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## **The Role of Transformative Learning in Fostering Identity Development among Learners in Professional Education Programs of Study**

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**Abstract:** In-depth interviews and observations of first-year residents (interns) in an academic medical center were conducted to explore professional identity development and potential for transformative learning among new physicians on-the-job.

**Keywords:** professional identity formation, transformative learning, medical education

Learners in various professional education settings are not only expected to act professionally but are also expected to become professionals. In addition to acquiring on-the-job knowledge, skills, and abilities relevant to the discipline, learners in advanced professional training must also adopt the professional values and behaviors that society associates with being a professional (Glaiser, 2009). Professional identity formation (PIF) requires transformation of a learner's personal paradigms, a major outcome expected for graduates in the professions (Johnson, 2000). Rather than being explicitly taught, however, much of what is learned is often acquired tacitly through observation of role models and enculturation in professional practice settings, often termed the "hidden curriculum." (Hafferty, 1998). Mezirow's (1991) theory of transformative learning was the theoretical lens for examining learning experiences within the context of residency training in an academic medical center because it centers on the transformation of an individual's worldview and perspective.

### **A Case Study of First-Year Medical Residents Learning to Become Professionals**

Research questions addressed in this case study focused on the type of educational experiences that contributed to the development of professionalism during the physician's first year of residency training, also known as the intern year. These included formal, informal, and incidental learning experiences (Marsick & Watkins, 2001) in a variety of clinical contexts as study participants rotated among various specialties to gain broad-based experience as a junior physician.

Individual interviews and extensive observation in the clinical setting allowed the researcher to gain an appreciation for what a new doctor experiences, how he makes sense of it, and the ebb and flow of confidence that evolves over time as the young doctor encounters novel experiences with patient care. To minimize the potential for socially desirable responses to interview questions, study participants were told only that the study sought to examine how they learned to practice medicine during their first year of residency training; they were not cued into the intentional observation or elicitation of descriptions that would reflect on development of professionalism, per se. Throughout, the researcher examined the critical incidents and the experiences they described for indications of gradual or epochal transformation of perspectives, and whether any of the experiences were indicative of changes or expansion of beliefs, values, or assumptions as meaning schemes (Brookfield, 1990; Mezirow, 1991).

Participant recruitment for the study was particularly challenging since the 80-hour work week was new to these physicians, and they had a host of novel experiences and a steep learning curve to master during this first year of residency. Of the more than 170 interns who began

residency training in this academic medical center in 2014, only four volunteered to participate in the study; three of these had attended medical school in the same institutional setting and knew the researcher from their early medical school years. Without this prior contact, however, the researcher believed that she would have been unable to recruit for the study, such is the intensity of demands placed on the time of interns, and their reluctance to become involved in any endeavor that may detract from clinical demands and study as junior physicians. Prior acquaintance with the researcher, however, enabled authentic dialogue and an openness to experience for these study participants that might not have been possible otherwise. While the researcher sought more diversity in study participant recruitment, all four were male, and three of these, white males.

### **Discussion of Professional Identity Development**

Our roundtable discussion will share themes and conclusions from this dissertation study by examining the transition from student learner to professional in the work setting. Learners relied heavily on the support and shared experiences with other interns to make sense of their new professional roles (Seigel & Donnelly, 1978). They experienced motivational swings as they sought to prioritize and manage multiple priorities in a defined period of time, learned when to ask for help, and figured how best to deal with different personalities in the work setting. The struggle of when to accept responsibility for decision-making in patient care situations and when it was more appropriate to defer this responsibility to a more experienced doctor was a nagging issue that influenced professional identity and shaped the experience of the first year.

During the roundtable, we will engage attendees in exploring the professional identity formation associated with other professions, as well as the development of these learners in medical education. Particular focus will be on the themes of personal transformation through educational experiences that help or hinder the acquisition of the attitudes, behaviors, and values in forming a professional identity.

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