Title: Research Pedagogy in a UK Radiography Education Setting

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Abstract

Introduction

This paper focuses on research pedagogy in radiography and the importance of research for the profession by exploring one university's endeavours to realise the aims of The Society and College of Radiographers *Research Strategy 2016-2021¹* around embedding research in the curriculum.

Methods

Co-Constructed Depiction method was developed as an innovative use of imagery in data collection, analysis, and presentation of results, being symbolic of the practices of the radiography profession by foregrounding the importance of images and their interpretation. A total of eighteen radiography staff, post-graduate radiography students, and 3rd year radiography undergraduate students took part in individual semi-structured interviews that included participant image making.

Results

Students and educators saw the importance of research for individuals and the profession. While students could identify where research was embedded in the curriculum, generally staff did not feel embedding was done well, but this may be because research is not made explicit enough in the curriculum. Participants suggested that research needs to become 'normalised'; being a part of all radiographers' work.

Conclusion

The links between research, professionalism and care can be made more evident to students from the start of their studies so increasing understanding of their own relationship with the spectrum of research, and how this links to maintaining the standing of our profession and to patient care.

Implications for Practice

The findings will inform future research pedagogy and curriculum development in radiography and other Allied Health Professions around embedding research in the curriculum in a way that educators and students recognise. A greater awareness of the importance of research for radiographers will lead to them being better prepared to take on advanced practice roles for the benefit of patients.

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Introduction

In 2015 The Society and College of Radiographers (SCoR) published a Research Strategy ¹ with three key aims. Action points identify *who* in the profession should be responsible for the implementation of each aim, however there is no guidance regarding *how* these aims are to be achieved, this being left to the discretion of the agents responsible for effecting them. The first of these aims asks that as a profession we 'Embed research at all levels of radiography practice and education' ¹. The expectation is that embedding research will raise the professional standing of radiography by increasing the amount and quality of research undertaken, with benefit to patients being at the heart of this vision. The Oxford English Dictionary ² gives a definition of embedding as: 'implant (an idea or feeling) so that it becomes ingrained within a particular context'. This definition supports the intention that research should be an integral part of teaching, learning and professional practice in radiography. How we might achieve this aim in practice was the focus of this research. Drawing on the experiences of radiography educators and students in one setting, improvements and changes are suggested which could be integrated into research teaching in radiography to help fulfil these obligations.

Literature Review - 'Hit the floor running' versus 'Hit the floor thinking'.

Teaching students on a vocational degree such as radiography can lead to tensions between the need to enable students to be ready for practice on qualification, and on the

other hand building the skills needed to foster future lifelong learning. This is significant for radiographers as many need the requisite academic skills to engage in postgraduate education which may in turn lead to an increase in research output as anticipated by the SCoR Research Strategy ¹.

Payne & Nixon³, when describing the skills and attributes of newly qualified radiographers required by clinical departments used the phrase 'hits the floor running', meaning that newly qualified radiographers should be ready to work clinically in an imaging department as a fully competent member of staff from the day they start work, with little time to acclimatise themselves to the environment. Later Jackson⁴ used the same phrase in his study of the UK radiography curriculum where he identified a disparity between the radiography community and educators in their identification of the significance of research as a vital skill for radiographers. Jackson ⁴ suggested that there may be a lack of awareness of the research culture within the profession which could be addressed by improving research teaching at undergraduate level. By embedding research in the curriculum newly gualified radiographers should be ready not only to hit the floor running, but to hit the floor running and thinking, and with the ability, based on their education, to progress both their embodied practical skills and their intellectual skills into advanced practice.

Radiography is not the only health profession to have undergone changes in the way students are educated over time, as courses in all allied health professions and nursing have become more academic and university based. This change in emphasis on the academic component of courses may have had an adverse effect on the integration of the practical and academic training for the job of radiography. For example, Baird ⁵ writing in 1996, only four years after radiography became a graduate entry profession, discussed the difficulties for students in matching practice in the clinical setting which she refers to as the practicum, with knowledge learned in the university. Baird continues that technical ability needs to be

complemented by critical thinking skills, implying that a professional radiographer needs both types of skill. However, she suggested that most professional undergraduate programmes' practicum focussed on the technical learning or how to do the job, at the expense of academia, which includes research and critique or how to *think* about the job. Baird's proposed solution to bridge this perceived gap is to include more reflection in practice. In other words, students need to develop their skills to think critically about what they are doing in practice rather than becoming technicians, uncritically following rules and regulations ⁵. Writing later, McInerney and Baird⁶ state that, in accord with professional registration bodies' requirements, critical thinking is essential for radiographers. They suggest integrating critical thinking into the whole curriculum and discuss their analysis of three learning activities. They acknowledge the limitations of their small-scale research and that while their study assessed pedagogical tools from a students' perspectives, there is no guarantee that it will translate into an increase in critical skills in practice. However, this study matches with the idea that students need to study research throughout the curriculum to help develop their critical thinking with the expectation that it will lead to an increase in criticality in practice. Without these skills, there is a reduced prospect of them being available to students once qualified and in practice.

Higgins et.al. ^{7,8} suggest that the radiography profession lags behind others in health care when comparing research output which might lead to a weakening of the professional field of radiography. They advocate that teaching research early in the course will improve the research culture, in line with the 'embedding' of research in the curriculum by the SCoR and identify that a change in research culture is needed ⁸, which requires strategic policies and actions, in other words this is a change that must be supported by the profession, the universities, and the policy makers, as well as local teaching teams and this is happening now across radiography.

There is clearly an expectation from the SCoR and in the literature mentioned that research should be part of the radiography curriculum and indeed it is included, but the aim of this study was to gain an understanding about whether educators and students are aware of research embedded in their own curriculum, and what form that takes for them.

Methods

Howell ⁹ describes social constructionism as a paradigm in which an understanding of reality is based on social interaction and while, according to Crotty ¹⁰ there is no true or valid interpretation of the world, it is possible to come to useful interpretations. A constructionist epistemology assumes that everyone involved in this research had their own perspective on the questions asked, so the interpretation of what was investigated was built by discovering what these individual views were ¹¹, indicating the use of an interpretive method of data gathering and analysis to, as Crotty ¹⁰ says, reach a useful interpretation of a local situation.

To integrate imagery within the method a new method called 'Co-Constructed Depiction' was developed for this study; a method focussing on understanding what is in the data by blending the words and images of each participant's ideas and concepts as a whole for display and analysis.

Ethical considerations

Ethical approval was granted by the University Faculty Academic Ethics Committee. Invitations to participate accompanied by an information sheet and consent form were emailed to potential participants. They were asked to give their consent to being involved in the research both in writing in advance of their interview, and as part of the interview audio recording, and it was made clear that they could withdraw at any point without prejudice or penalty.

Participants

This interpretive study did not intend to subject data to statistical analysis, thus a nonprobability theoretical sampling method was indicated ¹². Purposive sampling was used to invite participants who fell within the inclusion criteria to take part as they had knowledge of the issues being explored. The eighteen participants included nine academic staff from the radiography department of the university having a range of one to seventeen years in academic posts, five 3rd year students with no previous research experience, and four postgraduate students who held clinical posts and were studying at Master's level.

Data Collection

Data was collected using a semi-structured interview format, each lasting approximately one hour ¹³ to elicit responses, using open-ended and non-leading questions ¹⁴. Participants drew images during the interviews, which were analysed alongside the transcribed interviews. Participants were shown the image seen in Figure 1: *Drawing Information Diagram for Participants*, to explain the type of drawing they would be doing, without giving rigid guidelines and rules. The skeleton outline in the middle of each A3 size page acted as a guide and avoided presenting participants with a blank page, which seemed important as some participants had expressed concerns that something 'arty' might be required. Any line or shape would have sufficed, but for radiographers, the skeleton is a familiar image and its use acted as an icebreaker at the beginning of each interview. During the interview participants wrote their thoughts on the paper as they spoke.

Figure 1. Drawing Information Diagram for Participants.

The interviews were recorded and subsequently transcribed then participants' spoken comments were added to their drawings, forming the Co-Constructed Depictions following the method shown in Figure 2: Process for making Co-Constructed Depictions.

Figure 2 Process for making Co-Constructed Depictions

An advantage of this method is that there are both oral and visual materials to analyse and it is possible to cross match the two for each participant, thus adding internal validity to the findings. An example of one of the Co-Constructed Depictions is shown in Figure 3: Co-Constructed Depiction- Drawing 1 Question with colour key.

Figure 3 Co-Constructed Depiction- Drawing 1 Question with colour key.

One of the questions asked was: '(How) do you think we embed research in the whole curriculum?' Participants were purposely not given any definition of what was meant by the concept 'research' to avoid influencing their responses. It was important to gain an insight into their understanding of what research meant to them, and whether they differentiated between creating knowledge, and identifying, accessing and using knowledge in the form of research.

Co-Constructed Depiction as a new method of data collection and analysis aims to visualise different people's perspectives on the research questions by creating a visual narrative using their data in the form of words and images, to create two-dimensional depictions of

multidimensional perspectives. This becomes a depiction or illustration of a story coconstructed between the participants, and the researcher and data analyst.

Data analysis

One of Barthes' ¹⁵ theories having applications to medical imaging as well as photography is states that there are two elements of a photograph or image that arouse interest. The first is an element of general interest in the image that he calls *studium*, which in medical imaging might be the general interest in looking at the images produced. This is applicable mainly to the 'normal' appearance of an image, which in practice the absence of any pathology. The second type of interest is what Barthes suggests 'is this element which rises from the scene, shoots out of it like an arrow, and pierces me' ¹⁵, which he calls a *punctum*. Barthes suggests that this part of the image, perhaps just a detail, metaphorically bruises one's body like a sharp point or tip. So, this is something within the image that piques the interest of the viewer and may have a physical effect on them, it 'animates' them' ¹⁵, perhaps with an intake of breath or change in facial expression as they look at a pathology on a medical image even when they do not know the person whose image they are viewing. Co-Constructed Depiction draws on Barthes' idea of the *punctum*, to find the important things that participants drew and said, as they strike the researcher as important. An adaptation of Braun and Clarke's ¹⁶ theoretical thematic analysis, using existing theories and concepts, based on choices made as a result of the researcher's own knowledge and epistemology was used in conjunction with the *puncta* concept to identify themes within the data.

Results and Discussion

Responses to the research question: 'How is embedding of research in the radiography curriculum perceived, from both educators' and students' perspectives?' are discussed here. The results for this part of the research project describe how staff and students saw research embedded in the curriculum and draws on two sub-themes of the theme 'improvements'

namely 'normalising research' and 'student participation in research' as these have already led to changes in undergraduate radiographer research teaching at the university.

Seeing research in the curriculum

Participants were asked to think about the curriculum and say what were for them a form of

Barthes' ¹⁵ *puncta*, in other words, what stood out, or struck them as being about research.

The students answered this question with comments such as:

I think, no it [research] is kind of like introduced to us slowly, slowly in the first year and then in the second year there is a bit more then in the third year it's pretty full on (P1 Student)

Not so much in the first year but second year. First year it's more planting the seed. Third year research proposal taking what we learned from previous years and putting it into practice (P2 Student)

All the undergraduate students gave positive comments that they did think research was

embedded in the curriculum, although following further questioning this was something they

thought they could see in retrospect but might not have realised at the time. One student

suggested that lecturers should make it more obvious during the course, so they could see

research throughout, and that way the research project in the third year would not come as

such a surprise.

Two students, who from other answers given seemed to feel research was important for

radiographers, made the following comments:

I saw research more as I went on with my studies by undertaking the research in your module...it's really come to light that it's always been present in the whole curriculum and I appreciate it more understanding more the actual effort that goes into research (P11 Student)

everything being based on research everything that is taught us throughout the whole degree, you look back and realise that everything has been sort of preparing you for something like that (P12 Student)

Again, these students seem to be able to see where research was embedded in the curriculum in retrospect, but unlike those above who saw research building through the curriculum, they could see research had been embedded through all their teaching and learning, not just in modules perceives as specifically preparing students for their third-year research module. These students are reporting what embedding research should be, according to the definition from the OED²: 'implant (an idea or feeling) so that it becomes ingrained within a particular context'. The idea, of research, has been ingrained or embodied within the entire curriculum, according to these students.

When staff were asked this question there was a more cautious response:

I don't think we do...if it's there it's there implicitly (P20 Staff)

...we do it carefully I think we do it in pockets (P4 Staff)

Generally, staff did not think that research was embedded in the curriculum and some found this a difficult question to answer, as it was not something they had overtly considered before in connection with how they teach. However, this may be an example of staff not recognising what they do well themselves as there was evidence from students that research was in the teaching. There may however be another explanation for this apparent blindness by staff towards research in the curriculum. Participants mentioned patients, technology and equipment very little in their answers to any of the questions about the importance of research for radiographers, perhaps because they are part of 'what we do' as radiographers; of course they deal with patients and technology, as in Bourdieu's ¹⁷ words, it goes without saying. This offers an opportunity to rethink research in the curriculum and teaching in a way that is more explicit for staff and students. Therefore, it is important to identify what links there are to research in the modules and teaching and encourage staff to emphasise these links to students, so students are left in no doubt about research being threaded through or embedded in everything they learn.

Some staff were critically aware of their own limitations regarding teaching research because of their own lack of knowledge of the subject, saying for example:

> ...our skills and our confidence in research as a team because I suspect most of us don't feel confident (P20 Staff)

...some staff feel nervous about it because I think they were the students that also went through that [process of learning about research] and came out not feeling confident about research (P4 Staff)

These staff participants seem to be expressing a deficit in their personal research ability, identifying a shortfall in themselves and the team with regard to experience in doing and teaching research while simultaneously misrecognising the skills they do have and currently use on a research spectrum which includes arrange of research activity from reading research through using research and performing research.

There now follows a short discussion of two sub-themes about where research can be embedded not only in the curriculum but in the profession, which led from the comments made by participants about improving teaching.

Normalising research

Several comments were made about research needing to be a normal part of radiography, with one member of staff using the word 'normalise' from which this sub-theme developed, for example:

> ...it's [research] been turned into an extra ordinary thing and it shouldn't be - normalising that's a good word (P7 Staff)

...it [research] needs to become natural doesn't it, so we need to have that, that it's just normal, it's just what you do (P5 Staff)

Research should become a part of a radiographer's habitus and practice, just as using highly technical equipment and patient care is a normal part of radiographers' work. One student

understood this, expressing how research had become normalised in their mind, saying:

...by the third year you almost stop noticing that it's actually research, you start actually just doing it, start more naturally doing it (P2 Student)

When they say 'you almost stop noticing it' perhaps for them research is just what you do,

without stopping to give it a name, and so it becomes part of the *doxa*¹⁸ of radiography.

Doing research as a student

Participants suggested that students might benefit from doing a small research project,

rather than just a research proposal as a form of assessment, the suggestions being:

...practical research- they need to do it (P3 Staff)

...personally, I think it would be more beneficial to actually do the research itself ... I find it very strange that we don't do it (P11 Student)

Considering radiography is a vocational degree course, with students spending time in the clinical practicum learning 'on the job', these comments highlight an anomaly in the way we teach research. In the participants' university it had become a desktop exercise of writing a proposal, rather than a practical skill for students who are used to applying knowledge. This reflects Baird's ⁵ suggestion that there is a dichotomy between the practicum and academia, but this problem goes further than her suggestion that students find it difficult to match clinical practice with knowledge learned in the university as students may find it hard to practise research having not had chance to gain practical knowledge. Although students need to be encouraged to think critically about what they are doing, as Baird ⁵ suggests, there was little opportunity for students to practise research skills. One postgraduate student had a short elective period when they were able to:

... [do] something that we wanted to do related to research so I followed a research physio for the day (P16 Postgraduate Student)

Health Education England is currently exploring ways to offer students a research placement, but as a result of these responses, the university's students do now have the opportunity to perform a limited research project in the third year.

Conclusion

One of the tasks of radiographer educators is to help students develop their own version of the professional radiographer's habitus ¹⁸, through exposure to the academic and practical aspects of radiography. This embodiment of *radiographer* needs to include research abilities and skills to afford members of the profession the ability to develop their activities within the research spectrum. In practical terms, the links between research and professionalism can be made more evident to students from the start of their studies. This would increase their understanding of their relationship to the spectrum of research, and how it links to maintaining the profession.

Although research elements were seen in the curriculum, more must be done to overtly 'embed' research within it. There needs to be clarity for staff and students about where research already sits in the curriculum and activities, to meet the suggestions put forward in the *SCoR Research Strategy 2016-2021*¹. Overall, research needs to be perceived as a normal part of teaching and learning, in fact it needs to be 'normalised' both in the university and in clinical practice.

Implications for practice

It must be clear to students that radiography is not a 'button pusher' job; not a mere *doing* job, but a profession in which radiographers can progress to advanced clinical practice, by *thinking*. For this, radiographer need to be ready to enact the four pillars of advanced

practice, clinical practice, leadership and management, education, and research, of which research has been shown by some to be the most difficult practically ^{19, 20}. Greater demonstration of the importance of these four pillars in advanced practice could be achieved by using the subject themes to underpin the undergraduate curriculum, in the form of four bases, to structure the subjects currently taught at undergraduate level so the links to advanced practice are apparent from the start of their education. This recommendation is applicable to all AHPs as they are all included in the Health Education England ²¹ framework for advanced clinical practice. There is national and international application for this work in radiography and other healthcare professions as research is important for professional development, and particularly for improvements in patient care wherever patients are being cared for worldwide.

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Colour Key for Co-Constructed Depiction							
		Hit the ground running		Influences		Normalise research	
Habitus- all							
Habitus of lecturers		Professional field- Profession oriented		Constraints		Student participation in research	
Student constraints- habitus		Professional field- patient oriented		Suggestions for improvements		Embedding research- curriculum	



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Figure 1. Drawing Information Diagram for Participants.

Figure 2 Process for making Co-Constructed Depictions

Figure 3: Co-Constructed Depiction- Drawing 1 Question with colour key.