

## Use of cinemeducation for professional identity formation in medical students

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Professional identity means the progressive development of an individual self-perception throughout their careers or any other career, for example, in the field of medicine. This develops progressively as professionals learn the fundamentals, moral standards, and cultural norms of the medical industry. Through this process, individuals progressively adopt cognitive frameworks, behavioural norms, and emotional reactions characteristic of a physician or a medical professional.<sup>1</sup> The growth of professional identity is not linear or passive by nature, and it does not encourage non-critical incorporation. However, it requires active and repetitive actions and invites discussion/engagement from trainees, and it also helps individuals to resolve the connection between distinctive professional ties like pre-existing experts and norms, which are encouraged by the profession.<sup>2</sup>

The process of creating professional identity starts when the initial training persists throughout a person's career. While recent research has increasingly studied doctoral candidates' academic achievement and well-being, their professional identity development remains relatively less explored. This process fundamentally comprises the synthesis of individual personal characteristics with professional role expectations. In the context of Educator development requires sustained involvement in professional learning, through which teachers refine their instructional processes, deepen their knowledge in teaching methodologies, and remain informed about emerging developments in education research and practice.<sup>3</sup> A strong professional identity facilitates implementation of methods that enhance interdisciplinary collaboration/cooperation and improved patient outcomes. Healthcare providers with well-formed professional identities deliver more empathetic and responsive care and consistently deliver care that prioritizes the requirements and preferences of patients. Within the field of medical education, one model is widely recognized, which is Kegan's developmental model for its deep analysis of professional identity formation (PIF)

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among medical students.

This framework has six progressive stages of PIF: (1) incorporation, (2) impulsion, (3) imperial, (4) interpersonal, (5) institutional, and (6) inter-individual. Current research suggests medical students typically be in stages 2 through 4 during their training period. The stage two - imperial stage represents a phase where students demonstrate compliance in accordance with professional standards while exhibiting limited capacity for critical self-reflection. As learners progress to the institutional stage (stage 4), they develop the ability to negotiate complex systems and situational expectations within professional relationships. At this advanced stage, the students provide the development of more reflective abilities and professional self-awareness.<sup>4</sup>

More than 50 years ago, Merton articulated the insight for fundamental goal of medical education that goes beyond clinical knowledge and technical skills. It must also have a robust professional identity that enables graduates to fully internalize the physician's role, accept the values and adopt the cognitive frameworks, behaviours, and emotional responses characteristics of the medical profession. Consistently, another study believed these two objectives hold equal significance and warrant explicitness while addressing the mission statements and other documents outlining the objectives of medicine's educational institutions. This perspective is grounded and draws upon established pedagogical approaches of professionalism training and also aligning with the foundational recommendations of the Carnegie Foundation report, and it also mirrors contemporary developments in medical education curricula.

The moment when professional identity development becomes formally recognized as a core educational objective, the development of a physician's professional identity emerges as a fundamental aspirational target for all medical trainees. This paradigm shift has given rise to several foundational principles which logically guide medical education.<sup>5</sup>

One approach is getting famous and gaining all the attention that usage of cinematic media (films, curated clips, trigger videos, and television series) to enhance the medical education among medical students and

professionals. This approach has also been found to be efficient in many formats with selection of movies or clips are dependent on specific learning objectives not limited to duration of clips or their production type.<sup>6</sup>

This approach within medical humanities catches the power of cinematic narratives; the fundamental role of emotion in shaping learning behaviours and professional attitudes are recognized by this innovative approach. It offers unique access to learner's affective domains while enhancing theoretical knowledge and real-life experiences. As an Audiovisual storytelling medium, the clips from movies and dramas provide meaningful narratives (emotional) that serve as powerful conceptual framework.

These narratives connect with learners in several ways: 1) They bridge abstract concepts with the experimental approaches students already use. 2) They use empathetic storytelling to share real professional experiences. 3) They create a safe, approachable environment where students can engage freely.

The cinema-based approach offers three distinct advantages: it allows learners to draw comparisons, fosters emotional connections, and establishes a psychologically safe space for discussion. These qualities are particularly valuable when exploring sensitive or complex topics in medical education, as well as when encouraging deeper reflection.

Films can play a pivotal role in shaping professional identity. By immersing students in realistic scenarios—ranging from clinical challenges and ethical dilemmas to teamwork and complex patient interactions—it encourages active engagement. This method also strengthens decision-making skills, particularly in high-pressure situations, through guided reflective analysis. Moreover, students often find themselves more willing to adopt professional values before they encounter such challenges in real practice.

Another key benefit is the cultivation of clinical empathy. Cinemeducation helps students clarify their values by forming emotional bonds with the narratives they see. It inspires meaningful discussion on core clinical principles—such as integrity in moral or ethical dilemmas, accountability in team-based care, and adaptability in the face of obstacles. It also provides a platform for students to express their own viewpoints while aligning with professional expectations. When used effectively, it nurtures the kind of critical thinking that is essential for identity formation.

Cinemeducation also promotes collaboration across healthcare professions. By exposing students to a variety of team dynamics, power structures, change management processes, and interprofessional ethics, it demystifies complex concepts and reinforces mutual respect—an essential element in modern, team-based care.

However, the impact of this strategy relies heavily on careful planning. Choosing the right learning objectives and selecting film segments with clear relevance is critical. Without thoughtful guidance, the educational value may be reduced, and resources may be wasted.

Ultimately, Cinemeducation is more than a teaching tool—it is a transformative approach to professional identity formation. In health professions education, it opens creative avenues for instruction, shapes students' attitudes toward responsibility, and encourages them to internalize the values and norms of their future profession.

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## References

1. Toubassi D, Schenker C, Roberts M, Forte M. Professional identity formation: linking meaning to well-being. *Adv Health Sci Educ Theory Pract* 2023;28:305-18. doi: 10.1007/s10459-022-10146-2.
2. Cornett M, Palermo C, Ash S. Professional identity research in the health professions—a scoping review. *Adv Health Sci Educ Theory Pract* 2023;28:589-642. doi: 10.1007/s10459-022-10171-1.
3. Reissner S, Armitage-Chan E. Manifestations of professional identity work: an integrative review of research in professional identity formation. *Stud High Educ* 2024;49:2707–22. Doi: 10.1080/03075079.2024.2322093
4. Jia X, Du J, Xu T, Yin X, Zhang Q, Bao X, et al. Investigating the status and influencing factors of professional identity formation among Chinese medical interns: a mixed methods study. *BMC Med Educ* 2025;25:676. doi: 10.1186/s12909-025-07199-3.
5. Sarraf-Yazdi S, Goh S, Krishna L. Conceptualizing Professional Identity Formation in Medicine. *Acad Med* 2024;99:343. doi: 10.1097/ACM.0000000000005559.
6. Kadivar M, Mafinejad MK, Bazzaz JT, Mirzazadeh A, Jannat Z. Cinemedicine: Using movies to improve students' understanding of psychosocial aspects of medicine. *Ann Med Surg (Lond)* 2018;28:23-7. doi: 10.1016/j.jamsu.2018.02.005.