



## LJMU Research Online

**Morrell-Scott, NE**

**The perceptions of acceptance by new academics to a Higher Education Institution**

<http://researchonline.ljmu.ac.uk/id/eprint/7370/>

### Article

**Citation** (please note it is advisable to refer to the publisher's version if you intend to cite from this work)

**Morrell-Scott, NE (2017) The perceptions of acceptance by new academics to a Higher Education Institution. Journal of Further and Higher Education. ISSN 0309-877X**

LJMU has developed **LJMU Research Online** for users to access the research output of the University more effectively. Copyright © and Moral Rights for the papers on this site are retained by the individual authors and/or other copyright owners. Users may download and/or print one copy of any article(s) in LJMU Research Online to facilitate their private study or for non-commercial research. You may not engage in further distribution of the material or use it for any profit-making activities or any commercial gain.

The version presented here may differ from the published version or from the version of the record. Please see the repository URL above for details on accessing the published version and note that access may require a subscription.

For more information please contact [researchonline@ljmu.ac.uk](mailto:researchonline@ljmu.ac.uk)

<http://researchonline.ljmu.ac.uk/>

Author details: N Morrell-Scott  
Senior Lecturer Nursing  
Liverpool John Moores University  
n.e.morrell@ljmu.ac.uk

## **The perceptions of acceptance by new academics to a Higher Education Institution**

### **Abstract**

The aim of this study was to gain a perspective of new members of staff who attempt to gain entry into an existing Community of Practice, to ascertain how this process occurs, and to explore new ways of inducting teams into established Communities of Practice. This research is situated, whilst demonstrating uniqueness, against a critique of Lave and Wenger's (1991) Community of Practice theory, to analyse its applicability to the current Higher Education world.

A qualitative, phenomenological study was conducted in a United Kingdom Higher Education Institution Faculty. Semi-structured interviews with 8 members of academic staff, consisting of nursing and non-nursing lecturers who were all within two years of joining the institution, provided the data for this research. Data was examined using Miles and Huberman's (1994) qualitative data analysis model.

This research argues that the community of practice notion does not fully correlate in this context with participant experiences. Results demonstrated that participants were exposed to varying levels of incivility, with differing levels of acceptance to the Community of Practice. There was a dissonance between participants attempting to enter the nursing and non-nursing Community of Practice. Conclusions made demonstrate how gaining entry to the nursing Community of Practice, posed hostility compared to the non-nursing Community of Practice. The difficulties may have implications

for all levels of the academic institution, although this would need to be tested against a larger sample for general applicability.

**Key words:** Community of practice, nursing, incivility, resilience, induction, identity

### **Introduction & Context**

This paper will illuminate practices within Higher Education (HE) in the United Kingdom (UK) of new academics entering a pre-formed Community of Practice (CoP) from a practice background. This insider research is problematized through examination of the experiences of 8 new lecturers, within a faculty of a medium sized UK Higher Education Institution (HEI); in the south of England whilst uniquely critiquing the notion of a CoP by Lave and Wenger (1991) as an analogy. This account may support Lave and Wengers' (1991) theoretical model of a CoP, or may dispel this notion of attempting to enter a CoP as that of a difficult process. The research was conducted within one faculty, which predominantly provides undergraduate courses in health related disciplines, such as Nursing (pre-registration and post registration) and allied health courses, such as Social Work, Health and Social Care, and Midwifery. Through the use of semi structured interviews, the perspectives, experiences, emotions and feelings of new staff that have moved into the HEI within the past two years are explored. Participants had no former employment as a lecturer at any other institution, hence the participants may have had teaching experience in practice, but were purely practitioners in their previous roles. The data analysis method used was the 4 stage approach of Miles and Huberman's (1994) model of qualitative data analysis.

The piece of small scale research was conducted within one university faculty. The purpose of this research is to fully understand if Lave and Wenger's (1991) theoretical model has pertinence if we were to apply this to the aspect of legitimate peripheral participation (LPP). Research aims and questions were therefore formulated with this in mind.

## **Research Aims**

The aims of the research are to; gain a perspective of new members of staff entering an existing community of practice, to ascertain new staffs perceptions of integration to an existing community of practice, and to find ways of integrating a new team into a community of practice

## **Research questions:**

- What are the attitudes, emotions, challenges and assumptions of the members of the new team?
- How far does the experience of the team accord with Lave and Wenger's (1991) notion of integration in to a new team?
- What are the implications of this study for the robustness of the Lave and Wenger (1991) account?

## **Background**

Over 20 years ago Lave and Wenger developed the concept of CoP in their 1991 book, *Situated Learning: Legitimate Peripheral Participation*, as a notion of how learning occurs through their situated learning theory. Whilst defining CoP as "a set of relations among persons, activity and world, over time and in relation with other tangential and overlapping communities of practice. A CoP is an intrinsic condition for the existence of knowledge" (p98, 1991). The CoP model demonstrates how learning occurs in practice, through collaboration between peers, with individuals working to a common purpose, which is defined by, knowledge not task (Wenger, 1998). The Lave and Wenger (1991) theory focussed on the learning of "newcomer's" moving into a CoP and "old-timers", in order for them to become "full participants" through LPP. LPP was defined as "a way to speak about the relations between "newcomers" and "old-timers", and about activities, identities, artefacts, and communities of knowledge and practice" (p29, 1991).

CoP as a theory has been extended to other areas such as organisations. Never ways of adapting and understanding CoP has also been around the use of the internet as a tool for social learning. Vescio, Ross and Adams (2008) assert the importance of CoP in teaching practice and student learning.

Fontaine and Millen (2004) and Millen et al (2002) highlight how CoP has been applied to the field of management. CoP has also been applied to urban planning (Soekijad et al, 2004) and education (Butler et al, 2004), and has recently been applied to the healthcare sector (Li et al, 2009; Bentley et al, 2010). CoP's are different from other organisational areas such as working groups, project teams and informal networks as they focus on the acquisition of knowledge and co-development of skills and how knowledge is exchanged (Richard et al, 2014).

The importance of CoP as a theory to encourage collaborative learning and develop practice, through the attainment of new knowledge has been acknowledged many times within the literature (Andrew, Tolson and Ferguson, 2008; Billett, 2004; Evans Hodkinson and Ferguson, 2002; Hutchins, 1999; Boud and Garrick, 1999; Guile and Young, 1999; Engestrom, 1993). Bond and Patterson (2005) noted the issue of learning through community engagement has been particularly taken on board by academics who realise its importance in the HE world. However, as a notion CoP has been criticised by Fuller et al (2005) due to, in their opinion, great generalisations within the theory.

There has been minimal academic debate as to whether entry to an existing community is an easy process, especially the idea of existing communities denying "newcomers" entry, highlighting the need for this research. Lave and Wenger (1991) do discuss how access can be manipulated, which, dependent upon the organisation of the access can either encourage or preclude LPP. Fuller et al (2005) notes how Lave and Wenger (1991) do not discuss in any great detail the conflict and power relations that can be present for "newcomers" attempting the CoP in order to learn. Therefore, raising questions around whether it may be that there is a gap in the research or that simply all communities allow for "newcomers" to enter without resistance. Hodkinson and Hodkinson (2004) note how, although they did not explore in any depth, Lave and Wenger (1991) discuss CoP from an individualistic perspective, whilst appropriate; this piece of research will consider the group perspective. Literature in relation to the Lave and Wenger (1991) theory and new academics was explored through a literature review.

## **Search Methods**

A computerised search using a variety of academic databases was undertaken and relevant papers published from 2005 to 2013 were identified. Key words used included community of practice OR legitimate peripheral participation, AND new OR academic AND higher education, this formed the basis of the literature review.

## **Literature Review**

There is limited literature regarding new lecturers' acceptance into a CoP, and this research attempts to plug some of these gaps. Gourlay (2011) discussed with detail the challenges that are faced by new lecturers, who could be seen as the "newcomer" if we were to apply the Lave and Wenger (1991) notion. Several research studies have examined the processes undergone of new lecturers entering academia (Gourlay, 2011), focusing specifically upon the "newcomer" being socialised and learning the role (Trowler and Knight, 1999; Barkhuizen, 2002; Knight, Tait and Yorke, 2006).

Gourlay (2011) hypothesises through her research that CoP may not fully exist within academia, and alludes that participants of her study may have felt the transition from practitioner to lecturer difficult one, even explaining that her participants may have experienced feelings of loneliness, although this is not expanded upon. Andrews et al (2008) suggests that CoP has never existed within nursing for many reasons, however they realise that it would be beneficial if CoP did work. Gourlay (2011) also suggests that the interaction between "newcomer" and "old-timer" does sometimes fail. These experiences and feelings should be explored, providing further rationale for this study. Previous literature has not been so explicit as to suggest that people would ever be denied entry to a CoP, however, some have acknowledged the difficulties, which is where this study has uniqueness as it aims to examine this point.

Gourlay (2011) discussed the challenges faced by new lecturers who would be the "newcomer" in Lave and Wenger's (1991) situated learning theory. Lave and Wenger (1991) and then Wenger (1998)

explored learning through becoming a member of the community, but failed to describe if the “newcomer” would face resistance by existing members of the community to enter. Lave and Wenger (1991) never discussed in great detail challenges faced by the “newcomer”. Trowler and Bamber (2005) acknowledge that new lecturers are often forced to conform, into a culture with their new colleagues within pre-existing communities. Beecher and Trowler (2001) examined insightfully academic cultures and academic disciplines. Warhurst (2006) describes how tightly coupled CoP’s are likely to be characterised by strongly distinctive cultural practices amongst “newcomers”. Hodkinson and Hodkinson (2004, p29) discuss that “newcomers” to such a community are likely to experience an “additional dimension to their learning”; although this was never elaborated upon as such.

Lave and Wenger (1991) focus their situated learning theory upon the premise that when “newcomers” engage in a new community they will increase their learning of how the community works by the process of LPP, through this process the “newcomer” will experience a progressive trajectory of participation from the periphery of practice into full engagement, this could be characterised as an induction process into a new area. Andrews et al (2008) like Fuller et al (2005) believes that Lave and Wenger’s (1991) CoP as a theory is over simplified. Gheradi, Nicolini and Odella (1998) found that pedagogic pathways have eased the process of organising “newcomers” tasks which allow entry to the community. Hodkinson (2005) identified that access to this level of participation may be limited due to workplace power structures. Fontaine and Millen (2004) examined the effects of CoP’s in different organisations and found benefits in terms of; the organisation, from business opportunities and innovation; the group’s mutual appreciation and understanding, and; the professionals’ abilities and trust in the organisation. Bentley et al (2010) discussed the health sector and found positive effects on factors such as; adherence to clinical guidelines, job satisfaction, exchange of knowledge and interpersonal communication, and the professionals sense of belonging. Hurst, (2010); Lambardo, (2006); Smith and Boyd, (2012) all reinforced that moving from a role in practice into that of a lecturer in HE is difficult. Much of the research in this area has been quantitative

and conducted using questionnaires (Warhurst, 2008). However, for uniqueness and to gain a deeper insight in this area this study used qualitative interviews, the research methodology adopted for this research will now be discussed.

### **Methodology**

The theoretical perspective used was an interpretivist approach, this was appropriate as interpretivism explores “culturally derived and historically situated interpretations of the social life and world” (Crotty, 1998, p67). The research was phenomenological; phenomenologists suggest that to understand social reality we have to understand people’s experiences of that social reality (Gray, 2010). Phenomenology is used to discover and develop understanding of experiences as perceived by those living the experience (Rebar et al, 2011). Phenomenological data has benefits as it produces rich research through examining people’s experiences or perspectives in their natural settings. Phenomenologists have noted how phenomenological data can be difficult to replicate on large scales (Polit and Beck, 2010; Gray, 2010). Nevertheless, for the future large study semi-structured interviews will be used as a component based upon the findings of this study.

The research was qualitative; Maxwell (1998) and Corbetta (2003) advocated the use of a qualitative approach through all phases of research design. Both researchers were qualitative researchers and after considering the use of quantitative methods believed the depth of responses would be generated through the use of qualitative research. Quantitative data is hard, objective and standardised, but qualitative data is soft, rich and deep (Corbetta, 2003), providing further rationale for why a qualitative approach was used. Pope and Mays (2006) discuss how qualitative methods, which include observation or narrative data as opposed to numerical data, are increasingly being used to reach the parts that other methods cannot reach. An advantage of using qualitative research is that it focuses on subjective information and does not attempt to predict or control the phenomenon of interest (Rebar et al, 2011) and this also links to the phenomenological approach utilised; within



the context of this research the aim was to collect “real” data, further strengthening why semi structured interviews were used in this research.

**Data collection**

Semi-structured interviews were used to guide participants to consider the opinions and experiences of new lecturers, whilst allowing them freedom to express these in a way they felt appropriate. Use of this method minimised potential researcher bias, where participants’ views may be influenced or diluted by the researcher’s own. The sample were asked questions which guided the interview, and could gain rich responses. The semi structured interview questions allowed participants to discuss their experience from the time they began working within the faculty.

**Sample**

There was a potential of 11 members of staff within the eligible population, however in total the sample was 8. Table 1. Demonstrates participant demographics. The 8 participants in the sample were lecturing staff who had formerly worked in clinical practice either as either nurses or as practitioners within health related disciplines, ranging from clinical psychologists to social workers. Sample size was dictated by the staff that met the inclusion and exclusion criteria, and were willing to participate.

	21-30 years	31-40 years	41-50 years	51-60 years
Male- Nursing		Participant B Participant G	Participant H	
Female- Nursing	Participant C	Participant A		Participant E
Male-non-Nursing			Participant D	

Female-non- Nursing		Participant F		
------------------------	--	---------------	--	--

Table 1. Demonstrates participant demographics.

**Inclusion criteria –**

Any staff in role of lecturer or senior lecturer

Any academic staff that have joined the institution within the past 24 months

Any academic staff that have joined from a practice setting to the HEI

The rationale for the inclusion criteria was to gain front line experiences that had been within the institution for a length of time to provide answers from their experiences, 2 years was deemed long enough to have settled in but still feel new.

**Exclusion criteria-**

Any staff employed as an academic manager

The study considered only frontline lecturers to gain their perceptions and experiences; therefore no heads of department or senior managers were interviewed.

**Data analysis-**

The method of data analysis employed was Miles and Huberman's (1994) model of qualitative data analysis. This incorporated the following four stages:

1. Data reduction- condensing data to make it more manageable and relevant to the study.
2. Data display- arranging the data in a table to make it more reader friendly, and allow for coherent analysis.
3. Conclusion drawing- examining the data to make conclusions, and assessing what the implications are for the research questions.

4. Verification- to ensure accuracy of transcription member checking will take place at the beginning of the analysis to ensure accuracy. The process of member checking allowed each participant verifying the accuracy of their data. Peer checking then took place by a fellow academic not related to the subject group to ensure themes drawn were accurate and ensure researcher bias is minimised. Ethical issues will now be discussed.

### **Ethics**

Full institutional ethical approval was granted, Informed consent was obtained from all research participants. Participants were made aware that they had the right to withdraw at any time. The necessary arrangements were made to comply with the UK Data Protection Act (1998) with regard to computer storage and confidentiality. Participants were anonymised and referred to as ‘Participant A’, ‘Participant B’ and so on throughout the results.

### **Results**

Result themes have been tabulated for clarity and will be further explored with the use of participant insights, Table 2. displays the tabulated research themes.

Theme identified	Participant definition
Entry	Participants felt they were either allowed entry or refused
Incivility	Participant’s had either experienced incivility or witnessed it occurring to others
Participant identity	Participants reported professional identity was questioned either by themselves or by members of the CoP, leading to an identity crisis

Learning	Participants described how their learning took place
Emotions	Participants all described varied emotions
Resilience	Participants discussed their methods of resilience

Table 2. Tabulated research themes.

### **Entry**

All participants have explained how at first when attempting to enter the CoP they received positive experiences from their senior peers. However, what was apparent was that this did only last for a period of up to, at the longest point, 2 months and then varying degrees of hostility ensued to all participants. This was experienced predominantly by the group who were in the nursing discipline, although the non-nursing participants observed this occurrence to others.

However, 3 in 8 participants explained their experience was positive and they were welcomed, Participant D "I was welcomed wholeheartedly but looking back I don't know if that was because of what I was bringing with me and the fact that they were very conscious of that". Participant G felt welcomed by initially being met at reception.

Participant C demonstrated this "At first it was great as I mostly spent time with my boss and senior colleagues seemed to be ok really, ...I did feel that it was "too good to be true" which it was. My boss often said "it may be nice here but it's not perfect" which made me think something must be wrong."

Participant H described feeling people only wanted to know what he could teach to lighten their workload, he went on to describe how he felt he was not allowed to gain entry to the CoP.

Some participants described that following this time frame it became clear that they were not welcome within the CoP. Several participants suggested they were not accepted into the CoP. Participant A suggested she now felt accepted because she was leaving. On describing her time within the faculty and her awareness of no entry to the CoP, Participant C described “they don’t like change, that is obvious to any new staff, to the senior managers though they act as though they’re really up for change and then when it comes to it they try to sabotage it as much as they can...”

Participant D described how he believed there was a lack of integration into the larger CoP “I feel that there are little pockets of teams spread across who don’t cross over, I can feel like an outsider as I’m not a nurse”.

Participant F felt that she was welcomed within the non-nursing CoP, as they “were diverse”; however for the nursing CoP she felt that there were challenges associated to being accepted and allowed entry. Participant F said that within her CoP her colleagues were “nice”, and that “it was an easy process to move from practice”, although “the minority instances stick with you”, demonstrating how incivility has been felt.

### **Incivility**

The theme of incivility was particularly apparent early on within the interviews, with all participants experiencing this to some degree. Some participants experienced very hostile behaviours from the “old-timers”; the “newcomers” have suggested why they believe this occurred, although many attributed this to the unwillingness of the existing CoP to engage.

Participant H believed he experienced significant incivility and witnessed this towards others too. Participant D noted he experienced “old timers” from asking him “what’s the point in doing your courses if you don’t come out with a professional qualification” subsequently he has felt the need to justify his courses to them. Participant E expressed she did not experience direct incivility but has

experienced “things happening to others which has left me feeling uncomfortable...I have had people giving me wrong guidance on purpose which has made me look bad”.

Participant E also stated “the way others have been treated is uncomfortable, had I have been in a senior position I would have challenged it, although had I have been in that position it probably wouldn’t have happened in front of me”.

Participant F felt that her age was a factor, and that sometimes comments could have been perceived as discriminatory, however she stated they were not from her team and acknowledged they were from the nursing CoP. “Ooh you’re very young to be doing this... I got the feeling that they felt I had just studied and hadn’t worked in practice which wasn’t the case”. Participant F questioned if this was her own over analysis of the situation or whether it was accurate, she did suggest she found these comments hard to forget.

Participant F felt that “old timers” only wanted to find out what she could teach for them, when she told them her background and they realised that she could not teach on their modules she quickly felt ignored. This is a common theme of the emotions between all participants, “nobody asked my experience, I felt I was there to plug gaps” Participant B.

Participant G “A colleague asked me why I had written senior lecturer on my email, I replied because that’s what it says on my contract therefore I don’t really understand why they asked me that but there have been some undertones towards me of negativity.”

Participant’s identity appears to be a theme which was also questioned.

### **Participant identity**

Participants discussed questioning their own identity several times during the interviews, with comments such as “Some of the senior members of the faculty I did feel that I had to prove myself to. Because I don’t think they recognised my experience and exposure, and I did, I had never met them before I did I felt I had to prove myself, especially in certain classes and in certain subjects” Participant

A. Participant B also mirrored this “I felt undermined and at times incapable of doing my job, I felt quite suppressed at times. I questioned my own identity. My colleagues appear to have lost their identity.”

Although many participants have questioned their own professional identity, they have also questioned the identity that their peers have placed upon them, Participant B recalled vividly a conversation that took place when a senior member of the team advised them not to do more than what they believed they should be doing “she advised me that I had to be careful about what I was doing... I asked what they meant by that and was there a problem...she said well it confuses things”.

Participant G felt a great difference between practice and academia, felt it hard to move into this area and felt his identity questioned, especially when being questioned about why he was on a certain pay grade. I had a massive identity crisis as I thought I wasn’t good enough to be here, he says he still works in practise to prevent this crisis of identity. Participant E said she found it a challenge moving into academic life from the practice setting. Participant H also described how he struggled at times with not feeling like and academic, this was accompanied by his not learning.

### **Learning**

Participant responses suggest they had not learned about their job role from their colleagues, but have through their experiences, learned about themselves. Participant B stated he had changed as a person and this was due to his own personal learning whilst in the institution as opposed to any learning about the role itself “I’ve become less tolerant now, I will speak up for myself more and I’m less inclined to give people the benefit of the doubt now too.”

Participant H felt he had to learn in his own way as some colleagues would not share information with him for him to learn his role. Participant C “they wouldn’t help me or my team members which put great stress on us, we only wanted to learn the ropes from experienced people, but they wouldn’t let us.” Participant E felt differently, as she had “learned lots about a variety of different things, including

my clinical practice and academia". Participant F shared this view, "you only know what you don't know when you need to know it, but then I ask my senior colleagues or look it up and then find out"; she found learning easy in the main. This participant feels from an emotional point of view that she has moved forward and is confident.

### **Emotions**

There has been evidence of varying degrees of emotions from the participants interviewed; some have expressed sadness towards their lack of acceptance into the COP whilst others have expressed anger and frustration towards the situation and their colleagues Participant C clearly demonstrated her feelings at not being accepted "I've had a wide variety of emotions, ranging from anger at how lazy, stupid and wrong things were, to getting a real buzz from teaching all day. I can honestly say if I were to teach every day I would be fine its working with the wider faculty is where the problems start. At times I have hated every minute."

Participant F described how he has experienced a myriad of emotions from anger to sadness and frustration during his time, although he said that he had positive experiences. Positive experiences have also been shared by others, Participant F describes her main emotions are "feeling proud to get to be in this role".

"I was isolated, as I was working in a whole new arena with all new people as all I was getting was negative vibes, I felt isolated and anxious, I felt what had I done? I was seen as an expert in practice and came into a role where I wasn't respected and seen as a nobody." Participant B. Participant E has demonstrated resilience "Some people have irritated me in their behaviour towards others".

### **Resilience**

Some participants explained how they have changed their own behaviours which could be a demonstration of resilience. Participant B lacked confidence in his senior colleagues ability and stated that he usually "...I would go to managers if I needed advice rather than the senior lecturers, often



nobody could make a decision so I'd have to go to a manager anyway, so in the end I would just go to them." Participant D believes that he has changed as a person, and has demonstrated resilience, "I'm a bit more confident in my job, I care less about what other people think, as long as the important people around me and I think I'm doing my job I don't really care about the others".

"I feel more resilient, I have become less tolerant, if people work in such a way that is wrong then normally I would be tolerant now I would challenge them. I am now less liable now to give them the benefit of doubt" Participant B. Participant F states "after a while within the faculty you begin to be more vocal to these people". Participant H describes how he is "playing the game, to get out of this place what I can and then leave", and that he has now become resilient discussing how he would not now help some colleagues who had let him down in the past.

### **Limitations**

A limitation of this study may be that participants may not feel able to provide an accurate account of their experience, particularly if they are new members of the faculty.

### **Discussion**

Participants recognised the faculty as a CoP and were generally negative in their description of their attempts at entry to the CoP. As the method of data collection were semi structured interviews participants did get the opportunity to state the positives, but the majority of participants did focus their answers more on the negatives.

The themes identified within the results demonstrate that the notion from Lave and Wenger (1991) of LPP may be accurate as within the faculty the participants believed there to be an existing CoP. There is no clear reason as to why this was the case. What was demonstrated through this study is that within the nursing CoP, participants experienced significant negativity when attempting to gain entry.

Through this research there have been several themes found in relation to the attempts at gaining access to a CoP and the experiences of participants. The research has demonstrated that whilst the Lave and Wenger (1991) CoP theory may be accurate in some respects, in others the findings of this research suggest that it is not entirely accurate as a theory of what “newcomers” will experience; themes generated from the findings will now be discussed. This research provides new evidence in relation to what challenges new academics face when entering a CoP and these ranging from, incivility to participants questioning their identity.

### **Entry**

Whilst Lave and Wenger (1991) describe the key to LPP as accessibility for the “newcomer” into the CoP, they also advocate that “newcomers” should have access to a range of resources, and information. Although for some participants within this study this was not an option, as they appeared to have been denied access to resources to allow them to both learn and complete their job. For example, one participant discussed how they were told early on, when asking for a document, which they now knew all staff had access to, “we don’t give these out to anybody” and was refused the document.

It may be that no entry into this nursing CoP is an isolated event, or that this is a discreet occurrence not previously explored which takes place within other academic disciplines or CoP’s as commonplace. The theme of no entry also suggests that there may be an element of a power play, employed by the nursing “old-timers” to their “newcomers”. Huzzard (2004) suggests that power is displayed through social practices, with power possibly affecting new members attempting to gain access to a CoP. James (2007) notes how power can either facilitate or impede processes of participation, this research demonstrates how participants generally felt integration was impeded in this instance. The significance of this for the wider institution is that there may be an increased staff turnover and implications for students, through CoP not being expanded and modernising of practices through a sharing of new knowledge. James (2007) previously noted this and proposed a similar argument. Lave

and Wenger (1991) discussed issues of power and control but were vague in its application in the wider context. Fuller et al (2005) and Contu and Wilmot (2003) suggest that through this approach they place emphasis on identity (re)formation and community relations instead.

Largely these results demonstrated that there was an organisational culture existing within this university faculty, contradicting Silver's (2010) work who suggested that universities have no culture, although this research's findings may be an isolated event. The results suggest that whilst Lave and Wenger (1991) never actually discussed if gaining access was an easy process, it does not appear to be. The implications for the account by Lave and Wenger (1991) are that if CoP's allow entry then the account is correct, however, this research has demonstrated that if entry is denied the account of how a CoP works is unfitting. There was no rationale as to why gaining entry to the nursing team's CoP was made more or less difficult than the other disciplines, however this did occur, and would need further investigation. Results displayed how participants all had difficulty gaining entry to the nursing CoP due to instances of incivility, however when attempting entry to the wider CoP within the faculty this was felt to be easier.

### **Incivility**

Pearson, Andersson and Wegner (2001) describe how workplace incivility is a common problem within many disciplines. The types of incivility that have been experienced by the participants within this study mirrors the work by Pearson et al (2001) as participants described what they had felt as low level.

Incivility was demonstrated to all participants in varying degrees, with some observing it occurring to others and some being exposed to it as the first hand recipient, this can have implications for the faculty and institution as staff may leave or have attitude changes. What has been demonstrated through the research findings also is that participants may become resilient to the incivility, which could affect working practices, as noted through what the participants have demonstrated, such as describing how tolerance levels have decreased towards others. Lave and Wenger (1991) did briefly

note how conflict can occur with “newcomers” entering the CoP, although they did not go into detail, this may be because this has not been explored.

Although the incivility towards participants within the study occurred within different disciplines, there were links drawn between nursing and other health related subjects. There is evidence relating to high incidences of incivility within nursing as a discipline (Andrews, Tolson and Ferguson, 2008), and research suggests this is not just a UK issue but also an international one. There has been much literature to suggest that there is incivility within nursing practice and in nursing education, but the research around nursing education has largely come from the perspective of student to student and student to academic, not academic towards academic. However it should be noted that whilst it appears commonplace within nursing clinical practice, the academics who now work within HE will have all worked in practice and therefore it could be that this incivility has simply translated from practice into nursing academia, as nurses have moved from practice to academia, this would therefore need further exploration. Generally, Lave and Wenger (1991) make no account for incivility when attempting to enter the CoP, although participants in this study have experienced this, meaning that this is a new finding. In terms of the incivility felt by nursing academics this is an international issue as discussed by Clark (2008), Clark and Springer (2007) and Luparell (2011), although again this occurs in clinical practice and the examination of academics incivility has never fully been explored, therefore signalling new knowledge.

As incivility was never discussed within the theory by Lave and Wenger (1991) this would be an observation against the critique, as the majority of the participants either witnessed or experienced incivility. The implications of incivility against the Lave and Wenger (1991) account are that whilst they have noted conflict occurring, this may be something more significant. Participant identity was another finding which will now be discussed.

### **Participant identity**

Lave and Wenger (1991) argue that identity development is central to careers of “newcomers” is key to LPP. Lave and Wenger (1991) also discuss how learning and identity are inseparable; however what they do not discuss is when “newcomers” attempt entry with a preformed identity that is tested. Participant identity was a key theme within the results. This ranged from participants feeling that they were being tested by the “old timers” to feelings of inadequacy. Murray (2007) asserted that new nursing lecturers felt tensions when trying to meet the demands of HE, their colleagues and their profession. This may not have been aided by an apparent lack of direction when originally taking the post, this was confirmed by Participant H who stated he “applied for the job then had to find out what was involved”, again other participants mirrored this who suggested they had a laissez-faire manager who did not guide them into their role, this is where a thorough induction process may have helped. Staniforth and Harland (2006) found in their study that often new lecturers were not clear on the expectations of their role.

It should be acknowledged that there were different experiences noted between the different professions which were not anticipated prior to beginning the study. Participants may have experienced a transition period; the findings suggest that they may have questioned their identity. Whilst Kramer (1974) hypothesised that newly qualified staff nurses experience a transition period, this could also be applied to staff moving into specialist disciplines or other professions, such as the transition from practitioner to educator. The transition period Kramer (1974) suggested for nurses has been described by some as similar to feelings of, but not exclusive to, inadequacy, stress, anxiety, panic and frustration (Clancy, Oyefeso and Ghodes, 2007; Reising, 2002; Whitehead, 2001), these feelings were also noted by some participants. Nash et al (2009) describes how the quality of the transition experience may have important consequences for the staff member, the workplace and the wider workforce and this should be noted. Participants also described how they became negative, towards their colleagues within the CoP, and that their mood was altered which coincides with Nash, Lemcke and Sacre (2009).

Lave and Wenger (1991) never acknowledged that “newcomers” whilst forging their identity may experience the feelings that have been experienced by the participants, therefore this is a new finding. The implications of this finding for the robustness of the Lave and Wenger (1991) account are that the theory may be weakened to this acknowledgement not being made. Participant learning was a theme which will be discussed.

### **Learning**

There was a varied response from participants regarding a lack of learning. The participants who were in the nursing discipline described a lack of learning and described sometimes having to be devious to learn. The other disciplines within the CoP described experiences of positive learning for their roles.

Lave and Wenger (1991) do make note of how learning can occur in some instances as a form of a trade-off for labour, the results from this study do suggest that this may well be the case, as participants have discussed how some first experiences with “old-timers” was where they felt it was a case of what the “newcomers” could do in respect of labour for learning. However, it should be noted that in very few instances learning was never volunteered by the “old-timers” to the “newcomers”, and in some instances learning did not occur.

For the non-nursing participants within the CoP the respondents described on the whole that learning occurred, and although this trade off did take place Lave and Wenger (1991) make no account of the other means to which learning occurred by the participants. The learning that had not occurred freely by the nursing members of the CoP created a real disparity between the different “newcomers” of the CoP demonstrating how the different disciplines played a big part in learning.

The results from this study agreed that learning did occur, although for some participants this was not the case. The implications for this with respect to the CoP theory is that a lack of learning was not fully discussed by Lave and Wenger (1991) account and may weaken the theory. When learning did take place this was undertaken in a subversive manner by the nursing group to gain the knowledge that

was needed. Whilst nursing participants stated that for them to learn took longer than colleagues of the other disciplines they did learn in the end. Importantly, all of the participants stated they would freely engaged with any new lecturers' who were coming into the faculty and would encourage learning. The theme of participant emotions will now be discussed.

### **Emotions**

Generally participants described negative emotions towards attempting to gain access to the nursing CoP. Emotions were positive by all towards the non-nursing members of the CoP. Emotions varied and at times all participants described times of feeling inadequacy, stress, anger and positivity. The emotions noted by participants were never noted by Lave and Wenger (1991) as something that may occur. However, these emotions may be due to not gaining entry and as Lave and Wenger (1991) never accounted for this that may be why it was never noted by them; therefore this was a new finding. This links back to the theme of participant identity. Lave and Wenger (1991) never discussed how "newcomers" would experience emotions, particularly those that the participants felt of stress, anger and frustration, but also positivity and feeling grateful for working within the academic setting. In light of this aspect not being discussed within the theory, this could be seen as a new finding. Respondents described heightened emotions when attempting to gain entry and being refused, and also the incivility that either they had experienced or had witnessed others experience, this led to participants becoming resilient.

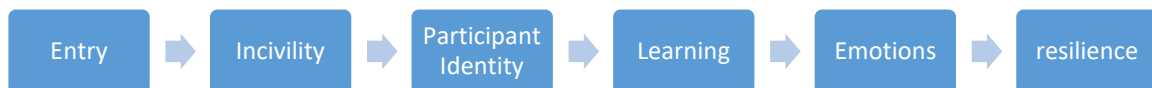
### **Resilience**

Luthar (2000) labels resilience as the enabling of unpleasant or painful episodes that people put to one side to allow them to move forward in life. It appears that when participants had failed on the whole to gain entry, learn and experienced incivility they then became resilient and almost described a "so what" attitude. This was demonstrated on the whole by all participants who found it easier to either retreat into themselves, or have no tolerance of the behaviours that they were experiencing.

Many demonstrated a “hardening” of attitudes towards the “old-timers”, however in some instances the method of coping was to leave the workplace, which 3 out of 8 participants did.

The resilience that participants described could be suggested as a coping mechanism after their experiences of incivility, no entry and lack of learning. This was never acknowledged by Lave and Wenger (1991) as a process that may have occurred, although this does fit with the experiences that have been noted. The process of participants not gaining acceptance appeared to follow a very clear process; as demonstrated within Figure 1. All participants when dealing with the nursing CoP appear to have experienced it through this process. The participants all in some way described how they were denied entry into the nursing CoP, although the non-nursing group were accepted into their own immediate CoP but openly acknowledging they could not gain entry to the nursing CoP.

Figure 1. Demonstrates the process of events participants experienced when attempting to gain entry to an existing CoP.



The process of what participants experience has significant implications.

### **Implications**

With regards to this institution, the implications of the findings of this study focused towards all levels of the University, as Trowler (2010) described as macro, meso and micro levels. Implications can be demonstrated as from a macro level, as poor productivity for output and declining levels of staff satisfaction which may or may not have larger implications for students and from a reputation



perspective. There may be larger consequences when being judged upon figures around the national student survey and attrition rates. The meso level may well be affected through the need to re-recruit and train staff in what may appear to be a carousel of staff hopping on and off. This could create implications for student satisfaction and also university reputation due to staff retention.

From the perspective of the micro level, staff may leave and this may have negative effects upon them, both in a professional light and from a personal position through experiencing stress, this has been demonstrated through the participants, with some suffering stress and some leaving the organisation after a relatively short period of time. Actual implications of this may be that the individual would be affected and from an organisational point of view student experience would be affected. Implications towards the robustness of the Lave and Wenger (1991) account have been discussed throughout, although it should be noted that when all of these are looked at together it does create a picture of a weakened CoP theory.

### **Integration**

Participants all suggested ideas of how they would integrate new teams and individuals into existing CoP's, this ranged from formal induction processes and the use of formal mentorship. Participants did describe how although they had been part of induction processes they believed they were undertaken with no seriousness or formality from the academic managers, they felt that if this was carried out formally, then a successful integration and acceptance into the CoP may have been possible. However, Barlow and Antonio (2007) felt that when formal induction processes are carried out new lecturers find them to be superficial. It was also noted how some existing processes enabled integration into the CoP and these included mentorship support and a meet and greet on the first day. Participants felt that this created a feeling of a welcoming environment, which assisted in in the transition from practitioner to academic.

Whilst it has been acknowledged that the nursing academics found integration more challenging than compared to the other disciplines, there can be no real explanation as this point as to why this

occurred, although it should be noted that this was the group who experienced incivility and so this is a link, as opposed to the other disciplines who did not experience incivility and found integration far easier.

## **Conclusions**

This research has examined the experiences of new academics within an intuition against a critique of the Lave and Wenger (1991) CoP theory. The research argues that the notion of CoP does not fully correlate with the experiences of the participants with this study. Lave and Wenger (1991) described within their notion how newcomers will enter a CoP and will learn from “old-timers”, however this research argues that whilst this can occur, and did when participants attempted to gain entry to a non-nursing CoP, when attempting to enter a nursing CoP in the majority of experiences this was not the case. Participants were generally refused entry to the nursing CoP, and a series of commonalities were demonstrated in themes throughout the paper. The themes were entry, incivility, participant identity, learning, emotions and resilience. It is though, important to take into consideration that there is a period of 24 years difference between the original COP theory and this research.

This research displayed that a HEI can be a hostile environment. In this instance the “newcomer” was exposed to incivility by the “old-timers” and this subsequently affected their learning. This perception of the “newcomer” may be incorrect due to their own vulnerability and possible identity crisis. However, participants have still experienced this and this remains an important perspective. There may be many explanations for this perception of experience, although one idea may be that the “old-timer” could feel threatened by the “newcomer’s” previous practitioner experience, or the skills and attributes they possess and are attempting to bring in to the community. However, what was apparent was the experiences between the staff who were nurses were similar; there was a clear dissonance between direct experiences between the nursing participants and the allied health professional participants when compared. The non-nursing group did witness the negative behaviours employed by the “old-timers” through interactions and sharing office space.

An aim of this research was to gain a perspective of new members of staff attempting entry, this was achieved, and the results were generally negative but it did depend on what discipline they were in as to whether this was an easy process or not. Further research may need to establish why and also why this culture is allowed to happen by management, as there are responsibilities to all staff, it could be suggested that this borders on bullying and dignity at work and the university have policies which should be adhered to. What may be a good line of enquiry would be to find out if the participants class this as bullying and if they feel that this view may be accurate, but it should be ascertained why this is occurring.

Another aim was met which was if “newcomers” found integration an easy process, again this was dependent on what discipline the “newcomer” was in, participants generally found this an easy process within the faculty as a whole but for integration into the nursing CoP all discussed this as being challenging.

An aim was to find new ways of implementing a new team into a CoP; this was achieved with some using their own experiences as a good method of integration.

The attitudes of members of the new team were generally negative from the nursing academic staff but positive towards the wider CoP. The emotions of the new team varied ranging from anger and frustration in some instances to gratefulness, which was discussed by a participant who was proud and grateful to be working in this role. Challenges noted by the “newcomers” included difficulties in learning their roles, facing identity crisis’ and incivility, either towards themselves or them witnessing it occur to others by the existing members of the CoP.

This research demonstrated a clear dissonance between the notion of entering a CoP and LPP by Lave and Wenger (1991). Implications of this study for the robustness of the Lave and Wenger account needs further exploration, this research suggests that the theory may be weaker.

The future large scale study will be undertaken at different HEI'S to examine different if the Lave and Wenger (1991) theory is applicable to all disciplines, it may be useful to use another method of data collection such as a questionnaire to allow for a larger sample to be accessed.

To conclude, it appears that the participants have all experienced to differing degrees no entry to the CoP. The commonalities displayed between the participants during their experiences indicate that these are very similar traits displayed by the "old-timers", particularly within the nursing field, although all participants experienced this in differing ways. Although the account by Lave and Wenger (1991) may be reasonable to some extent, the lens through which the participants within the study have experienced things suggest that that may be correct for "old-timers" who want to engage with "newcomers", however when they do not then this is a very different matter. In which "newcomers" will experience a myriad of emotions ranging from sadness to anger and then begin to change their methods of attempting to engage or even to some extremes retreat and leave, thus giving up attempts to enter the CoP. This study has great significance in relation to organisational cultures and professional and personal identity.

### **Recommendations**

There is an indication that there is a difference between the different disciplines, this would need exploring in the larger scale study.

### **References**

- Andrew, N., Tolson, D. & Ferguson, D. 2008. Building on Wenger: Communities of practice in nursing. *Nurse Education Today*, 28, 246-252.
- Barkhuizen, G. 2002. Beginning to lecturer at university: A complex of socialisation patterns. *Higher Education Research and Development*, 21, 93-109.
- Barlow, J. & Antonio, M. 2007. Room for improvement: The experiences of new lecturers in higher education. *Innovations in Education and Teaching International*, 44, 67-77.
- Beecher, T.; Trowler, P. (2001) *Academic Tribes and Territories: Intellectual enquiry and the culture of disciplines*. 2<sup>nd</sup> Ed. London, SRHE.

- Bentley C., Browman G.P., Poole B. 2010. "Conceptual and Practical Challenges for Implementing the Communities of Practice Model on a National Scale – A Canadian Cancer Control Initiative." *BMC Health Services Research* 10(3).
- Billett, S. 2004. Workplace participatory practices: conceptualising workplaces as learning environments. *Journal of workplace learning*, 16, 312- 324.
- Bond, R. & Paterson, P., 2005. Coming down from the ivory tower? Academics' civic and economic engagement with the community. *Oxford Review of Education* 31 (3), 331–351.
- Boud, D. & Garrick, J. 1999. *Understanding learning at work*, London, Routledge.
- Butler L., Novak Lauscher H., Jarvis-Selinger S., Beckingham B. 2004. "Collaboration and Self-Regulation in Teachers' Professional Development." *Teaching and Teacher Education* 20: 435–55
- Clancy, C., Oyefeso, A. & Ghodes, H. 2007. Role development and career stages in addiction nursing: An exploratory study. *Journal of Advanced Nursing*, 57, 161-171.
- Clark, C. (2008) Student Voices on Faculty Incivility in Nursing Education: A Conceptual Model. *Nursing Education Perspectives*. 29, 5, 284-289.
- Clark, C. & Springer, P. (2007) Thoughts on Incivility: Student and Faculty Perceptions of Uncivil Behaviour in Nursing Education. *Nursing Education Perspectives*. 28, 2, 93-97.
- Contu, A. & Willmott, H. 2003. Re-embedding situatedness: the importance of power relations in learning theory. *Organisational Science*, 14, 283-296.
- Corbetta, P. 2003. *Social Research: Theory, methods and techniques*, London, Sage.
- Crotty, M. 1998. *The Foundations of Social Research: Meaning and Perspective in the Research Process*, London, Sage.
- Data Protection Act. 1998. London, HMSO.
- Engestrom, Y. 1993. *Developmental studies of work as a test bench of activity theory: the case of primary care medical practice*, Cambridge, Cambridge University Press.
- Evans, K., Hodkinson, P. & Unwin, L. 2002. *Working to learn: transforming learning in the workplace*, London, Kogan Page.
- Fontaine M., Millen D. 2004. "Communities of Practice and Networks: Reviewing Two Perspectives on Social Learning." In Hildreth P., Kimble C., editors. eds., *Knowledge Networks: Innovation through Communities of Practice* (pp. 1–13) London: Idea Group Publishing
- Fuller, A., Hodkinson, H., Hodkinson, P. & Unwin, L. 2005. Learning in peripheral participation in communities of practice: a reassessment of key concepts on workplace learning. *British Educational Research Journal*, 31, 49-68.
- Gheradi, S., Nicolini, D. & Odella, F. 1998. Towards a social understanding of how people learn in organisations: The notion of situated curriculum. *Management Learning*, 29, 273-97.
- Gourlay, L. 2011. New lecturers and the myth of "communities of practice". *Studies in Continuing Education*, 33, 67-77.
- Gray, D. 2010. *Doing research in the real world*, London, Sage.

- Guile, D. & Young, M. 1999. Apprenticeship as a conceptual basis for a social theory of learning. *Journal of Vocational Education and Training*, 50, 173-192.
- Hodkinson, H. & Hodkinson, P. 2004. Rethinking the concept of community of practice in relation to school teachers workplace learning. *Journal of Training and Development*, 8, 2131.
- Hodkinson, P. 2005. Reconceptualising the relations between college-based and workplace learning. *Journal of Workplace Learning*, 17, 521-32.
- Hurst, K. 2010. Experiences of new physiotherapy lecturers making the shift from clinical practice into academia. *Physiotherapy*, 96, 240-247.
- Hutchins, E. 1999. *Cognition in the wild*, London, MIT Press.
- Huzzard, T. 2004. Communities of domination? Reconceptualising organisational learning and power. *Journal of Workplace Learning*, 16, 350-361.
- James, N. 2007. The learning trajectories of "old-timers": academic identities and communities of practice in higher education. In: BRIGGS, A. & COLEMAN, M. (eds.) *Research in Educational Management*. London: Routledge.
- Knight, P., Tait, J. & Yorke, M. 2006. *The professional learning of teachers in Higher Education*.
- Kramer, M. 1974. *Reality shock: Why nurses leave nursing*, St Louis, Mosby.
- Lave, J. & Wenger, E. 1991. *Situated Learning: Legitimate peripheral participation*, Cambridge, Cambridge University Press.
- Li L.C., Grimshaw J.M., Nielsen C., Judd M., Coyte P.C., Graham I.D. 2009. "Evolution of Wenger's Concept of Community of Practice." *Implementation Science* 4(11).
- Lombardo, P. 2006. Concerns for medical radiation programs in Australian universities. *Radiography*, 12, 332-338.
- Luparell, S. (2011) *Incivility in Nursing: The Connection Between Academia and Clinical Settings*. *Critical Care Nurse*. 3, 2, 92-95
- Luthar, S. 2000. The Construct of Resilience: A Critical Evaluation and Guidelines for Future Work. *Childhood Development*, 71, 543-562.
- Maxwell, J. 1998. Designing a qualitative study. In: BICKMAN, L. & ROG, D. (eds.) *Handbook of applied social research methods*. Thousand Oaks, CA: Sage.
- Miles, M. & Huberman, A. 1994. *Qualitative Data Analysis*, Newbury Park, Sage.
- Millen D.R., Fontaine M.A., Muller M.J. 2002. "Understanding the Benefit and Costs of Communities of Practice." *Communications of the ACM* 45(4): 69-73
- Murray, J. 2007. Countering insularity in teacher education: Academic work on pre-service courses in nursing, social work and teacher education. *Journal of Education for Teaching*, 33, 271-291.
- Nash, R., Lemcke, P. & Sacre, S. 2009. Enhancing transition: An enhanced model of clinical placement for final year nursing students. *Nurse Education Today*, 29, 48-56.
- Pearson, C., Andersson, L. & Wegner, J. 2001. When workers flout convention: A study of workplace incivility. *Human Relations*, 54, 1387-1419.

- Polit, D. & Beck, C. 2010. Essentials of nursing research: Appraising evidence for nursing practice, Philadelphia, Lippincott Williams & Wilkins.
- Pope, C. and N. Mays (2006). Qualitative Research in Health Care. London, BMJ Publishing.
- Rebar, C., Gersch, C., Macnee, C. & McCabe, S. 2011. Understanding nursing research: Using research in evidence based, Philadelphia, Lippincott William & Wilkins.
- Reising, D. 2002. Early socialisation of new critical care nurses. American Journal of Critical Care, 11, 19-26.
- Richard, L; Chiocchio, F; Essiembre, H; Tremblay, M; Lamy, G; Champagne, F; Beaudet, N. 2014 Communities of Practice as a Professional and Organizational Development Strategy in Local Public Health Organizations in Quebec, Canada: An Evaluation Model. Health Policy 9(3): 26–39.
- Robson, C. 2002. Real World Research: A Resource for Social Scientists and Practitioner Researchers, Massachusetts, Blackwell Publishers.
- Silver, H. 2010. Does a University have a culture? Studies in Higher Education, 28, 157-169.
- Smith, C. & Boyd, P. 2012. Becoming an academic: the reconstruction of identity by recently appointed lecturers in nursing, midwifery and the allied health professions. Innovations in Education and Teaching International, 49, 63-72.
- Smith, N. 1982. Mutual Knowledge, Michigan, Academic Press.
- Soekijad M., Huis in't Veld M.A.A., Enserink B. 2004. "Learning and Knowledge Processes in Inter-Organizational Communities of Practice." *Knowledge and Process Management* 11(1): 3–12
- Staniforth, D. & Harland, T. 2006. Contrasting views of Induction: The experiences of new academic staff and their heads of department. Active Learning in Higher Education, 7, 185-196.
- Trowler, P. 2010. Wicked issues in situating theory in close up research. Higher Education Close Up 5: Think Piece.
- Trowler, P. 2012. Doing Insider Research in Universities. Amazon Kindle.
- Trowler, P. & Bamber, V. 2005. Compulsory Higher Education teacher training: Joined up policies, institutional architecture and enhancement cultures. International Journal for Academic Development, 10, 177-95.
- Trowler, P. & Knight, P. 1999. Organisational socialisation and induction in universities. Higher Education, 32, 177-95.
- Vescio, V; Ross, D. Adams, A. 2008. A review of research on the impact of professional learning communities on teaching practice and student learning. Teaching and Teacher Education. 24, 1, 80-91.
- Warhurst, R. 2006. "We really felt part of something": Participatory learning among peers within a university teaching-development community of practice. International Journal for Academic Development, 11, 111-22.
- Warhurst, R. 2008. "Cigars on the flight-deck": new lecturer's participatory learning within workplace communities of practice. Studies in Higher Education, 33, 453-467.

Wenger, E. 1998. *Communities of practice: Learning meaning and identity*, Cambridge, University Press.

Whitehead, J. 2001. Newly qualified staff nurses perceptions of the role transition. *British Journal of Nursing*, 10, 330-339.