

*Conceptualising radiography knowledge
and the role of radiography educators : Perspectives and experiences of a
radiography education community*

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Abstract

The diagnostic radiography curriculum and the process of its enactment are under researched in the United Kingdom. To date, there have been no published studies which have investigated the curriculum and the role of radiography educators from the multiple perspectives of radiography students, university radiography educators and clinical radiography educators, that is, *a radiography education community*.

Accordingly, this study describes the perceptions and experiences of a radiography education community in relation to three research questions:

1. How does a radiography education community conceptualise the radiography knowledge and skills required of a diagnostic radiographer ?
2. How does a radiography education community conceptualise the role played by university based and clinically based radiography educators in helping the radiography student acquire radiography knowledge and skills ?
3. How does the community in this study compare with Lave and Wenger's theoretical constructs of a situated learning, legitimate peripheral participation and Communities of Practice (CoP)?

The epistemological foundation of the study is constructivism and the overarching methodology is a case study conducted within a single higher education institution and three of its associated clinical practice partner settings. The primary data collecting method comprised semi-structured interviews, supplemented by a critical review of germane literatures, government policy and the curriculum guidance provided by the relevant professional and statutory bodies. The theoretical framework in which the study is situated is based upon Lave and Wenger's theories of situated learning, legitimate peripheral participation and communities of practice.

The findings of the study reveal a radiography education community which is lacking any unifying pedagogic discourse. In particular, there is an absence of opportunities for cross-community working, especially in collaborative

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curriculum development and the process of its enactment. This is further compounded by the community's narrow interpretation of what a curriculum should comprise. Currently there is a clear focus on knowledge content and curriculum as a product which fails to take into account praxis and the social context in which learning takes place. These findings have been summarised by a representation of the enacted curriculum as compared with the 'ideological' function of a radiography curriculum. Specific developments required of the curriculum include: (i) placing a greater emphasise on the vocational relevance of radiography knowledge; (ii) gaining a better understanding of tacit radiography knowledge; (iii) ensuring greater familiarity with the curriculum and (iv) enhancing the standard of clinical supervision.

The radiography education community in this study evidences both convergence and divergence with Lave and Wenger's theoretical constructs of situated learning, legitimate peripheral participation and community of practice. Within the context of radiography education the study also highlights the consequence of power relationships, the complexity of learning in and across multiple communities of practice and the importance of individual learner biographies, all of which are underdeveloped in Lave and Wenger's theoretical discourse. These findings have been summarised in a proposed theoretical model for a radiography education community of practice.

Three specific pedagogic and managerial inferences may be drawn from this study which will require staff development and consideration of how the diagnostic radiography programme is managed across the community. Firstly, context, process and praxis need to be carefully considered in the collaborative development, design and implementation of the curriculum. Secondly, the university and clinical educators need to reflect on their own learning and teaching skills by engaging more fully with pedagogy. Thirdly, communication across the radiography education community of practice must be improved.