

Editorial

Professional identity formation

Latha Ravichandran¹, T. Linga Devi²Departments of ¹Paediatrics and ²Health Professions Education, Sri Ramachandra Institute of Higher Education and Research, Chennai, Tamil Nadu, India.

INTRODUCTION

Recently, there is a perceived need to shift from teaching and learning professionalism in medical education to learning to develop a professional identity. Is there a difference between the two? Professionalism is demonstrating a behavior that is in keeping with the community or fraternity norms or standards.^[1] Professional identity formation (PIF) is defined as the possession and exhibition of the medical professional conduct toward meeting the goal of providing optimal care and service in their respective professional domain. The educational process and training helps inculcate the required knowledge, skills, values, and behavior patterns pertaining to their respective fields. It is a process that helps students ascend in the Miller's pyramid of learning from Knowledge to Knowledge Application and perform tasks that are specific requirements in their profession.^[2]

The competency-based medical education is a curricular process that inculcates this training. This converts a person with a pre-existing identity into a professional who can perform predetermined tasks to provide efficient services. PIF is the highest step in Miller's pyramid of learning that transforms one from a professional who can "do or perform" to "being" that professional. This happens when there is a true integration of the knowledge, skills, behavior, and values of that profession. It is a change in behavior that occurs following the application of knowledge, a true internalization of the competencies and norms learned that one thinks, acts, and feels as part of the community or fraternity.

WHAT IS PIF AND WHY IS THERE A SHIFT FROM PROFESSIONALISM TO PIF?

PIF is incorporating within and demonstrating the behavioral norms, standards, and values of a professional community, here health profession, to shift from demonstrating a behavior as per norms when someone is watching and a less professional behavior when unwatched when actually there is a need to do the right thing as prescribed by the

community standards and "think, act, and feel" like a member of that community even when unobserved.^[3] Thus, there is an integration of knowledge, skills, behaviors, and values of their profession with already pre-existing identities and behaviors.^[4] It represents a continuous transformative process from being an ordinary layperson to being that health care professional who meets the expectations of the society he/she serves.^[5]

BENEFITS OF PIF

The major benefit of professional identity is that it has an influence on how one perceives, explains, presents, and conducts oneself.^[6] It also provides the framework for ethical practice. If the professional identity is not aligned, it leads to problematic behaviors that are unprofessional. It's that transformation which differentiates a professional who can "Do" to "being" that professional itself. PIF is an essential complement to competency-based education.

THE THREE R'S IN PERSONAL IDENTITY FORMATION

The vital elements in PIF: Are the 3 R's- Reflection, Relationships, and Resilience.

Reflection

Reflection entails sharing personal experiences in confidential mentor-facilitated peer groups. It helps the trainees to compare and contrast their perspectives versus those of their peers-thus, reflecting on, and either accepting/rejecting new ideas and hence continue to evolve and create their very own unique professional identity.^[5]

Relationships

Team building and establishing relationships with peers, mentors, role models, as well as with patients, their relatives, and society as a whole, is of paramount importance for personal identity formation. Medical educators have a duty to formulate a curriculum to help a student develop professional

*Corresponding author: Latha Ravichandran, Department of Paediatrics, Sri Ramachandra Institute of Higher Education and Research, Chennai, Tamil Nadu, India. latha@sriramachandra.edu.in

Received: 29 December 2023 Accepted: 29 December 2023 Published: 04 January 2024 DOI: 10.25259/SRJHS_56_2023

This is an open-access article distributed under the terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 License, which allows others to remix, transform, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms. ©2023 Published by Scientific Scholar on behalf of Sri Ramachandra Journal of Health Sciences

relationships based on a balanced learning environment where they are able to mitigate negative learning influences, augment positive learning practices, voice out safely their doubts and vulnerabilities, and establish rapport with their colleagues and patients in ways that aid in PIF.^[5]

Resilience

Is defined as “the ability to maintain personal and professional well-being in the face of ongoing stress and adversity.” It helps the students to respond to stress in personal and work-related environments in a healthy way without getting burnt out. This can be achieved by promoting a curriculum that helps students develop a strong sense of shared social identity based on mutual trust and respect for each other and can be facilitated through small group reflection activities, which help to develop intellectual stretching and emotional intelligence to overcome any adverse situations at work effectively.

WHY IS PIF IMPORTANT?

PIF is of paramount importance for health care providers to provide holistic patient care; the duty rests with medical educators to implement a competency-based curriculum with training in PIF from the 1st day of the student’s training. The external representation of a medical personnel’s feelings, beliefs, experiences, and values all serve as an influence in their delivery of holistic patient care. Hence, the creation of training opportunities and pedagogic space in the curriculum to enhance these core competencies of PIF becomes mandatory. PIF will help students transform and self-reflect on their own personal beliefs and values, guide them, enable them to become confident and make unbiased, non-judgmental decisions for providing holistic patient care.^[7] The efforts to form a professional identity will allow the student to think, feel, and act in alignment with the idea of a “good physician.”^[8] It is equally important for the student to reflect on how not to be, to desist from trying to create an impression (posturing), and managing impressions rather than creating and discovering the authentic self. The key to be in alignment with the idea of a good physician is to allow the authentic self to evolve and move away from “posturing.”

TWO MAIN APPROACHES FOR PIF DEVELOPMENT

We can categorize the approaches for PIF development into two: (i) individual—psychological/developmental and (ii) sociocultural.

Individual approaches to PIF are based on the conceptualization of identity formation, which is self-determined in response to life experiences, based on one’s morals, values, and beliefs, giving meaning to one’s self and one’s professional life.

Social approaches for PIF are focused on the individual’s interaction with their social surroundings, both as in a group and as an individual, and their relationships with them,

which dictates the way a professional behaves and thus contributes to the development of a competent and confident health professional.^[9]

PEDAGOGICAL APPROACHES/STRATEGIES TO ENHANCE THE ATTRIBUTES OF PIF

Practical pedagogical approaches that can be incorporated into our existing curriculum to enhance the attributes of PIF can be classified based on self-awareness, teamwork, attention to self-care, empathy, integrity, respect and equal regard for all, resilience, beneficence, and mindful attention to patient care.^[7]

Development of these core values can be attained by small group discussions, team-based learning through problem-based case scenarios, workshops on time management and guiding strategies to deal with various stressors and learning resilience, transforming humiliation, and dealing with conflict to develop an authentic PIF through faculty mentoring programs.

Empathy, integrity, resilience, and mindfulness in patient care can be trained by role-playing, reflective essays, group discussions, observing faculty mentors in practice, and creating videos exploring problem-solving case scenarios.

ROLE OF MENTORS IN PIF TRAINING

All of the above sessions, when moderated by a trained facilitator, help students to respect patient’s autonomy, actively seek opportunities to do good for their patients, and allow the patient to make informed decisions and thus avoid paternalistic attitude.^[7]

ROLE OF MEDICAL EDUCATORS IN PIF

Medical educators have the responsibility to create a patient-safe workforce who follow the ethical standards and understand the core values of professional identity.

As self-introspection of students is the first step before establishing their professional identity, the role of medical educators to review the existing curriculum and identify learning outcomes that help guide PIF and aid patient best practice has become the need of the hour.

Designing self-assessments and newer protocols to incorporate ways to make a practice safe, patient-friendly environment rests with the development of updated content for PIF by the medical educators.^[9]

MEDICAL EDUCATOR CHALLENGES IN PIF AND INNOVATIVE OPPORTUNITIES

The recent focus on PIF has challenged the medical educators to promote, facilitate, and integrate the development process of PIF through formal and informal curricular approaches.

Three important competencies and related pedagogic strategies have been considered to contribute to PIF. (1) Promoting reflective capacity, emotional awareness, and resiliency through

interactive, reflective writing. This helps in professional and personal growth. (2) Inculcating clinician resilience and well-being through teaching modules on mind-full clinical practice and resilient responses to difficult situations. (3) Professional and personal growth through effective use of professional development e-portfolio and faculty development for reflective coaching skills. These may be considered as targeted competency development and approaches that may help effective PIF.^[10]

REFERENCES

1. Bloom TJ. Understanding professionalism's interplay between the profession's identity and one's professional identity. *Am J Pharm Educ* 2022;86:ajpe8956.
2. Chandran L, Iuli RJ, Strano-Paul L, Post SG. Developing "a way of being": Deliberate approaches to professional identity formation in medical education. *Acad Psychiatry* 2019;43:521-7.
3. Janke KK, Bloom TJ, Boyce EG, Johnson JL, Kopacek K, O'Sullivan TA, *et al.* A pathway to professional identity formation: Report of the 2020-2021 AACP student affairs standing committee. *Am J Pharm Educ* 2021;85:8714.
4. Mount GR, Kahlke R, Melton J, Varpio L. A critical review of professional identity formation interventions in medical education. *Acad Med* 2022; 97:S96-106.
5. Wald HS. Professional identity (trans) formation in medical education: Reflection, relationship, resilience. *Acad Med* 2015;90:701-6.
6. Cruess SR, Cruess RL. The development of professional identity. In: Swanwick T, Forrest K, O'Brien BC, editors. *Understanding medical education*. 1st ed. Wiley; 2018. p. 239-54. Available from: <https://onlinelibrary.wiley.com/doi/10.1002/9781119373780.ch17> [Last accessed on 2023 Dec 23].
7. Krishnasamy N, Hasamnis A, Patil S. Developing professional identity among undergraduate medical students in a competency-based curriculum: Educators' perspective. *J Educ Health Promot* 2022;11:361.
8. Cruess RL, Cruess SR, Boudreau JD, Snell L, Steinert Y. Reframing medical education to support professional identity formation: *Acad Med* 2014;89:1446-51.
9. Cornett M, Palermo C, Ash S. Professional identity research in the health professions-a scoping review. *Adv Health Sci Educ* 2023;28:589-642.
10. Wald HS, Anthony D, Hutchinson TA, Liben S, Smilovitch M, Donato AA. Professional identity formation in medical education for humanistic, resilient physicians: Pedagogic strategies for bridging theory to practice. *Acad Med* 2015;90:753-60.

How to cite this article: Ravichandran L, Devi TL. Professional identity formation. *Sri Ramachandra J Health Sci.* 2023;3:39-41. doi: 10.25259/SRJHS_56_2023