Research

Self-Perceived Professional Identity of Pharmacy Educators in South Africa

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Objective. To identify, describe, and analyze the self-perceived professional identities of pharmacy educators within the South African context.

Methods. Narrative interviews were conducted, recorded, and transcribed. Thematic analysis and interpretation of the transcripts were conducted using qualitative data analysis software.

Results. Multiplicities of self-perceived professional identities were identified. All of these were multifaceted and could be situated on a continuum between pharmacist identity on one end and academic identity on the other. In addition, 6 key determinants were recognized as underpinning the participants’ self-perception of their professional identity.

Conclusion. This study afforded a better understanding of who pharmacy educators in South Africa are as professionals. Moreover, the findings contribute to an international, collective understanding of the professional identity of pharmacy educators.

Keywords: academic identity, communities of practice, pharmaceutical education, pharmacy educators, professional identity

Introduction

The role and behavior of pharmacy educators has been identified as a significant factor in the development of professionally mature pharmacy practitioners with the knowledge, skills, and attitudes necessary to deliver “medicine-centered, patient-focused” care. 1,2 As far back as 2000, the then president of the Association of American Colleges of Pharmacy Robert E. Smith argued that the role of pharmacy educators and particularly the potential impact of their professional identity on their teaching and the educational process was integral to reforming pharmaceutical education. 3 Furthermore, Smith challenged pharmacy educators to read the book The Courage to Teach, authored by Parker Palmer, and to reflect on who they were as teachers. 3,4 Based on Palmer’s notion that good teaching is not only the consequence of technique but rather is dependent on the “identity and integrity of the teacher,” 4 Smith suggested that if pharmacy educators would do the “heavy mental work” of looking deeply at their inner selves, at their professional identity, it might “strike at the root of our ineffectiveness and enable us to produce positive educational reform and improved teaching.” 3

Professional identity, sometimes termed occupational, work, vocational, or career identity, 5 has been described as “self-meaning connected with work,” 6 or the “conscious awareness of oneself as a worker.” 7 It is therefore analogous with the “sense of self” central to the concept of identity, although it can be considered to be more contextually specific. 7 The contextual nature is, to a large extent, a consequence of the communities within which one practices and the levels of one’s participation within these communities. As Wenger proposes, professional identity is often a “nexus of multi-membership” of several communities of practice. 8

Trede, Macklin, and Bridges suggest that feelings of “personal adequacy and satisfaction” in the workplace are related to professional identity and emerge as the “individual develops the values and behavior patterns consistent with society’s expectations of members of the profession.” 9 In addition they report that professional identity forms when a person cultivates the “attitudes, beliefs and standards which support the practitioner role” and couple it with “a clear understanding of the responsibilities” of being a professional. Furthermore, Oliver suggests that professional identity can also be viewed as agency, suggesting that it is the individual’s identity that will determine what they do and also how they do it. 10

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This agency notion of professional identity is expressed in the idea that professional or career success is associated with the positive construction of professional identity.\(^4\) This notion also underlies the sentiment expressed by Palmer when he suggested that good teaching emanated from the identity and integrity of the teacher.\(^3\)

Similar to other identities, academic identity is complex, multi-faceted, and influenced by many factors.\(^12,13\) In addition to being influenced by one’s context, academic identity is influenced by one’s beliefs and values, and in turn impacts on one’s sense of meaning and purpose, self-belief, enthusiasm, drive, dedication, and efficacy.\(^7\) The complex and multifaceted nature of academic identity is further compounded for academics teaching on professional or vocational programs, such as pharmacy. Holroyd argues that such academics often have a sense of confusion about the basis of their professional identity.\(^14\) Despite the notion that their identity should be founded on their “sense of unity with their peers in the academy,” they recognize that, in practice, it is located within the professions for which they are preparing their students. Furthermore, many of them may have begun their own studies with a perceived “calling” to a profession, and now find themselves in a university, where their primary activities are those of teaching and research. In general, they may have been successful in their careers as professionals, and it is because of their industrial or commercial experience and expertise that they may have been appointed to a teaching position.\(^15,16\) Although they have the relevant vocational qualifications, and may be acknowledged experts in particular disciplines, for the most part, their teaching skills have been acquired and developed experientially, and are not grounded in a solid scientific, research-led knowledge base, ie, they have learned how to teach while “on the job.”\(^17,18\) The unvoiced assumption is often made that since they have previously demonstrated proficiency in learning and in the skills necessary for their vocational roles, they will become effective teachers.\(^19,20\)

Teaching vocational programs also often requires that academic staff members participate at some level in at least 2 communities of practice – a vocational or occupational community and the academic community. Simultaneously, while negotiating membership in the academic community, vocational educators experience the responsibility and demand to sustain competence within their discipline, and a level of standing within their occupational communities of practice. Credibility and perceived success of vocational educators is also often bound to their vocational practice experience, and it is often within occupational communities that identity is not only gained and defined, but socially legitimated.\(^21\)

Viskovic and Robson advocated that it was difficult to establish or retain links with a vocational or professional group or community while becoming or being a member of another community, such as an academic community.\(^4\) They further suggested that it can create tension for both individuals and communities, because the occupational or vocational role is often given priority over the teaching role, by both the educators and the policymakers, with the result that teaching as an activity often becomes “devalued.” Consequently, many vocational educators do not become fully participating members of a wider teaching community, struggle to adopt an academic identity, and have a confused professional identity.

In the context of pharmacy education being a vocational program and many pharmacy educators being themselves pharmacists, many of them would have begun their own studies with a perceived “calling” to be pharmacists, and now find themselves in a university where their primary activities are those of teaching and research. Therefore, many pharmacy educators may have an ill-defined or confused sense of professional identity, which has the potential to impact on their effectiveness as teachers.\(^4\)

In the time that has lapsed since Smith’s editorial, there has been little in the pharmacy literature to suggest that pharmacy educators have responded to his challenge to look deeply at their inner selves and their effectiveness as teachers.\(^3\) In addition, there has been little or no published research to suggest that consideration has been given to furthering a collective understanding of the professional identity of pharmacy educators. To this end, the primary aim of this research study was to identify, describe, and analyze the self-perceived professional identities of pharmacy educators in South Africa. This study sought to answer the questions of how pharmacy educators perceive their professional identity and what key factors contribute to participants’ self-perception of their professional identity.

**METHODS**

The investigators used maximum variation, purposive sampling to select individuals to participate in the study. After obtaining permission from the universities, an individual at each of the 8 faculties and schools of pharmacy in South Africa was invited to participate. The participants were, as far as possible, diverse in age, gender, teaching experience, and representative of the various traditional disciplines within pharmacy. They also were all registered as pharmacists with the South African Pharmacy Council. The basic demographic details of each participant and a brief synopsis of their pharmacy-related work experience are summarized in Table 1. A unique identifier was assigned to each participant for the purposes of analysis.
Working within a constructivist-interpretative paradigm, 1 of the investigators conducted the interviews, each lasting an average of 90 minutes. The interviews were conducted in an environment chosen by the participant, and were digitally recorded. After an initial introductory phase, the interviewer invited the participant to tell his or her story in response to the question: “Tell me the story of your career thus far, from what first attracted you into pharmacy to where you find yourself now.” The narration phase was allowed to run uninterrupted and interviewer responses were kept to a minimum, with nonverbal signals of attentive listening provided when appropriate. This was followed where required by a questioning phase consistent with the classic narrative interview style described by Bauer, which involved clarifying various aspects of the participant’s story. The recordings of the interviews were transcribed, and individually analyzed by the researcher using the inductive, thematic analysis approach described by Braun and Clarke. Qualitative data analysis software (Atlas.ti, version 7.0.77, GmbH, Berlin) was used to manage the process of analysis. Because the aim of the study was to understand the individual perspectives of participants, each interview transcript was analyzed separately and an in-depth reconstruction and interpretation of each of the participants’ stories was developed. Thereafter, a synthesis of the interpretations based on a combined thematic analysis was conducted.

Table 1. Demographics of Participants in a Study of the Professional Identity of Pharmacy Educators in South Africa

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Gender</th>
<th>Age (Years)</th>
<th>Teaching Discipline</th>
<th>Pharmacy-Related Work Experience</th>
<th>Years in Academia</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Female</td>
<td>32</td>
<td>Pharmaceutics</td>
<td>1 year in public-sector pharmacy prior to academia. Locums regularly in community pharmacy.</td>
<td>8</td>
</tr>
<tr>
<td>2</td>
<td>Female</td>
<td>55+</td>
<td>Pharmacy practice</td>
<td>1 year in community pharmacy prior to academia.</td>
<td>30+</td>
</tr>
<tr>
<td>3</td>
<td>Female</td>
<td>29</td>
<td>Pharmaceutical chemistry</td>
<td>1 year in public-sector pharmacy prior to academia.</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>Male</td>
<td>45</td>
<td>Pharmacy practice</td>
<td>13 years in research and development in the pharmaceutical industry prior to academia. Locums regularly in community pharmacy.</td>
<td>7</td>
</tr>
<tr>
<td>5</td>
<td>Male</td>
<td>40+</td>
<td>Pharmacology</td>
<td>1 year in public-sector pharmacy, 4 years in community pharmacy and 2 years in the pharmaceutical industry prior to academia.</td>
<td>8</td>
</tr>
<tr>
<td>6</td>
<td>Male</td>
<td>50</td>
<td>Pharmacology</td>
<td>14 years’ experience in public sector, pharmaceutical research, and industry prior to academia. Locums occasionally in community pharmacy.</td>
<td>15</td>
</tr>
<tr>
<td>7</td>
<td>Female</td>
<td>58</td>
<td>Pharmacy practice</td>
<td>20 years in community pharmacy prior to academia. Locums regularly in community pharmacy.</td>
<td>16</td>
</tr>
<tr>
<td>8</td>
<td>Female</td>
<td>40</td>
<td>Generalist</td>
<td>Worked exclusively in academia.</td>
<td>13</td>
</tr>
</tbody>
</table>

Issues of trustworthiness and authenticity of the qualitative data were considered and addressed by having an independent reviewer analyze the data and by conducting member checking, which involved returning the interview transcript, the narrative reconstruction, and the interpretation thereof to each participant to check for accuracy and provide comments. Ethical approval for the study was obtained via the Faculty of Health Sciences’ Research, Technology and Innovations Committee from the Nelson Mandela Metropolitan University’s Research Ethics Committee (Human), prior to commencement of any data collection. Also, informed voluntary consent to participate and signed permission to record and use the interviews were obtained from participants.

Participants’ anonymity was maintained by using pseudonyms. Throughout the data collection, transcription, and analysis stages of the research, the need for participant confidentiality and anonymity had to be constantly balanced against the need for sufficient detail necessary to make meaningful interpretations. Given the relatively small number (approximately 85) of pharmacy educators in South Africa, many of whom are well known by their colleagues, certain demographic details, for example race, which may have made a significant contribution to the study findings, could not be included in order to protect the anonymity of the participants.

RESULTS

Self-Perceived Professional Identities of Participants

The participants included 5 female and 3 male pharmacy educators who varied in age from 29 to 58 years. All the major teaching disciplines in pharmacy were
represented, as were all the major racial groups in South Africa. The professional identities of the pharmacy educators can be considered to lie somewhere on a continuum between their identity as pharmacist (their vocational or practitioner identity) and their identity as an academician. This continuum is illustrated in Figure 1 where the practitioner (pharmacist) and academic identities are represented as 2 intersecting spheres and professional identity as a continuum through and beyond these spheres. To varying degrees, each of the 8 participants, held in balance the tension between their underpinning vocational or practitioner identities as pharmacists, and their academic identities as researchers, lecturers, teachers, or academic disciplinary experts. The extent to which they identified with, and held both or either of these facets in balance, largely determined their professional identity.

For several interviewees, their identification as a pharmacist was of primary importance to their professional identity. (Demographic information for each of the 8 participants is provided in Table 1.) Although they acknowledged that their identities embraced an academic component, it was secondary to their understanding of themselves as pharmacists. Within the academic domain, 2 of the participants tended to place more emphasis on their identities as lecturers or teachers, although their roles as researchers were also generally acknowledged. In contrast, another participant who viewed her role in academia as encompassing both teaching and research on a fairly equal basis, nevertheless preferred research.

While others such as participants 2 and 8, hesitated to identify themselves as either pharmacists or academics, their identification with the pharmacy profession nevertheless underpinned their academic professional personas. While participant 2’s professional identity was predominantly that of a teacher and mentor, she was “very passionate” about pharmacy and sharing that passion with students and nurturing their professional development was central to her role as a teacher. Another participant stated that “at core what I am, is a pharmacist” however, she ultimately saw herself as an educator within pharmacy.

Three of the other interviewees, participants 4, 6, and 3, were clear that their primary professional identity was academic in nature. Participant 4 viewed himself primarily as a lecturer, stating that he was there to teach, “it’s just that I’m teaching in pharmacy.” His identity as a lecturer or teacher was, however, strongly supported by his practitioner identity as a pharmacist, since he was of the belief that “pharmacy defines who I am.” Participant 6 identified himself with the specific academic discipline within which he practiced, labeling himself “a pharmacologist.” In addition, within the context of being a pharmacologist, he identified himself as being a researcher. Despite his strong identification with academia, participant 6 did not deny and was proud of his identity as a pharmacist; and added that he was specifically a pharmacologist. Still a relatively young academic, who could be considered to be in the apprenticeship phase of her academic career, participant 3 labeled herself a lecturer “because my paycheck says lecturer.” Her academic interest was primarily research and after completing her doctorate might eventually identify herself as researcher. She did recognize the value of being a pharmacist to her academic role.

**Nexus of Multi-Membership**

The professional identity of each of the 8 educators involved a level of participation in at least 2 broad communities of practice – the pharmacy community and the academic community. However, within each of these communities, multiple other communities of practice were represented. As Wenger suggests, communities of practice are primarily about learning, and participation in a community affords occasions for both personal and professional growth. For those interviewees, such as participants 4, 5, 6, and 7 who came to academia from well-established careers in other pharmacy domains, such as hospital pharmacy and industry, the manner in which their professional development and identity had been formed by their career trajectories was clearly evident.

A change in career, which necessitates a change in practice community, impacts on the knowledge and expertise, confidence, expectations, beliefs and motivations of professionals. This change is often accompanied by “transitional shock,” which impacts - to varying degrees - on professional identity. Although some of the 4 participants, who came to academia from well-established careers indicated that they had difficulties with some of the new responsibilities required of them, specifically teaching, a sense of “transitional shock” was not particularly evident in their stories.
Participants 4 and 7 in particular continued to sustain their pharmacist identity after their career moves by continuing to practice in contexts outside of the university environment. Participant 7 suggested that it enabled her to keep her teaching relevant and also helped bridge the gap for her students between academia and practice. Participant 4’s experience of balancing practice with teaching and research was one of mutual benefit, where all dimensions of his professional role were strengthened and consequently his professional identity and his strong identification with the concept of professionalism, was reinforced and sustained.

Some of the interviewees, such as participants 2, 4, 6, and 7, participated in several other professional and regulatory pharmacy communities. This participation was, however, clearly in their capacity as academics, and could be viewed as fulfilling the community engagement aspect of their academic role. In all instances, professional involvement was encouraged by the respective universities, although the participants did suggest that university support never extended to funding of their involvement. In South Africa, universities are increasingly responding to the societal challenge to increase their civic engagement and this was evident in each of the stories. Furthermore, in order to support and encourage community service, many universities now include community engagement as one of their academic staff promotion criteria.

The reasons suggested by the participants for their participation in pharmacy communities of practice beyond the university were various. For some it provided a means of enriching and keeping teaching relevant. For others, such as participant 6, it was a way of informing and keeping research relevant. Involvement beyond the university environment was also seen as providing a positive role model for students. Because of her concern about the incongruities she perceived between what was practiced and what she was teaching her students, participant 7 viewed her own practice as a means to bridge the gap between pharmacy practice and academia: “And that's why I can always say to them, I don’t sit in an ivory tower and tell you what to do, I get my hands dirty, so I can tell them this is how it's done.” On a more personal level, some of the participants felt that their membership in other communities of practice contributed to their personal growth as professionals.

Although participants were active in a variety of pharmacy-related communities of practice, outside of their department or college or school, their participation in the wider academic communities of practice within their universities was fairly limited. However, participant 5, who was probably the most active of the participants within the broader university community, stated that his primary focus in this activity was “raising pharmacy’s voice, from a professional point of view.” Notably, although some such as participants 1, 6, and 7 expressed early difficulties with teaching, none of them had any formal qualification in education. Furthermore, although some, like participants 1 and 4, had attended university courses on teaching and learning issues, none of the participants appeared to be active members of any education-centered communities of practice beyond those in which they actually worked and taught.

**Key Determinants of Professional Identity**

Emerging from the analysis of the narratives, 6 key determinants were recognized as underpinning the participants’ self-perception of their identity. Furthermore, each of these 6 key determinants can be characterized by a question (Table 2). The emphasis the participants placed on 1 or more of these 6 determinants appeared to suggest how they identified themselves professionally. For example, if a participant placed high value on the expected role determinant (what their job description suggests is required of them) then their answer to the question “What am I paid to do?” would be integral to their professional identity. The first 3 determinants, expected role, knowledge base, and practice, are more structural in nature, whereas the latter 3 determinants, professional status, passions, and satisfiers, relate more to the emotional dimensions of professional identity.

The expected role can be described in terms of a job title, such as lecturer or senior lecturer, or by a more detailed job description, but essentially it is the role for which an individual believes they are paid and subsequently what is expected of them. Participant 3 is an example of someone who based her professional identity on what she was paid to do, ie, lecturer, “because my paycheck says lecturer.”

The expected role is also consistent with the institutional identity described by Gee, where identity is a position...
that is endorsed by authorities within an institution. The importance that individuals place on their endorsed identity can therefore determine how they themselves perceive their identity.

One of the recognized distinguishing features of a profession is an underlying distinctive knowledge base. Consequently, the process of becoming a professional usually commences with studies toward a formal qualification, which is a necessary criterion for entry into the profession. As evident in some of the narratives, this knowledge base can form the basis for professional identity. For example, although participant 8 did not see herself as a pharmacist, she stated “at core what I am is a pharmacist. I got a degree although participant 8 did not see herself as a pharmacist, she stated “at core what I am is a pharmacist. I got a degree as a pharmacist, not a degree as a senior lecturer.”

The importance an individual places on the nature of their work or practice can be a further key determinant underlying their identity. The notion that who we are is constructed out of what we do, ie, practice, is the basis for the structural approach to understanding professional identity. Participant 2, for example, perceived herself primarily as a teacher. However, she never specifically called herself a teacher, but when asked her occupation, she chose to reply “I teach.”

Professional status was recognized as a further key determinant of professional identity. The value that some participants placed on this factor was particularly evident in the stories of participants 4 and 5. For participant 4, being a professional “is a way of life, it’s a way of thinking, it’s a way of being” and was fundamental and definitive to his professional identity. Participant 2, for example, perceived herself primarily as a teacher. However, she never specifically called herself a teacher, but when asked her occupation, she chose to reply “I teach.”

The extent to which passion is a determining factor in professional identity was apparent in participant 6’s story. His passions were pharmacology and research and he had no hesitations in identifying himself decisively as both a pharmacologist and a researcher. Fulfilling one’s occupation-related passions can bring deep satisfaction, which can serve to positively reinforce one’s sense of self, relative to one’s work. Consequently, satisfiers can also be considered to be a key determinant underpinning professional identity. For example, it was the satisfaction that participant 2 experienced from teaching that appeared to provide the basis for her professional identity.

DISCUSSION

In her Conceptual Framework for Academic Job Satisfaction, Hagerdorn argues that job satisfaction in academia can be considered to be an outcome of 2 interrelating constructs, namely: mediators and triggers. Mediators refer to the contextual factors through which job satisfaction can be understood and includes the rewards associated with work, demographics, and environmental conditions. Triggers are important work or non-work events that influence one’s point of reference, for example being promoted, changing jobs, or starting a family. Within this framework, the satisfaction or sense of fulfillment that participant 2 experienced from her teaching, would have been considered a positive motivator, and could be seen as having contributed positively to her identity as a teacher.

Motivators or rewards can be either intrinsic or extrinsic in nature and associated with recognition of work or achievement by a source other than oneself. Intrinsic rewards represent the “personal face” of academic work, while extrinsic rewards are associated with the “public face.” Further examples of intrinsic rewards from participants’ stories include: the personal satisfaction derived from contributing to and witnessing the professional development of students; the joy and fulfillment experienced in mentoring younger academics; and the satisfaction experienced from hearing positive stories of the success of graduates.

The importance of the environmental aspects of Hagerdorn’s framework in the context of job satisfaction and the development of professional identity should not be overlooked. What was particularly noteworthy in several of the narratives was the role that mentoring had played in contributing to participants’ sense of satisfaction and development of professional identity. The importance of positive role models was highlighted in participant 3’s story. Although she could still be classified as an “apprentice,” her apparent clarity of professional identity and her relatively smooth integration into all aspects of academic life were enabled through careful and close mentoring by her doctoral supervisor. By contrast, she voiced lack of mentoring and support in her integration into and sense of belonging within academic communities of practice and this appeared to be at the root of her hesitancy to adopt an academic identity.

The greater the emphasis an individual places on 1 or more key determinants, the greater the emotional and material investment they are likely to be willing to make, to nurture that aspect of their identity. For example, if 1’s emphasis is on knowledge base as a key determinant of professional identity, one would be more willing to make the investment or sacrifices involved in acquiring a doctorate than someone whose emphasis is on their practice. A person with an emphasis on practice is likely to find the pressure in higher education to acquire a doctorate at variance with their sense of self and their professional identity.
The extent to which all the key determinants are aligned with and in support of aspects of professional identity on which an individual places the definitive emphasis, may determine the extent to which the individual has an integrated sense of self as a professional and an accompanying sense of agency as a consequence of their professional identity. This was particularly evident in participant 6’s narrative, where driven by his “passion” for pharmacology, he had reached a point at which his expected role, knowledge base, and practice were all aligned with his passion, and he was doing work that was both deeply satisfying and served to support his sense of self as a professional and his clear understanding of himself as a pharmacologist.

Reybold suggests that, in general, identity is a “delicate balance” between separation and connection, which is always in tension. For professional practitioners who have become academics, this particularly involves an ongoing process of “separating from practice in one manner to connect to it in another,” in what Reybold has termed “a balancing act.” This was true for the 8 pharmacy educators in this study for whom a multiplicity of self-perceived professional identities were described. However, all of these were multi-faceted and involved holding in balance components of both a pharmacist identity and an academic identity. The extent to which they emphasized either of these components determined where on the professional identity continuum between pharmacist identity and academic identity their identity lay.

The professional identities of the participants had been formed through membership of multiple communities of practice and continued to be sustained through a “nexus of multi-membership.” As a consequence of this and the manner in which practice experience informs their teaching and research, pharmacy educators should be encouraged to seek out opportunities for participation in both pharmacy and education related communities of practice.

Briggs proposed that issues of professional identity lie at the juncture between structure and agency and that an individual’s professional identity is determined by his/her personal perceptions of self-image and self-efficacy in relation to his/her working context. In this study, 6 key determinants were identified as underpinning the participants’ self-perception of their professional identity. These included 3 structural determinants: expected role, knowledge base, and practice; and 3 determinants relating to the emotional dimensions of professional identity: professional status, passion, and satisfiers. Furthermore, the structural key determinants identified (expected role, knowledge base, and practice), to a large extent describe the manner in which professional identity can be considered a product of work context, while the latter 3 (professionalism, passions, and satisfiers) are perhaps more related to the agency aspect of identity. This supports the notion proposed by Briggs that professional identity is both a “product and an agent of the systems and structures within which the individual’s working life is located.”

In the light of these key determinants of professional identity, colleges and schools of pharmacy should be encouraged to address clarity of career path development and mentoring of new and emerging academic pharmacists. More specifically, pharmacy educators, who have effectively reconciled the various aspects of their professional identity and successfully negotiated an academic identity, should be encouraged to take an active role in mentoring newer academics in the process. Furthermore the mentoring of new academics should not only focus on the public aspects of academic practice, such as structures, expectations, and requirements, but these should be balanced with a focus on the personal aspects including emotions, experiences, and issues of identity, value, and purpose. Because identities are constructed through narrative, the simple act of assisting others to think and talk about who they are as educators and explore issues of professional identity has the potential to facilitate the process of identity negotiation.

CONCLUSION

This study aimed at describing and analyzing the professional identity of pharmacy educators in South Africa. It provided an opportunity for 8 participants to reflect and explore issues around their own professional identity and their purpose and effectiveness as educators of future pharmacists. Furthermore, it contributed to a collective understanding of who it is that teaches pharmacy and the professional identity of pharmacy educators not only in South Africa but elsewhere, especially those settings in which similar contextual factors impinge on pharmacy educators. This study responds to a challenge issued over a decade ago for pharmacy educators to do the “heavy mental work” of exploring who it is that teaches in the hope that it might “strike at the root of our ineffectiveness and enable us to produce positive educational reform and improved teaching.”

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