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Abstract

The purpose of this pilot study was to examine the effects of reflective writing when it was integrated into graduate students' early clinical experience in speech-language pathology. Journaling was introduced to teach, support, and foster Jesuit ideals, particularly that of reflection. Statistical analysis comparing students' pre and post semester understanding of how to apply journaling to themselves, their clients, their clinical education, and Ignatian Pedagogy showed a significant increase over time for each of these areas. In addition, effect size analysis indicated that the "learning curve" was great, as all areas of understanding (self, others, education, and Ignatian Pedagogy) showed a remarkable improvement from pre to post intervention, suggesting that reflection promotes such understanding.

Jesuit Education

In Jesuit institutions such as Loyola University Maryland, faith and reason are equally supported and reflected in the mission that states, in part, that the University is "committed to the educational and spiritual traditions of the Society of Jesus and to the ideals of liberal education and the development of the whole person."[1] These traditions inform a main component of Jesuit education known as Ignatian pedagogy. This signature pedagogy is not specific to any individual discipline; rather it is meant to be, as many Jesuit scholars note, "a way of proceeding," holding student competence and compassion as its goal.[2] Five educational principles comprise the Ignatian pedagogical paradigm: (a) context (What needs to be known about the learners?), (b) experience (What is the best way to engage learners as whole persons?), (c) reflection (How can learners more deeply understand what they have learned?), (d) action (How do we move from knowledge to action?) and (e) evaluation (How is growth assessed in mind, sprit, and heart?).[3] It is through such a teaching model that a Jesuit education "seeks to develop the whole student-mind, body and spirit."[4]

Such a teaching approach seems ideally suited to the Department of Speech-Language Pathology as care for others is central to the profession. Most, if not all, faculty members in the department are committed to and directed by the mission and goals of the University. They are familiar with the Jesuit ideals, particularly that of *cura personalis* ("care for the whole person"). It is only recently, however, that faculty have undergone training in Ignatian pedagogy allowing understanding to move beyond theoretical concepts into reflective action. This reflective action is focused both on examining ourselves as instructors as well as teaching students how to integrate Jesuit concepts into learning and being. The teacher-learner relationship is both central and crucial, as explained in the 2003 document, *Ignatian Pedagogy: A Practical Approach* by The International Commission on the Apostolate of Jesuit Education (ICAJE), which states that the primary goal of Ignatian pedagogy is to support and facilitate a relationship between the learner and the truth. It is the teacher's responsibility to create the conditions for the student to collect and recall personal experiences, including thoughts, feelings, insights, and values, in order to assimilate novel events and information, thereby expanding

spiritual and cognitive knowledge. Reflection is a central element in this relationship.

Reflection is a familiar term used by many in academia; in particular it is often noted in the scholarship of teaching and learning (SoTL) literature.[5] The Ignatian concept of reflection is explained as the "simple but powerful experience of revisiting one's experiences deliberately and in detail."[6] This process allows the learner to come closer to the goals presented by the ICAJE; that is, to "grasp the essential meaning and value of what is being studied, to discover its relationship to other facets of human knowledge and activity, and to appreciate its implications in the continuing search for truth."[7] Ultimately, the intent of reflection is to support a process that affects and molds the consciousness of students to the point that they are urged to go beyond knowing and move into action.

This is not to imply, however, that all learners (and teachers) must adhere to a Christian faith in order to participate in, and benefit from, a Jesuit education. For example, Loyola's vision statement pronounces that the University "strives to lead students, faculty, staff, alumni, and friends forward to pursue an examined life of intellectual, social, and spiritual discernment"; goals which could be applied to universities beyond the 28 Jesuit institutions in the United States. [8] In addition, the practice of reflection is certainly not specifically Jesuit, as many disciplines have integrated reflection into their pedagogy, including education, nursing, and physiotherapy.

In 1983, Schön published a guide for practitioners on reflective practice, grounded in the earlier philosophies of Dewey (i.e., early 1900s) and Lewin (1950s) in which examining the implications of another's viewpoint was noted as a key element in education and even enlightenment.[9] Schön argued that teaching reflective practice where the student thoughtfully considers her own experience as a means of connection between knowledge and action will lead to improved professional development, further explaining that providing information without teaching about thoughtfulness was incongruous to optimal learning and student development.[10] In 1985, Boud, Keough, and Walker[11] presented a model for reflection in

higher education, specific to the adult learner, claiming that reflection is what allows an experience to transform into learning. In this model, reflection involves three phases: (a) returning to the experience, (b) connecting with the feelings, and (c) evaluating the experience.

These ideas and models are consistent with the Jesuit approach, supporting what is known as "slow teaching"[12] where students are taught and encouraged to carefully examine their own experience as a person living in the world with others. In this way, reflection may be a cornerstone of Jesuit education, whose goal, according to Father Pedro Arrupe, the 28th Superior General of the Society of Jesus, is "to form men and women for [and with] others."[13]

Self-Reflection and Speech-Language Pathology

Students in speech-language pathology are obligated by their Code of Ethics, established by the American Speech Language Hearing Association (ASHA)[14] which provides guidelines for ethical behavior and treatment of clients and colleagues. In addition, students must demonstrate competence across a variety of standards including knowledge of disorders, principles and methods of assessment, and completion of successful clinical experiences in evaluation and intervention with people with varying communication disorders. Furthermore, students must demonstrate adequate and appropriate "interaction and personal qualities."[15] However, ASHA does not mandate competence be achieved in self-reflection or require that clinicians engage in on-going assessment of who and how they are when working with others. Overall, the scope of the graduate program, as guided by the accrediting body, ASHA, is to develop competent, qualified speech-language pathologists; this scope however focuses primarily on "the other," as faculty teach and support students to interact and provide service to clients with communication disorders. Because the program in speech-language pathology is housed in a Jesuit university, it can, however, integrate the Ignatian tradition of self-reflection, as it relates to the greater good, into the program. In this way faculty can engage in, as Balestra called disciplinary inquiry, as well as model and promote valuable "life skills" that will

support students' academic, personal, and possibly, spiritual development.[16]

The use of reflective writing in speech-language pathology (SLP) has been studied, although not extensively. Most recently, Hill, Davidson, and Theodoros completed a study examining the reflection skills of students in an SLP program about their experiences interviewing patients. [17] The authors incorporated reflective writing as a means to develop critical thinking skills, hoping to provide the students with an opportunity to integrate knowledge and reason. Journal writing was chosen, according to the authors, as previous research had found it to be "valuable in supporting the development of reflective practice in speech–language therapy students." [18]

The Hill et al. study found that even novice students were capable of reflection;[19] however few were capable of engaging in critical analysis in their writing, similar to the outcomes of Thorpe and Wong, Kember, Chung, and Yan. [20] However, Hill at al. noted that in other studies, specifically those of Plack et al.[21] and Williams, Wessel, Gemus, & Foster-Seargeant[22] (2002), approximately 40% of the participating students *were* capable of critical reflection "at the highest level." [23] These inconsistencies, Hill et al. postulated, were due to the differences in the pedagogical models of reflection used, noting that in their 2012 study there was no training or formal instruction about reflection as either theory or practice. [24] In addition, the participants did not receive feedback on their writing, nor were there opportunities for group discussion. In their discussion, Hill et al.[25] noted that the students could have benefited from the opportunity to talk to others, including peers and educators, and subsequently think about others' points of view.

Other research, particularly in teacher education, found that having the opportunity to share their reflections with others had a positive effect on students. Kettle and Sellars found peer reflective groups allowed students to examine and question their own preconceived ideas of teaching. [26] They also proposed that the students were being actively introduced to collaborative learning, a challenging but critical skill needed in a teaching career. These results support the earlier findings of Ojanen who examined the developmental

trajectory of student teachers as well as the varying contextual factors which may have impacted the change. [27] This author found that the students demonstrated improved personal and professional development over time, directly affected by, among other factors, the implementation of group reflection and the presence of role models. In speech-language pathology, one such role model is the clinical supervisor.

Clinical Supervision

According to the American Speech-Language-Hearing Association, clinical supervision is a crucial, highly complex component in the education of students and "consists of a variety of activities and behaviors specific to the needs, competencies, and expectations of the supervisor and supervisee, and the requirements of the practice setting." [28] The relationship between the supervisor and the student is of great importance, requiring effective interpersonal communication grounded in mutual respect. For novice students, the clinical experience, and subsequently the interpersonal relationship, may be one fraught with anxiety; anxiety of the unknown, anxiety about how they are evaluated, and anxiety about transitioning classroom based concepts into clinical competence. For the novice clinician the emphasis on her performance may overshadow or preempt her self-reflection. It is from here, however, that direct teaching about and modeling of self-reflection can support and promote an open, positive relationship between the student and the supervisor.

In a survey conducted by Ostergren, qualitative results found that "a supervisor's openness and approachability" were one of the most valuable elements of the student-supervisor relationship. [29] Using written reflection journals can promote a positive relationship between students and supervisors as well as self-reflection, according to Vega-Barachowitz and Brown.[30] These authors implemented a system of written journals with their graduate clinicians, requiring them to document (a) "outside experiences" and subsequent reflection, (b) "inner experiences" and subsequent reflections, and (c) objective and subjective "personal growth."[31] The use of the journals allowed the students to ask for help, express negative and positive feelings, as well

"problem solve, speculate, reflect, tattle, and to give their supervisor positive and negative feedback."[32] In addition, the use of written journals gave the supervisors an opportunity to know the student clinicians better and to have "discussions" that would not typically occur even in an individual conference. Clinical supervision is much more than direction about intervention; rather it is an opportunity to teach about, model, and instill, what Schön labels, "reflection on action" which will ultimately lead to "reflection in action" or as it is more commonly known, *thinking on your feet*.[33] "Depending on the discipline, content may vary enormously, but it is not possible to work on behalf of human beings to try and help them without having powerful feelings aroused in yourself"[34] Reflection, when grounded in an atmosphere of honesty and trust, can create an environment of safety, calmness and support- an environment in which people can do their best thinking.[35]

Purpose of the Study

This current study examines one attempt to teach, support, and foster Jesuit ideals with a particular emphasis on reflection. The students in Speech-Language Pathology (SLP) used their own experiences as the core of their reflection, guided by their clinical supervisor on how to express and explain that experience and connect it to further and future understanding of clinical experiences. In addition, group conversation and continued supervisor guidance provided an opportunity for students to consider action based on what they have learned. The purpose of the study is to examine the effects of reflective writing integrated into graduate students' first clinical experiences in speech-language pathology.

Methods

Design

This pilot study was a one group, pre-test post-test survey design, examining students' self-perceived changes in understanding and application of reflective writing during one semester of a clinical practicum. This repeated measures design was selected to evaluate change in student perceptions before and after the intervention. In addition, qualitative information was collected regarding the overall experience and impact of journaling. This provided additional insight into the strengths and weaknesses of the intervention that could not be obtained from the survey alone.

Participants

Twenty-six full time, first-year, graduate students in speech-language pathology were participants in this study. Participants were predominantly white (save 1 student who identified as Asian) females ranging from 22 to 47 years old (M = 25.07 years). All of the students were enrolled in a clinical internship course at Loyola University Maryland in which they were, according to the University catalogue, introduced to the professional practice of speech-language pathology targeting the specific skills needed in the professional domain. Students were responsible for assessment and intervention of clients with a variety of disorders affecting communication. The students participated in the study in either the fall or the spring semester of their first year of graduate school; the study spanned two consecutive academic years and consisted of a total of three small groups (see Table 1). The course instructor and content remained consistent across the semesters; however students were assigned a larger caseload in the spring (i.e., students were responsible for 4-6 sessions per week in the fall; 6-8 in the spring).

Procedures

Assessment. Approval of the Loyola University Maryland Institution Review Board (IRB) was obtained and written informed consent was received from all participants. Students completed paper/pencil pretest and posttest assessments at the beginning and end of each semester consisting of the following four statements: (a) I understand how to apply journaling to my clinical education; (b) I understand how to apply journaling to Ignatian pedagogy; (c) I understand how to apply journaling to personal reflection including examining values and beliefs; and (d) I understand how to apply journaling to reflection including examining client/caregiver values and beliefs. The students responded to each statement using a Likert scale of 1 to 5 (i.e., 1: strongly disagree; 2: disagree; 3: neutral; 4: agree; 5: strongly agree). The posttest was conducted 11 weeks after the pretest on the final week of the semester (alpha = .64). (Reliability analysis was conducted on posttest results only as, "judging the

Table 1. Participant characteristics by semester

Characteristic	Spring 2012 (N = 12)	Fall 2012 (N = 7)	Spring 2013 (N = 7)	Summative Data (N = 26)
M Age (range)	24 years (21-28 years)	24 years (22-27 years)	28 years (22-47 years)	25 years (21-47 years)
Ethnicity	100% White, Non-Hispanic	100% White, Non-Hispanic	86% White, Non-Hispanic (N=6) 14% Asian (N=1)	96% White, Non-Hispanic (N=25) 4% Asian (N=1)
UG or PB at Jesuit Institution	50% (N=6)	14% (N=1)	71% (N=5)	46% (N=12)
UG in SLP or Communication Disorders (traditional)	50% (N=6)	43% (N=3)	29% (N=2)	42% (N = 11)

UG=Undergraduate; PB=Post-baccalaureate

reliability of the instrument based on the pretest scores is premature.")[36] In addition, at posttest the participants responded to four supplementary evaluative statements: (a) I enjoyed the weekly writing exercises; (b) I enjoyed listening to others share their writing; (c) I would recommend this process be a part of future clinical rotation; and (d) I would prefer this to be in blog form. These supplementary statements required *yes/no* responses and were not considered in the statistical analysis.

Pre-intervention. All groups received information on Jesuit philosophy through Department and University clinical orientations in the fall semester of their first-year. At the Department's new student orientation, the students' inaugural event of their program, all first year graduate students were provided with information on the Department and University's mission as it relates to the Jesuit tradition. In particular, the students attended a 30-minute lecture on the University's core values, including academic excellence, focus on the whole person, honesty and integrity, and the role of discernment, all of which are central tenets of a Jesuit education. The following day, all students attended a 60-minute lecture on "the Jesuit influence on service and training" in the Clinical Center, their first year placement.[37] This lecture included information on Jesuit philosophy (e.g., to educate men and women of competence; to learn, lead, and serve in a diverse and changing world) and Ignatian Pedagogy (i.e., context, experience, reflection, action, evaluation), and concluded with

an opportunity to engage in communal silent, written, then small group, reflection on "how to put spirituality into action."[38]

Guided reflection. Following the onset of either the fall or spring semester each week, for 10 consecutive weeks, the graduate clinicians participated in weekly guided reflection exercises facilitated by their clinical supervisor (the second author). The reflection exercises varied across each week, although a similar format was implemented within and across the semesters. Specifically, a weekly topic was identified, and the student clinicians were instructed to "write [silently] for 5 minutes without stopping" in their journals. Topics were derived from various sources and were presented in the following order: (a) *Joy, (b) First Car, (c) What makes you uncomfortable?, (d) I'm good at…, (e) What is your most invaluable possession?, (f) I'm most proud of…, (g) Change, (h) Beauty, (i) Moving On,* and (j) *Joy* (repeated purposely). Topics were selected by the clinical supervisor and were modified from a session presentation at the American Speech Language Hearing Convention, and from collaboration with a professional educator who participated in a similar program while completing a student teaching practicum.[39] The order of the topics presented was at the discretion of the clinical supervisor; however she intentionally started the reflection process with prompts that were more concrete and literal, ending with ones which were more abstract, yet generic in order to facilitate student comfort with the reflection process. At the completion of five minutes, all

participants and the supervisor read verbatim what they had written in an uninterrupted, testimonial format. Following the testimonies, the clinical supervisor facilitated a conversation related to any common theme she identified in the readings (i.e., "First Car" led to a discussion of independence; "Beauty" led to grandmothers; "Joy" led to family and personal achievements). The clinical supervisor then connected these themes to the student clinicians' current clinical practice; for example when discussing pride, the supervisor commented and probed, "That was a moment you were proud of. What moments are your clients proud of?" Additionally, the graduate clinicians were verbally instructed on the key components of Ignatian Teaching Pedagogy (i.e., "Context, Experience, Action, Reflection, Evaluation") and how this teaching framework is useful in the clinical application of speech-language pathology. This instructional conversation occurred one time per program, typically at week 7.

Results

Results of correlated t-test analyses, presented in Table 2, show students perceived a statistically significant increase in their understanding of clinical journaling, as it relates to clinical education, Ignatian pedagogy, their own values and beliefs, and the values and beliefs of their clients. According to the paired samples t-test, a similar change was noted for items 1- *I understand how to apply journaling to reflection including examining client/caregiver values and beliefs*, 4- *I understand how to apply journaling to my clinical education*, and 2- *I understand how to apply journaling to Ignatian pedagogy* with mean differences of 1.5, 1.46, and 1.346, respectively, from pretest to posttest. Item 3- *I understand how to apply journaling to personal reflection including examining values and beliefs*, was also statistically significant with a mean difference of .72 from pre to posttest.

Results of effect size analyses, also presented in Table 1, show that the magnitude of the treatment effect was quite large for all of items. Specifically, all effect sizes were greater than 1.3, indicative of at least a "large" effect as defined by Cohen indicative that the intervention had very high practical significance.

Results of the qualitative remarks at posttest were as follows: (a) 100% of the students reported that they enjoyed the exercises; (b) 100% of the students reported that they enjoyed listening to others share their writings; and (c) 100% of the students reported that the reflection activities should continue in future clinical rotations. Finally, 0% of the students reported that they preferred the writings to be completed in blog form.

Table 2. Survey scores and results of correlated t-tests for reflective writing

Survey Item	Pretest Mean (SD)	Posttest Mean (SD)	t	d
Composite Score	3.38 (.97)	4.64 (.52)	13.64*	1.62
Item 1-Journaling & clinical education	3.27(.87)	4.73 (.45)	9.18*	2.11
Item 2-Journaling & Ignatian pedagogy	3.04 (1.11)	4.38 (.64)	6.08*	1.48
Item 3-Journaling & self-values/beliefs	4.08 (.64)	4.8 (.41)	5.308*	1.34
Item 4-Journaling & client values/beliefs	3.15 (.88)	4.65 (.48)	8.446*	2.12

* p < .001 (two-tailed)

Discussion

The purpose of this pilot study was to examine the effects of reflective writing when it was integrated into graduate students' early clinical experience in speech-language pathology. Journaling was introduced as a means to teach, support, and foster Jesuit ideals, particularly that of reflection. Reflection is a central component to Ignatian pedagogy, and the integration of reflective writing into an entry level graduate course in speech-language pathology was an attempt to provide the students with both knowledge and skills about the role of contemplation in clinical practice. Overall, the results of this preliminary study indicated that integrating reflective writing into a first year clinical course was seen by graduate students as an effective method to learn about and practice reflection. This simple approach of deliberately revisiting experiences[40] was both appreciated by and beneficial for the students during their early experiences as graduate clinicians.

Examination of Results

Statistical analysis comparing students' pre and post semester understanding of how to apply journaling to themselves, their clients, their clinical education, and Ignatian Pedagogy indicated that there was a significant increase over time for each of these areas. In addition, further analysis (i.e., effect size) indicated that the "learning curve" was great, as all areas (self, others, education, and Ignatian Pedagogy) showed a remarkable improvement from pre to post intervention, indicative that the actual experience of reflection is a necessary element to promote such understanding. In sum, based on these cursory findings, written reflection was found not just to work but to work well.

As noted in the procedures, at the beginning of their graduate experience all of the students in the study attended two lectures about Ignatian pedagogy and received cursory information about reflection. This information was presented in a large lecture format during orientation to all students in the program, not just to those involved in this study. These lectures were designed as an introduction to the program and its alignment with Jesuit values introducing the topics of attention and discernment. This preliminary

information may have influenced the pretest results as only 16% of the students indicated that they did not understand how to apply journaling to themselves, others, clinic, and Ignatian pedagogy (as evidenced by responses of "strongly disagree" and "disagree"). Most students (73%) at pretest responded "neutral" and "agree" (36.5% of responses for each) with the statements; however the change from pre to post test was significant for all areas assessed indicating that the intervention added to that base knowledge. That is, by posttest, no students indicated that they did not understand how to apply journaling (0% of students responded "strongly disagree" or "disagree" to any statement) with the majority indicating they "agreed" (i.e., 32%) or "strongly agreed" (i.e., 66%). This change is indicative that a supported experience and required practice are beneficial, rather than solely relying on the presentation of cognitive information such as the group lectures. Including the theory into the practice and vice versa appears to be a positive pedagogical addition when teaching about reflective practice.[41]

Students appeared to have the strongest base (pretest) knowledge of how to apply journaling to themselves, most likely as it is a familiar practice across a number of life domains. Students may have been exposed to journaling in their personal life or in school, and possibly even aware of its benefits; however the regular practice of group reflection appeared to create a deeper understanding by the end of the semester as the posttest knowledge increased significantly even from this high starting point.[42] This familiarity with the concept of journaling and reflective practice as it relates to self may have supported the growth in the other three areas, particularly furthering an understanding of applying this practice to clinical work, and most specifically to their clients.

Although engaging in reflective practice typically begins with an examination of the self, the Jesuit intention is to broaden our perspective to consider how we fit in the world with and for others. Examination of this present study's results indicated that the greatest change was noted for how to apply written reflection to clinical education (mean difference from pre- to post-test = 1.46), and to the clients (mean difference from

pre- to post-test = 1.5). These findings are encouraging as they provide positive information on how to integrate Ignatian pedagogy into clinical practice. The development of competence and compassion is a central goal of Jesuit education; it is not enough to address one without the other.[43] In speech-language pathology it appears as if faculty often teach *about* the other rather than to help the students see the world *as* the other; therefore, reflective writing may foster less egocentric clinicians and promote positive change. In this way students can be taught how to engage in empathetic understanding of their clients, a necessary constituent in a therapeutic relationship. As Carl Rogers, the father of person centered therapy, noted in 1975, "the more the therapist or teacher is sensitively understanding, the more likely is constructive learning and change."[44]

Student Comments

Although the assessment tool was limited in its number and content of questions, unstructured comments solicited at least one semester post intervention, supported the quantitative findings. Specifically, comments sent to the second author indicated that written self-reflection had a number of positive effects for the students. One benefit was noted simply from the opportunity to slow down and examine their experiences, supporting the Jesuit notion of "slow teaching." Creating and allowing the space for reflection appeared to be a positive experience; for example, one student wrote:

> The reflections that we did each week provided a time for me to focus and clear my head. I was always racing throughout the day, doing as much as I could. The reflections prompted me to stop doing and start thinking and I found so much clarity after the exercise.

Another student also supported this designated time spent writing; she stated:

> Having the weekly "reflection writing" time was a really enjoyable experience. I found it beneficial on several levels. The few minutes we took to write the reflections was a nice chance to take time and really identify and acknowledge our own thoughts and feelings that may be overshadowed by the stress and flow of grad school.

A third student echoed the theme of stress and the need to slow down, and stated that the designated time for reflection helped with stress management and connected her to her reason for being in graduate school; specifically she stated, "The stress that each week brought was wiped away during the short time we had all met. The topics I gushed on about consistently reminded me that I was where I needed to be."

The specific approach of working in a small group was also noted to be of benefit, finding the reflective process to provide moral support, echoing the findings from Kettle and Sellars;[45] one student wrote, "Sharing with classmates furthered this process while allowing for a deeper sense of support during what can be a very stressful time (graduate school)." Still another indicated, that the group setting allowed her to "bond with classmates when sharing the reflections."

Although the journals were not analyzed for content, it appears that the written reflection supported Schön's concept of "reflection on action."[46] This is also what has been referred to as *engaging in midcourse correction*;[47] to this end, one student noted:

> It is often hard to realize the blips and triumphs when you are in throws of a session (or life). Taking a few moments to reflect, allowed for realization of what was going well and what could be tweaked to improve.

Finally, written reflection may have been successful in moving students' thinking beyond the "here and now" of the individual course and into their overall "practice" of examination. From thinking about and seeing the world as the client, the reflection process helped students find the commonalities. For example, one student commented, "The reflection process also enabled me to recognize that while we are all very different from our clients and from each other, we have many of the same basic life goals and desires." And still another noted, "I found the reflection writing process to be extremely beneficial to my growth and development as a person and as a future SLP." Overall, it appears that a systematic approach to teaching about, modeling, and sharing reflective writings can potentially move our

students beyond "just" knowing and into action, and help to develop whole practitioners, in body, mind, and spirit.

Limitations and Future Research

Although the study yielded positive results, a number of limitations are present. The presence of the clinical supervisor may have been an influencing factor as the students may have responded more positively due to their relationship with her; that is, knowing they were being graded on their performance in the course (although not on the journals) may have unduly influenced their productivity and product of journaling. In addition, demographic data were not collected on the individual surveys, therefore analysis could not be conducted to determine if a students' undergraduate experience, age, or exposure to Jesuit philosophy was an influencing factor in their responses. Information on a student's present means of reflection was also not collected; this could also be a contributing or confounding factor in the outcome. Finally, the number and scope of the questions were very brief, and although the alpha score was acceptable (particularly for such a limited number of items) it could be beneficial to expand the survey to include a greater number of constructs as well as individual items assessing those constructs.

It is the intention of the researchers to continue with this study and extend the assessment and intervention. In the immediate future, data will be collected pre and post intervention which will include additional demographics (i.e., gender, age, religious or spiritual affiliation, and current reflective practice), and student rating of (a) understanding of how to use journaling (i.e., self, others, education, Ignatian Pedagogy); (b) frequency and intent of reflective practice; (c) preferences (i.e., alone, with group, about a theme, etc.); (d) subjective ratings (e.g., interesting/boring; like/dislike; valuable/worthless); and (e) personal beliefs (e.g., role of reflection in professional development/client improvement/Jesuit education). In addition, in weeks 5 and 10 of the semester students will reflect specifically about a recent clinical session, using an "OSAP" format. That is, each entry will include the following: O: Objective (what happened?), S: Subjective (how

did the events make me feel?); A: Assessment (What does it mean?); P: Plan (What will I do with this knowledge?). This narrative information will be analyzed for content, themes, and "depth" level of reflection.[48] Finally, the effects of the supervisor's participation will be examined as two groups will differ in this regard; that is, in group one, all participants and the supervisor will journal simultaneously followed by oral reading of what they had written; in group two, the supervisor will not participate in the writing or reading, but all other procedures will remain constant (facilitating the reflection and connecting student comments to current themes and Jesuit principles).

In sum, integrating reflective writing into a clinical course in speech-language pathology appears to be productive and beneficial for first-year students in increasing their understanding of how to apply journaling to themselves and their clients. In addition, teaching about reflection through this action based approach supports the overarching goal of Ignatian pedagogy. As noted in *Ignatian Pedagogy: A Practical Approach:*

> Pedagogy, the art and science of teaching, cannot simply be reduced to methodology. It must include a world view and a vision of the ideal human person to be educated. These provide the goal, the end towards which all aspects of an educational tradition are directed.[49] HJE

Notes

[1] Loyola University Maryland, "The Loyola Mission," *Mission, Vision, and Values*, accessed December 11, 2013, http://www.loyola.edu/about/missionvisionvalues.aspx.

[2] John W. O'Malley, S.J., *The First Jesuits* (Cambridge, MA: Harvard University Press, 1993).

[3] Sharon J. Korth, "Precis of Ignatian Pedagogy: A Practical Approach," in *A Jesuit Education Reader*, ed. George W. Traub, S.J. (Chicago, IL: Loyola Press, 2008).

[4] Xavier University. "Jesuit Tradition: Campus to Community" [brochure]. November, 2010, accessed December 12, 2013 http://www.xavier.edu/undergraduate-admission/documents/jesuit-tradition-brochure.pdf, 3.

[5] e.g., Nancy Chick, Aeron Haynie, and Regan Gurung, eds., *Exploring More Signature Pedagogies* (Sterling, VA: Stylus Publishing, 2012).

6 Rebecca S. Nowacek and Susan M. Mountin, "Reflection in Action: A Signature Ignatian Pedagogy for the 21st-Century," in *Exploring More Signature Pedagogies*, ed. Nancy Chick, Aeron Haynie, and Regan Gurung, (Sterling, VA: Stylus Publishing, 2012), 140.

7 International Commission on the Apostolate of Jesuit Education (ICAJE), *Ignatian Pedagogy: A Practical Approach*, 2003, accessed December 11, 2013 http://www.sjweb.info/documents/education/pedagogy_en.pdf, 11.

8 Loyola University Maryland, "Vision Statement," *Mission, Vision, and Values,* accessed December 11, 2013, http://www.loyola.edu/About/missionvisionvalues.aspx.

9 Donald A. Schön, *The Reflective Practitioner: How Professionals Think in Action* (Boston: Arena Publishing, 1983).

10 Donald A. Schön, *Educating the Reflective Practitioner: Towards a New Design for Teaching and Learning in the Professions* (San Francisco: Jossey-Bass, Inc., 1996).

11 David Boud, Rosemary Keogh, and David Walker, "Promoting Reflection in Learning: A Model," in *Reflection: Turning Experience into Learning,* ed. David Boud, Rosemary Keogh, and David Walker (London: Kogan Page, 1985).

12 see Nowacek and Mountin, "Reflection in Action," 136.

13 Kevin Burke, *Pedro Arrupe: Essential Writings* (Maryknoll, NY: Orbis Books, 2004), 173.

14 American Speech-Language-Hearing Association, "Code of Ethics" (2010), accessed December 11, 2013, www.asha.org/policy, doi: 10.1044/policy.ET2010-00309.

15 Stnd V-B-3, Council for Clinical Certification in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, "2014 Standards for the Certificate of Clinical Competence in Speech-Language Pathology," accessed December 12, 2013, http://www.asha.org/Certification/2014-Speech-Language-Pathology-Certification-Standards/.

16 Dominic. J. Balestra, "Where Loyalties Lie," *Conversations on Jesuit Higher Education* 24, no. 3 (2003): 3-10.

17 Anne E. Hill, Bronwyn J. Davidson, and Deborah G. Theodoros, "Reflections on Clinical Learning in Novice Speech-Language Therapy Students," *International Journal of Language and Communication Disorders* 47, no. 4 (2012): 413-426, doi: 10.1111/j.1460-6984.2012.00154.x.

18 See Madeline Cruice, "Common Issues but Alternative Solutions and Innovations," *Advances in Speech-Language Pathology* 7 (2005): 162-166; Lindy McAllister and Michelle Lincoln, *Clinical Education in Speech-Language Pathology* (London: Whurr, 2004); Hill et al., "Reflections," 415.

19 Hill et al., "Reflections," 415.

20 Karran Thorpe, "Reflective Learning Journals: From Concept to Practice," *Reflective Practice* 5 (2004): 327–343; Frances Wong, David Kember, Loretta Chung, and Louisa Yan, "Assessing the Level of Student Reflection from Reflective Journals," *Journal of Advanced Nursing* 22 (1995): 48–57.

21 Margaret Plack, Maryanne Driscoll, Sylvene Blissett, Raymond McKenna, and Thomas Plack, "A Method for Assessing Reflective Journal Writing," *Journal of Allied Health* 34 (2005): 199–208.

22 Hill et al., "Reflections."

23 Renee Williams, Jean Wessel, Maryann Gemus, and Elaine Foster-Seargeant, "Journal Writing to Promote Reflection by Physical Therapy Students during Clinical Placements," *Physiotherapy Theory and Practice* 18 (2002): 5–15.

24 Hill et al., "Reflections."

25 Ibid.

26 Brenda Kettle and Neal Sellars, "The Development of Student Teachers' Practical Theory of Teaching," *Teaching and Teacher Education* 12, no. 1 (1996):1-24.

27 Sinikka Ojanen, "A Process in Which Personal Pedagogical Knowledge Is Created Through The Teacher Education Experience," ERIC Number: ED398200, June, 1993, retrieved from http://eric.ed.gov/?id=ED398200.

28 American Speech-Language-Hearing Association, "Clinical Supervision in Speech-Language Pathology" [Position Statement], 2008, accessed December 11, 2013 www.asha.org/policy,doi: 10.1044/policy.PS2008-00295, 1.

29 Jennifer A. Ostergren, "The First Year of Professional Service in Speech-Language Pathology: Supervisory Role, Working Relationships, and Satisfaction with Supervision," *Contemporary Issues in Communication Sciences and Disorders* 38 (2011): 61-75, doi: 1092-5171/11/3801-0061, 71.

30 Carmen D. Vega-Barachowitz and Jean C. Brown, "Outcomes Measurement and Management: Cost and Benefits of Reflective Supervision," *Perspectives on Administration and Supervision* 10, no. 2 (2000): 3-18, doi: 10.1044/aas10.2.3.

31 Vega-Barachowitz and Brown, "Outcomes Measurement and Management," 5.

32 Ibid., 18.

33 Schön, *The Reflective Practitioner*.

34 Jeree H. Pawl, "On Supervision," in *Reflective Supervision Learning: Discussion Guide,* ed. Rebecca S. Shanok, Linda Gilkerson, Linda Eggbeer, and Emily Fenichel (Arlington, VA: Guide Zero to Three/The National Center for Clinical Infant Programs, 1995), 44.

35 Rebecca Parlakian, *Look, Listen, and Learn: Reflective Supervision and Relationship-Based Work* (Washington, D.C: Zero to Three, 2001).

36 Chong, Ho Yu, "An Introduction to Computing and Interpreting Cronbach Coefficient Alpha in SAS," (Paper proceedings from SAS Institute Inc., *Twenty-Sixth Annual SAS ® Users Group International Conference*, Cary, NC, 2001, accessed December 11, 2013 http://www2.sas.com/proceedings/sugi26/p246-26.pdf) 246.

37 Janet Preis, *The Jesuit Influence: Service and Training at the Loyola Clinical Centers* [PowerPoint slides] (lecture presented at the Loyola Clinical Centers Orientation, Loyola University Maryland, Columbia, MD, August 28, 2012).

38 Ibid.

39 Linda Louko, Karen Bryant, and Patricia Zebrowski, "Reflective Writing in Graduate Clinical Training" (presentation at the Annual American Speech-Language Hearing National Convention, San Diego, CA., November, 2011).

40 Nowacek and Mountin, "Reflection in Action."

41 Hill et al.

42 Joshua M. Smyth, Arthur A Stone, Adam Hurewitz, and Alan Kaell, "Effects of Writing about Stressful Experiences on Symptom Reduction in Patients with Asthma or Rheumatoid Arthritis," *JAMA* 281, no. 14 (1999): 1304-1309, doi:10.1001/jama.281.14.1304.

43 O'Malley, *The First Jesuits*.

44 Carl Rogers, "Empathic: An Unappreciated Way of Being," *The Counseling Psychologist* 5, no. 2 (1975): 2-10, doi: 10.1177/001100007500500202, 5.
45 Kettle and Sellars, "The Development of Student Teachers."

46 Schön, *The Reflective Practitioner*.

47 Brian McDermott, "Integrating Principles of Ignatian Pedagogy into Clinical Supervision for Psychology and Pastoral Counseling" (workshop presented at Loyola University Maryland, Baltimore, MD, January, 2010).

48 see Hill et al., "Reflections on Clinical Learning."

49 ICAJE, *Ignatian Pedagogy*, 5.