Abstract

The aim of this project is to examine how specialisation in diagnostic radiography has occurred. In particular, this research aims to examine the contemporary ethos of specialism in diagnostic radiography; how the higher status of technology has developed over patient-centredness; the impact of the working relationship between radiology and diagnostic radiography on this development; the relationship between gender and the nature of occupation in the development of diagnostic radiography.

Qualitative data was collected using 31 semi-structured interviews that took the form of oral histories where possible. The time-span covered is 1932-2001.

Findings show that a paradigm shift is required. Defining specialism and expert practice is difficult, as both are negotiated constructs that tend to have local meaning. Not all specialisms in diagnostic radiography increase professional autonomy and management has a key role to play in the development of radiography as a profession to enable full engagement with consultant status. To a great extent, diagnostic radiography and its associated specialisms is governed by an emphasis on technology rather than the patient. This emphasis has roots in power difference between radiologists and radiographers and within the hierarchy of radiography. Radiologists have controlled radiographers to provide a service to radiology rather than the patients, and, although this is still evident in some hospitals, it is changing. Task offloading from radiologists to radiographers confuses the notions of specialism and radiography is in danger of seeking professional development through emulating radiology rather than using radiographic caring skills and expanding practice with a humanistic and patient focused emphasis. Radiography emerged as a pioneering, elite profession that could originally be regarded as a specialism of nursing. Technology and medicine gradually reduced radiographic practice to have a technological and quantitative focus. There is now a demand to once again broaden radiographic practice to actively contribute to a patient-centred service in an autonomous, more qualitative and self-directed manner. A collection of oral histories has been a direct result of this research. Specialisms are a broad area of diagnostic radiography and rather than focus on technological areas of practice, a more holistic range of specialisms could be embraced to enable the profession to progress.