “both leaders [of professional groups] and the public have assumed that practitioners would engage in learning throughout their working lives” (p. 513). Action Learning is a process through which individuals identify, learn about, and take action to resolve real-world, practice problems or issues. Thus, this process provides a framework through which professionals may engage in ongoing, active, practice-specific learning.

In contrast, many continuing education learning activities for professionals, such as conferences and workshops, tend to involve participants as passive recipients of learning. These sessions often include more generalized information designed to appeal to a broad range of attendees. Consequently, the learning acquired may not result in a direct and practical application to professionals’ unique practice setting and problems. Action Learning, on the other hand, encourages professionals to engage in an active learning process in which the professional identifies a practice-specific problem, actively learns about the problem, and applies the learning to resolve the practice problem.

The Action Learning process and related activities mirror the annual requirements mandated by the College of Nurses of Ontario’s (CNO) Reflective Practice program. All registered nurses and registered practical nurses in Ontario must (a) identify their learning goals related to a practice issue, (b) complete a learning activity,
and (c) apply their learning to enhance their practice and/or resolve a practice issue. Although there is considerable literature about Action Learning, the objective of this research is to add to this body of knowledge. Specifically, the intent of this research is to acquire insight into nurses’ perceptions of their Action Learning experience, the negative and positive perceptions of their learning activities, as well as perceptions of the barriers and challenges experienced by participants. Ultimately, the research conclusions and practical implications of the research may be of interest to nurses and other professionals and may enhance their implementation of Action Learning and/or the CNO’s Reflective Practice program requirements.

This chapter will describe the background of the study, the background of the problem, and purpose of the study. The researcher’s assumptions will then be stated, and the importance of the study will be summarized. The limitations of the study will be discussed, followed by an outline of the remainder of the study.

Background of the Study

Florence Nightingale is reputed to have said, “Let us never consider ourselves as finished nurses. We must be learning all of our lives” (A. M. Stein, 1998, p. 245). Thus, for nurses, continuous learning has been an expectation from the very beginning of our profession. During the first half of the 1900s, continuing education (CE) programmes were offered by hospitals as a strategy to address the severe nursing shortage, provide practical hands-on learning, fill the “gaps of spotty basic training” (p. 238), and prepare the new graduate to function within the hospital setting. By the mid-1900s, the venue for CE programs gradually moved from a hospital-based setting to educational institutions. At the same time, specialization of nursing roles increased to
the point that, by the 1970s, at least 39 nursing specialty organizations existed, most of which had established certification requirements that included specific initial and ongoing continuing education requirements (p. 249). This created the impetus for the development and provision of specialty-specific continuing education. In this context, continuing education can be viewed as the progression from one level of knowledge to a more advanced level of knowledge, within a specialty area, beyond that obtained within the individual’s basic professional education. However, what also must be acknowledged is that, upon completion of the specialty-based continuing education, the individual is now at the entry-level stage within the specialized practice and additional, practice-based, ongoing learning is still necessary. In addition, the term “continuing education” is used to refer to formal post basic baccalaureate or graduate degree programs. Thus, “continuing education” is used interchangeably to refer to three different learning activities. The term is used to describe (a) post basic specialty-specific courses, (b) baccalaureate or graduate degree programs, or (c) ongoing learning activities that occur throughout a professional’s career.

The rapid increase in knowledge, skills, and new technology has impacted a professional’s ability to maintain current levels of knowledge and, in turn, to translate newly acquired knowledge into practice. Obsolescence is not surprising given that “the half-life of professional knowledge is somewhere between two and five years” (Perry, 1995, p. 767). Nelson (1988) explains that the knowledge of professionals may become obsolete because “part of the knowledge, skills, and attitudes professionals acquired during their academic education ... has been forgotten... some knowledge, skills, and attitudes were never owned, [and] new information, skills, and attitudes have emerged
that the professional has not acquired” (p. 87). L. A. Brown (1988) notes, “the obsolescence of knowledge has been most marked in the professions, [and thus] it is essential for the practitioner to continue learning after initial professional education is complete” (p. 252). According to Brown,

practitioners are not acting in a truly professional manner unless they not only seek to master new knowledge, but also incorporate it into their practice in order to maintain and improve proficiency and provide the best service they can to their clients. (p. 253)

Thus, professionals are expected to continually learn and apply this learning to their practice.

The American Nurses Association describes continuing education as “those professional learning experiences designed to enrich the nurse’s contributions to quality healthcare and his or her pursuit of professional career goals” (A. M. Stein, 1998, p. 4). An interesting observation within this statement is that “continuing education” involves “learning experiences”. Barriball, While, and Norman (1992) explain that “education” implies the provision of courses to the practitioner, while “learning” implies the efforts by the professional to keep abreast of new developments. Learning is an active function of the learner, whereas education can be perceived as the learner in a passive, recipient role. Perhaps the American Medical Association recognized this distinction in the selection of the term “continuing professional development” to denote a “shift in our vocabulary” that recognizes the importance of ongoing professional development rather than continuing education (Wentz & Paulos, 2000, ¶ 3). Without detracting from the importance of the more passive forms of continuing education activities, such as
courses, workshops, and conferences, professionals are encouraged to engage in ongoing, active learning opportunities.

The recognition of the rapid obsolescence of professional knowledge and the need for health care professionals to engage in ongoing, active, practice-based learning raises concerns about the manner in which this occurs. Perhaps this recognition prompted the 1996 revision to the Regulated Health Professionals Act. The change in legislation required each regulated health profession (College) in Ontario to “develop, establish, and maintain programs to assure the quality of the practice of the profession and to promote continuing competence among its members” (CNO, 1993, p. 6). Each professional College (e.g., physicians, nurses, opticians, occupational therapists) however, was free to choose the specific format and requirements of their Quality Assurance program. A survey conducted in 1999 of 21 professional colleges indicates that a variety of strategies have been adopted (CNO, 1999). For example, several Colleges mandate a specific number of continuing education “hours” ranging from 50 hours within 2 years to 90 hours within 3 years. Some Colleges require self-assessment, peer assessment, and/or a professional portfolio, while others require members to maintain a “learning log”.

The College of Nurses of Ontario (CNO), in addition to two other Colleges, requires professionals to develop a “learning plan for the current year... and implement and evaluate the [learning] plan” (CNO, 1998, p. 10). The Reflective Practice model selected by the CNO provides an effective framework through which nurses achieve ongoing professional learning. This begins by the nurse completing the CNO’s self-assessment tool to analyze his or her current nursing knowledge, skills, and competence.
In addition, the College recommends a peer-feedback activity as another self-assessment strategy. The nurse uses the results of the self-assessment and peer feedback in combination with reflection on practice problems and issues to identify a personal learning need. The individual then develops a learning plan, engages in learning activities, and applies the learning to enhance practice and/or resolve the practice issue or problem.

Statement of the Problem

This research evolved from my interest in how nurses engage in active, ongoing professional learning. Through many years as program manager of, and instructor in, an occupational health nursing certificate program, I had an opportunity to observe graduate nurses engaged in speciality-specific continuing education. The breadth of content within these programs and the fact many students had no previous exposure to or understanding of the specialty of occupational health nursing resulted, unfortunately, in teaching methods that were often more didactic in nature. Consequently, students tended to be passive rather than active learners. As an educator, I found this to be a challenge, and efforts to engage students in active learning were met with often disappointing results.

In addition, I taught students enrolled in a distance education post-RN baccalaureate degree program. In contrast, these courses did not include traditional face-to-face classroom learning. Thus, these students were required to become active learners. One of the courses I had the pleasure of teaching (or rather, promoting students’ active learning) within this degree program was a mandatory, two-semester course that required students to complete an Action Learning project. A summary of the
course requirements is included in Appendix B. Briefly, the course required students to (a) identify and reflect on a practice issue, (b) create learning goals and objectives, (c) learn about the practice issue, (d) specify the intended outcomes of their learning, (e) apply the learning to resolve the practice issues, and (f) evaluate the outcomes achieved. As an educator, I derived tremendous enjoyment and satisfaction from teaching this course. The course impressed upon me that the Action Learning process truly promoted and enhanced nurses’ active, practice-relevant learning and that the outcomes achieved were of benefit to the nurse, his or her clients, and ultimately the practice setting.

My interest in Action Learning coincides with my interest in the College of Nurses of Ontario’s (CNO’s) Reflective Practice program requirements because the processes are almost identical. I believe the CNO process provides an effective framework through which nurses are able to engage in practice-relevant learning. I wonder, however, how well nurses understand the process and how effectively they comply with the CNO’s requirements. My personal conviction is that nurses may be more willing to undertake a Reflective Practice activity if they understand the process and recognize the value and benefits of the outcomes that can be achieved. This presumes, however, that nurses (a) clearly understand the Reflective Practice process, (b) are able to implement the process and various component activities, and (c) view the effort involved as enjoyable, worthwhile, and of benefit to their practice. Since 1998, the CNO has conducted numerous information sessions for nurses throughout the province and has published several articles about the Reflective Practice program requirements through the CNO’s journal, “Communique” (now “The Standard”). Thus, information about the program requirements has been readily available to nurses.
Despite this, I wonder whether nurses comprehend and fully implement all requirements of the Reflective Practice program.

A recent conversation with an occupational health nurse illustrates my concerns. This individual proudly stated that she understands and fully complies with the Reflective Practice requirements and indicated that she has completed her Reflective Practice activity for this year. She explained that her supervisor decided that all nursing staff within the Occupational Health Department must work more closely with Infection Control staff and mandated that her staff attend an Infection Control workshop. The nurse attended a Pandemic Preparedness workshop and stated that this was her Reflective Practice learning activity. Unfortunately, several discrepancies between this individual’s activities and the expectations of the College of Nurses of Ontario (CNO) are apparent. In contrast with the CNO’s requirements, a practice issue was not identified through self-assessment and reflection but was mandated by the supervisor. Some infection control topics might have been relevant to this individual if they related to employee health such as potential work-related exposures to infectious agents, new emerging infectious diseases, or prevention of the spread of infectious disease among both staff and clients. This individual’s practice, however, does not include pandemic preparedness. It does not involve pandemic planning activities such as the development and implementation of polices, procedures, or staff training. Thus, the learning activity was not directly relevant to the individual’s practice and the learning achieved could not be directly applied or used to enhance the nurse’s practice. The discrepancy between this individual’s perception of Reflective Practice requirements and CNO expectations
was even more of a concern because this individual is actively involved in professional activities and viewed as a resource, mentor, and role model by her peers.

I suspect the above example is not an isolated instance. Because of my interest in Action Learning and the College of Nurses of Ontario’s (CNO) Reflective Practice process, I often ask nurses whether and how they implement CNO’s requirements. My impression, based on their comments, is that some nurses do not fully understand and comply with the process. Many of the nurses with whom I spoke indicated their compliance on the CNO’s annual license renewal form simply because this is required in order to renew their licence. Some individuals have stated that they hope the College will not audit their compliance, and, if this does happen, they intend to reconstruct a learning activity for the purpose of the audit. My concerns are supported by a small survey within one hospital that determined only 31% of the nurses interviewed (n = 51) fully completed all steps of the learning plan as required by the CNO (Zimmerman, 2001). The problem that prompted this study is that nurses may not fully understand and implement the Reflective Practice process. I wondered whether nurses have difficulties and how they might resolve these difficulties. As an educator, I wondered (a) how nurses engaged in learning about practice issues, (b) how they applied their learning to their practice problem, and (c) how educators might support their learning activities.

Admittedly, this study will not directly enhance nurses’ compliance with the Reflective Practice program. This study may, however, provide some insight into the experiences and perceptions of individuals who have completed a very similar process.
In doing so, the study may illuminate their successes, problems, or difficulties and provide practical implications that may be of benefit to other nurses.

**Purpose of the Study**

The purpose of this exploratory qualitative study was to explore perceptions of individuals who had completed at least one Action Learning activity. An objective within the research was to determine whether the results confirm, extend, or refute the underlying theoretical principles and characteristics of Action Learning. An additional aim of the research was to consider practical and research implications of the research results. This research was not an Action Learning research project per se, but rather the focus of the research was to understand the perceptions of those who had completed an Action Learning process.

The purpose of this research was to explore the perceptions of participants’ Action Learning experience within three broad research questions:

- What were the nurses’ perceptions of their Action Learning experiences?
- What were their negative and positive perceptions of learning activities within the Action Learning process?
- What were their perceptions of the barriers and challenges experienced by participants?

**Theoretical Framework of the Study**

This study utilized the theoretical framework of Action Learning as a process through which professionals are able to engage in practice-based learning. The Action Learning process involves (a) identifying, through reflection, a practice problem, (b) learning about the problem, and (c) applying the learning to resolve the problem.
Andragogical, communicative, constructivist, and situated learning theory provide the theoretical underpinnings of Action Learning. These theoretical principles were considered in the design, the interview questions, and formed the basis of data analysis especially related to participants' motivation to identify and learn about practice-relevant problems and their ability to self-direct their own learning. Similarly, reflection and journaling are key components of the Action Learning process, and interview questions and data analysis focused on participants' use and perceptions of these activities.

Scope of the Study

The scope of this study can be viewed as an inverted triangle in which the focus becomes increasingly more narrow and specific (see Figure 1). The broad upper surface of the triangle is the expectation that all professionals engage in ongoing, practice-relevant learning. Within this level are all members of a profession (e.g., educators, lawyers, engineers, clergy, architects, physicians, and other health care professionals such as occupational therapists) who are expected to engage in ongoing practice-relevant learning. Beneath this layer are the 114,130 registered nurses and registered practical nurses who are members of the College of Nurses of Ontario (CNO) and are required to comply with the CNO's Reflective Practice requirements. The scope of this research study is located at the narrow base of the triangle and is restricted to 11 registered nurses who were obligated to complete an Action Learning activity, similar to the CNO's Reflective Practice requirement, as a mandated course within a baccalaureate degree program.
All professionals expected to engage in ongoing practice-relevant learning

114,130 nurses expected to annually comply with College of Nurses of Ontario’s Reflective Practice Requirement

11 registered nurses’ mandated Action Learning activity

Source: Jane Lemke

Figure 1. Scope of research study.
Rationale for the Study

Prior to commencing this study, I acquired a wealth of literature that provided ample examples of the use and benefits of Action Learning and Action Research (a related process). When viewed in relationship to the scope of this research study, much is known about the ways in which various professionals utilize this process to explore, learn about, and resolve practice issues. For example, numerous authors (Bevevino & Snodgrass, 2000; Flake, Kuhs, Donnelly, & Ebert, 1995; Fueyo & Koorland, 1997; Ghaye & Ghaye, 1998; Goldston & Shroyer, 2000; Silins, 2000; Squire & Barkins, 1999; Whitehead, 1998; Yost, Sentner, & Forlenza-Bailey, 2000; Yuen & Cheng, 2000; Zeichner & Liston, 1996) described the benefits of Action Learning to enhance an aspect of their teaching. Keating, Diaz-Greenberg, Baldwin, and Thousand (1998) and Sax and Fisher (2001) used the process to enhance teacher preparation. Bourner, Cooper, and France (2000) described the usefulness of Action Learning within a university community, and Glanz (1999) used the process to explore and learn about problems experienced by school administrators.

Bowerman and Peters (1999), De Loo and Verstegen (2001), Lankard (1995), Livesey and Challender (2002), and Peters (1996) described the usefulness of Action Learning as an organizational learning strategy. Similarly, Action Learning was used by occupational therapists (Cockburn & Trentham, 2002), marriage counsellors (Small, 1995), and social workers (Waterson, 2000) as a strategy to reflect upon, learn about and resolve practice issues.

Finally, many nurses (Cameron, Hayes, & Wren, 2000; Galvin et al., 1999; Kelly and Simpson, 2001; Ryan & Chambers, 2000; Webster, 2001) described their use
of Action Learning as a strategy to reflect upon, learn about, and enhance an aspect of their practice.

Of specific interest relevant to this study is the use of the Reflective Practice process by Ontario nurses. A study conducted by the College of Nurses of Ontario (2000) surveyed 2,500 nurses to validate participation in Reflective Practice and to obtain feedback on the benefits and effectiveness of participating in the program. The CNO results indicated that 69.8% of respondents believed the Reflective Practice program to be effective in enhancing the quality of practice (CNO, 2001). According to the CNO, the findings demonstrate an impressive belief in the Reflective Practice program among nurses. The fact that almost 70% “believe” in the process may appear extremely impressive, however; 100% of Ontario nurses are expected to comply with the process. When viewed from a different perspective, almost 30% of nurses in the province may not fully “believe” in the Reflective Practice process. As I reviewed the results of the CNO’s survey, several questions emerged. I wondered whether nurses’ “belief” in the Reflective Practice process directly translated into their compliance with CNO requirements. I further pondered the manner in which nurses engaged in the Reflective Practice process and whether they experienced difficulties or challenges. I noted that much of the literature I had acquired described the process and outcomes of Reflective Practice, Action Learning, and Action Research typically in the form of case studies or research reports that described and quantified the outcomes of the activity. I was unable to locate in-depth qualitative research reports that explored professionals’ personal Action Learning experiences and the problems, difficulties, and challenges they experienced. I realized that I had acquired considerable insight into the
experiences of almost 400 registered nurse students through the 8 years in which I taught two semesters per year of an Action Learning course. The apex of the scope and the rationale for this study became readily apparent. I decided that a qualitative research study of students' Action Learning experiences and perceptions may provide some insight and understanding that might begin to fill a gap in our knowledge of professionals' perceptions, challenges, and problems experienced within the Action Learning process.

Importance of the Study

This research is important because the research conclusions may enhance the body of knowledge pertaining to active, practice-based, continuous learning activities for nurses. The expectation of the public and the College of Nurses of Ontario is that nurses maintain and continuously enhance their knowledge and skills and, as a result, provide competent, knowledgeable care. Ongoing professional learning, therefore, is of critical importance to the professional and ultimately his or her clients. The process through which the learning is acquired is therefore equally important. The Action Learning process provides a framework through which professionals are able to identify, learn about, and resolve practice-specific problems and issues. Thus, the perspectives of nurses who have completed an Action Learning activity may yield practical implications for other nurses' ongoing, practice-based learning and may help them to fulfil the College of Nurses of Ontario's Reflective Practice program requirements.

Limitations of the Study

Several characteristics of this study imposed unavoidable limitations to the research methods and data collection process. These can be summarized under three
major areas: (a) characteristics of the sample, (b) the interview method, and (c) the a priori assumptions of the researcher. The sample for this study was both small and homogeneous, and thus the findings cannot represent the larger population of nurses. Data collection involved an email interview that imposed a limitation of contact with participants and restricted the use of probing questions that are typical of face-to-face interviews. Furthermore, the lack of face-to-face contact with participants prevented the researcher from discerning any facial or body "language" that might promote understanding of participants' comments and experiences. The relatively short and focussed contact with participants reduced understanding of insight into the real world of the participants. As a nurse and educator, I have preconceived beliefs about ongoing professional learning. Realizing this, however, I have endeavoured to analyze and present the data in an objective, unbiased manner. This research is in partial fulfilment of a Master of Education degree and thus is limited in scope and duration. This research is the culmination of the researcher's course work within the Master of Education degree that has included a focus on ongoing professional learning.

This study was a qualitative study and exploratory in nature. The results were, therefore, tentative, and no claims for representativeness beyond this research setting were implied or made. It was expected that this research would capture broad categories and themes and that additional research will be needed to understand practice-based professional learning within an Action Learning format.

Researcher Assumptions

Lincoln and Guba (1985) state, "we need to recognize that objectivity in its pure form is an unattainable state" (p. 108). They add that naturalistic inquiry is "value-
bound” and “cannot be value-free” (p. 174), that “it is influenced by the values of the inquirer” (p. 161), and “it behaves the investigator...to make explicit account of values [including the] personal values of the inquirer” (p. 174). Consistent with this statement, disclosure of my personal values and beliefs relevant to the focus of this research is therefore both an expectation and requirement.

I believe that all professionals have an obligation to engage in learning activities, relevant to their practice throughout their entire career. Thus, I believe that a professional cannot claim to “know it all” or claim to have no need for new learning. However, I suspect that some nurses (and other professionals as well) may not engage in meaningful, practice-related learning activities on a continuing basis.

I believe that nurses may not fully appreciate the merits of the Reflective Practice process because they either have not engaged in the process or have done so in an ineffective or incomplete manner. I believe nurses need to understand more than the framework of the process, but need to become knowledgeable of and able to perform the various activities within the process.

Outline of the Remainder of the Document

Chapter Two will review the literature related to the theoretical underpinnings of Action Learning as well as a discussion of several important characteristics of the Action Learning process. Chapter Three will describe the research methodology including research design, selection of participants, data collection and analysis strategies, methods to promote the trustworthiness of the research, as well as pertinent ethical considerations. Chapter Four will present the findings of the research, and Chapter Five will (a) discuss the research results, (b) relate these to Action Learning
theory and characteristics, (c) present the practical implications of the research, and (d) suggest recommendations for further research.
CHAPTER TWO: REVIEW OF LITERATURE

An expectation of any member of a profession is that the individual be knowledgeable, capable, and competent. This expectation becomes problematic if the individual professional has not engaged in ongoing learning activities in order to remain current and acquire new knowledge, skills, and competencies. The College of Nurses of Ontario (CNO; 1998) "believes...the process of continuous learning...is of paramount importance in maintaining and improving competence" (p. i). The CNO's Reflective Practice Program requires nurses to "engage in reflective practice and continuing improvement opportunities" (p. 1) in order to "improve the quality of his or her dimension of practice" (p. 2). The Reflective Practice program adopted by the College of Nurses of Ontario is clearly aligned and consistent with the Action Learning process. Thus, the insight acquired through a literature review of the theoretical principles embedding in Action Learning and key characteristics of the process has relevance to understanding the CNO's Reflective Practice program. Both the CNO's Reflective Practice program and the Action Learning process provide a framework through which nurses and other professionals can engage in reflection and practice-based learning with the intent of resolving a practice issue. The following literature review will briefly present an overview of Reflective Practice, specifically related to nurses, followed by a discussion of the theoretical principles that are embedded in Action Learning as well as key characteristics of the Action Learning process.

Reflective Practice

Our understanding of reflective practice evolves through the writings of Dewey (1933), Freire (1996), and Mezirow (1991); however, the importance of professionals
becoming reflective practitioners owes much to the writings of Schön (1983, 1987). According to Schön (1983), reflection involves both reflection-in-action (mental activities at the time of event in need of an immediate resolution) and reflection-on-action (thinking that follows an event in order to solve a practice issue, problem or difficulty). Reflective Practice in the context of this study refers to reflection-on-action that involves a “deliberate process of thinking about and interpreting experience in order to learn from it” (Atkins & Murphy, 1995, ¶ 6). According to Atkins and Murphy (1993), the Reflective Practice process involves three stages: (a) an awareness that one’s present knowledge does not sufficiently explain current events, (b) critical analysis of and learning about the situation, and (c) the development of a new perspective on the situation.

Campbell and Mackay (2001) indicate that among Canadian Regulated Health Care Professional Colleges, 12 different approaches are used as requirements for their professionals to maintain licensure, including various approaches to mandated continuing education. A unique approach selected by the College of Nurses of Ontario is a “professional development system...[that is] learner-focussed, self-directed and experiential” (Campbell & Mackay, ¶ 9). The College of Nurses of Ontario (CNO) (2000) describes Reflective Practice as a formal process that helps nurses maintain their competence by continually reflecting upon, learning about, and improving their practice. This process begins with an assessment of the nurse’s current practice, using the CNO’s Self-Assessment Tool and other standards, guidelines, or expectations relevant to the individual’s practice. The self-assessment, in combination with reflection, is then used
to identify a practice issue or problem. A learning plan is created to "identify what you need to learn, how you will know when you have learned it, what activities you will use to learn and by when" (Witmer, 1998, p. 3). The nurse then implements the learning plan and determines "how you have used it to make your practice even better" (p. 3). The Reflective Practice process mirrors the Action Learning process, and thus the theoretical underpinnings and key characteristics of the Action Learning process are directly relevant to the CNO’s Reflective Practice program requirements.

Brief descriptions of three small research studies serve to illustrate the use of the Reflective Practice to achieve positive outcomes for nurses. Smith’s (1998) qualitative research study (n = 25) concluded that the Reflective Practice process promoted an integration of practice experience and academic knowledge that resulted in a reassessment of old perspectives and assumptions. The aim of Paget’s (2001) research was to determine whether Reflective Practice resulted in practice outcomes. His study concluded that the majority of respondents (84%, n = 72) viewed Reflective Practice as either useful or very useful (¶ 25) because the process resulted in significant, specific practice changes (¶ 29). In addition, the practice changes were seen as "long-term and possibly permanent by most...thus ruling out any short term effect" (¶ 31). A small study (n = 6) by J.Bailey (1995) concluded that Reflective Practice resulted in both micro (personal changes) and macro (changes to shift patterns) changes.

In addition, numerous anecdotal reports support the value of reflective practice for staff nurses (Bailey, 1995; Kim 1999; Kuiper, 2002; Waterworth 1995), nurse administrators and supervisors (Gilbert, 2001; Maggs & Biley, 2000; Schmieding, 1999),
and nurse educators (Burnard, 1995; Chambers, 1999; Hannigan, 2001; Platzer, Blake, & Ashford, 2000; Richardson & Maltby, 1995; Scanlon & Chernomas, 1997). The College of Nurses of Ontario’s (CNO’s) Reflective Practice program requirements are well supported by professional literature, nursing research, and anecdotal reports of nurses’ use of the process. As stated, the CNO’s Reflective Practice program is strikingly similar to the Action Learning process. The remainder of this literature review will discuss the theoretical underpinnings of Action Learning as well as key characteristics of this process.

Action Learning

Marsick and O’Neil (1999) indicate that the term Action Learning is in danger of becoming a “buzz word” that means everything and thus nothing. An understanding of meaning of Action Learning and the way the process is implemented is therefore important. Action Learning is succinctly described as “a systematic process through which individuals learn by doing” (Lankard, 1995, ¶2). Numerous and more detailed definitions have been suggested for Action Learning; however, within these various definitions, several commonalities can be identified. A fundamental characteristic of Action Learning is that the focus begins with an awareness of real-life tasks (Revans, 1998) and real work issues, problems, and opportunities (Webster, 2001). These problems must be significant and meaningful to the individuals involved (Koo, 1999) and often cannot be solved overnight (Marsick, 1990). Boud (1986) indicates that learning always starts with a problem posed. Within the Action Learning model, reflection serves to create an initial awareness of a problem or issue (a problem posed)
and prompts the individual to explore and understand the characteristics of the problem. Learning about the problem includes a combination of review of existing knowledge, the acquisition of additional relevant knowledge, and questioning insight (Koo; Marsick). Ultimately, the Action Learning process should accomplish two types of outcomes. As McNiff and Whitehead (2002) state, the process includes “a change in thinking as well as a change in action” (p. 42). As Spence (1998) notes, “individual development is as important as finding the solution to the problem” (p. 1). However, learning is not simply the act of acquiring knowledge or skill but also includes the transfer of learning and insight in order to do something differently (Johnson, 1998). As Morton-Cooper (2000) states, “an important caveat is that [the process] begins with the stated intention of improving practice (p. 9). In summary, the Action Learning process involves (a) identifying, through reflection, a practice problem, (b) learning about the problem, and (c) applying the learning to resolve the problem.

As indicated above, Action Learning results in outcomes that benefit both the individual and the practice setting; however, the process is not without potential challenges and difficulties. One difficulty, highlighted by Silins’ (2000) research, is that many individuals are not well informed about the Action Learning process (p. 9). Similarly, many individuals often experience difficulties knowing “what to learn, how to locate and use resources, and how to evaluate their learning” (I. Taylor & Burgess, 1995, p. 94). The time required to complete an Action Learning activity is often cited as a challenge, since one project might require 4 to 6 months of work (Marsick, 1990; Spence, 1998). Similarly, the time required for reflection and journaling is often
described as a difficulty for some individuals (Guglielmino et al., 2005; Hancock, 1999; Peterson & Jones, 2001; Pierson, 1998). Other potential barriers include lack of access or inadequate human or material resources, spouse and family demands, technical difficulties associated with computer use, and changes in Action Learning project goals or priorities (Guglielmino et al.). A learning activity prior to an Action Learning activity may be needed to promote an understanding of the Action Learning process and related activities, identify potential problems and difficulties, and suggest strategies to resolve these.

Theoretical Principles of Action Learning

A large body of literature is available that describes the theoretical principles that are embedded in Action Learning. An in depth discussion of these theoretical principles is beyond the scope of this literature review. Table 1 briefly identifies four theoretical principles of Action Learning in order to give the reader a basic understanding of key theoretical concepts. Each principle will then be elaborated upon utilizing relevant literature.

Andragogy.

Since 1900, educators have focussed on differentiating between pedagogy (the art and science of teaching children) and andragogy (the art and science of teaching adults) (Knowles, 1982). A principle of andragogy is that adults possess a problem-centred orientation to learning (Knowles, 1975) and thus seek learning activities “in order to cope more effectively with real-life tasks or problems” (Cranton, 1989, p.7). Thus, an adult’s learning should be relevant to the individual’s environment
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<th>Theoretical Principles of Action Learning</th>
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<tr>
<td>Andragogy</td>
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<td>Characteristics of andragogy include an emphasis on the individual adult’s environment and experience, the strength of his or her motivation to participate, the individual’s degree of control over learning activities, the value of group-based learning, and the congruence between participation and anticipated outcomes. (Cross, 1986).</td>
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<td>Communicative learning</td>
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<td>Learning is enhanced through communication with others. Through dialogue with others, new roles, relationships, and actions are explored, a course of action planned, and additional knowledge and skills acquired (Mezirow, 1996).</td>
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<td>Constructivist learning</td>
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<td>Knowledge is actively acquired and built up by the individual theory rather than passively received (Crowther, 1997).</td>
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<td>Situated learning</td>
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<td>Learning is grounded in the actions of everyday situations; knowledge is acquired situationally and transfers only to similar situations (D. Stein, 1998).</td>
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and experience (Cross, 1986). Brookfield (1986) acknowledges that adult learning is “generally problem-centered” but states that it is often “a free-flowing exploration of an area of knowledge undertaken for the innate fascination of that activity...with the focus on the development of self-awareness and self-insight rather than the development of performance-based competencies” (p. 121).

From an andragogical perspective, adults are motivated to learn due to intrinsic (internal) rather than extrinsic (external) forces (Imel, 1989). In addition, the adult desires control over learning activities (Cross, 1986) and assumes active responsibility for his or her own learning in contrast to the pedagogical model in which the learner is dependent and passive. Closely related is the assumption that adults possess a tendency toward self-directedness (Knowles, 1982). In direct contract to this, Cranton (1992) asserts, “self-directedness is not a characteristic of adult learners.”. Brookfield (1986) concurs by stating, “while self-directedness is a desirable condition of human existence it is seldom found in any abundance” (pp. 94-95). Cranton (1989) argues that adults acquire self-direction “at different rates and in different stages of life” in the process of maturation (p. 6). Knowles (1982) indicates that an individual’s self-directedness may vary based on the characteristic of the learning activity. He explained that an adult “may be very dependent in learning to repair a piece of computer, but completely self-directing in learning to repair a piece of furniture” (p. 148).

An extensive critique of each andragogical assumption is beyond the scope of this literature review. Of importance are the key principles that relate to and underpin Action Learning. Consistent with andragogical assumptions, Action Learning involves
a problem-centred orientation to learning with the intent to resolve real-life tasks or problems that are directly related to an individual’s environment. Action Learning presumes an individual’s intrinsic motivation to learn and the ability to self-direct and control the various activities within the process.

*Communicative Learning.*

Mezirow (1991) explains that through communicative learning we learn “to understand what others mean and to make ourselves understood as we attempt to share ideas through speech” (p. 75). From a communicative learning perspective, an individual’s ability to understand, describe, and explain our intentions, values, ideals, feelings, and reasons is promoted through dialogue with others. Through dialogue with other professionals, practice issues are explored by asking questions such as “how do you see this?” and “how do you experience this”? (Cranton, 1996). Brockett (1994) stresses that although individual learning is “often characterized by times of intense, focussed... inquiry... [interaction with others] makes new insights and growth possible” (p. 7). There is no doubt that individual learning activities are important, worthwhile, and promote learning; however, there is value in shared learning activities within a group of colleagues. Dialogue with other professionals within the framework of Action Learning provides professionals the opportunity to become aware of a broader perspective of practice issues and problems.

*Constructivist Learning Theory.*

As the word implies, a primary focus of constructivism is the individual’s own construction or building of knowledge. Thus, one definition of constructivism is simply
"the active engagement of learners in the construction of their own knowledge and understanding of the facts, processes, and concepts" (Bagely & Hunter, 1992, p. 22).

According to constructivist theory, individuals actively construct their own knowledge through an internal representation of knowledge and a personal interpretation of experience (Bednar, Cunningham, Duffy, & Perry, 1992; Cooper, 1993). An important underlying concept of constructivism is the belief that knowledge is actively acquired and built up by the individual rather than passively received (Crowther, 1997; Jenlick & Kinnucan-Welsch, 1999). Active learning involves developing alternative explanations, interpreting data, participating in cognitive conflict involving constructive debate about phenomena, and developing, testing, and selecting alternative hypotheses (Crowther, p. 6). Some important characteristics emerge from the previous brief discussion of constructivism that demonstrate the applicability to Action Learning.

Consistent with constructivism, an expectation of Action Learning is that individuals actively create their own personal understandings and meanings rather than merely being passive recipients of the information. Also, from a constructivist perspective, the focus of learning within Action Learning is on real-world situations with the intent that learners are able to solve real-world problems. For this reason, constructivists use the term *authentic learning* to describe learning that is situated within the individual’s practice and life-world (J. S. Brown, Collins, & Duguid, 1989). Consistent with constructivist learning theory, an expectation within Action Learning is that individuals actively construct their own knowledge that is “situated in” and relates to the individual’s unique practice setting and issues.
Situated Learning.

From a situated learning theoretical perspective, learning is grounded in everyday situations and involves the creation of meaning from experiences and activities in the context of the individual and his/her real-world challenges (D. Stein, 1998). Situated learning encompasses the expectation that learning is acquired situationally but is also transferred to similar situations. Within the Action Learning process, learning is situated through the identification of a practice-specific problem or issue, the practice-relevant learning that occurs, and the application of the learning to the individual’s practice setting. An additional concept within situated learning is that learning “is more than just the individual construction of knowledge” (Imel, 2000, p. 1) but includes a social process that encompasses ways of thinking, perceiving, problem solving, and interacting” (D. Stein, p. 1). Consistent with communicative learning theory, a premise of situated learning theory is that learning with others is beneficial because knowledge is distributed among the learners, who serve as resources for one another by clarifying ideas and concepts and suggesting additional resources (Imel, p. 1). As stated previously, learning within the Action Learning process is enhanced through dialogue with others.

Common themes began to continue to emerge through these discussions. Action Learning is grounded in andragogical, communicative, constructivist, and situated learning perspectives that are apparent through the emphasis on an individual’s motivation to identify practice-relevant problems, to self-direct, and to construct their own learning, often through dialogue with others, and to apply the learning to the
practice setting. A further understanding of Action Learning is enhanced by understanding the underlying characteristics of activities within the process.

Characteristics of Action Learning

The focus of the previous discussion was the theoretical principles that underpin Action Learning. Several key characteristics are embedded in Action Learning. The process, which is needs and practice based, involves learner self-direction, reflection, and journaling activities. Table 2 briefly summarizes these characteristics, and the remainder of this chapter will present a discussion of these characteristics utilizing relevant literature.

Needs Based.

Furze and Pearcey (1999) assert that there is little consensus on the definition of the word “need”. Kristjanson and Scanlon (1992) define need as “a deficiency that detracts from a person’s well-being” and “a gap between the current set of circumstances and some changed or desirable set of circumstances” (p. 156). The circumstances in which the need occurs may be “described in terms of proficiency (knowledge, skills, and attitudes), performance, or situations” (p. 157). Boud (1986) stresses that “learning always starts with a problem posed rather than knowledge provided” and suggests that learning activities for professionals must be “organized around problems derived from professional practice” (p. 242). The Action Learning process begins with an awareness or recognition of a need within an individual’s practice. As indicated, the need may be realization of a gap between current and desired
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<td><strong>Needs based</strong></td>
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circumstances, practice-based problems posed, or the need to enhance proficiency, performance, or situations.

*Practice Based.*

It is interesting that the Chinese character for the word learning is a combination of two characters; one means study and the other means practice (Gibbons, 1999). Our "Western" approach to learning often appears to place more emphasis on the study aspect of learning and less emphasis on practice-based learning. No discussion of professional practice would be complete without Schön's (1983) oft-repeated, figurative, yet vivid description that clearly identifies the dual focus of any professional's learning needs.

In the varied topography of professionals' practice, there is a high, hard ground overlooking a swamp. On the high ground, manageable problems lend themselves to solution through the application of research-based theory and technique. In the swampy lowland, messy, confusing problems defy technical solution. The irony of this situation is that the problems of the high ground tend to be relatively unimportant to individuals or society at large...while in the swamp lie the problems of greatest human concern. (p. 42)

The focus of learning must not abandon the "high ground" of basic sciences, theory, and research which ultimately reshape and expand the basis for professional practice; however, learning must also plod through the quagmire of the swamp, because the swamp is where the problems, challenges, and concerns of real individuals and real practice issues occur. Formal, institutionalized learning activities and often conferences,
workshops, and seminars rarely occur "in the swamp", and while they may attempt to focus on or apply to swampy issues, they cannot truly replicate being in the swamp. Daley (2000) interviewed lawyers, nurses, and educators and concluded that regardless of the profession, individuals stated that knowledge became meaningful when the information and learning could be linked to their practice. Action Learning provides an excellent opportunity for professionals to consider the problems and issues that take place within the swamp of their practice.

Learner Self-Direction.

An additional "central feature" of Action Learning is the expectation that individuals will self-direct their own learning activities (I. Taylor & Burgess, 1995, p. 90). This expectation relates to self-directed learning as both process and a personal characteristic or attribute (Oddi, 1987, p. 22). The former is described by Knowles (1975) as "the process in which individuals take the initiative... in diagnosing their learning needs, formulating learning goals, identifying human and material resources for learning, choosing and implementing appropriate learning strategies, and evaluating learning outcomes" (p. 18). Brockett and Hiemstra (1991) note that the term "self-directed learning" may be used in the context of an instructional method or an approach to learning. Instead, they prefer the term "learner self-direction" to capture the focus on learners and their preference for or desire to take the initiative and assume responsibility for learning. Garrison (1997) describes motivation as including the "entering motivation" (the decision to participate) and "task motivation" (the effort required to
stay on task); (p. 27). As such, motivation is therefore an important dimension of the process of self-direction and, by extension, Action Learning.

Self-direction is not only a process but also a personal characteristic or attribute. Several attributes are necessary for self-directed learning. These include a person's ability to make choices, conceive plans, exhibit self-discipline (Caffarella, 1993), and to locate and use books and articles (Brookfield, 1986). Unfortunately, some individuals may lack these important attributes. Nilsson (1988) suggests there may be “a misguided belief that everybody is so self-directed and self-motivated that somehow they are going to find their way to what they need to learn...[and] somehow take the initiative and start learning” (p. 16). Self-directed learning attributes are essential, since self-directed learning involves a shift away from others such as educators or employers performing the task of identifying learning needs and specifying a learning plan and learning activities. The shift from reliance on others to reliance on oneself and the need for self-directed learning attributes may be challenging for some individuals. As a result, these individuals may be less capable of undertaking self-directed learning (Cranton, 1992), may experience “frequent ambiguity, uncertainty, and problems both of planning and directing learning” (Brookfield, 1986, p. 82), and, consequently, the “inadequacies in personal skills or abilities make progress difficult” (Guglielmino et al., 2005, p. 80). Hatcher (1997) suggests the benefit of a workshop in self-directed learning to promote an understanding of the process and skills and identify some strategies and techniques that might assist in the implementation of self-directed learning. Those who choose to
implement an Action Learning activity must possess or acquire the ability to undertake the process of self-directed learning.

Reflection.

Reflection is a key characteristic of Action Learning, and thus an understanding of reflection is essential to implement an effective Action Learning activity. As O’Hara, Beaty, Lawson, and Bourner (1997) succinctly state, “for Action Learning to work...you need reflection” (¶ 16). In fact, reflection is so embedded into the process of Action Learning that one article refers to the process as “Action Reflection Learning” (ARL Inquiry, 1996). Reflection occurs throughout the Action Learning, including the initial reflection on practice issues and experiences, reflection while engaged in learning about the practice issue, and reflection on action plans and outcomes (O’Hara, et al., ¶14). Unfortunately, reflection is often a taken-for-granted behaviour, and many professionals “have not been prepared adequately to reflect effectively” (B. J. Taylor, 2000, p. x).

The literature abounds with discussion, recommendations, and direction for the use of reflection. Brookfield (1995) states that “critical reflection focuses on and includes the process by which adults question and then replace or re-frame an assumption...[and] the process through which adults take alternative perspective on previously taken for granted ideas, actions, forms of reasoning, and ideologies” (p. 2). Our understanding of the function, process, and importance of reflection for professionals owes much to the writings of Schön and Mezirow among others. Schön helps us to understand why and when professionals should reflect, and Mezirow helps us to understand how this reflection can occur. Schön (1983) provides the rationale for
reflection through his observation that “professional knowledge is mismatched to the changing character of the situations of practice - the complexity, uncertainty, common instability, uniqueness, and value complex which are increasingly perceived essential to the role of professional practice” (p.14). As a result, professionals are often confronted by “unfamiliar situations where the problem is not initially clear and there is no obvious fit between the characteristics of the situation and the available body of theories and techniques” (Schön, 1987, p. 34). A professional’s “rigorous professional knowledge” does not assist the professional’s ability to solve problems in the “swampy lowland where situations are confusing ‘messes’ incapable of technical solution” (Schön, 1983, p. 42). For example, according to Schön, about 85 percent of the cases that a physician sees in his or her office are not “in the book” (p. 35). The issue, for professionals, is to identify these “messy” practice situations and issues and the related “uncertainty, instability, uniqueness, and value conflict” (p. 50) and attempt to solve the “real-world problems of practice” (p. 27). The solution to practice-based problems is often not found in a textbook but can be explored and understood through reflection and self-directed learning, both of which occur within Action Learning.

Mezirow (1991) challenges us to enhance our reflections by exploring and assessing the content, process, and premises of our thinking and understanding. Content reflection involves “reflection on what we perceive, think, feel or act upon” (p. 107) and helps us to define and describe our practice-based problems. Cranton (1996) claims that content reflection is “similar to Dewey’s definition of reflection” that describes reflection as the “active, persistent, and careful consideration of any belief or supposed
form of knowledge in the light of the grounds that support it, and the further conclusions to which it tends” (p. 6). Process reflection, on the other hand, involves “an examination of how we perform the functions of perceiving, thinking, feeling, or acting and an assessment of our efficacy in performing them” (Mezirow, p. 107). In other words, once the practice-based problems are identified, we engage in process reflection through our problem-solving activities (p. 108); however, process reflection includes an additional activity of “thinking about the strategies used to solve the problem” (Cranton, p. 871). Premise reflection requires us to focus on “identifying and judging our presuppositions” (Mezirow, p. 117) and “involves our becoming aware of why we perceive, think, feel or act as we do and the reasons for and consequences of our possible habits of hasty judgment, conceptual inadequacy or error in the process of judging” (p. 108). Through premise reflection, we question the relevance of the problem itself and question our underlying assumptions, beliefs, or values (Cranton). Reflection assists professionals to identify, explore, learn about, and solve practice issues. As such, it is an essential characteristic of the Action Learning process.

Journaling.

Journaling is a tool that promotes reflection and aids in the implementation of Action Learning. Many perceive journaling to be synonymous with keeping a diary and as a result may be unaccustomed to journal writing (Orem 1997). Holly (1989) clarifies by indicating that both serve the purpose of recording events and pouring out thoughts and feelings. Like a diary, the journal is a place to “let it all out”; however, the journal is also a place for making sense of what is “out” (p. 20). Journals are useful as a repository
The text on this page is not legible due to the quality of the image. It appears to be a page from a book or a document with multiple paragraphs of text. Without clearer visibility, the content cannot be accurately transcribed.
of practice situations, stories, and anecdotes. They can also serve to promote sense-making and self-dialogue that encourages individuals to expose and explore interpretation of experiences, values and as a result serve as a basis for reflection (Ghaye & Ghaye, 1998). As such, journals provide a tool at the outset of Action Learning to promote awareness of practice-based issues, problems, and challenges. Reflection is facilitated through journaling at the time of initial journal entries and during subsequent review of these entries (Holly). In doing so, journals enhance the ability to look inward and encourage deep rather than surface learning that involves speculation, doubt, problem stating, problem solving, and ideation (Kerka, 1996), and they assist individuals to articulate connections between new and existing knowledge (Kerka, 2002).

Subsequent journaling about practice changes or improvements also promotes reflection and helps to acknowledge and demonstrate learning outcomes (Ghaye & Ghaye).

Journaling, however, is a skill that must be learned rather than assumed to be a natural capacity (Jasper, 1999; Orem). Jarvis (2001) suggests that nurses “may first have to learn the skills of reflective writing” (p. 56). Mastery of journaling skills is important since it promotes and enhances reflection. Both reflection and journaling activities are key characteristics of the Action Learning process.

The merits and benefits of journaling and reflection are well documented in literature, but the literature also indicates that these activities may cause some emotional difficulties. As Cox, Hickson and Taylor (1991) assert, “few people setting out on a journey of critical self-reflection find the journey painless” … [and may be] quite anxiety provoking” (pp. 380-381). Reflection may be “a struggle” (O’Hara et al., 1997,
¶19) and involve painful experiences (Johns, 1995; Rich & Parker, 1995) "because we see our emotions and relive our experiences" (Holly, 1989, p.7). A qualitative research study of reflective thinking among nurses by Teekman (2000) concluded that "a number of respondents harboured unresolved conflicts that resulted in lingering concerns, worries, grief and anguish... thereby generating conflict and anxiety within the individual" (¶ 59). Rich and Parker caution that "there is... a growing body of research and anecdotal evidence which points out the potential dangers and pitfalls [of reflection]" because of the "potential to expose vulnerabilities and for some it may threaten their deep-seated coping mechanisms and increase anxiety levels rather than reduce them" (¶ 55). Despite the benefits of reflection and journaling, both activities may involve painful emotions that might be challenging for some individuals.

Chapter Summary

Chapter Two summarized literature related andragogical, communicative learning, constructivist, and situated learning theories as they relate to Action Learning. These theories are embedded in Action Learning and underpin the importance of the individual’s motivation to identify practice-relevant problems, to self-direct, and to construct their own learning, often through dialogue with others, and to apply the learning to the practice setting.

Furthermore, Chapter Two utilized literature to describe several key characteristics of the Action Learning process. The discussion indicated that the process is based on an individual’s practice and needs, involves learner self-direction, and incorporates reflection and journaling activities.
The literature review served a valuable purpose of establishing the framework through which the research results were analyzed. The theoretical underpinnings of Action Learning discussed in the literature review were reviewed to determine whether the research findings extend, confirm, or refute the theoretical underpinnings of Action Learning. In addition, literature pertaining to Action Learning activities of reflection and journaling were utilized during the data analysis process.

Chapter Three will describe the research methodology used in this study.
CHAPTER THREE: METHODOLOGY

The literature review within Chapter Two discussed the underlying theoretical principles and characteristics of Action Learning. Chapter Three will describe the research design, study participants, research setting, data collection and analysis strategies, ethical considerations, research trustworthiness, and limitations of this research.

Research Methodology and Design

This research utilizes a naturalistic, exploratory, qualitative research design. As DePoy and Gitlin (1994) state, “naturalistic designs are preferred because their structure is exploratory, revealing new insights and understandings without the imposition of preconceived concepts [and] constructs” (p. 127). This research incorporates several fundamental characteristics of qualitative research. From a theoretical perspective, the research begins with “an a priori decision [that the researcher] will examine the meaning of experiences [italics in original] for individuals [that] informs what will be studied and how it will be studied” (Polit & Hungler, 1999, p. 239). The purpose of qualitative research is to investigate experience and interpret the meaning of those experiences (DePoy & Gitlin). Thus, this research incorporates a naturalistic, exploratory approach in order to investigate, describe, explore, and understand participants’ perceptions of their Action Learning experience.

Consistent with qualitative research, the research design is flexible, elastic, and may be adjusted during the course of data collection (Polit & Hungler, 1999). According to Lincoln and Guba (1985), naturalistic research must be emergent rather than preordinate, because meaning is determined by context and “dependent on the
Introduction to Social Networks

Social networks are complex systems composed of nodes and connections. Nodes represent entities such as individuals, organizations, or objects, while connections represent relationships between these entities. The study of social networks has been of great interest in various disciplines, including sociology, computer science, and economics.

In recent years, the use of social networking sites has become widespread, offering new opportunities for research and practical applications. These platforms allow users to create personal profiles, connect with other users, and share various types of content. Despite the potential benefits, concerns have been raised regarding privacy, security, and the impact of social networking on users.

This chapter aims to provide an overview of social networks, focusing on their structure, dynamics, and applications. We will explore different types of social networks and discuss the methods used to analyze them. Furthermore, we will examine the implications of social networking for individuals and society as a whole.
interaction [italics in original] between investigator and context, and the interaction is...not fully predictable...[thus] the design must...unfold, cascade, roll, and emerge” (pp. 208-209). However, Lincoln and Guba caution that naturalistic inquiry does not begin “empty-handed” but rather, as Marshall and Rossman (1989) state, should begin with “many of the elements of traditional research plans, but reserve the right to modify, alter, and change during data collection” (p. 45). This research design included the potential for modification depending on the focus and content of participants’ comments and feedback. For example, participants’ responses within the initial email interview prompted the need to request further elaboration from 2 individuals about the negative emotions and feelings that occurred during their reflections. These comments were unexpected and thus the issue was not identified within the original interview.

An underlying assumption of qualitative research is an “emic” perspective which means that the information is based on “the informant’s way of understanding and interpreting experience” (DePoy & Gitlin, 1994, p. 130). Thus, the information comes from within the research itself rather than being imposed from without (Parfitt, 1996, ¶3). In addition, qualitative research includes the recognition that there are “multiple realities that can be identified and understood only within the natural context in which the human experience and behaviour occur” (DePoy & Gitlin, p. 18). Consistent with qualitative research design, this study attempted to explore and understand participants’ “lived experiences” of their Action Learning activity.

Selection of Participants

that, “in qualitative research, sampling is driven not by the need to generalize or predict, but rather by a need to create...new interpretations,...to uncover multiple realities, and/or to create a deeper understanding” (p. 34). Consistent with these expectations, purposive sampling was used to acquire “information rich” individuals (Devers & Frankel, 2000, p. 3) who were able to provide an insight into and understanding of their Action Learning experiences.

Kuzel (1999) suggests that qualitative researchers must decide not only who to sample but how to sample. This research included criteria, purposive sampling strategies. Creswell (1998) provides several specific strategies for purposive sampling and recommends that qualitative researchers identify and provide a rationale for their sampling strategies (p. 118). Creswell also indicates “all participants [must] experience the phenomenon being studied” and suggests that criterion sampling “works well when all individuals studied represent people who have experienced the phenomenon” (p. 118). All participants in this research study meet two criteria. All participants are registered nurses and all completed at least one Action Learning activity. Participants were contacted by email thus an additional criterion was that each potential participant had access to email through their Internet Service Provider. The sample criterion creates a very homogeneous sample, and this is appropriate according to Kuzel (1999), who indicates that this sampling characteristic is suitable when “seeking to understand a particular group of individuals particularly well” (p. 40). Brink and Wood (1994) state that a convenience sample is simply an available sample of individuals and, as Lincoln and Guba (1985) state, this is a useful sampling strategy because of the need to save time, money, and effort.
The next consideration for a researcher is the sample size. Kuzel (1999) indicates that "although there are no hard and fast rules, experience has shown that five to eight data sources or sampling units will often suffice for a homogeneous sample" (p. 42). The original intent was to limit the sample size to 8 individuals. The initial recruitment activities resulted in fewer than 8 participants and thus additional recruitment was undertaken. As a result, the intended sample size was exceeded by 3 respondents. Rather than arbitrarily eliminate some participants from the research, a decision was made to extend the sample to 11 participants.

All participants involved in this study are currently registered nurses who are graduates of a post-RN, distance education, baccalaureate degree program. A two-semester, mandatory course, within this program and taught by the researcher, required students to complete an Action Learning activity. Recruitment of participants was initiated by reviewing lists of students who completed the course at least 3 years ago and as long as 8 years ago. From this list, 10 students were randomly selected for whom an email address was available within the student list. An attempt was then made to contact each of these 10 potential participants, via email, with a request to participate in the research study. Attached to this email was a "Letter of Invitation" to participate in the research. The intent to contact potential participants by email became problematic because email addresses tend to change over time and several email messages from the researcher to potential participants were returned with an undeliverable mail message indicating that the email address no longer existed. As a result, another 10 students were randomly selected from the student list and additional letters of request to participate were sent via email to these individuals. The intent was to continue this
process until at least 8 individuals volunteered to participate. In total, an attempt was made to contact 40 individuals. Of these, 21 requests were returned as “undeliverable” and no response was received from 8 individuals. Eleven individuals volunteered to participate in this research. Participants who agreed to participate were sent, and returned, via email, an Informed Consent Form. All but one individual returned the completed interview via email. One participant requested return of her interview by surface mail, and this request was met.

Data Collection

As stated, the research interview was sent to participants via electronic mail (email). Marshall and Rossman (1989) indicate that an interview is useful “for making inferences about a large group of people from data drawn on a relatively small number of individuals” (p. 84). They also suggest that the use of an interview implies the assumption that participants are able to describe their beliefs through self-report (p. 83). For this research, an expectation was that participants’ feelings and beliefs can be described through self-report and that these are honest and accurate responses. Kanzaki, Makimoto, Takemura, and Ashida (2004) comment that an advantage of the use of electronic-delivered interviews is that participants can choose when to write at a time when they are able to share their feelings and thoughts. The implication is that research participants are able to consider the interview questions and reflect on their responses. None of the participants returned the interview immediately and most responses indicate that participants put time, thought, and effort into their comments.

The interview (see Appendix A) included open-ended questions with the intent of eliciting sufficient and in-depth comments. Lincoln and Guba (1985) indicate that
"as the study unfolds and particular pieces of information come to light, steps should be taken to validate each against at least one other source (e.g., a second interview)” (p. 283). An additional “exploratory interview” approach was used to obtain additional comments from 2 participants. This second, email-based interview was open and lacking in structure (Kvale, 1996, p. 97) and requested further comments from 2 individuals who described negative emotional experiences during reflection. As this was an unexpected response, a decision was therefore made by the researcher to attempt to further explore these participants’ perceptions of their negative experiences. The subsequent interview included two open-ended questions asking these individuals to elaborate on their negative experiences and to describe the strategies they used to resolve these.

The interview did not elicit demographic information from participants. This information was omitted to reduce any attempt to correlate, compare, or contrast participants’ perceptions of the Action Learning experience and characteristics such as age, marital status, number of years since graduation as a registered nurse, or number of years of employment. As Sandelowski (1995) states, “People are certainly central in all kinds of inquiry…but they enter qualitative studies primarily by virtue of having direct and personal knowledge of some event…and only secondarily by virtue of demographic characteristics” (p. 180). She suggests that one way to resolve this is to design “a series of studies...[to achieve] a larger synthesis of findings...in which the researcher can more adequately address the question of whether and how a variable such as gender is important in understanding a phenomenon” (p. 181). Ongoing professional learning is an expectation of all nurses and mandated by the College of Nurses of Ontario,
regardless of the age, educational achievement, or whether the individual is male or female, married or single, or a novice or experienced nurse. The primary consideration, when seeking participants for this study, was completion of an Action Learning activity. No attempt was made to obtain a sample that was demographically representative of the population of nurses in Ontario. Similarly, no attempt was made to analyze the data based on demographic characteristics of the sample.

Data Analysis

Bogdan and Biklen (1992) describe data analysis as the process of systematically searching and arranging information in order to increase your own understanding of the information and to enable you to present what you have discovered to others. Essentially, data analysis involves bringing order, structure, and meaning to the mass of collected data (Marshall & Rossman, 1989). Regrettably, as Crabtree and Miller (1999) state, "there are nearly as many approaches to interpretation as there are qualitative researchers" (p. 20). They describe the process of interpretation as "a dance for two," but those two are often multiple and frequently changing...the two dancers are the interpreter and the text" (p. 129). According to McCracken (1988), the object of analysis is to determine the categories, relationships, and assumptions that inform the respondent's view of the world in general and the topic in particular. Two main steps have been suggested to describe the "dance" of data analysis. The first step, recommended by Marshall and Rossman, involves reading and rereading the data in order "to become familiar with [the] data in intimate ways" (p. 114). The second step, suggested by Crabtree and Miller, includes a literal reading, a reflexive reading, and an interpretative reading of the transcription (p. 138). Rather than a linear process, these
null
readings were viewed as a spiral process that “implies a continuously deepening understanding of meaning” (Kvale, 1996, p. 48). These two steps were incorporated into the data analysis of this research.

All but 1 individual responded via email, thus facilitating use of a word processing software program (Microsoft Word). The responses of the individual who returned the interview by surface mail were transcribed verbatim onto a Word document. A separate two-column table was created for each participant, onto which the individual’s verbatim statements were entered into the left-hand column of this table. Data analysis began with a line-by-line reading of each participant’s responses with the intent of understanding and becoming familiar with their comments. This within-case analysis provides person-specific information without which the individual account, or case, cannot be understood (Ayres, Kavanaugh, & Knafl, 2003). As McCracken (1988) stresses, “at this initial step of data analysis, the data should be considered in its own terms, ignoring its relationship to other aspects of the text” (p. 42). One important use of within-case analysis involves over reading or rereading of an informant’s narrative (i.e., within case) because this helps to identify meaning that is implicit (similar, repeated words and phrases, omissions, avoided topics) rather than explicit.

During the initial, reflective reading, notations were entered into the right-hand column to indicate key words or phrases that appeared in participants’ verbatim statements within the left-hand column. Crabtree and Miller (1999) suggest these notations are useful because they assist the researcher to “identify the meaningful units or parts” (p. 21). This will “allow the researcher to become more focussed” and “reduce
the amount of data being considered at any one time and [it] brings together related pieces of text [that] can facilitate making connections” (p. 164).

These initial notations were then reviewed during subsequent and repeated reflexive reading of the data. As suggested by Huberman and Miles (1994), summary pages of related notations were created based on “clustering by conceptual grouping” (p. 432). For example, one cluster of notations became apparent that related participants’ comments about “difficulty beginning” a part of the Action Learning process. Within this cluster were notations of difficulty beginning the Action Learning process, reflection, and/or journal-writing activities. The process of segmenting and coding of data allowed the researcher to “characterize what each stretch of the interview was about in terms of general thematic content,” especially when the data of interest “are not found neatly bundled together at exactly the same spot” (Coffey & Atkinson, 1996, p. 35). This process is worthwhile, because it “permits viewing of a full data set in one location...albeit in a condensed mode, and can [thus] be interrogated” (Huberman & Miles, p. 432). McCracken (1988) comments that at this stage of data analysis, “the focus of attention has now shifted away from the transcript” and “toward an interpretation of the data” (p. 42). Reflective reading of clusters of notations facilitated identification of emerging themes that formed the basis of the research findings and conclusions.

Trustworthiness. Altheide and Johnson (1994) suggest that “problematic issues pertaining to validity... must be addressed and pragmatically resolved” (p. 489). One significant issue is that the researcher “is part and parcel of the setting, context and culture he or she is trying to understand and represent” (p. 486). Lincoln and Guba
suggest criteria for credibility, dependability, confirmability, and transferability to ensure the trustworthiness of qualitative research. Several of these criteria are incorporated into this research.

Credibility. Credibility “is the naturalist’s substitute for the conventionalist’s internal validity” (Lincoln & Guba, 1985, p. 296) and involves the efforts of the researcher to represent the multiple realities revealed by informants as adequately as possible (Krefting, 1991, p. 215). Negative case analysis involves searching for disconfirming or negative evidence (Creswell & Miller, 2000, ¶20). Creswell and Miller note that researchers have a “proclivity to find confirming rather than disconfirming evidence” (¶21). During data analysis, emerging themes were continuously checked and rechecked against participants’ verbatim responses. During this process, an effort was made to identify participants’ comments and perceptions as well as researcher’s interpretations that “do not fit within the pattern” (Patton, 1999, ¶6). For example, two participants’ descriptions of their negative reflective experiences were inconsistent with the positive comments from the remainder of the participants. This prompted a second interview with these individuals to create a clearer, more in-depth understanding of their perceptions and experiences.

Credibility of the research is enhanced by the “neutrality” of the researcher through efforts to minimize subjectivity (Cutcliffe & McKenna, 1999, ¶26). This involves a process of reduction or bracketing that is described as “a suspension of judgement” (Kvale). This requires the researcher to admit one’s beliefs, prejudices, preconceived notions, and assumptions (Paley, 1998; Walters, 1995) and critically analyze one’s own presuppositions (Kvale, 1996). I have published a series of
"Learning Curve" articles in a professional nursing journal that includes topics such as: professional portfolios, reflection, group learning, concept mapping, and how to implement a personal learning plan. In doing so, I have publicly communicated my beliefs and assumptions about these topics. As a nurse-educator, I consistently encouraged my students to engage in ongoing professional learning following completion of their formal learning activities and willingly act as mentor and resource person to former students as well as colleagues. As a board member and subsequently president of a nursing organization, I strongly promoted a variety of educational activities for members. In fulfilling both my educational and organizational roles, I publicly communicated my belief that nurses should engage in ongoing, practice-relevant learning. This belief extends to my personal commitment to remain current and knowledgeable. Thus, I reflect on practice issues and situations, identify my own learning needs, plan and engage in ongoing learning activities, and apply my learning to enhance my knowledge, skills, and practice.

In addition to recognizing my personal beliefs, I am equally aware of my personal prejudices and preconceived notions about ongoing professional learning. As stated in Chapter One, I suspect that some nurses (and other professionals, as well) may not engage in meaningful, practice-related learning activities on a continuing basis. I suspect some nurses adhere to the belief that their basic education is sufficient and no further learning is required. I suspect that some nurses may not fully understand the Reflective Practice process and do not fully appreciate the merits of this. Furthermore, I suspect that some nurses assume they understand the process but implement the learning activity in an ineffective or incomplete manner.
Finally, several personal assumptions became obvious during the undertaking of this research study. I assumed that most participants would describe the Action Learning process as positive. As someone who uses, enjoys, and values reflection, I naturally assumed (and perhaps hoped) that participants would view reflection as positive. I was somewhat surprised by the unanticipated response of 2 participants who described negative emotional experiences within their reflective activities. This prompted me to review relevant literature to acquire a deeper awareness of the potential for and resolution of negative emotional responses during reflection. I was not surprised by the lack of wholehearted endorsement of journaling by some participants. My personal assumption is that individuals who are accustomed to journaling (e.g., those who maintain a personal diary) may view this activity as positive. In contrast, others who are less accustomed to journaling will likely perceive the activity as less positive.

Throughout this research activity, I was constantly aware of my beliefs, prejudices, preconceived notions, and assumptions. I made every effort to view participants' responses through their lens rather than filter their comments through my less transparent lens that has become clouded by my personal beliefs and assumptions.

*Dependability and confirmability.* Dependability relates to the consistency of findings (Krefting, 1991), and this can be enhanced through research that is "auditable". This implies that "another researcher can clearly follow the decision trail used by the investigator in the study...[and] arrive at comparable conclusions given the same data" (Krefting, p. 221). According to DePoy and Gitlin (1994), the researcher "is responsible not only for reporting results but also for explaining how the results are obtained" (p. 278). Participants' comments will be presented in Chapter Four, and the research results
will be discussed in depth in Chapter Five in a manner that is intended to demonstrate the thought processes that lead to the identified research conclusions.

*Transferability.* Lincoln and Guba (1985) state that “the establishment of transferability by the naturalist is very different from the establishment of external validity by the conventionalist” (p. 316) because generalization is not the goal of qualitative studies (Slevin & Sines, 1999). Lincoln and Guba elaborate by stating that “it is...not the naturalist’s task to provide an index of transferability; it is his or her responsibility to provide the data base [italics in original] that makes transferability judgements possible on the part of potential appliers” (p. 316). Polit and Hungler (1999) posit, “if there is to be transferability, the burden of proof rests with the investigator to provide sufficient information to permit judgments about contextual similarity” (p. 431). They explain that this is accomplished through provision of “thick description of the research setting, context...and processes” (p. 430) such that “the results have the appearance of truth or reality and are well grounded and supportable” (P. H. Bailey, 1996, p. 186). As Edge and Richards (1998) state, natural inquiry should seek “to produce understandings of one situation which someone with knowledge of another situation may well be able to make use of” (p. 345). According to Slevin and Sines, those reading a research report should be able to consider the research results and conclusions relevant to their unique interests and practice. I believe this report includes sufficient, rich description of the research methodology and context, including thick description of participants’ comments, perceptions, and experiences, to enable readers to relate the results to their own interests and usefulness. Slevin and Sines suggest that one of the limiting aspects of transferability of qualitative research findings relates to the
time span of the study, because, by the time the study is completed, changes may occur that render the findings out of date (¶ 49). They suggest that one way to counter this problem is to study the leading edge of change. Action Learning is not a new learning strategy for professionals; however, it has not been extensively explored with a specific relevance to ongoing learning among registered nurses. As a result, this research may be of current and timely interest, and thus transferable, to nurses.

Ethical Considerations

Polit and Hungler (1999) state that “when humans are used as study participants...care must be exercised in ensuring that the rights of those humans are protected” (p. 131). These “rights” include the right to self-determination, the right to full disclosure, the right to privacy and dignity, the right to anonymity and confidentiality, the right to fair treatment, and the right to protection from discomfort and harm (Burns & Grove, 2003; LoBiondo-Wood & Haber, 2002; Polit & Hungler). Ethical considerations were specified in the Application for Ethical Review of Research Involving Human Participants submitted to Brock University and ethics clearance received from the University (see Appendix C).

The rights to self-determination and to full disclosure are based on the ethical principle of respect for persons and include the expectation that participants are treated as autonomous agents (Burns & Grove, 2003, p. 166). In so doing, the researcher fully informed participants about all aspects of the study and allowed each participant to decide whether or not to participate. Each participant was informed of the right to withdraw from participation at any time during the research process. Participants were
not coerced to participate, and no deception or covert data collection occurred. Participants did not receive a stipend for their involvement in this research activity.

A concern should be raised that participants were former students of the researcher and thus might have responded with desired statements or comments intended to please the researcher. The duration of time since the researcher had contact with these individuals as students is noteworthy. All research participants are now graduates of the degree program, and the researcher has had no further contact with any participant for at least 3 years and as long as 8 years. Although not verifiable, the researcher is confident that participants’ comments reflect their own perspectives and not their interpretation of the desired perspective of the researcher.

The right to privacy and dignity is based on the principle of respect for persons and “the individual’s freedom to determine the time, extent and general circumstances under which private information will be shared with or withheld from others” (Burns & Grove, 2003, p. 171). Participants’ right to privacy and dignity was protected by full information and disclosure of research activities and their informed consent to participate in the study.

Anonymity implies that “the subject’s identity cannot be linked...with individual responses” (Burns & Grove, 2003, p. 172). Due to the nature of personal electronic mail, anonymity cannot be assured, since the recipients’ email address and thus identity are known to the researcher. Each potential participant’s letter of invitation states that the individual may request to receive the questionnaire by surface mail and be provided with a stamped, self-addressed envelope for return of the questionnaire. As previously stated, only 1 individual requested use of surface mail in order to respond and this
person explained her request by stating, “I am much better at expressing myself in long hand than in email.”

Although complete anonymity cannot be assured, some additional precautions were taken to reduce the ability to identify each participant during the data analysis stage. The “body” of each email response was “cut and pasted” onto a separate Microsoft Word document with all identifying information removed. The researcher assigned a unique pseudonym to each research participant that was known only to the researcher. For simplicity, this was done by designating a name to each participant using the first 11 letters of the alphabet (e.g., Ann, Barb, Carol, and so on). In this manner, only the researcher is able to identify an individual based on the assigned pseudonym. Place anonymization is also important (Nespor, 2000). This was achieved by omission of any reference to a participant’s employer or city of employment or residence.

Confidentiality pertains to the “researcher’s management of private information” (Burns & Grove, 2003, p. 172). The use of electronic mail can result in a loss of participant anonymity; however, the researcher must guarantee the confidentiality of participants’ comments and responses. The researcher informed and ensured all participants that any information provided by them remained in the strictest confidence and was not shared publicly or reported in any manner that identifies the participants. Participants were informed that a thesis advisor had access to the research data but this did not contain any identifying characteristics. Participants were assured that all hard copies of related documents were maintained by the researcher in a private, locked file
and that computer-based files were saved onto a password-protected computer hard drive.

Fair treatment implies "fair and non-discriminatory selection of participants...based on research requirements (Polit & Hungler, 1999, p. 138). Assurance of fair treatment was demonstrated to participants by "nonprejudicial treatment" of all individuals, honouring all agreements between researcher and participants, adhering to all ethical precautions and obligations, and granting participants access to the researcher if requested (Polit & Hungler, p. 139).

Protection from discomfort and harm includes physical, emotional, social or economic discomfort or harm (Burns & Grove, 2003, p. 175). No discomfort or harm was anticipated for any individual involved in this research activity and, to the researcher's understanding, no participant experienced any discomfort or harm as a result of this research study or the interview questions posed to participants.

Chapter Summary

This chapter described the research methodology for the study, selection of participants, data collection, and data analysis processes, ethical considerations, and limitations of the study.

The purpose of this study was to explore nurses' perceptions of their Action Learning experience. A qualitative research design was used to explore and understand participants' responses. A purposive, convenience sample of 11 participants was obtained. All research activities followed the guidelines set by the Brock University Ethics Research Committee. Participants' rights of self-determination, full disclosure, privacy and dignity, confidentiality, fair treatment, and protection from discomfort and
harm were ensured. Data were collected using an email interview. Data analysis involved an initial reading, a reflective reading in which key words or phrases were noted, and a rereading of participants' responses to identify categories and themes. Methods to ensure the credibility, dependability, confirmability, and transferability of the study were discussed. Chapter Four will summarize participants' responses and identify themes that emerged within these responses.
CHAPTER FOUR: RESEARCH RESULTS

The background and purpose of the research, a literature review, and research methodology were discussed in previous chapters. As previously stated, research participants were asked to respond to an email interview following receipt of their informed consent to participate in the research study. Responses were received via email and most participants' comments provided insight into the perceptions of their Action Learning experiences. This chapter will summarize these responses and, in doing so, participants' comments will be quoted verbatim in order to illustrate or illuminate themes that emerged within the responses. The chapter will begin by identifying the focus and outcomes of participants’ Action Learning and their continued use of the process. The chapter will then present participants’ comments as they relate to the three broad research questions: (a) What were the nurses' perceptions of their Action Learning experiences? (b) What were their negative and positive perceptions of learning activities within the Action Learning process? and (c) What were their perceptions of the barriers and challenges experienced by participants? The chapter will identify participants’ perceptions of the barriers to their implementation of Action Learning and enhancement of the process. This chapter will conclude with a discussion of participants’ access to professional literature and other information sources. The next chapter will discuss the research conclusions based on participants’ comments and emerging themes, relate the research results to Action Learning theoretical underpinnings and characteristics, discuss practical implications of the research results, and suggest recommendations for further research.
Focus of Participants' Action Learning Activities

Participants were asked to identify the focus of their Action Learning activities. When viewed individually, their activities include a diverse range of topics. However, on closer examination of participants’ topics, a theme emerged—all participants selected a focus that appeared to relate directly to a practice issue. The issue involved participants’ clients, students, staff, or a personal, practice-related issue; however, all Action Learning activities focussed on an issue within the participants’ practice setting. Table 3 summarizes the focus of participants’ Action Learning activities. Participants’ verbatim comments pertaining to the focus of their Action Learning activities will then be presented.

Ann, Donna, Hannah, and Irene described client-specific problems as the focus of their Action Learning activity. Ann decided to explore “what I perceived as a patient safety issue… [and decided] all patients in the ambulatory care setting needed to be identified by armbands with name identification.” Donna became interested in learning about pneumonia prevention among her elderly clients, and both Donna and Irene decided to learn how to prevent falls among the elderly within their practices. Donna indicated that she continued to use the Action Learning process “to assess [patients’] risk for recurrent pneumonias, recurrent risk for falls.” Hannah recognized “the need for handouts relating to immunotherapy and implications for both the patient and the medical personnel administering these injections” and decided to learn how to enhance client-teaching handouts as the focus of her Action Learning activity. Hannah became aware of “a new self-injecting adrenalin pen that now competes with the Epi-pen, but
Table 3

**Focus of Participants' Action Learning Activities**

<table>
<thead>
<tr>
<th>Focus</th>
<th>Action Learning activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clients</td>
<td>• Prevent pneumonia and falls among elderly</td>
</tr>
<tr>
<td></td>
<td>• Develop client handouts about immunotherapy</td>
</tr>
<tr>
<td></td>
<td>• Enhance client handouts</td>
</tr>
<tr>
<td></td>
<td>• Enhance patient identification</td>
</tr>
<tr>
<td></td>
<td>• Enhance client assessment for risk of pneumonia and falls</td>
</tr>
<tr>
<td></td>
<td>• Revise client handouts</td>
</tr>
<tr>
<td>Students</td>
<td>• Enhance students' critical thinking skills</td>
</tr>
<tr>
<td></td>
<td>• Enhance use of problem-based learning</td>
</tr>
<tr>
<td></td>
<td>• Revise teaching material due to language barrier and knowledge level</td>
</tr>
<tr>
<td></td>
<td>among foreign-trained nurse-students</td>
</tr>
<tr>
<td>Staff</td>
<td>• Promote facilitation and critical thinking among staff</td>
</tr>
<tr>
<td></td>
<td>• Resolve nurse/physician conflict</td>
</tr>
<tr>
<td></td>
<td>• Address horizontal violence among staff</td>
</tr>
<tr>
<td></td>
<td>• Mentor staff</td>
</tr>
<tr>
<td></td>
<td>• Enhance staff training</td>
</tr>
<tr>
<td></td>
<td>• Enhance staff focus on client health promotion and disease prevention</td>
</tr>
<tr>
<td></td>
<td>• Enhance orienting and mentoring new staff</td>
</tr>
</tbody>
</table>

*(table continues)*
<table>
<thead>
<tr>
<th>Focus</th>
<th>Action Learning activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff</td>
<td>• Promote staff compliance</td>
</tr>
<tr>
<td></td>
<td>• Develop strategies to resolve staffing levels and reduce staff stress during SARS</td>
</tr>
<tr>
<td></td>
<td>• Enhance familiarity among staff with new self-injecting adrenalin pen</td>
</tr>
<tr>
<td></td>
<td>• Resolve poor charting and documentation by staff and lack of accountability by staff</td>
</tr>
<tr>
<td>Personal</td>
<td>• Enhance leadership skills</td>
</tr>
<tr>
<td>issues</td>
<td>• Resolve personal issues related to change</td>
</tr>
<tr>
<td></td>
<td>• Resolve new practice issues related to job change</td>
</tr>
<tr>
<td></td>
<td>• Resolve potential conflict of interest</td>
</tr>
</tbody>
</table>
with a different mechanism of action" and used the Action Learning approach to learn about the new product in order to help clients understand the use of the new product.

Two nurse educators chose to focus their learning on issues related to students. Barb "discovered the lack of critical thinking skills among students" and decided to learn how to revise her teaching to promote her students' critical thinking. Fran decided to learn "as much as I could" about the use of problem-based learning as a teaching method. Fran recognized "language barrier [is] a big problem" because of the number of "foreign trained RN students." She decided to use the Action Learning process to learning "how to devise ways to present the material for not only the different language groups but also different levels of baseline knowledge."

Carol, Donna, Eva, Grace, and Irene selected practice problems related to staff issues. Carol decided to explore and learn about "issues of facilitation and critical thinking in the home health care environment." Donna used the Action Learning process to enhance "mentoring [and] orientating new staff or teaching staff nurses" and also to explore strategies to use "when confronted by an employee who was not compliant with my direction." Eva used Action Learning "during the SARS crisis... [to] determine how to staff multiple clinics with minimal staff." Eva commented that she "spent a lot of time reflecting on what worked and what didn't work, and why approaches didn't work in order to make changes the next day to improve efficiency and effectiveness of care." She realized that "staff were getting more and more stressed... throughout the SARS crisis." Eva was also involved with an international nongovernment organization doing humanitarian work overseas, and she realized that staff "were providing curative care rather than seeing the value of health promotion and
disease prevention strategies.” Through her reflections, she recognized that “nurses were not adequately trained in international nursing leading to culture shock, illness and stress.” Grace recognized that nurse-physician conflict contributed to staff issues and decided to learn how to develop strategies to help resolve this conflict. Irene identified several Action Learning activities. She stated that she became aware of horizontal violence (i.e., intragroup hostile behaviour) among staff and used the Action Learning process to further her understanding of horizontal violence issues within her workplace. Irene also decided to use the process to learn about mentoring. Irene used the Action Learning process because of her “deep concern relating to poor charting that I kept seeing over and over” and also her concerns regarding a “lack of accountability” among staff.

Ann, Donna, Eva, Grace, Hannah, and Irene described topics with a more personal focus. Ann indicated that the process was helpful to learn about “new practice issues” following a recent change in position. Donna decided to learn how to enhance her leadership skills, and both Donna and Eva decided to explore issues related to change within their practice. Grace stated that she used the Action Learning process to determine “whether her involvement with a group of philanthropists could lead to a conflict of interest.” Hannah used the Action Learning process to learn how to revise client information handouts because of the “new self-injecting adrenalin pen.”

Outcomes of Participants’ Action Learning Activities

Participants were asked to describe whether their Action Learning activities enhanced their professional practice. Several participants responded with descriptions of practice-specific outcomes related to clients, students, and staff. The outcomes
described by participants may appear initially unrelated; however, once again, a common theme can be detected when viewed collectively. Participants’ descriptions of the outcomes of their Action Learning activities clearly indicate that their learning resulted in identifiable achievements relevant to a client-, student-, or staff-related practice issue.

Client-related outcomes were described by Donna and Hannah. Donna stated that, as a result of her Action Learning process, she enhanced her client assessment questions to identify “their risk of recurrent pneumonias [and/or] recurrent falls” as part of her discharge planning process. Hannah indicated that her Action Learning resulted in enhanced patient education handouts and stated that the new handouts “served as a quick and easily understood reference guide,” and “patient compliance improved immensely.” She reported that the handouts were translated into other languages, and this “generated tremendous feedback both from the patient...and the referring physician”.

Staff-related outcomes were identified by Carol, Eva, Grace, and Irene. Carol discovered that “learning about facilitation opened my eyes to other areas where facilitation is critical” and that she could “pinpoint some strategies.” As a result of her Action Learning activity, Eva created an “improved orientation process” and reported that “the organization has taken a more broad perspective of health...[and] incorporates health promotion and disease prevention.” Eva indicated that she developed strategies to address the identified stressors among staff during the SARS crisis, and as a result “the stress level reduced a bit. I think the staff felt more supported.” Grace stated that the process enhanced her “confidence to discuss physician issues with colleagues more
openly and to feel more confident when relating to physicians.” Irene stated, “Through reflective practice I have been able to identify concerns I have at my workplace” related to horizontal violence. Her learning prompted action to undertake “a survey at my workplace” related to the issue. Irene’s concerns regarding documentation and accountability prompted her to become part of a group learning activity in the form of a “workplace documentation committee and then a large project” as well as another committee to learn how to develop a “code of conduct for staff.”

Barb and Fran, both nurse educators, described outcomes related to students. Barb reported that she “was able to incorporate some of my learning into the new program that was being developed” and that “[other] faculty… used me as a source to help them incorporate critical thinking [into their teaching].” Barb indicated that her Action Learning activity resulted in “a change in teaching… I encourage students to think things through and use me as a resource but not the person to just give them the answer.” Fran indicated that her Action Learning project “helped identify areas where I could improve teaching methods…and therefore a better learning experience for the students.” Fran stated that she “revised my presentations [and] identified which students are actually weak and then I can spend time with them individually.” Clearly, a theme emerged that participants’ Action Learning activities achieved practice-specific outcomes relevant to clients, students, staff, or personal issues.

Participants’ Continued Use of Action Learning

Participants were asked to indicate whether they continue to use the Action Learning process, and their responses indicated some variation in the extent to which the process is used. Although not explicitly stated, comments from 4 participants implied
their ongoing use of the Action Learning process. Hannah’s comments more strongly indicate her use of Action Learning. She stated, “Yes, I have continued this practice... because of the knowledge of what a powerful process it is in my practice.” Carol noted that the process of her subsequent Action Learning activities “is much more fluid” and she “fully uses[s] the process when I identify a significant issue.” Fran admitted to using the process “on and off [due to] time constraints.” Ann stated, “I will admit that [the process] was helpful however, I do not continue with this process today. I have not due to the time required.” She added, however, “I must admit, though, that when there is a real issue of concern that I have returned to this practice of journaling until I feel that the issue has been resolved.” Ann found the activity “was time consuming and due to this I have not continued the process... because I am lazy.” However, she added, “but I often think about practice issues and discuss issues as they arise with co-workers”. Thus, participants’ comments implied inconsistent continued use of the Action Learning process.

Participants’ Perceptions of the Action Learning Process

Participants were asked to describe the positive or negative perceptions of the Action Learning process. Most participants provided feedback that indicated positive perceptions of their Action Learning activity. Irene noted that the activity included both “negative and positive aspects,” and Grace simply stated, “I can’t think of anything I found negative about the activity.” Some participants chose not to elaborate on the positive characteristics of their experience. For example, Fran simply stated that the process was “positive,” and Donna stated, “It ended up being a positive process.” Others elaborated on their positive perspective of the experience. For example, Grace
described the activity as "energizing and somewhat freeing," and Eva stated that she felt "exhilarated and empowered" by the process. Grace also stated that through the activity she "learned some new skills," and Ann observed, "What I once thought was rumination or just plain complaining...could be more productive." Grace provided an interesting positive comment that viewed the experience from a slightly different perspective, stating, "The activity gave me a sense of universality, that my experience was not at all unique." The statements by some participants that the process was positive, the lack of negative comments about the process, and the descriptive words (e.g., energizing, empowered, and productive) support the theme of participants' positive perception of the Action Learning process.

Two additional themes emerged from the more detailed comments of the positive perceptions of the Action Learning experience. One theme related to recurring comments that describe participants' perception of Action Learning as beneficial to the individual's thinking processes. Once again, some comments were very brief, while other comments provided greater insight. For example, Karen simply stated that the process "allowed me to be more thoughtful," and Donna indicated, "I ended up enjoying the activity as it made me think deeper into the issue." More detail was provided by Eva who stated that, because of the process, she "developed a sense of purpose" and felt "challenged intellectually and professionally." Eva indicated that the process "improved my ability to think more critically about practice issues and helped me to determine what actions needed to be taken to bring about positive change." Eva added that she discovered that the process helped her to "break out of the conformity of my traditional patterns of reflecting and move into unfamiliar territory." Ann stated that the process
improved my critical thinking skills [and] encouraged me to probe deeper for solutions to problems". Fran indicated that the process "helps to cover all areas [and] look at things in an organized fashion." During the reflective reading of these statements, several key words or phrases became apparent (e.g., "more thoughtful," "improved my ability to think more critically," and "probe deeper"). These comments indicated a theme that the Action Learning process was perceived by participants as beneficial to their thinking process.

The second theme that emerged within participants’ positive perceptions of the Action Learning process related to the benefit of the activity to identify and solve practice issues. For example, Ann stated that she “found the process helpful in identifying problems” and concluded that the process “allowed me to identify issues in the workplace that were bothersome to me and of concern for my patient care practices.” Similarly, Grace stated the activity “provided insight into my own practice.” The same thought was echoed by Karen, who stated the process provided “an interesting insight into my practice,” and Grace discovered that the process “gave me permission and a reason to do something [about the practice issue] that I had needed to do for a long time.” Hannah stated the process “forced me to focus” and “forced me to keep myself current on new developments [because] it is very easy to just continue doing what I have always done and not take that extra step to look for areas of improvement.” Irene stated, “I experienced understanding, posed questions, and had a sense of direction in which to proceed [and] the experience… encouraged me to question aspects of my nursing practice, to question myself and others.” Eva summarized her perceptions of the benefits of the Action Learning by stating, “Sometimes you can’t see the forest for the trees, so
you need to remove the trees.” Eva continued by explaining, “You have to break into manageable pieces what may seem like an overwhelming practice issue in order to get to the core of the issue and to determine strategic action plans.” A reflective review of the participants’ comments statements indicated that participants used the Action Learning process to identify, focus on, gain insight into, and think about issues or problems within the individual’s practice. Thus, the above comments supported the theme of participants’ positive perceptions of the Action Learning process as an activity that promotes the ability to identify practice issues.

Fewer negative perceptions about Action Learning were reported and once again, some participants’ comments were brief and somewhat general while other participants provided more detail. Donna was honest enough to confess that the activity was “something I really wasn’t interested in doing.” Two themes emerged within comments of negative perceptions of the Action Learning activity. One theme relates to difficulties individuals experienced initiating the Action Learning process and a second theme relates to the time and effort involved in the Action Learning process. Although Barb and Eva identified some benefits of the Action Learning process, both individuals commented on their difficulty beginning the activity. For example, Barb stated, “I was not sure how to begin,” and Eva indicated that she “had some difficulty getting started.” Eva described the process as “very unfamiliar and threatening” and “more difficult than I expected because of the critical analysis,” and Irene observed that she felt the need to “do it right.” Finally, Ann, Fran, Irene, and Joan stated that their initial Action Learning activity was very time-consuming, and Irene found the process “energy consuming.” Karen described this as “extra work” and “tedious.”
Participants’ Perceptions of Reflection within the Action Learning Process

The above comments relate to participants’ positive and negative perceptions of the Action Learning activity. Participants were also asked to indicate whether they reflect on practice issues and, if so, to describe their impressions of reflection. Clearly, a theme can be detected within participants’ comments that reflection was generally viewed as a positive activity and of benefit to identify practice issues.

Comments by some participants indicated that reflection was used to help them to identify, explore, and think about practice issues. Irene commented, “My reflections help me to identify areas of concern...and problem solve.” Carol stated, “I take time at the end of every day to review what went well, what didn’t and examine how I contributed to both the positive and negative experiences of the day.” Eva indicated that she reflects whenever “something sends up a red flag, [and] then I reflect on it or if something went really well, I reflect on it.” Grace stated that she “reflects on my practice issues on a fairly regular basis,” and through reflection, “I get more in touch with what the core issue in a circumstance is, rather that just feeling uncomfortable with a situation, but not allowing myself to really look at it.” Similarly, Hannah stated, “My reflections certainly help me to zero in on issues and... forces me...to stop and actually take account of what I have been doing.” A review of the above comments demonstrated that participants perceived reflection as positive because it helped them to become aware of, focus on, review, and think about practice issues.

Two participants indicated that reflection helped them to analyze practice problems. Grace stated, “Reflection is a great learning tool... [that] has helped me analyse problems and see things differently...to really look at an issue, usually because I
am confronted with it more often than I would prefer.” Ann commented, “Reflecting has helped me analyse problems and see things differently at times, especially away from the practice setting.” Comments by these two individuals indicated a positive perception of reflection because the activity promoted analysis of issues and problems within their practice.

Participants also described how reflection helped to achieve positive outcomes for the individual. Irene indicated, “Reflection can provide much stress relief.” Carol commented, “The reflexive process has really helped me grow and develop as an individual practitioner but also helped to identify priority actions for the practice environment.” Ann observed that she “certainly reflects more on my practice and acts upon situations and bring issues forward to co-workers, nurse educator and clinical director.” Later Hannah stated, “I think that if one has identified and been involved in a learning activity, then he or she should take the next step and incorporate this into the practice.” The above comments indicated a theme of participants’ positive perception of reflection as an activity that helped to identify and think about practice issues, to analyze practice problems, and to achieve positive outcomes for the individual.

As previously stated, some individuals described personal difficulties with the Action Learning process. Similarly, some difficulties were identified pertaining to reflection. Ann stated, “Sometimes I could not recall exactly what it was that I wanted to reflect on.” Eva admitted that reflection is “not being viewed as a priority” and confessed “it’s very low down on my ‘to do’ list.” She later commented, “The process of reflection is not easy. I wouldn’t undertake such an effort if I didn’t plan to apply what I learned.”
Although not a consistent comment among all participants, one theme emerged within responses from 2 participants who provided eloquent and detailed descriptions of their negative reflective experiences that clearly describe the extent and depth of feelings experienced by these nurses. Eva indicated that she “did not expect the reflective experience to be as draining as it was, both physically and emotionally.” Eva continued by stating that she “had to relive difficult times and analyse the significance of those experiences.” She admitted to “feeling the fear of the unknown [and] at one point I broke into tears and became angry.” Eva described the extent of feelings by quoting from her journal “I can’t deal with all this emotional baggage.” Through her reflections, Eva realized that she “was surprised to find that she had been holding a lot of emotion inside” and needed to “emotionally detach myself from the experience that had gotten me so upset.” Similarly, Irene stated, “it was uncomfortable looking closely at my feelings and myself because I saw good and bad.” She reported, somewhat humourously, by quoting from her journal: “Reflection makes me take a close look at myself, warts and all; maybe I’d rather not see my warts today!” She used an analogy to describe both the negative and positive characteristics of reflection by stating, “Reflective practice feels like preparing to give birth, anticipating the pain and joy.” These comments indicated that 2 participants’ reflective experiences included negative feelings.

Fortunately, both Eva and Irene were able to resolve their negative feelings that were generated through their reflections. Eva stated that she recognized the importance of “acknowledging and analysing my negative feelings, instead of ignoring them” and concluded that as a result she discovered it was “easier for me to relax”. Irene reported
that, through reflection, “an emotional release [and] a huge weight has been taken off me.” Irene concluded by stating the process “gave me energy, excitement and a feeling of purpose in my nursing” and “I expected reflective practice to be boring and…would not be something I would have chosen to do, but the experience changed how I would practice in nursing from then on.”

A follow-up email interview with both Eva and Irene revealed their strategies to resolve the negative emotions experienced during reflection. These include (a) limiting negative emotional responses, (b) placing time limits on their negative reflections, (c) discussing the difficulties with others, and (d) engaging in alternative activities.

Eva suggested some strategies to limit her negative responses that may arise during reflection. She reported that she would “detach myself emotionally from the negative experiences” and start to “think about the negatives again. I would remind myself that I was getting off track and that I needed to go back to focusing on the positives.” She also mentioned the usefulness of “advice by crisis counselors to stop the endless mind tapes that cause crisis victims to relive bad experiences over and over again in their minds.”

Both individuals recommended the need for placing time limits on their negative reflections. Irene suggested the need to “acknowledge these feelings in a time-controlled manner.” She added, “Once I had identified the negatives, I tended to dwell on them for extended periods of time. Realizing this, I set time limits for dwelling on the negatives in order to minimize the feelings of anger, being overwhelmed, and feeling anxious, exhausted and emotionally drained.” Similarly, Eva stated that she needed to
"set boundaries on the amount of time I would allow myself to reflect on the negatives. I would tell myself that I will reflect on the negatives for an hour then I must move on."

Irene recommended that negative feelings could be alleviated by discussing her difficulties with others. She suggested that "using others as a sounding board is very helpful" and sharing concerns with peers helps "to gain their insight...objectivity and perspectives."

Finally, Both Irene and Eva suggested the importance of engaging in alternative activities as a strategy to reduce negative feelings. Eva noted that "sometimes it was not easy to refocus especially at night when lying in bed unable to sleep and at those times I would get up and read a book to stop the mind tapes from causing me to relive the negative experiences. If, during the day, I couldn’t refocus, I would stop reflecting, try to do something that put me in a positive mood, something that was fun or relaxing, and then I would go back to reflecting on the positives." Irene stated that when reflection became negative, she "gave myself a break (go for a walk) and revisit a reflection later when I can look at it with fresh eyes."

Within the first email interview, both Eva and Irene indicated that reflection involved negative experiences. The second, follow-up email interview with these individuals was used to explore and understand the ways in which they were able to resolve their negative feelings. Both provided clear, detailed description of specific actions and strategies they used to overcome the negative feelings. Although not explicitly stated, an impression is perceived through their comments that they were able to use these strategies to resolve their negative feelings.
Participants' Perceptions of Journaling Within the Action Learning Process

Participants were asked to describe their positive and negative perceptions of the process of maintaining a reflective journal as part of the Action Learning process. Only 2 individuals mentioned positive perceptions of journaling. Carol indicated the usefulness of journaling stating, "I concretise the experience in a journal...the writing helps me remember and see themes." Irene commented "I often journal in a number of notebooks...and I am no longer overwhelmed by writing in a journal. I see it now as routine for me and it helps me to review my successes and my not so successful moments."

In contrast to the positive perceptions of reflection, a review of comments pertaining to journaling supported a theme that journaling is viewed more negatively and appears to be an activity performed less consistently than reflection. Grace was honest enough to admit, "I hate journaling" but added, "I do keep some notes, but not as often as I could." Donna admitted, "I don't always record reflections in a journal." Similarly, Fran commented, "I rarely record my reflections, but I think I may try to do so more often." Barb stated that she only writes in a journal "if I identify an issue that I think is significant." Fran commented that she uses the process "more in thought than on paper" and "I rarely record my reflections." Eva appeared to justify not journaling by stating, "I do not record any of my reflections - we need to determine our unique reflective process and that may be reflecting without journaling." Ann admitted, "I have never been a diary keeper and find the process cumbersome at times". The above comments indicated that some participants do use journals as part of their reflections and implied that journaling is not viewed as a positive activity. Thus, a theme was
identified that journaling was inconsistently used and somewhat negatively perceived by some participants.

As previously mentioned, a theme emerged pertaining to participants' difficulties initiating their Action Learning process. This theme reemerged within participants' comments related to journaling. For example, Irene stated, "Initially, I felt overwhelmed by the thought of getting started on keeping a journal" and later commented, "Actually writing my thoughts and feelings down felt awkward and overwhelming." Similarly, Ann commented, "I had difficulty putting thoughts and emotions into words on paper," and Carol stated that journaling was "a little hard to get into the habit every day."

Some participants included comments in an effort to explain why they do not continue to write in a journal, and a common theme of a lack of time clearly emerged from participants' comments. For example, Hannah admitted the "hard part...is taking the time to write down the specific issues," especially because of "a very busy schedule and a time consuming workload." Ann commented that "journaling is time consuming," but instead she maintains a "record of practice issues within a file folder." Eva admitted that she no longer uses "a formal written process... because it takes way too much time and energy." Time was an issue for Irene who added, "I will admit there are times that I do not take the time to reflect and write in my journal when life gets busy, but I always come back to it eventually." Thus, participants' comments indicated a theme of a somewhat negative perception of their Action Learning experience because of the time involved to complete the process as well as time needed to maintain a reflective journal.
As previously indicated, Eva experienced negative emotions during some of her reflective activities. She also reported both negative and positive feelings as part of the journaling activity. Eva indicated that she “stopped journaling for a week because I felt overwhelmed. I felt anxious.” She stated, “Once I started to journal again, I felt more positive about the experience. I was surprised to find that I had been holding a lot of emotion inside. The journaling allowed me to release my pent up emotions in a safe environment.” She related, “I was pleasantly surprised at how liberating it felt to write experiences and feelings on paper, [and] writing in my journal feels like an emotional release.” A theme of participants’ negative perception of journaling became apparent because (a) journaling is not consistently used, (b) individuals reported difficulty beginning to journal, and (c) some view journaling as time-consuming.

Participants’ Perceptions of Barriers to Implementation of Action Learning

Participants were asked to indicate their perceptions of barriers or impediments to implementing a personal Action Learning activity. Clearly, a theme emerged of the lack of time or time restrictions as impediments. Ann, Carol, Eva, Fran, Irene, and Karen commented on the lack of time to implement Action Learning. Eva mentioned a lack of “emotional energy,” and Fran indicated a lack of “energy levels.” Ann admitted that she is often “too tired or lack[s] the intestinal fortitude.” Family issues were mentioned as an impediment by both Eva and Fran. Eva stated simply “family constraints” and Fran mentioned “distractions [such as] family illness.” Carol appeared to confirm these by stating, “I can see where nurses with family commitments and harried schedules just can’ t find any extra time for themselves.” Joan was the only individual who indicated an additional impediment stating, “I have received advice from
our local hospital attorney to be very careful with the journaling process due to the legal implications and confidentiality issues."

Participants’ Perceptions of Enhancement of Action Learning Process

Participants were asked to provide their perceptions of ways to enhance implementation of Action Learning, and two themes emerged from these comments. Participants’ responses indicated the need for employers to assist and support professionals’ Action Learning activities and the need for nurses to acquire a greater understanding of the Action Learning process. Ann suggested the provision of “a designated amount of time at work to implement Action Learning.” Eva stated, “There needs to be a working environment which recognizes the value of reflective knowledge in bringing about positive practice changes.” Irene observed that the process “does not seem to be part of our day to day language of the workplace. Why is that I wonder? Perhaps it needs to be part of orientation for the workplace and then part of the ongoing education of nurses. I do not think I have ever come across a committee with the goal of promoting reflective practice.” Similarly, Donna stated, “I don’t remember having been introduced to the idea...I wonder how many others may never have done it before.” Eva stated, “I think nurses need to do an assignment that walks them through the entire reflective process so they understand the complexity of the process.” Participants’ responses indicated a theme of a lack of support for Action Learning within the workplace. This theme was supported by comments that identified (a) the lack of dedicated time at work to engage in Action Learning, (b) the lack of recognition and value within the workplace of the positive practice-related outcomes of the process, and (c) the lack of workplace committees that promote reflective practice.
responses also indicated a theme of the need for the workplace to help nurses acquire a
greater understanding of the Action Learning through orientation to and education about
the process as well as workplace assignments that support an understanding of the
process.

Participants' Access to Literature and other Resources

Participants were asked whether they have access to professional literature and
other sources of information. Their responses indicated that literature appears to be
consistently available for all participants. Barb indicated, "This [literature] is an area I
feel is very important." Two individuals reported using professional literature
"extensively" (Eva) or "on a regular basis" (Hannah). Ann, Eva, and Fran indicated
they had access to online databases, and Ann, Hannah, and Irene indicated access to
journals. Ann, Donna, Eva, Irene, and Karen indicated they obtained literature through
their hospital or university library. Donna, Hannah, and Ann reported access to the
Internet through their employer, and both Ann and Irene indicated access from home.
Ann, Barb, Fran, and Irene reported using texts. Donna mentioned using program
guides, and Ann mentioned using Practice Guidelines. Donna was the only one person
who admitted, "I can't say that I actually use a lot of professional literature in my work.
Carol reported, "For larger, more complex issues, I contract out that service." Literature
is consistently available among participants; however, the diverse types of literature and
the various ways in which participants' access professional literature is an interesting
observation.

In addition, 9 participants also mentioned individuals as sources of information.
Donna and Irene indicated that they utilize information from specialists while Barb and
Eva commented on the value of experts as sources of information. Hannah and Irene indicated that they obtained information from peers, and Ann identified the use of "knowledgeable staff." Eva mentioned coworkers and Fran stated colleagues provided information. Finally, Grace stated she obtains information from a leadership network, and similarly Carol uses an information "network of human resources." Conferences were cited as a source of information for Hannah and Irene. Seminars, workshops, and association meetings were mentioned by Hannah, and both Ann and Hannah obtained information from professional organizations. Two individuals cited other professionals as sources of information such as physicians, social workers, pharmacists, and company representatives. The above comments indicate a theme that most participants have access to information through literature, other individuals, and professional organizations.

Chapter Summary

This chapter presented the findings of the study based on participants' responses to the email interview questions. Their comments were quoted verbatim in order to provide the requisite "thick descriptions" that will assist readers to relate participants' statements to the topics and themes identified by the researcher.

Participants' Action Learning activities (a) focussed on issues related to clients, students, staff, and personal issues, (b) were directly related to the individuals' personal practice, and (c) resulted in identifiable achievements that resolved the issue and/or enhanced a component of their practice. Ongoing use of Action Learning appeared to be inconsistent among participants. All identified at least one Action Learning activity; however, only 4 of 11 participants, appeared to have engaged in subsequent activities.
A positive perception of the Action Learning process emerged within participants’ comments because the activity (a) enhanced their thinking processes, (b) helped them to identify practice problems, and (c) achieved positive outcomes.

Participants perceived reflection to be positive because this helped them to become aware of, focus on, review, and think about practice issues. Two participants, however, reported negative reflective experiences. A follow-up email interview with both Eva and Irene revealed their strategies to resolve the negative emotions experienced during reflection. These include (a) limiting negative emotional responses, (b) placing time limits on their negative reflections, (c) discussing the difficulties with others, and (d) engaging in alternative activities.

Journaling was perceived as less positive than reflection and was not consistently used by all participants. Some individuals reported difficulty beginning to journal, and some view journaling as time-consuming.

Participants’ responses indicated a theme of a lack of support for Action Learning within the workplace because of (a) the lack of dedicated time at work to engage in Action Learning, (b) the lack of recognition and value within the workplace of the positive practice-related outcomes of the process, and (c) the lack of workplace committees that promote reflective practice. Participants’ responses also indicated the need for the workplace to help nurses acquire a greater understanding of the Action Learning process.

Chapter Five will discuss the research findings, identify theoretical and practical implications of the research, and suggest further research.
CHAPTER FIVE: SUMMARY, DISCUSSION, IMPLICATIONS, AND CONCLUSIONS

Chapter Four presented a summary of participants' responses utilizing verbatim quotes to identify and demonstrate emerging themes. This Chapter will discuss the research findings as they relate to the research questions, identify theoretical and practical implications of the research, and conclude with suggestions for further research.

Summary

Professionals, including nurses, are expected to engage in ongoing, practice-relevant learning in order to maintain current knowledge and skills and apply their learning to enhance their practice and resolve practice issues. The Action Learning process provides a framework through which professionals are able to identify, learn about, and resolve practice problems or issues. The purpose of this qualitative study was to explore the perceptions of nurses who had completed at least one Action Learning activity. A purposive, convenience sample of 11 nurses was obtained and participants were asked to describe their Action Learning experiences and perceptions through an email-based interview. Data analysis began with the focus on responses from each individual participant including both a line-by-line and reflective review of the participants' comments and concluded with the identification of themes that emerged within these comments. It was anticipated that the results would provide insight into participants' implementation of the Action Learning process and any problems, needs, or issues they experienced. It was hoped that this study would yield
practical implications that may be of benefit to professionals who choose to implement an Action Learning activity.

The research study set out to explore the participants' perceptions within three broad research questions: (a) What were the nurses' perceptions of their Action Learning experiences? (b) What were their negative and positive perceptions of learning activities within the Action Learning process? (c) What were their perceptions of the barriers and challenges experienced by participants? These questions guided the data collection, analysis and presentation of the research findings.

Discussion

The previous chapter summarized participants' responses and identified themes that emerged through analysis of participants' comments. The following discussion will present a within, and across-case analysis of the research results as well as the research findings as they relate to the three broad research questions.

*Within, and Across-Case Analysis.*

Reflective rereading of each participant's responses allows the researcher to "look for meaning that is implicit rather than explicit in the interview text" (Ayres et al., 2003, p. 876). This strategy is useful to identify repeated words or phrases, avoided topics, and/or incongruencies within the boundaries of an individual account. In doing so, implicit as well as explicit meaning can be identified within the individual's narrative. Ayres et al. indicate this strategy is especially useful when analyzing lengthy narrative interviews in which subtle implicit within-case themes can be identified. A within-case analysis of each participant became challenging because participants'
responses were typewritten, often in very brief sentences or, in some cases, point form. As a result, this study lacked the luxury of lengthy, narrative interviews in which implicit subtleties are likely to emerge. Across-case analysis promotes the identification of commonalities and like-meaning from the accounts of multiple research respondents. Table 4 promotes the visualization of within-case and across-case data and several commonalities can be identified. Participants who reported either a positive perception or both positive and negative perceptions of Action Learning identified at least two positive features or characteristics of the process. Among those who described a positive perception of Action Learning, Ann, Carol and Evan identified three positive features or characteristics. As a result, an implicit impression is that a positive perception of Action Learning includes a positive perception of components of the process. Two additional across-case commonalities can be identified. First, a review of reports of difficulties experienced by individuals indicates that 5 individuals (Anna, Barb, Carol, Eva, and Irene) reported difficulty with three aspects of the Action Learning process. The other 6 individuals reported no difficulty (Donna and Hannah), difficulty with one aspect (Grace, Joan, and Karen), or difficulty with two aspects (Fran). Second, individuals who reported difficulty with journaling also stated that they do not journal or do so inconsistently.

Participants' Perceptions of Their Action Learning Experience

The first objective of this study was to explore and acquire an understanding of participants' perceptions of their Action Learning experience. Participants' responses indicated an overall theme of a positive perception of the Action Learning experience.
Table 4

*Within and Across-Case Summary*

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<tr>
<th>Variable / Participant</th>
<th>Ann</th>
<th>Barb</th>
<th>Carol</th>
<th>Donna</th>
<th>Eva</th>
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<td>Difficulty with reflection</td>
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<td>Difficulty journaling</td>
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<td>Difficulty with time</td>
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<td>Continues to use Action Learning</td>
<td>No</td>
<td>Inc.</td>
<td>Yes</td>
<td>Implied</td>
<td>Inc.</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
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<td>Continues to reflect</td>
<td>Yes</td>
<td>Yes</td>
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<td>Continues to journal</td>
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Note. Pos = positive; Neg = negative; Inc. = inconsistent use of or engagement in:
Several individuals simply described the process as "positive," while others chose words such as "energizing," "productive," "freeing," "exhilarated," and "empowered" to describe their positive perceptions of the experience. Participants' choice of words may appear to lack descriptive quality. Beaty, Lawson, Bourn, and O'Hara (1997) suggest that

participants often have difficulty in articulating precisely what it is from Action Learning that made such a difference....It would not be surprising for a participant in Action Learning to say "I feel more confident but I can't put my finger on what I learned that has made me more confident." (¶26)

Perhaps some participants' choice of words, as quoted above, is therefore less surprising and may simply indicate difficulty articulating their perceptions.

Fortunately, several participants included comments that elaborate upon their positive impressions and perceptions of Action Learning. Upon further analysis of this broad theme, three additional themes emerged that provide insight into participants' positive perceptions of specific components of the Action Learning process. First, the process helped participants to focus on relevant and meaningful issues within their practice setting. Second, it promoted thinking and learning about practice-specific issues and problems. Third, participants were able to achieve outcomes within the individuals' practice.

The first theme that emerged was participants' practice-specific focus of their learning related to clients, students, staff, and problems of a more personal nature. For example, one participant explored the "problem" of how to prevent falls among elderly clients. Another focused on the "problem" of ineffective client handouts. Other
problems related to nurse-physician conflict, the need to enhance staff training, orientation and mentoring, and how to adapt teaching to the needs of foreign-trained nurse-students. When viewed collectively, the focus of participants’ learning clearly related to actual “problems posed” (Boud 1986) within their practice environment, and these appear to be very real and significant to these individuals.

The second theme that emerged was participants’ positive perception of the process because it promoted thinking and learning about practice-specific issues and problems. Several comments exemplified this theme such as statements that the process “allowed me to be more thoughtful,” “made me think,” “made me think deeper into issues,” and feeling “challenged intellectually and professionally.” Participants’ comments, therefore, indicate a positive perception of the Action Learning experience because of the way in which the process stimulated participants’ thinking. Action Learning literature tends to address the focus of learning (O’Hara et al., 1997; Spence, 1998), the learning process (ARL Inquiry, 1996; Gibbons, 1999; Johnson, 1998; Koo, 1999; Revans, 1998; Webster, 2001), the nature of learning (ARL Inquiry; Marsick, 1990), and learning outcomes (Lankard, 1995; Silins, 2000). I was unable to locate articles that specifically describe how Action Learning promotes an individual’s thinking process.

The third theme that emerged was the benefit of Action Learning to achieve outcomes that enhanced the individuals’ practice. As Revans (1998) indicates, a significant component of Action Learning is the “action” taken by practitioners to resolve the identified practice problem or issue (p. 6). Participants’ Action Learning activities achieved outcomes that helped to resolve practice issues and/or enhance the
individuals' practice. For example, as a result of their Action Learning activity, participants were able to create an improved orientation process or enhanced patient handouts that resulted in improved patient compliance. The words such as "improved" and "enhanced" in these two examples suggest that the individuals achieved practice-relevant outcomes.

**Participants' Negative and Positive Perceptions of Action Learning Activities**

The second objective of the research was to explore participants' negative and positive perceptions of their learning activities within the Action Learning process. Most participants described their reflection activities as positive, and only 2 participants provided comments that suggested a negative perception of reflection as "not a priority" and "not easy". An unexpected research finding was the negative feelings that 2 participants experienced during their reflection activities. Although similar comments were not reported by other research participants, the self-disclosure by these 2 nurses raises concerns about the extent to which this phenomenon may occur among other professionals during their reflection on practice issues. For these 2 individuals, the reflective experience included considerable negative feelings, and for 1 individual, her reaction was unanticipated. These participants' comments are consistent with Beaty et al. (1997), Cox et al. (1991), Holly (1989), Johns (1995), and Rich and Parker (1995), who indicate that reflections may provoke negative responses. In summary, the research findings indicated participants' positive perception of reflection; however, the study also indicated that reflection may include negative responses.

Journaling is a key component of reflection and thus an important activity within Action Learning. Participants' comments indicated that some did not maintain a
(Text from the image is not legible due to the resolution and quality of the image.)
journal, did not record often, or reflected in thought rather than on paper. Thus, a research finding indicated inconsistent use of journaling within Action Learning. This may be directly related to participants’ journaling difficulties, especially at the onset of this activity. This finding is consistent with Orem (1997) and Holly (1989) who state that journal writing may be difficult for some individuals. The journaling difficulties and the inconsistent use of journaling suggest a negative perception of journaling as a component of the Action Learning process.

Participants’ Perceptions of Barriers and Challenges Within Their Action Learning

The third research question pertained to the barriers and challenges experienced within the Action Learning process. Despite positive perceptions of the Action Learning experience, some participants reported difficulty initiating the process. Comments such as “unfamiliar,” “difficulty getting started,” and “more difficult than expected” support this theme. Similarly, participants also experienced difficulty commencing journaling activities by describing their initial journaling activities as “hard,” “difficult,” “awkward,” and “overwhelming.”

Three additional themes were identified through data analysis of participants’ comments pertaining to difficulties they experienced within the Action Learning process. The first theme that emerged related to participants’ difficulties with self-directed learning activities. The second theme that emerged was perceptions of difficulties regarding the time required to complete the Action Learning process. The third theme pertained to participants’ lack of understanding of the Action Learning process and activities.
null
Difficulty with self-directed learning emerged as an underlying theme that became evident through data analysis. As previously stated, participants indicated that they experienced difficulty initiating either the Action Learning process and/or journaling activities. This theme is demonstrated by comments such as “not sure how to begin,” “difficulty getting started,” “overwhelmed at the thought of getting started,” and “hard to get into the habit.” Cranton (1992) suggests that some individuals lack planning skills and knowledge and may be less capable of undertaking self-directed learning (p. 55). Similarly, Brookfield (1986) states that without adequate preparation, learners may “be faced with frequent ambiguity, uncertainty, and problems both of planning and directing their learning” (p. 82). Although the interview did not attempt to elicit an understanding of participants’ self-directed learning knowledge, skills, or previous self-directed learning experiences, some comments suggested that unfamiliarity with self-directed learning activities exists among participants. This research finding is consistent with Cranton, Brookfield, and Silins (2000), who indicate that an essential factor for the success of Action Learning is prior preparation for and understanding of self-directed learning. Thus, the research indicated that individuals may lack an understanding of self-directed learning and this detracts from their ability to perform the self-directed learning activities within Action Learning.

The challenge of time required to engage in and complete an Action Learning process emerged as a theme within participants’ comments. Guglielmino et al. (2005) indicate that time is often a barrier in the sense that there were other competing or higher priority demands on the learner’s time including family responsibilities. Many individuals indicated that Action Learning activities were described as time-consuming.
Several noted their lack of time as well as time restrictions, such as family obligations, that affected the implementation of their Action Learning. Thus, the study indicated that time required to complete an Action Learning process was perceived as a challenge for many participants.

When viewed collectively, difficulty initiating the Action Learning process and/or journaling activities, difficulty with self-directed learning, and difficulty with negative emotional response might suggest an underlying lack of understanding that may have negatively impacted participants’ ability to perform various Action Learning activities. This is consistent with Guglielmino et al. (2005), who indicate “inadequacies in personal skills or abilities made progress difficult” (p. 80). Thus, this study suggested that participants’ difficulties may relate to an underlying lack of understanding of the process and component activities.

Implications for Theory

As stated in the literature review, the theoretical principles of andragogy, constructivism, situated learning, and communicative learning are all embedded in the conceptual framework of Action Learning. The following discussion will consider whether the research findings extend, confirm, or refute the theoretical underpinnings of Action Learning.

The Action Learning process incorporates three characteristics of andragogical theory. One principle of andragogy is that adults (and therefore professionals) possess a problem-centred orientation to learn in order to cope with real-life tasks (Cranton, 1989) that are relevant to the adult’s environment and experience (Cross, 1986). The research indicated that participants’ Action Learning topics related to real-life problems and tasks
within the individual’s practice environment and their need to cope with and resolve the practice problem or issue. Thus, the research results are consistent with and confirm this andragogical principle within Action Learning.

A second characteristic of andragogy is that adults are motivated to learn due to intrinsic rather than external or extrinsic forces (Imel, 1989). Although this was not explicitly stated, participants appeared to have self-selected their Action Learning focus or topic because of an internal motivation or need to learn about and resolve the problem or issue. For example, one individual was motivated to learn because she recognized the need to develop strategies to reduce the stress among staff during the S.A.R.S. crisis. None of the comments suggest that a participant selected a topic because of external direction or decision; however, this cannot be confirmed. Thus, the research indicated that participants were internally motivated to select the focus of their learning. However, the initial motivation to commence and engage in Action Learning activities is somewhat more problematic and creates an interesting paradox. As stated in the literature review, motivation involves both entering motivation (the decision to participate) and task motivation (the effort required to stay on task; Garrison (1997, p. 27). Participants’ comments of difficulty initiating and “getting in the habit” of Action Learning are consistent with and suggest both entering and task motivation difficulties. All participants engaged in an initial Action Learning activity as a course requirement in a post-RN baccalaureate degree program. Thus, the entering motivation for their initial Action Learning activity was extrinsic. None of the participants’ comments, however, suggested or implied that their subsequent Action Learning process was externally motivated. This is noteworthy because the research results indicate that involvement in
subsequent Action Learning projects is somewhat less consistent among participants. For example, one person admitted to not continuing to use Action Learning and another confessed to continuing to use the process “on and off.” Because of the apparent inconsistent motivation to engage in subsequent Action Learning, some concern must be raised about the degree or intensity of intrinsic motivation and extent and influence of extrinsic motivation to engage in Action Learning. An impression within the study is that the force (a course requirement) of external motivation to engage in Action Learning appears to be stronger and more influential than the force exerted through personal or intrinsic motivation (see Figure 2).

Once motivated to engage in Action Learning, however, participants’ focus on a practice problem or issue and task motivation to complete the Action Learning activity appeared to result through intrinsic rather than extrinsic motivation. This is significant because a characteristic of andragogy embedded within Action Learning is the expectation that adults are intrinsically motivated to engage and participate in learning activities. Thus, this study only partially supports the andragogical principle embedded in Action Learning that adults are intrinsically motivated to learn.

A third characteristic of andragogy is that adults desire control over learning activities and assume active responsibility for their own learning (Cross, 1986). Personal control and active responsibility for learning are embedded within Action Learning because a key characteristic of the process is the expectation of self-directed learning. A research finding, as discussed above, was that participants experienced some difficulty with self-directed learning. The degree or extent of difficulty as well as
Extrinsic motivation: Course requirement

Engagement in Action Learning

Personal intrinsic motivation: Need to solve problem

Source: Jane Lemke

*Figure 2.* The forces of internal and external motivation on engagement in Action Learning
specific characteristics of participants' self-directed learning difficulties cannot be discerned through participants' comments. However, the fact that self-directed learning posed some difficulty indicated only partial support and confirmation of the andragogical assumption within Action Learning that individuals are able to engage in self-directed learning activities.

According to andragogical, constructivist, and situated learning theories, learning is grounded or situated in everyday problems and issues and involves creating personal meaning from experiences and activities in the context of the individual and his/her real-world challenges. A key characteristic of Action Learning is the focus on practice-based problems and issues that occur, as Schön (1983) suggests, in the “swampy lowland” (p. 42) in which important and challenging problems exist that are often less amenable to textbook, ready-made solutions. For example, the problem of nurse-physician conflict and the issue of horizontal violence among staff were clearly situated within the individuals’ practice. These practice issues are less consistent with Schön’s high ground problems of technical knowledge and solution. Instead, the unique characteristics and nuances of the individual nurses’ practice setting and circumstances place the problems within Schön’s swamp, and the professional must create “artistic ways of coping with the phenomena” (p. 42). This study supports a fundamental characteristic of Action Learning that the process is grounded in learning that evolves through real-life swamp-like problems and challenging issues within an individual’s unique, personal practice setting. Thus, this study confirms and supports the relevance and applicability of andragogical, constructivist and situated learning theory within Action Learning as a process that is situated in these participants’ need to explore and
learn about relevant, meaningful, real-world issues and problems within an individual’s practice setting.

From both a constructivist and situated learning perspective, as discussed above, participants engaged in authentic learning that was situated within their practice and life world situations. From a situated learning perspective, “learning is not separated from the world of action” (Spence, 1998, p. 1) and involves the application of that knowledge to “solve problems related to everyday life circumstances” (p. 2). As previously stated, participants’ Action Learning activities achieved outcomes that resulted in action to resolve their identified everyday life/practice problems. Thus, this study’s findings support and confirm the constructivist and situated learning perspective within Action Learning that learning involves action as well as outcomes that achieve some resolution of practice problems. From a constructivist perspective, learning involves an individual’s active engagement in (Crowther, 1997; Jenlick & Kinnucan-Welsch, 1999) and construction of his or her own knowledge through personal interpretation of experience (Bednar et al., 1992; Cooper, 1993). Participants did not elaborate on their construction of learning. However, some comments indicated that the process promoted their thinking and learning about practice-specific problems. Although participants’ personal interpretation of experience cannot be discerned through their responses, the study indicated that their practice experiences and situations were incorporated into participants’ learning. Thus, this study infers, but cannot confirm, the constructivist theory that participants actively constructed their own knowledge through personal interpretation of experience.
The research results are less consistent with situated learning and communicative learning theory related to the importance of learning as a social process involving dialogue with others. Only 2 participants' comments implied the benefit of group learning. One individual stated that she "became part of group learning activity" to explore workplace documentation, and another participant commented that "using others as a sounding board is very helpful." Two reasons for this omission are possible. Participants' initial Action Learning process was a solitary activity because this was part of a required course in participants' degree program. In addition, none of the interview questions focused on group-based learning; thus participants were not prompted to consider this approach to learning. Gibbons (1999), Johnson (1998), Koo (1999), Marsick (1990), McNiff and Whitehead (2002), Morton-Cooper (2000), Revans (1998), Silins (2000), and Webster (2001) stress the importance and value of group-based learning within the Action Learning process. This study does not discount the importance of learning through dialogue with others; however, the lack of comments about group learning may suggest that this approach is not viewed as part of participants' learning orientation and repertoire. An Action Learning process was the focus of this research rather than a Participatory Action Learning process in which a key characteristic is the involvement of and learning within a learning set or group of individuals. The results of this study neither confirm nor refute communicative and situated learning theoretical perspectives that understanding and learning within Action Learning are promoted through dialogue with others.

The previous discussion demonstrated that the theoretical principles of andragogy, constructivism, situated learning, and communicative learning are embedded
in the conceptual framework of Action Learning. The literature review identified reflection and journaling as two of the key characteristics of the Action Learning process. The following discussion will consider whether the research findings extend, confirm, or refute the importance these characteristics of the Action Learning process.

As stated in the literature review, reflection is a key characteristic within the Action Learning process. Unfortunately, the interview did not elicit information about the specific reflective strategies used by participants. Despite this, a few comments promoted limited insight that illuminated some characteristics of participants' reflections. Some responses implied that participants engaged in both content and process reflection. Content reflection, with the focus on what an individual perceives, thinks, feels, or acts on, helps to define and describe our practice-based problems (Mezirow, 1991). Participants' comments that reflection helped to "get more in touch with...the core issue," "really look at an issue," "zero in on issues," and "identify areas of concern" suggested their use of content reflection to help define and describe practice-based problems. Process reflection, with the focus on how an individual perceives, thinks, feels or acts, promotes problem-solving activities (Mezirow). Participants' comments that reflection was used to "analyse problems" and "problem-solve" indicated the use of process reflection. Premise reflection, with the focus on why we perceive, think, feel or act as we do, helps to clarify our underlying assumptions, beliefs, or values (Cranton, 1996). Unfortunately, the interview did not elicit comments that indicated whether participants engaged in premise reflection. The research finding of participants' positive perception of reflection and their use of both content and process reflection support and confirm the value and importance of reflection as a key
component and characteristic of the Action Learning process for these participants.

The study findings indicated inconsistent use of journaling and that some participants experienced difficulty beginning and using a reflective journal. These findings imply a negative perception of journaling as an activity within the Action Learning process. Journaling is a key component of reflection and thus the Action Learning process, because journals assist individuals “to make sense of the experiences” (Boud 2001, p. 10) and promote self-awareness, problem stating, and problem solving (Kerka, 1996). This study suggests less support for and endorsement of journaling by participants. As a result, the research study indicated some concern about the extent to which journaling was perceived as a key component of reflection and thus a characteristic of the Action Learning process.

In summary, the study findings supported the andragogical principle that participants possessed a problem-centred orientation to learning. However, the andragogical principles that adults are intrinsically motivated to learn and are able to self-direct their learning activities were only partially supported by the research findings. Participants’ learning was authentic and grounded in their everyday problems, thus supporting both constructivist and situated learning theories. There were insufficient findings to confirm the constructivist principle that participants were able to construct their own knowledge and insufficient findings to support the situated learning and communicative learning principle that participants’ learning involved a social process that included dialogue with others. The study findings indicated that participants supported the Action Learning characteristic of reflection; however, participants demonstrated less support for journaling activities.
Implications for Practice

Revans (1998) states that the objectives of Action Learning are to identify and "make real progress upon the treatment of some problem...in the real world" (p. 15). The study findings demonstrated that participants' perceptions of the Action Learning process were positive because this allowed them to identify and achieve positive outcomes related to their practice problem. Thus, a practical implication of this study is the benefit of Action Learning as a process that assists professionals to identify and resolve practice problems.

The research findings indicated participants' positive perception of Action Learning as an activity that promoted their thinking and learning about a practice problem. Professionals are expected to maintain current practice-specific knowledge and skills. These are often acquired through formal continuing education (CE) activities such as conferences and workshops in which the instructor/presenter structures the learning objectives, content, and teaching strategies and attendees are passive recipients of knowledge. An interesting contrast can be noted between the learning involved in many formal, didactic professional CE workshops, conferences, or courses and the learning involved in an Action Learning activity. Although the words "education" and "learning" are often used interchangeably, a fundamental difference exists between the two terms. The term "learning," as a noun, describes the action involved in internal mental changes that may be discerned externally in the form of behavioural change, and as a verb, denotes the action of acquiring skills and knowledge. The term "education," however, refers to the process of managing external conditions such as conditions of instruction that facilitate the internal change called learning (Brookfield, 1986).
Although CE sessions may be informative and of interest to participants, the content is often more generalized in order to be applicable to potentially diverse participant interest, needs, practice settings, and situations. In contrast, a practical implication of Action Learning is that the process encourages an individual to engage in active learning that is practice-focussed, relevant, and directly applicable to the individual’s practice situation.

Despite the benefit of Action Learning to assist professionals in identifying, learning about, and resolving practice issues, the research raised some practical implications about professionals’ motivation to engage in Action Learning. All participants were extrinsically motivated to complete their initial Action Learning process as a course requirement in a post-RN baccalaureate degree program. The somewhat inconsistent engagement in subsequent Action Learning activities suggested that intrinsic motivation may exert less influence or motivation to engage in Action Learning. Was their extrinsic motivation to complete a required course perceived by some participants as stronger than their intrinsic motivation? The research results suggested that some professionals might not experience sufficient intrinsic motivation to engage in and complete an Action Learning activity. The research, therefore, raises the question of how professionals’ intrinsic motivation might be enhanced. It is interesting that the study indicated that participants lacked an understanding of the Action Learning process and related activities of self-directed learning and journaling. A practical implication of the research is that motivation to engage in an Action Learning activity might be enhanced through greater understanding of the Action Learning process and activities. As mentioned, the ability to perform many of the Action Learning activities,
such as self-directed learning, reflection, and journaling, is often assumed. The study’s findings and implications are consistent with Silins’s (2000) research, which concluded that one essential factor for the success of Action Learning is preparation of those engaged in the process (p.11) because “most of the participants… indicated that they were not well enough informed about what was involved” (p. 9). Motivation might also be enhanced through the personal gratification and a sense of accomplishment that result from successful completion of one Action Learning activity. Perhaps the realization that Action Learning achieves positive outcomes may be rewarding both personally and professionally for the individual. Thus, a practical implication of this research is that professionals’ intrinsic motivation to engage in Action Learning may be enhanced through increased understanding of the process, increased engagement in Action Learning and positive reinforcement that result from Action Learning outcomes.

The above discussion suggests an overriding practical implication that professionals may require some preliminary knowledge and skills prior to engaging in an Action Learning project. Professionals need to understand the difficulties they may encounter implementing Action Learning and strategies to resolve these. Undoubtedly, many adults (including educated professionals) may assume they possess the knowledge and skills to initiate an Action Learning process. Professionals view themselves as capable of identifying practice issues and problems. The practical implication of this research finding is that professionals should not assume an innate ability to engage in Action Learning. The slogan “be prepared” is apt.

An important component of Action Learning is self-directed learning and a practical implication of the research is that some professionals may need to enhance
their understanding of self-directed learning. The ability to engage in self-directed learning is an important personal attribute that is required in order to complete an Action Learning activity. However, as Taylor and Burgess (1995) suggest, many individuals often experience difficulties knowing "what to learn, how to locate and use resources, how to set boundaries on their learning and how to evaluate their learning" (p. 94) and thus require "some preparation for working in a self-directed way" (p. 87). Thus, a practical implication of this study is that, despite years of formal education, professionals should not assume an innate ability to be self-directed and may find the requirement for self-direction to be a challenge.

Professionals may benefit from an initial learning activity that promotes greater understanding of self-directed learning. A related practical implication is the question of how professionals enhance their self-directed skills and attributes in order to engage in and complete an Action Learning activity. What skills are needed? How are these skills and attributes acquired? A review of Action Learning case studies by I. Taylor and Burgess (1995) concluded that some preparation for working in a self-directed manner is important. Hatcher (1997) suggests the benefits of a workshop in self-directed learning to promote an understanding of the process and skills and to identify some strategies and techniques that might assist in the implementation of self-directed learning. Numerous books and articles describe strategies to enhance self-directedness; however, rather than a passive workshop, a more active, hands-on learning activity may be beneficial.

The research results indicated a positive perception of reflection within Action Learning. However, the negative feelings experienced by 2 participants are worthy of
consideration. B. J. Taylor (2000) comments that "it takes courage to invest in the depth of reflection... [and] you will need determination to keep on reflecting" (p. 71). Boud (2001) notes that individuals "need to focus on the feelings and emotions... [and these] may need to be discharged or sublimated" (p. 14). Numerous practical implications of the research finding evolve from this discussion. Professionals need to be aware of the potential for negative reactions, recognize negative feelings as soon as they occur, and be aware of and utilize strategies to overcome the negative feelings. Professionals need to realize when their own coping strategies are ineffective, acknowledge the need to obtain professional assistance, and utilize supports available. This may be uniquely difficult to nurses, who typically perceive themselves as care providers rather than care recipients.

Another practical implication supported by this study is the need for professionals to enhance their knowledge and skills related to journaling. Journaling is a key component of the Action Learning process because it promotes an awareness of practice problems, facilitates thinking about these problems, and enhances the reflective process. As previously stated, many professionals may assume journaling to be an assumed and innate skill. However, this study suggested that participants experienced difficulty, especially beginning their journaling activities. In fact, several indicated that they tend not to use a reflective journal. Journaling enhances reflection on practice issues, problems, and experiences not only at the outset of the Action Learning process. Subsequent journaling and reflection on journal entries may encourage deeper critical thinking and help to explore feelings, values, beliefs, emotions, and reactions about the practice issue and consider precipitating factors and circumstances. Further journaling
and associated reflections may expose dilemmas, contradictions, and questions. In addition, journaling may be used to record and reflect on progress to resolve the practice issue as well as expected or unanticipated outcomes (Ghaye & Ghaye, 1998; Holly, 1989; Kerka, 1996, 2002). In the absence of journaling, reflections may be shallow, critical thinking may be minimal, and key underlying issues may be overlooked. As a result, learning goals and objectives may be shortsighted, the breadth and scope of learning limited, and learning outcomes may not truly resolve the underlying practice problem or issue. The research finding, of a lack of wholehearted endorsement of and engagement in journaling has significant practical implications, because ineffective journaling might lead to ineffective reflection and thus may contribute to less effective implementation of Action Learning.

Journaling is a skill or behaviour that must be learned (Jarvis, 2001) rather than assumed (Jasper, 1999). Orem’s (1997) study indicated that learners “tend to benefit more from the practice of journal writing if they are given active guidance and positive reinforcement” (¶ 15) and concluded that “as effective as journals may be, you can’t assume that all journal writers know how to get started” (¶16). Thus, a practical implication is that professionals, including nurses, may need to learn how to journal and how to use journaling to promote reflection. However, once again, a more practical, hands-on learning activity may enhance professionals’ journal-writing skills.

A final practical implication related to journaling pertains to the concern expressed by one participant regarding legal implications of journaling. This issue was somewhat clarified through a telephone interview with a College of Nurses of Ontario (CNO) Practice Consultant. This person was unaware of any legal issues related to
journaling, and the CNO has not been contacted by any nurses with this concern. The Practice Consultant indicated that nurses are obligated to protect client confidentiality and this includes content in an individual’s reflective journal. This individual recommended that the issue would be prevented by maintaining client confidentiality within the nurse’s journal and omitting any details of clients, workplace characteristics, or descriptions of specific incidents that might compromise client confidentiality. Thus, a practical implication is that nurses need to be reminded that journal entries must not breach client confidentiality. Although sound advice, this does not address the legal implications should a nurse be subpoenaed to present journal notations as testimony during a trial. Documentation such as the patient’s chart may be subpoenaed. Might a subpoena extend to journal notations? For example, a nurse who was involved in or had witnessed inappropriate or incompetent care might use journaling to explore and reflect on this situation without breaching client confidentiality. Could this be subpoenaed? The resolution of this issue is beyond the focus and scope of this study. However, the inclusion of the comment by one participant indicates that the concern is, at the very least, worth noting.

The time involved implementing an Action Learning activity emerged as a theme that has practical implications for professionals contemplating Action Learning. Individuals must recognize at the onset that an Action Learning project will not be completed in days, weeks, or possibly months and that the activities of reflection, journaling, and learning are all time-consuming. Maintaining a journal can be both time-consuming and exhausting (Hancock, 1999). The most frequently cited barrier to journal writing and reflection is time (Cox et al., 1991), especially finding enough quiet,
uninterrupted time (Peterson & Jones, 2001). I. Taylor and Burgess (1995) indicate that
time management is an issue for many individuals. Marsick (1990) comments that real-
life problems do not become solved overnight and notes that an Action Learning project
may involve 6 to 9 months of work. Thus, a practical implication of the research is that
professionals need to be aware of the time required to complete an Action Learning
project including reflection and journaling.

Regardless of whether Action Learning is accomplished during or outside of
work hours, time availability and conflicting time demands create difficulties for many
professionals. A common complaint is “not enough hours in the day.” The solution to
time issues is undoubtedly complex and will be unique for each individual. B. J. Taylor
(2000) recommends an approach to time issues is to think about “making” time instead
of “finding” time, to be more proactive in claiming it and to prioritize time to attend to
important tasks (p. 121). The findings suggest that participants need to be aware of the
amount of time required to implement an Action Learning project. In addition,
participants need to learn about and develop time-management skills and organize
priorities such that work, family, and social commitments are not neglected, yet time is
made available for Action Learning activities.

The research results have significant implication for nurses within the province
of Ontario. As stated, the College of Nurses of Ontario requires every registered nurse
and registered practical nurse in Ontario to comply annually with the Reflective Practice
program requirements. This includes completion of a learning activity that parallels the
Action Learning process. As such, many research findings have direct practical
implication for nurses’ compliance with Reflective Practice program requirements.
One implication is motivation to engage in the Reflective Practice process. Nurses are externally motivated to comply with the College of Nurses of Ontario’s requirements since the annual registration renewal form requires nurses to attest that they have participated in Reflective Practice within the previous year. However, this involves merely placing a check mark in the appropriate location on the annual registration renewal form. Is this sufficient extrinsic motivation? Once motivated to engage in an Action Learning activity, a practical implication is that individuals are expected to self-direct their own learning within this process. The College of Nurses of Ontario (CNO) (1998) states that nurses are required to engage in learning that is self-initiated and self-directed (p. 5). As such, nurses are expected to be self-directed and able to perform the required activities. The practical implications of this study include the need for professionals (a) to understand the benefits of Action Learning (and by extension Reflective Practice) process, (b) to understand and enhance their reflection, journaling, and self-directed learning knowledge and skills, and (c) to be aware of problems or challenges they may experience while implementing the process.

The fact that the word “reflection” is included in the name of the program indicates the importance of this activity within the College of Nurses of Ontario’s Reflective Practice program. The research findings indicated a strong positive perception of reflection and suggested that participants engaged in both content and process reflection. This supports the importance of reflection as a key characteristic and component of the CNO’s Reflective Practice program. The practical implication of the research findings is the continued use of reflection as an important component within Action Learning and the CNO’s Reflective Practice program.
The College of Nurses of Ontario recognizes that implementation of the Reflective Practice program implies an effective professional development system within the workplace that includes access to tools and resource materials such as articles, textbooks, and conference papers (Campbell & Mackay, 2001). The learning component within the Action Learning process is often described using the formula \( L = P + Q \) or, in other words, learning \( (L) \) results from the combination of programmed knowledge or the acquisition of relevant knowledge \( (P) \) and questioning insight \( (Q) \); Koo, 1999; Marsick, 1990). Programmed knowledge, called technical rational knowledge (“know that” knowledge), refers to knowledge that is external to the knower and found in books and other retrieval systems (McNiff & Whitehead, 2002). Consistent access to literature and other information sources emerged in participants’ comments. This study demonstrated that participants enjoyed access to professional literature and thus programmed knowledge. Access to online databases appeared common among most participants as well as a wide range of other information sources such as coworkers, seminars, workshops, conferences, and allied health care professionals. The findings underscore the practical implication that access to programmed knowledge is essential to the implementation of Action Learning.

Provision of learning opportunities extends beyond access to professional literature and includes support of learning activities within the workplace. Participants perceived a lack of support or encouragement to engage in an Action Learning activity within the workplace. As one individual stated, “There needs to be a working environment which recognizes the value of reflective knowledge in bringing about positive practice changes.” The practical implications of these perceptions are twofold.
The first implication relates to the characteristics of typical learning activities within health care settings, and the second implication relates to the organizational benefits that evolve through Action Learning.

This study indicated that participants perceived a lack of support within their workplace for Action Learning activities. Health care organizations tend to provide formal learning activities such as orientation sessions and learning activities such as "in services." In fact, the College of Nurses of Ontario’s (CNO) Quality Practice Setting Attributes Model suggests that hospitals promote staff continuing education through orientation programs, continuing education activities, and training specific to a position or role (Mackay & Risk, 2001). Certainly, these learning options are worthwhile; however, they tend to involve passive learning by attendees. In contrast, a characteristic of Action Learning, consistent with the CNO’s Reflective Practice program, is an expectation of active, self-directed, personal involvement in learning activities. The practical implication is that health care employers and hospital-based educators may wish to explore strategies that encourage and support Active Learning activities within the workplace.

The perceived lack of support and encouragement of Action Learning endeavours within the organization presents a paradox, since Action Learning outcomes are extremely relevant to the workplace. The intent of Action Learning is to achieve some action or change within the work setting (Revans, 1998). This study demonstrated that participants’ Action Learning activities were of benefit to clients, staff, students, and, by extension, ultimately the organization. Historically, Action Learning originated as a process that promotes learning within an organization in order to resolve workplace
problems and achieve positive outcomes. Have we lost sight of this? Thus, a practice implication that evolves from this study is the concern that Action Learning is not wholeheartedly embraced within health care workplaces, despite its focus on practice-relevant outcomes. The challenges within the current health care environment might account for the lack of support for Action Learning activities. Alternatively, however, perhaps the challenges of funding issues, bed shortages, long wait times, staff burnout, and staff shortages create a very real need for innovative thinking and learning within the workplace. As the College of Nurses of Ontario (1998) suggested, the change may be minimal, but nonetheless “small changes, eventually add up to larger changes” (p. 5). Action Learning may not solve the nursing shortage, resolve staffing issues, or eliminate staff burnout; however, Action Learning activities may identify some strategies, regardless of how small, that might promote positive change within health care settings.

As stated, all nurses within Ontario are required to comply with the CNO’s Reflective Practice requirements. This raises one final practical implication of this study. All participants were registered nurses who had completed a post RN, baccalaureate degree program and had previously achieved an RN diploma through a community college program. Education for Registered Practical Nurses (RPN) within Ontario has recently evolved to a 2-year community college program. However, many RPNs in the province graduated from a much shorter program. In fact, an early program was only 9 months in duration. The study indicated that participants experienced some difficulties implementing the Action Learning process. This prompts some concern that RPNs might experience greater difficulty implementing the Reflection Practice
requirements, perhaps because several Action Learning activities and personal attributes may not have been included in their PRN education.

Implications for Further Research

The research findings and conclusions suggest numerous opportunities for further research that might contribute to an enhanced understanding of key components of the Action Learning process and activities. Future research might explore professionals’ perceptions of practice problems that may be amenable to Action Learning. In addition, further research is indicated to explore the characteristics and degree of intensity of practice issues, problems, and situations that influence professionals’ motivation to engage in Action Learning. Future studies might compare perceptions of nurses engaged in a solitary Action Learning activity to nurses engaged in a Participatory Action Learning process that includes dialogue and discussion with others. Further research might explore whether age, years of experience as an RN, or years in a specific position influence nurses’ participation in Action Learning and/or the CNO’s Reflective Practice program. Additional research might explore the perceptions of Registered Practical Nurses and the problems, challenges, and difficulties they experience. For example, is active, self-directed learning a challenge for these nurses? To what extent are RPNs familiar with and able to utilize professional literature?

Self-directness within Action Learning emerged as an issue within the research findings. Although considerable research has been completed regarding self-directed learning, additional research may be beneficial with a specific focus on professionals’ (including nurses’) self-directness within Action Learning. This might include research that explores professionals’ perceptions of their self-directed skills, attributes, and
experiences and how nurses and other professionals perceive their ability to be self-directed within the Action Learning process.

The research finding that some emotional difficulties may be experienced during reflection suggests the need for further research to explore professionals’ perceptions of situations, problems, or issues that tend to trigger negative emotions during reflection. In addition, research might explore personal attributes that prompt negative feelings and protective personal characteristics that reduce the extent or degree of negative responses as well as strategies that assist individuals to overcome the negative feelings within reflection.

Further research might explore factors that enhance the use of journaling as a reflective practice tool. Additional research might explore workplace and employer characteristics that encourage or promote nurses to engage in Action Learning within the health care settings. Finally, research might explore employers’ perceptions of the benefits of Action Learning and the use of the process as an organizational learning strategy.

In summary, further research may be beneficial to acquire a richer understanding of the experiences of professionals engaged in Action Learning. In particular, additional research may explore the challenges and difficulties within this process and ways in which implementation of Action Learning and the CNO’s Reflective Practice program may be enhanced, including the role of employers and educators.

Conclusions

As professionals, nurses are expected to engage in ongoing, practice-relevant learning throughout their career. The Action Learning process incorporated by the
College of Nurses of Ontario in its Reflective Practice program provides a framework through which professionals can engage in active, practice-specific learning with the intent of resolving a work-related problem or issue. This qualitative research study was undertaken to explore the perceptions of 11 nurses who had completed at least one Action Learning activity. The research was intended to acquire an understanding of the perceptions of these individuals within three broad research questions: (a) What were the nurses' perceptions of their Action Learning experiences? (b) What were their negative and positive perceptions of learning activities within the Action Learning process? and, (c) What were their perceptions of the barriers and challenges experienced by participants?

The research concluded that participants' overall perceptions of the Action Learning experience were positive. In addition, some characteristics of Action Learning were perceived as positive, specifically a focus on practice issues and practice-relevant outcomes and the perception that the process enhanced participants' thinking about a practice problem. Participants viewed reflection as positive; however, some comments prompted a concern that reflection may cause potentially upsetting negative feelings that need to be resolved. As well, the research indicated that some participants experienced difficulties beginning the Action Learning process, beginning journaling, and implementing self-directed learning activities. Several barriers to implementation of Action Learning relate to lack of knowledge of the process and activities, including journaling, the time involved in an Action Learning process, and finally the lack of support for Action Learning activities within the workplace. Numerous practical
implications were identified for each of these research findings as well as suggestions for future research.

The research conclusions and practical implications are, it is hoped, of interest to nurses to promote and enhance compliance with the Reflective Practice program requirements of the College of Nurses of Ontario. More significant, however, is the hope that nurses will become more familiar with the Reflective Practice program and Action Learning process and activities and become more intrinsically motivated to engage in ongoing, practice-relevant, professional learning.
References


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Appendix A: Action Learning Course Requirements

All participants are graduates of a distance education, post RN baccalaureate degree program. Their final, mandatory two-semester course required students to complete an Action Learning activity. The following summarizes the expectations of each assignment within the course.

Semester #1, Assignment #1a: Practice reflections and observations
This course commenced with a requirement that students reflect on their nursing practice. They were encouraged, but not required, to maintain a reflective journal.

The first assignment included a discussion of the student’s reflective process and a summary of the positive and negative impressions of the reflections and observations. Students were then required to identify, discuss and analyze up to four practice issues that emerged through reflection. Students were expected to discuss details of their reflections and observations that considered the contributing factors, issues and implications of the practice issues supported by anecdotal evidence from their reflections and observations.

Semester #1, Assignment #1b: Annotated bibliography
This portion of the first assignment was intended to enhance students’ understanding of the professional practice issue(s) identified during their reflection. Students were required to submit annotated bibliographies of 20 articles pertaining to up to four practice issues.

Semester #1, Assignment #2: Analysis of evidence-based practice
Students were required to select one practice issue identified during their reflections and continue their literature review in order to analyse their current practice based on current professional literature. The second assignment required students to conduct a literature review of the topic, demonstrate whether or not their identified professional practice was supported by professional literature and discuss possible alternatives that might enhance this practice based on literature.

Semester #1, Assignment #3
Students were required to submit a proposal for their Action Learning project (to be completed during the second semester). Within the proposal, students were required to identify and explain the rationale for their choice of practice issue, incorporating a discussion of their reflections, observations and literature review. Students were required to identify and justify their learning goals and objectives, identify the objective of their Action Learning project and relate this to anticipated achievements within their practice as well as the methods and strategies to determine whether the outcomes and achievements were accomplished.
Semester #2, Assignment #1 (required submission – no marks assigned)
Students were required to submit an interim report of their Action Learning project describing their accomplishments to date and any difficulties or problems encountered that may impact the success of their project. This assignment served to formalize contact with the instructor. However, informal contact was provided, as needed.

Semester #2, Assignment #2
Students were required to submit a report of their Action Learning activity that included the rationale for their choice of practice issue and an in-depth literature review of the topic. Students were required to describe their learning accomplishments and identify, describe and provide supporting evidence of the outcomes they achieved. Students were then required to evaluate the effectiveness of their Action Learning activity based on their initial goals and objectives and whether, in retrospect, their Action Learning process could have been enhanced. Students were required to discuss the implications of their Action Learning activity, consider recommendations for future, similar Action Learning activities relevant to the practice issue.
Appendix B: Email interview

Dear research participant,

This interview is intended to explore your perceptions of your initial and subsequent Action Learning activities. During your initial Action Learning process you maintained a reflective journal to identify a problem or issue within your practice that could be enhanced, performed a literature review to learn about the identified practice issue, utilized this learning to complete a practice-specific activity and then summarized and evaluated your Action Learning activity.

I am interested in learning whether your initial Action Learning activity was a positive or negative experience for you, and why, whether you continue to use an Action Learning approach in your practice, what barriers prevent you from doing so and what might enhance your future use of Action Learning. You may be contacted by phone or email, following my receipt of your responses, in order to clarify my understanding of your comments.

Initial Action Learning process

♦ Please describe your initial action learning activity.

♦ Please describe your perceptions of your initial action learning activity including the positive or negative characteristics of this process.

♦ To what extent did your initial Action Learning activity enhance your professional practice?

Subsequent Action Learning activities

♦ Have you continued to use the Action Learning process within your practice? Why or why not?

If you continue to use the Action Learning process:

♦ Do you continue to reflect on practice issues? If so, do you record your reflections in a journal? What are your impressions of reflection and journaling?

♦ Do your reflections assist you to identify specific practice issues? Please describe.

♦ Do you use professional literature to enhance your understanding of an identified practice issue? To what extent do you have access to professional literature?

♦ Do you use other sources of information to learn about your identified practice issue?
Do you ‘apply’ your learning activities to enhance your practice related to a specific practice problem or issue? If so, please describe.

Do you perceive any barriers or impediments to implementing a personal Action Learning activity?

What would promote or enhance your implementation of Action Learning?

Please feel free to add any further comments regarding Action Learning.

Follow-up email interview.

A follow-up, email-based interview was conducted with two individuals who experienced negative feelings during their reflection activities. Their interview included the following questions:

1. Please elaborate on the strategies you used to overcome the negative reflective feelings.

2. What advice would you give other nurses who experience these negative emotional feelings during reflection?