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# Becoming an academic: the reconstruction of identity by recently appointed lecturers in nursing, midwifery and the allied health professions

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#### Abstract

This study investigates the workplace learning experiences of recently appointed lecturers in UK higher education in nursing, midwifery and the allied health professions. Health care practitioners, appointed to academic posts in Universities, are experts in their respective clinical fields and hold strong practitioner identities developed through professional socialisation. This study focuses on the first five years of experience after appointment to higher education and aims to inform strategies for academic induction. The new lecturers generally find their mid - career transition challenging but they feel well supported. They are strongly motivated by their contribution to the development of student practitioners. They tend to hold on strongly to their identity as a clinical practitioner rather than quickly embracing new identities of scholar and researcher. The implications include the need for university departments in health professional fields to provide clearer role models and more realistic expectations for new lecturers.

#### Introduction

In the UK the majority of university lecturers contributing to programmes for health care professionals have a clinical background, hold a recognised professional qualification and are registered with the Nursing and Midwifery Council (NMC, 2008) or the Health Professions Council (HPC, 2005). The transition from clinical practitioner to an academic role for these lecturers involves considerable challenges including development of practice and identity. This research project seeks to explore the experiences of health care professionals who have been appointed to lecturer roles and have held them for up to five years. It considers emergent themes and identifies similarities and differences between perspectives of lecturers in the different professions. The purpose is to inform academic induction practices for health care professionals with a view to strengthening the capacity of lecturers and their early contribution to training of new health professionals. Colleagues based in clinical practice make a crucial contribution to health education programmes through supervision of work-based learning or by contributing to teaching in the university, however this project focuses on those appointed to academic posts. The

paper is of relevance to lecturers in professional fields and the academic development staff and line managers who support them.

In the current study 'academic induction' is taken to mean an extended period and the focus is on lecturers in their first five years of experience in a higher education academic role. This recognises the social nature of workplace learning and includes a more sustained period in which ways of working, new knowledge and skills and above all identities may develop (Trowler & Knight, 2000). The term 'lecturer' is taken to mean anyone holding a full time or part time academic contract, acknowledging a wide variation in terminology across the sector.

In contrast with the traditional route to academic roles via doctoral study, the majority of lecturers in health professions take up their academic posts having developed considerable clinical professional expertise. Whilst they will have experience of scholarship as a result of mentoring staff and students and engagement with the evidence base for their professional field, few will have direct experience of research activity. This can create tension due to the high value placed on research in the workplace context of higher education. The Health Professions Council, Nursing and Midwifery Council and professional bodies for each specialist profession place demands on these lecturers in relation to ensuring currency of clinical practice (HPC, 2005; NMC, 2008). The question of continuing clinical practice of health professions lecturers is contested and has implications for the range of lecturer roles and identities that may be acceptable within a university department (Barrett, 2007; Boyd & Lawley, 2009).

This research aims to consider the experiences of different health care professionals during their transition to higher education roles and asks the question how do nurses, midwives and allied health professionals experience transition from clinical roles into new posts as lecturers in higher education?

#### Becoming an academic

The literature supports the notion that the transition from practice roles into lecturer roles in higher education is a challenging one (Dieklemann, 2004; Hurst, 2010; Lombardo, 2006; Sim, Zadnik, & Radloff, 2003). Additionally, there is a concern identified in some studies that new lecturers were not clear on the expectations of their new role (Staniforth & Harland, 2006). A study that included lecturers in nursing identified tensions for professional educators when they attempted to meet the imperatives of both higher education and their original professional fields (Murray, 2007). In a further study new nurse lecturers felt a lack of structure compared to their previous health service workplace roles (McArthur-Rouse, 2008). Another study found new nurse lecturers felt a lack of status in their new workplace and experienced challenges including high expectations and a new language (Boyd & Lawley, 2009).

## Workplace learning

Situated learning theory and activity systems theory provide useful theoretical frameworks for understanding academic workplaces (Knight, Tait, & Yorke, 2006). Such an approach has emphasised the importance of the quality of informal daily interactions for professional learning of new lecturers in academic workplaces (Trowler & Knight, 2000) and that formal induction was considered by new lecturers to be superficial (Barlow & Antonio, 2007).

From a situated learning perspective the new lecturers will learn through their work as 'newcomers' as they interact with 'old-timers' within a community of practice (Lave & Wenger, 1991; Wenger, 1998). In addition to the academic department the new lecturers will have links to partnership practice settings that provide work placements for their students. Wenger (1998) presents a model of the professional learning of new entrants to a complex workplace as one requiring boundary crossing within an over-lapping constellation of communities of practice. Although situated learning focuses on informal workplace learning (Eraut, 2000; Wenger, 1998) the new lecturers may also potentially learn through more formal support (Boyd & Lawley, 2009; Fuller, Hodkinson, Hodkinson, & Unwin, 2005).

The workplace learning literature emphasises the need to understand the informal communities of practice within an organisation (Wenger, 1998). To promote learning in the workplace Brown and Duguid (1991) argue that the organisation must nurture the informal networks and activities of staff but that 'this support cannot be intrusive, or it risks merely bringing potential innovators under the restrictive influence of the existing canonical view' (1991, p. 53). This is where in addition to the formal professional development structures or 'learning architecture' within a university (Dill, 1999) the concept of fuzzy learning architecture is useful (Boyd, 2010; Hurst, 2010). This is neither formal nor completely informal, it may be nurtured by the organisation but cannot be completely controlled. For example a faculty may nurture the formation of writing groups but it is unlikely to be able to create successful writing groups by requiring all staff to join one.

Activity systems theory (Engestrom, 1987, 1999, 2001) signals the need to focus on workplaces as collective dynamic object-oriented activity systems in which rules, tools and division of labour shape behaviour but in which social action and contributions by participants are also able to shape the system. History and wider contextual influences on workplaces is emphasised in activity systems theory and the workplace is considered to include tensions or contradictions, which may be problematic, but may also drive further learning, 'Contradictions are historically accumulating structural tensions within and between activity systems' (Engestrom, 2001, p. 137). Within the workplace of the new lecturers, which may include more

than one activity system, the consideration of contradictions or tensions provides a useful tool for analysis.

## Identity

Giddens views identity as a 'reflexive project' that involves '...the sustaining of coherent, yet continuously revised, biographical narratives...' (1991, p. 5). Within a sociocultural perspective Wenger argues that 'It is therefore a mistaken dichotomy to wonder whether the unit of analysis of identity should be the community or the person. The focus must be on the process of their mutual constitution' (1998, p. 146). He argues that there is a 'profound connection between identity and practice' (1998, p. 149) and positions identity as a 'becoming'. He considers that we define who we are through negotiation and reconciliation as we steer our way along multiple trajectories related to our varying positions of membership of multiple communities.

In one British university Clegg (2008) found during a study of academic identities that the boundaries of higher education 'emerged as porous' so that some academics were not identifying with subject discipline in a simple and traditional way but were influenced by other claims 'beyond the confines of the university'. The current study investigates the experiences of recently appointed lecturers who bring with them well established professional identities and whose work includes significant external engagement with practice settings.

#### Methods

The study used an online survey as the key source of data which was collected between February and April 2008. Relevant university departments were approached to agree on participation in the project. A key contact in each department confirmed the number of lecturers involved and forwarded the invitation to participate and the link to the online survey. In this way an attempt was made to approach the entire UK population of lecturers in the selected professional fields. A small minority of departments declined to participate and not all lecturers chose to respond to the survey. An estimated total of 2487 lecturers were invited to participate and 504 responses were received giving a response rate of 20%. Of these respondents 146 had between one and five years experience in higher education and are the focus of this paper. The distribution of the survey relied on cooperation from numerous colleagues in the sector and whilst every effort was made to standardise distribution, numerical calculations are acknowledged to be a best estimate.

The survey question structure was informed by the literature. Closed questions were used to explore respondents' biography and professional backgrounds. Open-ended

questions asked lecturers about their experiences, the support they had been given and their future professional development. Within these broad areas they were prompted for strengths, areas for development, opportunities, constraints, and their perspectives on formal and informal support for their professional development. The project report provides full details of the questionnaire structure and is available online (Boyd, Smith, Lee, & MacDonald, 2009).

The research team were guided by ethical principles and gained ethical clearance through their own university research ethics committee process. Confidentiality and anonymity of the respondents was deemed to be paramount and the use of the online survey, which does not identify the e-mail address of the respondent, ensured that individuals could respond fully without being identified or linked to their institution. In addition the data was scanned by the team to remove any threats to anonymity.

The theoretical framework of workplace learning highlights the significance of the institutional and departmental context of new lecturers and yet in order to ensure anonymity for individuals and institutions in this study the key features of workplace context are only drawn into the data through self-reporting by respondents. This is a significant limitation of the study because different institutional and departmental workplace contexts of the lecturers are likely to have very different expectations and pressures, for example in relation to the expectations for research activity and published outputs.

The qualitative responses by lecturers were analysed using a thematic approach whereby an initial coding index based on the analytical framework developed from the literature was amended iteratively as themes emerged from the data (Ritchie & Lewis, 2003).

Table 1. Distribution of respondents across the relevant professional fields.

Professional field	All branches of nursing	Midwifery	Occupational Therapy	Physiotherapy	Radiography
Number of respondents (%)	72 (49%)	14 (10%)	18 (12%)	27 (19%)	15 (10%)

Table 2. Age distribution of respondents.

Age on completion of survey (years)	20–29	30–39	40–49	50–59
Number of respondents (%)	6 (4%)	46(32%)	77 (53%)	17 (11%)
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Table 3. Clinical experience of respondents prior to appointment as a lecturer.

Clinical experience (years)	1–10	11–20	21–30	31+
Number of respondents (%)	40 (27%)	73 (50%)	31 (21%)	2 (1%)

#### **Findings**

The research report of the project presents the findings in full detail, including giving considerable voice to the survey respondents through the use of selected quotes (Boyd, Smith, Lee, & MacDonald, 2009).

Of the selected 146 respondents, 82% were female and 67% described them- selves as in a 'full-time' contract. The respondents included a small number of lecturer-practitioners (8). Although the lecturer-practitioners may have particular characteristics associated with their dual role, it was beyond the scope of this study to pursue analysis of them as a distinctive group.

The biographical data in Tables 1–3 show the mid career transition made by the majority of new lecturers in these professional fields. These experienced practitioners are likely to have a well established professional identity prior to taking up their role in higher education.

Three main themes emerging from the qualitative analysis were: 'managing self'; 'activities'; and 'support'. These are outlined now prior to a discussion section that links them to each other and to the literature.

## Managing self

The theme 'managing self' emerged strongly from the analysis and focuses on the way that the new lecturers described their individual handling of their new role and work context. The lecturers generally enjoy their new role and terms used to describe their experience include 'exhilarating', 'exciting' and 'stimulating'. They get great satisfaction from nurturing new professionals. They welcome the autonomy, flexibility and opportunities for their own personal and professional learning in their new workplace.

The lecturers find these positive aspects are countered to different degrees by challenges including heavy workload, learning organisational procedures, understanding the language of higher education, learning to teach, and marking student work. Lecturers frequently use the term 'stress' to describe their general experience.

A significant challenge for the majority of new lecturers is focused on their development as a researcher and finding time for research activity.

#### Activities

The perspectives of the respondents focused on the different activities of their role, including teaching, maintaining links with their clinical role, and research activity.

## The primacy of teaching

The lecturers overwhelmingly placed teaching as a high priority and this was linked to their commitment to developing new professionals. The new lecturers raise many teaching issues, including the process of developing skills and confidence in teaching as well as the considerable time that they spend on preparing for taught sessions. Some lecturers, in particular those from nursing, see the requirement to teach outside their area of specialist knowledge as a particular challenge. Marking student work (grading) emerged as an area of significant challenge for new lecturers. All professional groups share a concern about the responsibility of marking and the excessive time taken by this activity.

## Clinical practice

The nurse lecturers, in particular, express a need to maintain credibility as clinical practitioners. The student audience is perceived as placing high value on clinical credibility, in terms of up to date practitioner knowledge and clinical skills. A number of new lecturers express a sense of loss of expertise in clinical skills and practice; they express sentiments of grief and feeling that from being at the top of their profession they are moving backwards. This is an element of the reluctance of new lecturers to let go of their established identities as clinical experts.

## Scholarship and research activity

Scholarship and research is seen as a personal priority for the majority of respondents and they feel it is also a departmental priority. Most of the new lecturers would like to see themselves engaged in research or studying for a PhD within the next three years. Only 4% of the new lecturer respondents had completed a doctor- ate prior to their appointment and 8% had completed it since then. The pressure to research and publish appears to be linked to departmental or institutional priorities. In some contexts the pressure to publish was seen as very strong, even within their first year of appointment, and in one case the respondent used the term 'extreme'. However a small number of the lecturers see themselves primarily as teachers and a very small minority are planning a return to clinical practice.

The pressure to be an active researcher reveals tensions within the experience of the new lecturers. The rules of selection and appointment of new lecturers place value on clinical expertise and within the role teaching is a key priority, but underlying all this the new lecturers recognise that in the higher education context holding a doctor- ate is perceived as an essential requirement of academic

credibility. Despite this pressure the respondents generally claim to prioritise operational and student focused demands on their time at the expense of research activity. The lecturers seem to be strongly motivated by nurturing students as new clinical practitioners rather than by the possibility of making new contributions to knowledge within their professional field. They do not see strong links between teaching and research activity.

# Support for new lecturers

In general new lecturers felt well supported in the workplace. Returned surveys are illuminating when viewed as individual transcripts. Some new lecturers have found themselves in supportive environments, usually in well established departments with existing programmes of study. In a smaller number of cases lecturers felt formal sup- port was weak and some felt isolated in their workplace. However, even in supportive environments, there was a general feeling that sustained support specifically for developing scholarship and research activity would be a key factor in helping them to achieve their goals of research activity and building their identity as an academic.

Teaching team colleagues were most frequently mentioned as a key source of support, 54% of respondents placed them as highly significant. A smaller proportion identified line managers, mentors, formal programmes, external clinical colleagues, and informal support groups. The majority of respondents identified several individuals or groups as providing significant support. The new lecturers emphasise the significance of physical location by frequent mention of particularly gaining support from those colleagues with whom they share an office space, a corridor or a coffee room. A considerable number of new lecturers had sought out their own informal mentor. This mix of largely informal support for workplace learning is in line with previous findings on academic workplaces (Boyd, 2010; Trowler & Knight, 2000).

#### Discussion

The analysis of survey responses of new nurse, midwifery or allied health professional lecturers demonstrates that both positive and difficult aspects of the transition are mostly shared across the professional groups but some significant differences have been identified. The lecturers generally appear to enjoy their transition into higher education, in spite of the many challenges and the process of reconstructing their identity.

The strong theme of 'managing self' resonates clearly with previous work (Bar-low & Antonio, 2007; Boyd & Lawley, 2009; Hurst, 2010; McArthur-Rouse, 2008; Murray, 2007). The lack of clarity of the expectations of the role, of role boundaries and ways of working; and the difficulty of maintaining a work-life balance were highlighted by large numbers of respondents in this survey, suggesting that these issues can safely be generalised to the larger population.

Tensions in the role and the workplace, and the confusion this causes for identity building by lecturers, featured strongly. The self-management by the new lecturers may be viewed as identity-building work in the sense that it is the 'mutual constitution' of identity and workplace (Wenger, 1998, p. 146). The change in the lecturers' role is experienced and expressed through the activities of teaching, scholarship and research, organisational issues of working in higher education context and working in clinical partnerships. The lecturers do not see strong links between research and teaching

and position these more as separate areas of work. Building stronger and more explicit links between research and teaching appears to be a fruitful area for academic development with these groups of staff (Macfarlane & Hughes, 2009).

Generally the workplace experiences of new lecturers appear to encourage them to hold on to their identity as a credible clinical practitioner despite the inherent contradiction that this is no longer a realistic position due to their new workplace set- ting. In this area of the new lecturers' experiences Wenger's emphasis on the connection between practice and identity is significant (1998). As the new lecturers negotiate their way along multiple interwoven trajectories of identity they appear to hold on to their identity as a practitioner and as supporters of new practitioners. They do not strongly focus on building new identities as higher education teachers or as researchers within their professional field. In the case of the new lecturers, particularly those in nursing, the influence of claims 'beyond the confines of the university' (Clegg, 2008) appear to have a very significant influence over their identity building work. It is the clinical practice and procedural knowledge elements of the professional field that appear to have a priority status in the minds and practices of these new lecturers. From Wenger's perspective (1998) the new lecturers appear to be building a new identity trajectory as 'teacher' but also working hard to maintain their existing trajectory as 'clinical practitioner'. They feel pressure to build a new identity as 'researcher' and many have plans for this or have even taken concrete steps in this direction, but they find it difficult to prioritise this area of activity within their everyday practice and workload. The new lecturers do not appear to have clear role models, Wenger's 'paradigmatic identities' (1998), within their departments on which they might shape their emerging academic identities. These role models would provide the permission required to adopt a range of different permissible identities that may be valued within their department (Barrett, 2007) and help to demonstrate stronger links between research and teaching (Macfarlane & Hughes, 2009).

The significance of informal learning, highlighted by the workplace learning literature (Lave & Wenger, 1991; Trowler & Knight, 2000; Wenger, 1998), seems to have been confirmed in the case of these new lecturers. There is evidence that formal programmes of study were also valued and this supports a critique of situated learning theory as being rather too dismissive of formal learning opportunities (Fuller et al., 2005).

The differences identified within the findings exist mainly between the lecturers in nursing as a group and the other allied health professionals and midwives included. For example clinical currency is perceived as more important for the nursing professions (Barrett, 2007) and some nurse lecturers were less happy to teach outside their specialist area. The underlying contextual reasons for these differences between lecturer perspectives in different professional fields is worthy of further investigation and may be related to the tensions that exist around the acceptance of health sciences as academic disciplines (Oldnall, 1995).

Overall the workplace context, role and strong pre-existing clinical expert identity of the new lecturers forms a complex experience that appears to slow down the construction of a new strand of their emerging academic identity, that of a researcher.

## Conclusion

In the UK new university lecturers in nursing, midwifery and allied health professions are generally appointed after establishing themselves as expert clinicians with associated practices and identities. They find the mid career transition to their higher education roles challenging. They generally enjoy

the challenge, feel well supported and are highly motivated by nurturing new practitioners. They see teaching as a priority and it takes up much of their time and energy. The new lecturers experience underlying pressure to complete a doctorate and be research active as a contradiction to the priority for teaching. They do not see strong links between teaching and research activities. From a workplace learning perspective, in which practice shapes their multiple identities, the newly appointed higher education lecturers in nursing, midwifery and allied health professions respond to their experiences by only slowly letting go of their prior identity and credibility as a clinical practitioner rather than more quickly embracing new identities as a scholar and researcher within their professional field.

The implications of this study include the need for departments in nursing, midwifery, physiotherapy, radiography, and occupational therapy to clearly set out the range of permissible academic identities that are valued within the institution and the professional fields. This will provide a guide for new lecturers in their reconstruction of identity.

In addition there is a need within departments in these professional fields to strengthen the essential characteristic of university teaching, that it is underpinned by engagement with research. This will help to capture and redirect the motivation of new lecturers to contribute to development of new professionals. Departmental leaders and relevant academic development staff need to recognise the significance of fuzzy learning architecture (Boyd, 2010) and use it to form more expansive workplace learning environments.

Departments and higher education institutions need to set realistic expectations for the workload of lecturers and for scholarship and research activity within this. They need to provide effective workplace support for time and workload management so that excessive stress is avoided during the academic induction period which new lecturers generally find enjoyable but challenging.