

Reflecting on Reflection in Clinical Social Work: Unsettling a Key Social Work Strategy

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Abstract

This study calls into question some of assumptions within social work education and practice regarding the transformational potential of reflection-on-practice. Participants ($n = 34$) in this simulation-based study each engaged in two clinically focused simulations, each followed by an interview which included observing segments of their video-recorded simulations. The objectives of this study are to make some sense of the misalignments between participants' post-simulation reflections of their practice behaviours, and the practice behaviours observed by the research team, and later by participants themselves. Findings illustrate that: (i) how clients and the session are understood in the moment can be different than how they are understood post-client engagement; (ii) reflections of practice behaviours can be tied to how individuals want to be, which are not necessarily aligned with how they are in the moment; and (iii) reflections are intertwined with awareness of oneself. These results identify some of the limitations of individualised reflective activities, and demonstrate the powerful potential of collective reflection on recordings of simulations to challenge memory distortions, retrospective biases and to promote greater accountability to ourselves as social workers, and to those we work with.

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Introduction

Reflection has become a core concept in social work education, guiding the development of social work assignments and assessment tools (Bay and Macfarlane, 2011; Blakemore and Agllias, 2019). This article explores some of the limits of reflection, particularly reflection-on-practice, and critical reflection, as methods for social workers to interrogate the tensions they encounter in professional practice, with a particular focus on clinical social work. The foundation of this study is a simulation-based research project that explored social workers' encounters with uncertainty and the strategies they used to navigate it.

The purpose of this article is to make some sense of the misalignments of participants' reflections on their clinical practice, and the practice behaviours we (and later, they) observed. Seeking to understand these misalignments is important given that reflective processes, and particularly critical reflection-on-practice, are often proposed as strategies for social workers to reduce the harms of inequality, and as avenues to secure social justice (Fook, 2015; Watts, 2019). While our intent is not to dismiss the values of reflective processes, this work raises questions about social work's heavy reliance on critical reflection, particularly critical reflection that depends on retrospective accounts of practice, as a singular and largely individual strategy for developing critical, anti-colonial and anti-racist practitioners. While others have raised concerns about positing reflective practice as an effective tool to reduce harms (e.g. Smith, 2013), there is a need for empirical data alongside these important conceptual conversations.

Reflective processes

Reflective practice, critical reflection and reflexivity are key strategies and concepts in social work practice, education and research (Fook, 2015; Watts, 2019). These terms are related but hold different foci (D'Cruz et al., 2007; Watts, 2019). Schön's (1983) original model of *reflective practice* included two dimensions: reflection-in-action/practice and reflection-on-action/practice. Reflection-in-action is the process of applying previous and current learnings in-the-moment while trying to strategise how to proceed effectively (Mishna and Bogo, 2007).

Reflection-on-action refers to the process of reflecting on an experience after it has occurred with the intent to develop new insights (Mishna and Bogo, 2007; Thompson and Pascal, 2012). Reflective practice and its two dimensions have long been utilised as tools to support social work students and practitioners to learn from experiences, build knowledge and develop new skills (Schon, 1983; Mishna and Bogo, 2007).

Critical reflection builds on reflective practice by incorporating multiple, and often varying, critical theoretical perspectives (Bay and Macfarlane, 2011; Watts, 2019)—particularly post-modern theory in understanding that there are multiple understandings of ‘truth’ (Fook and Gardner, 2007). Critical reflection encourages an awareness of broader socio-political contexts and examines personal implicit biases, assumptions and values, and how these impact social work practice (Fook, 1996, 2012). Critical reflection involves thinking critically about roles, client interactions and positions of power to improve and transform social work practice (Fook, 2012, 2015).

Similar to critical practice, *reflexivity* encourages an awareness of individual contexts, examination of the self and relations of power and knowledge generation (D’Cruz *et al.*, 2007; Lay and McGuire, 2010). Reflexivity encourages focus on building greater self-awareness and questioning assumptions around how understandings and knowledge are generated, and how practice is enacted (Lay and McGuire, 2010; Watts, 2019). While critical reflection reflects on-action as a retrospective processing of events that have occurred, reflexivity occurs in-the-moment, in-action (D’Cruz *et al.*, 2007, p. 83). Greater discussion of these terms and their theoretical differences within practice, education and research are well-documented elsewhere (see Fook, 1996; D’Cruz *et al.*, 2007; Thompson and Pascal, 2012; Watts, 2019). The reflective processes that frame this article are reflection-on-action, as well as critical reflection as a post-practice exercise. That is, the intentional processes of examining one’s practice behaviours to learn from them (Bogo, 2018; Bruno and Dell’Aversana, 2018) and to work towards transforming practice to disrupt oppressive relations.

Reflective processes and social work education and practice

Reflective processes are considered core learning objectives and core competencies in social work education (CASWE, 2021; CSWE, 2022). They are relied upon as a strategy to work towards effective and ethical practice across differences, to disrupt power dynamics and to understand oneself, particularly in relation to others (CASWE, 2021; CSWE, 2022).

Reflective processes have been explored in a range of social work settings including in the classroom (Morley and Macfarlane, 2014;

Singh, 2019), field placement (Lam *et al.*, 2005; Sicora, 2019) and across professional practice (Beddoe, 2010; Hermsen and Embregts, 2015; Watts, 2019). Exercises used to engage in reflective practice tend to include independent activities such as journaling, standpoint papers, process recordings and verbal debriefing with peers, supervisors or educators following a roleplay, case vignette or a real-life client. These reflective exercises provide a forum for social workers to discuss, share and transform their ideas and knowledge. While valuable, they are however often based on students' own recollections and understandings of the practice behaviours being reflected upon. Furthermore, reflective exercises in the classroom tend to require students to write papers in isolation, that are then read and graded by instructors who have sometimes had little training in how to facilitate in-depth critical reflection (see, e.g. Grain, 2022).

Reflection as a pedagogical and practice activity is not without its limitations and challenges, including lack of time to meaningfully participate due to time constraints, lack of prioritisation and/or interest (Lay and McGuire, 2010; Watts, 2019); risks of engagement including seeming and/or feeling incompetent, fear of being judged, and feeling defensive/closed to receiving feedback (Taylor, 2005; Beddoe, 2010; Gursansky *et al.*, 2010; Adamson, 2011; Sicora, 2019); difficulty establishing the relationships necessary to engage in open discussions, particularly due to capacity issues and competing demands (Bruno and Dell'Aversana, 2018); over emphasis on individual experiences and transformation which can overshadow much-needed engagement in social and political transformation (Thompson and Pascal, 2012; Smith, 2013); and, of particular focus throughout this article, retrospective bias and distortion (Gursansky *et al.*, 2010).

A key critique of reflection-on-practice is the risk of retrospective bias and distortion (Gursansky *et al.*, 2010). Literature on reflective memory (Newell, 1992) highlights that practitioners' memory is both subjective and personal. Newell (1992) argues that individuals possess multiple perceptions of their encounters without actual evidence aside from their own interpretation. Therefore, one might select details or include aspects that depict themselves more favourably because it brings more pleasure and happiness, and/or avoids negative feelings (Shaw, 2016). While self-reflection is an important element in reflective practice, it is hence limited by being inherently one-dimensional and based on selectively biased memories (Yip, 2006; Thompson and Pascal, 2011; Shaw, 2016). Observing recordings of one's own practice behaviours has been found to support students and practitioners in improving their reflective practice, and in facilitating reflections that are based closer to reality than those dependent on faulty memories (Bolger, 2014; Antczak *et al.*, 2019). Thus, research into observed practice, in relation to reflections of practice, can provide valuable insights into the limitations and potentials of reflective processes.

Methods

Conceptual framework

This research is informed by constructivist and social constructivist paradigms which assert that people construct their understandings and knowledge of the world through experiences, and reflection on those experiences (Amineh and Asl, 2015; Adom *et al.*, 2016). Through these processes, people develop beliefs and mental models they then use to interpret the world (Jackson and Klobas, 2006). Reality is understood as ‘multiple and is the result of a negotiation of interpretations’ (Sandu and Unguru, 2017, p. 58). Constructivism focuses on doubts about the possibilities of human perception (Kraus, 2019), while social constructivist paradigms emphasise how knowledge is generated and determined through relationships and social contexts, and dependent upon social understandings and interactions (Omodan and Tsotetsi, 2020).

The aim of this work is to approach reflective practices as subjective, multiple, varied and as constructed through relationships.

Study design

This study is situated within a wider simulation-based research project exploring uncertainty in clinical social work practice. That project was conducted online between October 2021 and February 2022. Participants ($n=34$) each engaged in two thirty-minute recorded simulated online counselling sessions with two standardised clients, ‘Myia’ and ‘Dave’, portrayed by trained actors. Each vignette was designed to contain encounters with uncertainty; our process for designing representative vignettes is detailed elsewhere (Asakura *et al.*, 2023).

Following each simulation, participants engaged in a thirty-to-forty-five-minute semi-structured interview that asked participants to reflect on the simulation. Of note, all three members of the research team who facilitated these interviews (K.O., S.T., R.G.) are practised social workers with clinical training and practice experiences; each of which supported facilitating discussions of clinical skills and practice behaviours. The interviews first asked participants to recall and reflect on the uncertainty they encountered throughout the simulation, and how and why they navigated through their encounters as they did. Participants were then asked to identify one encounter that felt particularly significant to them, to observe. If nothing or too much came to mind, the interviewer supported participants in identifying a significant moment. After observing the segment, the moment was discussed in greater detail, including discussions around the participant’s in-the-moment response to the uncertainty encountered, and their practice behaviours and decisions. In

total, we engaged with each participant ($n=34$) for approximately three hours which included two simulated clinical sessions ('Myia' and 'Dave'), two semi-structured post-simulation interviews, some short breaks and debriefing opportunities.

While conducting the post-simulation interviews, our team kept noting significant divergences between what participants said they did in session, and what we observed. These divergences were memoed throughout data collection as a common point of discussion during our debriefings. This exploratory study aims to make some sense of the misalignments of participants' reflections on their clinical practice, and the practice behaviours we (and later, they) observed. The objectives of this study are to: (i) identify misalignments between participants' reflections of their practice behaviours, and of what we, and later they observed; (ii) explore common elements of participants' misalignments; and (iii) identify limitations of reflection-on-practice for social work education and practice.

The data utilised for this article were generated during the post-simulation semi-structured interviews, which were recorded and transcribed. Included in these post-simulation interview transcripts are transcribed segments of the simulations that were observed during the post-simulation interviews.

All research materials and processes were approved by Carleton University's Research Ethics Board.

Simulations

Myia is portrayed as a thirty-three-year-old Burmese Canadian immigrant mother. She is exhausted from the pressures of parenting and supporting her children's online learning during the coronavirus disease 2019 pandemic, in addition to other care responsibilities. Myia reaches out for mental health support a few hours after realising she is pregnant; the pregnancy is unplanned. Dave is portrayed as a twenty-one-year-old Black Canadian university student. He is experiencing a variety of stressors including the intense pressures of university, the complexity of an interracial relationship with his white partner, health concerns for a parent and potentially discriminatory and racist barriers within his university programme. Dave reaches out for mental health support as he has been experiencing a lot of anger and is uncomfortable with his recent increased alcohol consumption.

Participants

Three participant groups engaged in this study, all located in Canada: students enrolled in a Master of Social Work (MSW) program ($n=12$);

recent MSW graduates who had worked in full-time clinical social work positions for six months to two years ($n=10$); and experienced MSW practitioners who had a minimum of five years of full-time clinical social work experience ($n=12$). Participants were recruited through the research team’s networks, professional listservs and relevant Facebook groups. Participants were compensated according to experience; \$80CDN for MSW students, \$100CDN for recent graduates and \$150CDN for experienced practitioners. Demographic information can be found in [Table 1](#).

Data analysis

Data analysis was informed by reflective thematic analysis ([Braun and Clarke, 2022](#)); framed conceptually by constructivist and social constructivist paradigms ([Adom et al., 2016](#); [Kraus, 2019](#); [Omodan and Tsotesti, 2020](#)). Operationalised, this means that the post-simulation interview transcripts were approached with the understandings that: (i) participants’ knowledge of their practice is framed by their own unique experiences, and their reflections of their experiences and (ii) participants’ understanding of their practice can be subjective.

To make sense of the misalignments between participants’ reflections-of-practice and what was observed, first involved identifying the misalignments in the post-simulation interview transcripts. These misalignments were identified during coding. The post-simulation interview transcripts were coded using NVivo qualitative data analysis software by the same three research team members that conducted the interviews. To ensure consistency, one transcript from each of the three participant groups was coded collectively prior to team members dividing the transcripts, to code them individually. Team members met regularly throughout these processes.

Table 1. Demographic profiles ($n = 34$)

Gender	Students	Recent Graduates	Experienced Practitioners	Total Participants
Female, %	12 (100)	8 (80)	7 (58)	27 (79)
Male, %			4 (33)	4 (12)
Non-binary, %		2 (20)		2 (6)
Trans-masculine non-binary, %			1 (8)	1 (3)
Age, years				
Average age	29	29.5	52	
Median age	27.5	28	49.5	
Race, %				
BIPOC	2 (17)	4 (40)	3 (25)	9 (26.5)
White	10 (83)	6 (60)	9 (75)	25 (73.5)

When the research team coded the transcripts, all misalignments that were discussed between participants and members of the research team and those that were obviously apparent from the post-simulation transcripts were coded as having a misalignment of reflection and practice behaviours. What we mean by obviously apparent is that the transcripts included transcribed portions of the simulations that were observed during the post-simulation interviews. If a participant had a reflection that was misaligned from their practice behaviours captured in the transcribed portion of their simulation, it was included as a misalignment. Whilst there were many more misalignments that we observed during the study, a decision was made to include only these moments as they were discussed with and/or witnessed by both participants and a member of the research team.

The codes were then organised thematically by all four authors of this article that came together over a series of meetings to discuss, refine and define mutually agreed-upon themes.

Results

Three themes were developed to understand the misalignments between the reflections participants shared during the post-simulation interviews and their practice behaviours: (i) how clients and the session are understood in the moment can be different than how they are understood post-client engagement; (ii) reflections of practice behaviours can be tied to how we want to be, which are not necessarily aligned with how we are in the moment; and (iii) reflections are tied to perceptions and awareness of self.

Theme 1: How clients and the session are understood in the moment can be different than how clinicians understand them post-client engagement

Theme 1 captures how the ways in which clients and the session are understood in the moment, can be different than how they are remembered afterwards. For instance, prior to watching the simulation together with the interviewer, Student 2 shared that during the simulation they understood the simulated client, Dave, as being resistant to counselling. Student 2 explained that because Dave was so resistant, they were quite intentional with how many direct questions they asked Dave around topics they considered tension filled:

Student 2: My uncertainty was how much to keep probing about this ...

The uncertainty was how much do I need to know.

Interviewer: How much you need to know for what?

Student 2: That's a good question ... I would say my focus was more so on getting him back for a second session. So, my uncertainty was kind of like: do I need to know more about things that happened a few years ago? Because he's kind of said 'I used to use alcohol; now I'm using it again'. So, you know, do I need to know more about that? Or do I need to know more about just what's going on now?

Interviewer: Is there a pressure not to over ask because you want to encourage him to come back? Is that what I'm hearing?

Student 2: Yeah.

After watching a segment of the simulation, Student 2 unpromptedly remarked, 'Watching it back, he was pretty open. I bet if I kept asking pretty direct questions, he would have kept telling me'. Here, Student 2 shared how their understanding of the client during the simulation did not align with how they perceived Dave when observing the recording of the simulation. It is possible that the moment was too complex to fully understand in real time, and that a number of factors potentially impacted Student 2's ability to construct an accurate understanding of the client, including their fears of rupturing the therapeutic relationship, as well as factors related to working across differences of gender and race. Had Student 2 not directly observed a portion of the simulation, their post-practice reflections of the encounter would have characterised the client as resistant which after reviewing the simulation, was acknowledged as an inaccurate understanding.

Participants expressed that moments of their simulations were experienced as 'cloud[y]' (Recent Graduate 8), and/or 'blurry' (Student 12) for an array of reasons including a sense of being overwhelmed and/or uncertain. There was a recognition by some participants that these factors impacted their ability to engage in reflective processes within the sessions, as well as within our post-simulation interview discussions. For example, some participants had difficulty recalling the order of events in the session when asked to support the interviewer in locating segments of the recorded simulation to observe. When Student 12 was asked whether a moment they noted occurred before or after discussions of abortion with the client Myia, they responded, 'I mean it almost speaks for the uncertainty of the session in that it felt kind of blurry. There wasn't like a clear beginning, middle, end of it. It was very just, OK, you're overwhelmed. Yeah, that's overwhelming.' Student 12 shared that their identification with Myia's overwhelmed feelings resulted in them too feeling overwhelmed; Student 12's sense of being overwhelmed then impacted their ability to recall moments. In turn, researchers observed that these cloudy in-the-moment experiences can lead to some misalignment between reflections of encounters and reality. This was exemplified by Recent Graduate 8 who considered how their experiences of in-the-moment uncertainties clouded their ability to recall their practice behaviours in our discussions:

Interviewer: Because when you were talking [prior to observing], you had said that you had gone through options with her about the job. But I wouldn't say that's what I saw [after observing the segment together].

Recent Graduate 8: No, so I thought I did... maybe it [uncertainty] does cloud my processing a little bit. And it's possible too that my perception of the situation given my uncertainties is different than what actually happened, which I think might be the case here.

To engage in post-practice reflective processes require clarity and accuracy of memory, which was not always experienced by participants.

Theme 2: Reflections of practice behaviours can be tied to how we want to be, which are not necessarily aligned with how we are in the moment

We found that reflections of practice behaviours can be rooted within how people want to be, who we think we should be, what we value and what we hope for and imagine of ourselves—which are not necessarily how we are in the moment. For example, when asked about their strategies for navigating uncertainty in their clinical work, Student 3 explained, 'when in doubt, I just try to keep it open and I try to prove that I am listening by using key phrases that the client has said but also asking questions to explore a little bit deeper... just to get a little bit more information as to what their perspective is on the situation and get a little bit more clarity'. Although these reflections around remaining open, curious and engaging in active listening represent the way Student 3 felt were the best approaches to navigate uncertainty, they were in stark contrast to the psychoeducational approach that they drew upon throughout the session. After observing a segment of their simulation, Student 3 remarked, 'I can't believe I used the word 'statistically' when talking about feelings'. Misalignments between participants' recollections of how they approached uncertainty in the simulations versus their actual practice behaviours were also present in their recollections of being direct with clients, following the client's lead, providing flexibility and options, and normalising and validating clients. These misalignments seemed to emerge in the spaces between who we hope to be in moments, and who we are.

Relatedly, when Experienced Practitioner 2 was asked to recall what they were thinking when Dave asked them if he was a bad person for not wanting to always put his family's needs above their own, Experienced Practitioner 2 remarked,

I didn't feel I could say, no, you're not evil. Like, that's just not how I would normally do things, you know... I think he needed to feel that for himself. Like there was a part of him that was feeling like that was a wrong thing to do. So I was just struggling with how do I get him to

come to find out for his own self that it doesn't make you an evil person for wanting to stand on his own and not go home and not have to do that responsibility and give up everything he'd been working for.

While Experienced Practitioner 2 reflected that 'that's just not how I would normally do things', this contrasted with the practice behaviours Experienced Practitioner 2 then observed with a member of the research team; an excerpt of the transcribed portion of the simulation that was observed follows:

Simulated Client Dave: My dad had a stroke a couple of months ago... He's fine now. He's back to work and he's good. But you know, it made me stop and think, like, wow. What would be my role if my dad wasn't my dad anymore, if he wasn't here. Would I have to leave school? Could I stay here? But I don't want to. I kind of want to finish this chapter in my life.

Experienced Practitioner 2: Yeah, yeah.

Dave: Does that make me a bad person?

Experienced Practitioner 2: No, I don't think so. Yeah. Yeah. It's hard, right? You're kind of in the middle of this and you want to do well in school and you're at the top of your class and I think that sounds like something you're quite proud of as well, and you've been able to accomplish that.

Dave: Like, what kind of person doesn't think that they want to go back and take care of the family, you know what I mean? Like, does that make me evil or, like, I don't know. Like I love my family, don't get me wrong. But I really love my life here. What kind of person does that make me?

Respondent: Yeah, OK. Yeah. It's hard to know.

While Experienced Practitioner 2 went on to support Dave in considering for himself the ways in which he was not 'evil', Experienced Practitioner 2's recollection of their in-the-moment reflections were incomplete, with a focus on the moments that aligned with how they wanted to engage with Dave, rather than a complete and representative picture of what they said in the moment.

Theme 3: Reflections are tied to awareness and perceptions of self

Participants in this study, including those with extensive clinical experience, often remarked that they were unaware of certain practice behaviours until they observed them with us. After observing a segment of the simulation, Experienced Practitioner 10 remarked that they had not been aware that the hesitation they were experiencing in-the-moment impacted the delivery of their words in ways that deviated from the 'gentle, slow and kind' approach they were striving for. While this

practitioner has over eight years of post-MSW clinical practice experience, and ‘decades’ of direct practice professional experience, this was the first time they had observed a recording of their practice.

These sentiments of being unaware of oneself in-the-moment were echoed by other participants with comments like ‘I didn’t even know I was doing that’ (Experienced Practitioner 6). Experienced Practitioner 6 also noted curiosity, and unawareness around if what they had observed of themselves was because they were feeling tired that day, and/or if these practice behaviours were limited to online practice. Some participants, like Experienced Practitioner 6 welcomed the opportunity to confront the unexpected versions of themselves captured in the recordings. They expressed wanting to use this information to support developing their self-awareness and clinical practice, and expressed a desire to have such exercises more commonly integrated in social work education and professional practice. Not all participants, however, were open to, or comfortable, confronting themselves in the recorded simulations.

For Recent Graduate 4, being asked to observe themselves in practice was something they considered ‘super triggering’ because their understanding of their presence with clients did not align with what they observed. This participant noted being unaware of elements of their physical appearance, the sound of their voice, and facial expressions. This misalignment was so ‘triggering’ that Recent Graduate 4 commented, ‘I don’t remember if it was listed in the [study information] documents that you have to watch yourself and listen to yourself. But I think it would be a good kind of content warning because some people might opt to not do it because of that’. While research processes were explained during recruitment and scheduling, and the consent form detailed the research processes, Recent Graduate 4 did not feel forewarned enough about the potentially triggering impacts of the research processes. Stepping back, however, some of what was considered triggering was being confronted by recording(s) of practice behaviours which did not align with what Recent Graduate 4 believed to know of themselves.

Discussion

The results of this study call into question some of the assumptions regarding the transformational promises of reflection-on-practice because they can be based on distorted recollections of practice, as well as distorted understandings and perceptions of the self.

Reflection-on-practice relies on an assumed accuracy and clarity of memory which was not always experienced by our participants, and which does not account for how subjective and flawed memories are (Gursansky *et al.*, 2010; Shaw, 2016). In addition to issues related to memory, this study highlights several factors that can impact how one

recalls their practice, including practitioners' subjective understandings of clients and moments, practitioners' emotions, as well issues related to clinical encounters being too complex for one's consciousness to fully understand in-the-moment (D'Cruz *et al.*, 2007). Reflection-on-practice also assumes that social workers can accurately distinguish the difference between who they want to be in the moment versus who they are. The accuracy of these data, as well as Shaw's (2016) work exploring how people tend to remember in ways that are favourable to them, do not align. This is particularly significant when considering the perceived possibilities of critical reflection based on recollections of practice, as this data demonstrates how the ways in which participants understood they embodied their values within their practice were misaligned from their practice behaviours. The value of observing recordings of practice behaviours is demonstrated within these shortcomings of recollections and is consistent with social work literature that demonstrates how observing recordings of practice behaviours, particularly within a supervision context, can work to challenge memories and encourage new insights (Antczak *et al.*, 2019). These findings also provide a cautionary tale on the reliability of the recollections of practice behaviours upon which so much reflection-on-practice relies. In addition to observing recordings of practice, we found that some of the limits of individual self-reflection could be offset through collaborative reflection in which a research team member could constructively challenge participants to consider alternative viewpoints that differed from what they believed to know of themselves and their practice behaviours, and what was recorded and/or observed and interpreted by others (Dovigo, 2020).

While participants' clinical skills were not evaluated in a way that would put grades or performance reviews at risk, participants seemed eager to be perceived as competent by members of the research team. Herein lies a tension when asking social workers to use reflection as a tool to examine the self they are, and not the self they want to be—we want to believe certain things of ourselves and we want to belong, which involves others needing to think we are competent and good (Baumeister, 2022). This natural desire conflicts with the call to use reflection as a means for social workers to confront their fluid and dynamic selves in ways that go against contemporary notions of self-affirmation and self-care that rest firmly in the belief that one is 'enough'. Contemporary assertions of being enough, while helpful, make it difficult for social workers to engage in the critical self-examination required to recognise that what we are doing is not enough, and that we need to do better aligning our practice to our social justice values.

These data also put into question notions of mastering self-awareness. While social work education speaks to the importance of being self-aware and knowing oneself (Feize and Faver, 2019), participants in this

study, including those with extensive clinical experience, often remarked that they were unaware of certain practice behaviours until they observed them with us. Such moments of realising the inadequacy of our self-knowledge are an important counterbalance to the construction of the professional self as all-knowing and in complete control of oneself (see [Smith, 2013](#)). Instead, these fractures in self-knowledge encourage a degree of humility and a reorganising of the relationship to the self as uncertain, multi-faceted, fluid and temporal, thereby carving new spaces for improvisation, surprise, curiosity and learning ([Weinberg, 2007](#)).

We suggest these challenges to the assumptions involved in the transformational promises of reflective processes be held at the forefront when considering how much work we rely on reflective processes that rely on individual recollection to do within social work education and clinical practice.

Implications for social work education and professional development

Notably, these findings suggest a need to create more opportunities in education and professional development to confront our real-time practice behaviours—and not merely those we remember in often distorted ways or those we imagine and hope for ourselves, but those we enact in our simulated or actual practice. Within a Canadian social work context, engaging in recorded simulations is relatively new, and not the norm. However, recorded simulations such as those exemplified here, particularly when observed alongside a supportive other (i.e. researcher, supervisor, peer), provide opportunities for practitioners to engage in more accurate and critically reflective practice ([Antczak et al., 2019](#); [McMahon and Ledden 2019](#)). Our findings show the productive potential of recorded simulations in prompting participants to incorporate different perspectives of their practice; challenge what they know and remember of their practice behaviours; and to support a greater understanding of complex moments that may be too difficult to fully understand or that can be remembered in distorted ways ([Rosenstein, 2002](#); [Urdang, 2010](#); [Bolger, 2014](#); [Antczak et al., 2019](#)).

This research also highlights the value of engaging in reflective processes not as an individual activity, but as a collective activity with multiple perspectives such as those in peer reflective practice groups, and in some group supervision models ([Early et al., 2017](#); [Dovigo, 2020](#); [Ladyshevsky and Sanderson, 2020](#)). Collective reflection not only supports multiple understandings of practice behaviours and provides opportunities for feedback, but it also reframes reflection as an exercise that supports workers in confronting the versions of themselves that vary from how they understand or want themselves to be

(Kirkwood *et al.*, 2016; Kourgiantakis *et al.*, 2019). Collaborative reflection further highlights the importance of expanding self-awareness beyond self-knowledge to also focus on self-awareness in relation to working with others (Feize and Faver, 2019). Herein lies a call for social work education and professional development to facilitate increased opportunities for workers to confront their practice behaviours in tandem with others, and not simply their independent memories and imaginings of them. This requires a greater conceptualisation of self-love and self-care that does not rest in notions of ‘being enough’ but instead one that takes responsibility and that is willing to learn alongside others for the greater good (Hooks, 2000, 2001). It is a version of self-love and self-care that is comfortable being uncomfortable with oneself and their practice, that is open to others strengthening their understanding of themselves and their development, and that recognises the self as multifaceted, enacting multiple subjects and fluid (Miehls and Moffatt, 2000; Weinberg, 2007). We encourage social work educators to focus on the problematics of self-perception, incorporate the multiplicity of the self in reflective exercises, as well as integrate how memory and self-understandings are shaped by the broader social relations we hope to challenge.

Limitations

Participants in this simulation-based study were not accustomed to observing recordings of their practice regularly, which could impact transferability for those that are accustomed to this as part of their learning/practice. Additionally, participants were largely white (W74.5%). However, the themes presented in this article were consistent across demographics, and care was taken to ensure that the examples and quotes highlighted were representative of the identities of all participants.

Conclusion

This research draws on simulated client sessions and post-simulation reflective interviews with social work students, recent graduates and experienced practitioners in Canada ($n=34$) to explore some of the limitations of reflective processes. Although reflective practice is a focal element of social work education and practice, results suggest that reflection can often be misaligned, grounded in distorted memory or bias and tied to wishful—yet sometimes inaccurate—perceptions of self. As social work education and practice continues to engage in reflective practice as a key tool to examine one’s behaviours and learn from them, these

misalignments in reflection must be considered when designing learning and supervision activities. This research underscores the need to understand reflection as a situated and ongoing practice that is based on fluid notions of multiple selves. Although much reflective practice is currently framed as an independent exercise, results show the productive potential of collective reflection on recordings of simulations to challenge memory distortions and retrospective biases and promote greater accountability to ourselves, others and clients.

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