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## Development of professional identity during early training in oral and maxillofacial surgery: a qualitative study

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#### **Abstract**

Development of professional identity is becoming increasingly important in medical education, and has been found to be beneficial in a surgeon's training. However, despite the complex, demanding nature of early training in oral and maxillofacial surgery (OMFS), we know of little research on how it develops during this time. We therefore used qualitative research methodology based on a grounded theory approach to investigate how trainees gain a sense of identity as they progress through their 2 undergraduate degrees. Data from in-depth, semi-structured interviews with OMFS specialist trainees were transcribed and coded to allow for thematic analysis and subsequent theory construction. We propose a model of how professional identity develops in early OMFS training. Of note, professional experience gained during the second degree was found to be of great importance in the development of a strong professional identity. We look at reasons for this in terms of "cognitive space" and use the concept to discuss potential improvements to the training pathway.

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#### Introduction

Professional identity, defined as the "stable and enduring constellation of attributes, beliefs, values, motives and experiences in terms of which people define themselves in a professional role", has increasingly been used in research into healthcare education. 4 Understanding the holistic picture of what professionals are, rather than what they do, is essential for aspiring trainees as individuals and for a profession as a whole, and helps to cultivate a sense of belonging by providing a context for development. It follows that development of professional identity is increasingly important in surgical education. Recent reports have highlighted an impending "identity crisis" in oral and maxillofacial surgery (OMFS) because awareness of the specialty is limited among students, healthcare professionals, and the public. 11,12 Within

At present we know of no published data on how professional identity develops during early OMFS training, or how experience during both undergraduate degrees contributes to a sense of belonging. We therefore investigated this and explored ways to improve the process.

#### Methods

We collected data through in-depth, face-to-face interviews using a semi-structured protocol. Participants (P) were OMFS specialist trainees from London. Purposive sampling was

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the specialty itself, a sense of professional identity is also important, and given that early training is particularly complex and demanding, junior trainees may find it difficult to acquire. Studies show that of those who begin their second degree with the intention of pursuing a career in OMFS, over 40% leave the specialty, <sup>13</sup> possibly because of a lack of identity, which has a negative impact on motivation, perseverance, and enthusiasm.

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used to ensure that both sexes were equally represented and that trainees who had studied medicine or dentistry as their first degree were equally represented. The final group consisted of 4 trainees whose first degree was in dentistry and 3 whose first degree was in medicine. There were 4 men and 3 women ranging between ST3 and ST5.

Interviews were recorded, transcribed, and anonymised. Information was analysed as it was collected to maintain the dynamic, iterative process that is important to grounded methodology. Relevant ideas, actions, or opinions, were coded and categorised, and meaningful categories were then developed into themes, which were refined and tested as further raw data were coded and integrated into the framework. Thematic analysis showed how a sense of professional identity develops.

The study was approved by the Medical Education Ethics Committee, Imperial College, London.

#### Results

Analysis showed that professional identity develops during 4 key stages in OMFS early years training. It begins during the primary degree, continues after graduation, is consolidated during the second degree, and continues to develop after dual undergraduate qualification. Table 1 shows evidence for this from trainees with dental and medical backgrounds.

Early development during the primary degree

Professional identity revolved around development of a broad identity as a doctor or dentist. Experience in OMFS seemed to influence the choice of career.

"We spent 2 weeks with the OMFS department, including clinics, operating theatre sessions...I was watching a head and neck operation. I think I only had seen the tracheostomy and thought that this is for me." (P6)

#### Development after graduation

This equates to the time spent working as a doctor or dentist between undergraduate degrees. Despite the variation in nature and duration between trainees, participants reported that the experience was important to understanding the specialty on a professional level. They reflected on how it had laid a foundation for their future in OMFS, perhaps without recognising its importance at the time.

"I did a year in the community dental service. I learnt a lot in that year... GA lists by myself, IV sedation, management of kids... Gives you confidence." (P6)

They reported that experience of roles in OMFS units were hugely important in the establishment of a sense to belonging. Being part of the team and having responsibilities within departments further expanded their awareness of the specialty.

"It was a very steep learning curve but I quickly learned that that was what I wanted to do.' (P2)

#### Consolidation during second degree

During this period participants began to feel that they were part of the specialty. This was for a number of reasons. They found that the skills they had developed during their first degree and early professional life allowed them to use their time more efficiently than their fellow students and it made the degree more manageable, mainly because they were more mature, had more professional experience and experience of studying, and were at ease interacting with patients and colleagues.

"I was efficient. It's imperative. You have no choice. I was older and had been working for a while before I returned to school. I approached my second degree in a completely different way to my first degree... I had 4 jobs at the time, plus I had a wife and kid on the way so my priorities were very different. I went to school, 9-5, and it was like a job, I had things I had to achieve... I was there for very different reasons." (P6)

An ease of learning provided space in a trainee's routine, which enabled them to work to ensure financial stability, increase their experience in OMFS, and continue to build their career portfolios. However, it was difficult to gain professional experience during formal periods of undergraduate training.

"I don't think it's necessarily right that the second degree-ers are working night shifts so frequently to support themselves... I don't think you should have to be as exhausted as I was. It's very hard work." (P4)

More importantly, maintaining links to OMFS units and departments during the second degree was seen as a key feature in the rapid development of professional identity. The career choice, represented by the return to university, together with the ability to carry out professional duties in conjunction with formal academic study, increased the association with the specialty.

"I was working I or 2 night-shifts a week. It was tiring but kept my skills up... it was also good because I got involved with the department, things like audits. Plus it's a chance to get to know the regs and even other second degree-ers like myself. There was hardly any maxfax in the course but I definitely knew more about maxfax when I finished (my second degree) than when I started it." (P5)

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