

Prisoners of oath: junior doctors' professional identity during and after the 2015-2016 NHS strikes.

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Junior doctors' working lives have been subject to much inquiry, and are characterized by long hours at work (Rich et al, 2016), low levels of morale (Bessa et al, 2016), high levels of occupational stress (Swanson et al, 1998, Zhou et al, 2019), ever-increasing workloads (Hobbs et al, 2016); sexism (Nicholson, 2002) and persistent agitation from non-clinical managers (Doolin, 2002; Bessa et al, 2016). The Junior Doctors' dispute of 2015-2016 represented a watershed moment in public sector and professional employment relations in the UK. Public and practitioner opinion was polarized by the actions of the junior doctors, and the British Medical Association (BMA) representing them ' trade union and professional body – the BMA – and the junior doctors themselves (Park and Murray, 2014, Toynbee et al, 2016, Chima, 2020). Retrospective analyses of the strikes have thus far focused on patient outcomes, primarily due to the far-reaching effects of the industrial action on the general public of England (Furnivall et al, 2018; Rimmer, 2018). Framed in the literature on identity work (Alvesson et al, 2008; Brown and Coupland, 2015; Brown, 2021), this paper examines how the occupational identity of junior doctors, which is heavily rooted in patient care, diluted and ultimately thwarted the effectiveness of the strike action, both through doctors' own commitments to patients and as used as a tool by government to sway public opinion against their action. In turn, it was a reworking of junior doctors' professional identities that helped them accept defeat in the strike and refocus on their careers. We show this through a longitudinal qualitative study, which provides nuanced insights into the tensions that challenge junior doctors' working lives. This analysis uncovers how underlying values of

patient care embedded within medical practitioners, in this situation facilitated the financial logic of the NHS. Now, as the world relies more than ever on the labour of early career medics to treat the victims of the COVID-19 pandemic, new insights into their working lives and occupational tensions are of renewed value.

References

Alvesson M., Ashcraft, K. L. and Thomas, R. (2008) "Identity matters: Reflections on the construction of identity scholarship in organization studies" *Organization* **15**(1) 5-28

Bessa, I, Charlwood, C., Cook, H. and Jephson, N. (2016) *An Enquiry into the Morale of Junior Doctors*, CERIC Policy Report #7

Brown, A.D. and Coupland, C., 2015. Identity threats, identity work and elite professionals. *Organization Studies*, 36(10), pp.1315-1336.

Brown, A. D. (2021) 'Identities in and around organizations: Towards an identity work perspective', *Human Relations*. doi: [10.1177/0018726721993910](https://doi.org/10.1177/0018726721993910).

Chima, S.C., 2020. Doctor and healthcare workers strike: are they ethical or morally justifiable: another view. *Current Opinion in Anesthesiology*, 33(2), pp.203-210.

Doolin, B. 2002. Enterprise discourse, professional identity and the organizational control of hospital clinicians. *Organization Studies*, 23: 369–390.

Furnivall, D., Bottle, A. and Aylin, P., 2018. Retrospective analysis of the national impact of industrial action by English junior doctors in 2016. *BMJ open*, 8(1), p.e019319.

Hobbs, F.R., Bankhead, C., Mukhtar, T., Stevens, S., Perera-Salazar, R., Holt, T. and Salisbury, C., 2016. Clinical workload in UK primary care: a retrospective analysis of 100 million consultations in England, 2007–14. *The Lancet*, 387(10035), pp.2323-2330.

Nicholson, S., 2002. 'So you row, do you? You don't look like a rower.' An account of medical students' experience of sexism. *Medical Education*, 36(11), pp.1057-1063.

Park, J.J. and Murray, S.A., 2014. Should doctors strike?. *Journal of medical ethics*, 40(5), pp.341-342.

Rich A, Viney R, Needleman S, *et al.* 2016. 'You can't be a person and a doctor': the work–life balance of doctors in training—a qualitative study *BMJ Open* 2016;**6**:e013897. doi: 10.1136/bmjopen-2016-013897

Rimmer, A., 2018. Junior doctor strikes had a "significant impact" on services but did not increase deaths, study finds. *BMJ: British Medical Journal (Online)*, 360.

Swanson, V., Power, K.G. and Simpson, R.J., 1998. Occupational stress and family life: A comparison of male and female doctors. *Journal of Occupational and Organizational Psychology*, 71(3), pp.237-260.

Toynbee M, Al-Diwani AA, Clacey J, and Broome, M. R. Should junior doctors strike? *Journal of Medical Ethics* 2016;**42**:167-170

Zhou, A.Y., Money, A., Bower, P., Van Tongeren, P., Esmail, A. and Agius, R. . 2019. A Qualitative Study Exploring the Determinants, Coping, and Effects of Stress in United Kingdom Trainee Doctors. *Acad Psychiatry* **43**, 560–569