Fools, Facilitators and Flexians

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Title: Fools, Facilitators and Flexians: Academic Identities in Marketised Environments

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Abstract: Employing the interdisciplinary field of health inequalities as a case study, this paper draws on interviews to explore subjective accounts of academic identities. It finds widespread acceptance that academia is a market-place in which research-active careers require academics to function as entrepreneurs marketing ideas to funders. Beyond this, two contrasting aspirational identities emerged: academics seeking to work collaboratively with policymakers (‘policy facilitators’) and academics seeking to challenge dominant discourses (‘Shakespearean fools’). Most interviewees identified strongly with one or the other of these identities and few believed academia sufficiently supported their preference, although there was some consensus that recent changes were aiding ‘policy facilitator’ roles. In interviewees’ accounts of trying to pursue ‘Shakespearean fool’ type roles in marketised environments, a further, chameleon-like identity emerged (‘flexians’): academics producing malleable ideas that can be adapted for different audiences. In exploring these identities, the paper challenges the popular distinction between ‘Mode 1’ and ‘Mode 2’ research.

Key words: Academic identity; academic roles; marketisation; knowledge transfer; evidence-based policy; health inequalities.

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Fools, Facilitators and Flexians: Academic Identities in Marketised Environments

Introduction:

It is widely accepted that universities are becoming more business-like than ever before (see Wedlin, 2008). A number of studies explore how these developments are impacting on academics and their work (Chandler et al., 2005; Kinman, 2010; Skelton, 2004; Tytherleigh et al., 2005). There is a consensus that a key change in this shifting landscape is the increased privilege afforded to socially relevant and applied knowledge, and an associated questioning of the notion that knowledge has an intrinsic value in and of itself (Harris, 2005).

This is precisely the trend that Gibbons and colleagues (1994) sought to capture when they famously defined ‘Mode 1’ (traditional, intellectual) and ‘Mode 2’ (applied, problem-solving) work. In the subsequent debates about the rise of ‘Mode 2’ knowledge that emerged, two clearly divergent lines of thought are identifiable. On the one hand, the increasing emphasis on ‘evidence-based policy’, knowledge transfer and research impact are understood as indicative of the marketisation of universities (Harris, 2005; Marginson and Considine, 2005) and their increasing dependence on external funding sources (Marginson and Considine, 2005; Wedlin, 2008). This has led some to conclude that academic identities are becoming increasingly corporate and depoliticised (Hofmeyr, 2008), threatening academics’ ability to contribute to social justice and critical citizenship (see Harris, 2005; Giroux & Myrsiades, 2001). In contrast, others have framed these changes as a welcome challenge to the exclusivity and elitism that has traditionally dominated universities (for an overview, see Harris, 2005). From this perspective, the increasing support for
‘Mode 2’ types of research can be viewed (at least partially) as an outcome of academic reflections on why we do the work we do and for whom it is intended (Burawoy, 2005; Dorling and Shaw, 2002). There has been some suggestion that academics within disciplines that are overtly ‘applied’, such as public health, tend to support the shift, whilst academics in more traditional subjects (e.g. the humanities) resist it (Nowotny et al., 2003).

However, several commentators have recently indicated that the tension between these two kinds of academic contribution might have been overplayed, given that academics often perform multiple roles (and adopt multiple identities). For example, in a 2004 address to the American Sociological Association, Michael Burawoy (2005) suggested that sociological work may consist of four, inter-related strands: public; professional; policy; and critical. Burawoy claims that, although there may be some antagonism between these strands, there can also be ‘organic solidarity’, in which each strand derives ‘energy, meaning and imagination’ from the others (Burawoy, 2005, p. 275). Yet very little empirical research examines academic responses to changes in the UK higher education system and/or their ability (and desire) to undertake these different kinds of work (Marginson and Considine, 2005, explore some of these issues in an Australian context).

This paper begins to address this gap by considering the interview accounts of academics involved in health inequalities research, an inter-disciplinary field in which many academics are highly committed to achieving policy change. It builds on the work of Clegg (2008), who undertook a small, interview-based study exploring academic identities within an individual UK university, and Henkel (2005), who employed interviews with biological scientists to examine the impact of recent changes on academic identities in the UK and elsewhere. The findings support both
authors’ assertions that academic identities are complex and shifting, and that these identities are closely intertwined with perceptions of autonomy (Henkel, 2005; Clegg, 2008). Like these studies, this paper finds that academics are engaged in efforts to forge identities that are consistent with their personal values, despite often perceiving contemporary academic environments to be unsupportive of these values. However, this paper differs from these previous studies in several ways. First, it finds a clear divergence between academics aspiring to work closely with policymakers and those aspiring to challenge dominant policy discourses; a division which was accompanied by a related divergence in interviewees’ accounts of what constitutes academic ‘autonomy’. Second, it finds that many of the academics aspiring to challenge dominant policy discourses nevertheless described minimising (or omitting) the more critical aspects of their ideas when presenting them to policy audiences (with a view to ensuring that they maintained some level of policy credibility). In addition, as it is clear that all of the interviewees aspired to influence policy but that they aspired to do so in very different ways and over contrasting time-periods, this paper challenges the widely accepted dualism of ‘Mode 1’ and ‘Mode 2’ types of academic work.

Following this introduction, this article describes the case study and provides some brief methodological background. Interview data are subsequently employed to explore how academics articulated: their own ideal, professional identity (i.e. what they aspired to be); that of academic colleagues and academia more generally; and their actual, lived identities as health inequalities researchers with recent experience of working in academic settings. The concluding discussion summarises the five identities that were prominent in the interview data, some of which were articulated as ideal, preferred identities, others of which were presented as real, lived identities and one of which appeared to be mythical identity, which no one aspired to or performed,
but which was employed by interviewees as a useful contrast to alternative (preferred) identities.

**The case study: Health inequalities in the UK**

The election of a New Labour government in 1997 heralded a new era for health inequalities in the UK. Seventeen-years after the publication of the widely cited Black Report on inequalities in health (Black *et al.*, 1980), New Labour was keen to emphasise that the Conservative government had failed to implement any of the report’s (largely socio-economic) recommendations (Department of Health, 1997). In-line with the new government’s commitment to evidence-based policy (Cabinet Office, 1999) it commissioned a follow-up to the Black Report (Acheson, 1998), and promised that the evidence-based conclusions of this new Inquiry would inform a health strategy. The interviews with academics took place at a time which was marked by clear enthusiasm for the fact that health inequalities was finally being taken seriously by policymakers, but a growing sense of disappointment that this did not seem to be resulting in actual reductions in health inequalities (Shaw *et al*., 2005).

This paper is based on an analysis of 61 interviews with individuals involved in the interplay between health inequalities research and policy in Scotland and England. Interviewees included (mostly senior) academic researchers, civil servants, ministers, journalists and research funders but this paper focuses on the insights provided by the 32 individuals with experience of working as academics. Academic interviewees were selected on the basis that they had made significant and distinct contributions to health inequalities research prior to 2007 (the interviews were conducted in 2006-2007). As a result, most were based in research-intensive universities and had experienced relatively successful academic careers.
Semi-structured interviews explored how and why academics had come to work in the field of health inequalities, what they felt the role of health inequalities academics should be and how they articulated their own professional identity. Thematically coded, the interview data provides a useful means of exploring the subjective dimension of academic identities (Barth, 1969; Meer, 2010). As the majority of interviewees were keen to remain anonymous, and as the UK health inequalities community is relatively small, it was agreed that any defining personal characteristics of specific speakers (including gender, class, age and ethnicity) would not be disclosed.

Findings: Five Identity Types

(i) Academics as entrepreneurs

In keeping with claims that academia has become increasingly marketised (Harris, 2005; Wedlin, 2008), one of the most consistent features of the way academics articulated their identity was to present themselves as entrepreneurs whose careers depended on being meeting funders’ demands:

Senior academic: ‘You run yourself like a small business. […] I say the ESRC and the MRC are my bosses - they are effectively… I have to watch what they want, I have to fulfill their expectations… I have to live up to whatever they ask me to do.’
Senior academic: ‘Academics are entrepreneurial, they go where the money is and so […] if somebody says, ‘research a project on X,’ you know, ‘cycling,’ we’d all start doing sociology of cycling or something [laughs].’

Whilst not all of the interviewees identified themselves in quite such business-like terms, the vast majority referred to the need to be able to ‘sell’ or ‘market’ their ideas and virtually all interviewees stressed the necessity of securing research funding to maintain (or advance) their careers. Indeed, interviewees frequently noted that the process of writing successful grant applications involved trying to guess what kinds of work research funders were most likely to support (see Knorr-Cetina, 1981):

Senior academic: ‘You get questions, in a purely scientific sense, you get questions that you want to pursue. So what do you do? You hang it on, one way or another, you hang it as some issue that you think will get it funded.’

The emphasis placed on the need to obtain research funding was linked to a common perception that academic careers were becoming increasingly precarious. For example:

Mid-career academic: ‘When you see the number of academics that are increasingly dependent on grants and insecure funding, we have an idea of the trend. The trend is to make academics… tied to certain grants, tied to certain… financial help. So […] at the end of the grant or at the end of the… the years… they can be fired or made redundant. Made redundant is the rule.’
More positively, interviewees generally acknowledged that opportunities for obtaining research funding for health inequalities work had increased since 1997 (when the issue moved onto the official policy agenda). However, this was often not perceived to have made health inequalities researchers’ lives easier as it was generally perceived to have occurred alongside a more general decline in academic job security.

The following interviewee described the unrelenting pressure to obtain external research funds in particularly stark terms:

Academic: ‘When I was doing my research in the eighties, I thought… you do this, then you get a job a bit like the people who taught you, who are lecturers and senior lecturers or whatever… and… unless you have a burning desire to run a department, you carry on doing your teaching and when the spirit takes you, you write things. Now that’s… not remotely viable anymore. […] Now you’ve got to go straight for the top, don’t hang about, you finish your PhD, you get your first few papers, you get onto a research team as co-applicant, then you go for your own money, and after that you go for [bangs table] one after [bang] the other, [bang] after the other, [bang] after the other… It’s a bloody treadmill!’

The above interviewee linked this pressure directly to his/her perception that academic jobs (including ‘permanent’ posts) had become increasingly less secure.

Only four interviewees indicated that they were not concerned with securing research funds. Two of these were, by their own account, close to retirement and a third was already retired (although still academically active). The fourth was a particularly high-profile academic who said s/he felt his/her status and credibility
were now high enough to allow him/her to focus on promoting ideas to the media and public, rather than to research funders. Interestingly, even this individual described his/her work as being about selling ideas; s/he was merely trying to sell them to the media and the public, rather than research funders.

Overall, the language of markets was pervasive across the interview data, with academics presenting themselves as purveyors of ideas to research funders in particular but also to academic peers, policymakers and journalists. This conception of academia was rarely challenged, even though it appeared to be disliked by many (as several of the above quotations indicate). Rather, most interviewees seemed to accept that entrepreneurship was an unavoidable aspect of contemporary academic life (at least for research-active academics).

**(ii) Academics as policy advisors / policy relevant researchers**

Beyond this, there were sharply divergent views about how academics should promote their ideas and to whom. Around a quarter of the academic interviewees articulated an aspiration to produce research that would be *directly* useful to policymakers. As the following extract illustrates, many of these interviewees hinted that they believed academics had a responsibility to produce this kind of work:

Senior academic: ‘I think it’s important for universities and for academic research generally… to make the links in with the Department [of Health]. […] I think… academics have got a responsibility to help… inform.’

The preference for this kind of role closely mirrors the role of research as idealised in New Labour policy statements and speeches (e.g. Blunkett, 2000; Cabinet Office,
1999). It was also the preferred role for academics articulated by many of the civil servants I interviewed. Yet despite this convergence, few interviewees who aspired to this way of working felt contemporary academic working environments actively supported this preference. For example:

Senior academic: ‘I think the incentives are… almost all in the opposite direction, to have as little to do with practical policymaking as possible… get on with your own research and impress your own peers. Certainly […] two or three years spent in government seems to do nothing for your career…’

Senior academic: ‘Several of us do try and [work at the interface of research and policy] but we do it… at risk to our own professional lives. Except, I don’t find it a risk really ‘cause I enjoy doing it so [laughs]. But… you don’t get promoted so much, […] your university isn’t quite so thrilled with you for doing that sort of work… as it is for… people who just write more papers or get more grants.’

Although both of the above interviewees said they felt academia was not supportive of their desire to produce policy relevant research and work closely with policymakers, both indicated that they had nevertheless been able to undertake these kinds of roles (and both were relatively successful in academic terms, having secured senior posts in research-orientated universities). This was a consistent trend; all of the interviewees who said they felt health inequalities researchers should be working closely with policymakers indicated that they had themselves been able to work in this manner. For some, this was achieved through holding official and/or unofficial
advisory positions. Others had contributed to policy inquiries, policy reviews or cross-party committees, whilst some merely said they had undertaken research that had been commissioned by policymakers. The data do not, therefore, suggest that academics felt completely unable to work with policymakers but they imply this kind of work was neither encouraged nor rewarded as much as interviewees who aspired to this kind of role felt it should be.

As might be expected, these interviewees were generally supportive of the increasing prioritisation of the policy impact of research in higher education policies. Most felt that this shift might aid academic engagement with policymakers or, at the very least, lead to better recognition for those undertaking this kind of academic work:

Senior academic: ‘I think if you could show some research actually resulted in a [policy] change, if you put that in the RAE [Research Assessment Exercise] submission, if there’s evidence of esteem or impact… I think it would, at the margins, be taken seriously.’

However, others indicated they felt such changes were largely rhetorical:

Senior academic: ‘The ESRC [Economic and Social Research Council] has made a lot of fuss about dissemination but… I still think, for most academics, it’s a sort of price they have to pay in order to get an ESRC grant.’

Interviewees in this group often defined themselves partially by contrasting their way of working with that of their less policy-orientated colleagues. Health inequalities researchers who were perceived to be politically motivated were singled
out for particular criticism by several interviewees on the basis that this implied their work was not ‘objective’. For example:

Academic: ‘[Blank - Professor] is a good researcher… very bright and very dedicated but the problem with [Blank], and I know [Blank] well, I’ve worked with him/her a number of times, [Blank] is a Marxist and s/he is hugely motivated by his/her political outlook… which can make it difficult because… I feel that [Blank’s] scientific analysis is very often coloured by his/her materialist politics so I don’t always agree with [Blank’s] interpretation of the evidence.’

The most common contrast that was put forward, however, was between policy-orientated academic work and traditional, ‘intellectual’ work.

(iii) Academics as ‘pure’ scientists, operating in ‘ivory towers’

Interviewees (in academia and elsewhere) who believed academics ought to be working more closely with policymakers often contrasted their preference against an image of academics as isolated and disengaged. For example:

Senior academic: ‘The idea of the academic… beavering away in sort of seclusion, to the exclusion of policymakers, I think is completely crazy.’

Senior academic (and policy advisor): ‘Over time, it becomes evident […] who are the people who will be… comfortable working with policy and more
useful to policymakers and who are the people who are much happier working in a purely academic environment.’

Such distinctions reflect Gibbons and colleagues’ (1994) distinction between Mode 1 and Mode 2 types of work. Yet, only one academic interviewee indicated that they had ever found the notion of a purely academic, Mode 1 type career in any way desirable, and even this individual reflected that they no longer felt it was desirable or viable:

Senior academic: ‘I was trained as an academic years ago, when you didn’t do this kind of thing [promoting work beyond academia] and if you did, it was actually considered rather vulgar… It was sort of thought that people who did this kind of thing were people who didn’t have much grey matter. Now I think that’s an arrogant attitude and we are paid by public taxes and we should actually, our work should be made into a useable form for public debate or anything else that is necessary for democratic processes… but I’m afraid I’m not very good at it.’

In summary, not a single interviewee suggested they believed that academics should undertake health inequalities research for purely intellectual/scientific purposes. So although this identity was referred to, no-one appeared to be living or aspiring to it. Rather, all interviewees felt that an important aspect of their job involved making their research accessible to others (which did not, of course, mean that everyone thought this was something that they were particularly skilled at, as the above extract illustrates). Yet, there was a significant division between interviewees who believed
this meant academics should work closely with policymakers (discussed above) and those, with longer-term aspirations of achieving significant policy shifts, who felt some separation from policymakers was essential.

(iv) Academics as advocates for social / political change

The political and moral commitment of health inequalities researchers to their chosen topic was immediately apparent in most interviews, with many academics explaining that they had been attracted to the field through a commitment to social justice and equality. For many, health inequalities appeared to represent the embodiment of broader societal injustices and were, therefore, a highly morally charged issue. For example:

Senior academic: ‘I think that health inequalities are […] the most fundamental abuse of human rights in the developed world. [I]f you imagine locking up a substantial proportion of your population for the last five or ten years of their life without any justification at all, well actually this is worse than that, it’s like executing them arbitrarily. […] And when people don’t know about it, in a sense it’s not a moral issue, but as we come to know about these differences and get a clear idea of how they could be remedied, if we then fail to act, it is morally culpable.’

Although the above interviewee was talking in general terms, it was clear that s/he felt his/her own working life was underpinned by a moral purpose. Indeed, for the majority of academic interviewees, their chosen field of research was framed as an
opportunity to tackle issues of personal, moral and/or political concern. For many, it was, as one interviewee put it, ‘not a job’ but a ‘vocation’.

Relating to this, there was a consensus that health inequalities academics had a duty to promote their work beyond academia. However, there was a significant divide between interviewees who interpreted this responsibility as meaning academics should work closely with policymakers (discussed above) and those who believed academics needed to maintain a distance from current policy agendas in order to focus on the ‘bigger picture’ and work towards much more significant policy change. For example:

Senior academic: ‘I just think it’s silly to be doing research which… relates to… the very short term policy agenda. There is so much more at stake than that. Our societies are changing beyond all recognition… and where we’re going, how we change, is just the most important thing and… we just have to take up the big issues and think about them…’

Mid-career academic: ‘It might seem slightly bizarre but I think… [there should be] some kind of detachment from… the policy agenda and… having independent research… taken as a long-term investment, rather than a short term solution to particular policy questions.’

The aspiration being described above, evident in over half of the interviews with academics, was to produce research that of significant social and political relevance but which was unlikely to be of immediate policy relevance because it challenges existing policy approaches. This fits with Weiss’ (1977) ‘enlightenment’ model of
the relationship between research and policy, in which the policy contribution of research is to gradually change actors’ perceptions and ways of thinking over long period, rather than to provide immediate policy solutions.

Just like their more policy-orientated colleagues, interviewees who aspired to this kind of role generally did not appear to feel that contemporary academic environments were supportive of this way of working. Of the interviewees who had been involved in health inequalities research since the 1970s and/or early 1980s, most suggested this was something that had changed during their time in academia. For example:

Senior academic: ‘I think there is a real… problem about where the headspace comes to… think critically in ways that don’t require empirical research. […] When I first got my lectureship […] there was time within the job to write, so that . . . it’s almost an intellectual space, that kind of thinking space; it was built into an academic post, into a lectureship. That doesn’t exist now.’

Senior academic: ‘There ought to be more deliberate understanding that they [academics] have both to… satisfy the people who… finance them… but also make room, very deliberately, for the novel and the critical. And it’s a much harder task in the present day than it… used to be.’

The belief it was becoming increasingly difficult to undertake ‘critical’ work within academia was linked (by both of the above interviewees and several others) to a perception (discussed earlier) that academic careers have become increasingly dependent on individuals’ ability to external research funds.
In contrast to their more policy-orientated colleagues, several interviewees in this group claimed that ‘policy relevant’, transferrable research was being actively encouraged in the current academic climate, particularly by research funders (including the main UK Research Councils). Indeed, one interviewee, who claimed s/he no desire to actively market her/his ideas to policy audiences, said s/he nevertheless felt required to in order to fulfil the requirements of the research council from whom s/he received funding. This is important because it suggests that recent changes within UK academic environments mean that even researchers who are not themselves orientated towards policy audiences may feel compelled to consider the factors shaping the credibility of ideas within policy audiences.

Indeed, most interviewees in this group were extremely wary of working closely with policymakers and several interviewees were extremely critical of researchers who they felt were too closely associated with policymakers. For example:

Academic: ‘Let’s problematise [Blank] who, as you know, is a Professor at [Blank], and a well-known researcher who supports the Blair line… and who has recently occupied [an advisory role within government]. And clearly when an academic becomes an official policy advisor, they rather lose their academic credibility, and also it perhaps calls into question the work that they’ve been doing… for a period before… they occupied that post.’

The above extract stands in stark opposition to the academic quoted on p11 of this article. Both interviewees referred to objectivity or autonomy and both suggested their preferred way of working was more compatible with academic autonomy. The contrast between these two quotations highlights what appeared to be a more
widespread tension within the health inequalities research community; what served to increase credibility amongst researchers who were sympathetic to one of these identities often seemed to actively damage credibility amongst researchers more sympathetic to the other (a tension which several interviewees directly referred to). This served to underline the division between the two groups.

Like their more policy-orientated colleagues, interviewees in this group clearly sought to forge career paths which enabled them to undertake the kind of work they aspired to, even though they perceived contemporary academic environments to be relatively unsupportive. However, there were fewer examples of individuals within this group who appeared to have been able to go some way to satisfactorily achieving this. In total, only five interviewees indicated that they felt they had created a space in which they could produce the kind of critical work they aspired to; of these, three were either close to retirement or recently retired (all of which had indicated they were no longer seeking research funding). The remaining two were extremely successful researchers with sophisticated quantitative skills, one of whom claimed that s/he sometimes deliberately over-stated the time it would take to undertake particular pieces of work in grant proposals, thereby creating protected time to undertake the kind of critical work s/he found it more difficult to obtain funding for.

Most other interviewees in this group indicated that their actual work as an academic was a long way from the politically active role to which they aspired. For many, this seemed partly due to a lack of clarity about precisely where they should be focusing their efforts to promote ideas (beyond academia) relating to the need to significant social and/or policy change. Interviewees in this group variously referred to efforts to work with community organisations, politicians, the public, charities, think tanks and mass media outlets (of which charities and mass media outlets appeared most
popular). However, no-one in this group appeared particularly satisfied with their efforts to promote their ideas beyond academia. Crucially, many interviewees indicated that the pressure they felt under to obtain research grants meant they simply did not have time for the kinds of activities they would have liked to engage with. For example:

Senior academic: ‘I would love to be more involved with politics - I just haven’t got the energy [laughs]. I used to be, when I was younger, but once I realised how hard it was going be to… remain in an academic career… I gave it all up because it just swallows your life, to just… keep it going. […] You always have to have at least three or four [grant] applications in at any one time [sighs] because the average hit rate is about twenty percent… so that’s just the way you do it. And you get to the stage where you no longer can remember what you were ever interested in because you’re just making applications for the sake of it. Now once you’ve got the money, then you’ve got to produce something, so you just go through the motions. And you think, ‘Jesus, it’s amazing to think I once was interested in all this, you know, once…”

Indeed, as the above extract illustrates, there were high levels of dissatisfaction and pessimism amongst this group, with several interviewees reporting that they were considering leaving academia in the UK (to move into other roles within the UK, to retire early or to move to academic posts overseas).

(v) Hybrid academic identities as responses to contemporary academic workplaces
So far four academic identities have been outlined but only the second and fourth were identities to which any interviewees aspired. As noted, interviewees tended to have strong preferences for one or the other of these identities. However, this did not necessarily mean that they felt able to live out these identities and interviewees who aspired to undertake politically critical but socially engaged work appeared to find it particularly difficult to equate their actual working life with their ideal academic identity. Several of these interviewees described trying to simultaneously position themselves as policy-relevant researchers and politically critical academics, in the belief that this would aid their ability to secure research funding. For example, some interviewees who clearly stated that they believed academics ought to maintain a distance from policymakers also described framing research grants in ways which they felt would be more appealing to policy audiences.

Importantly, the cyclical nature of academic work in which outputs (such as articles) influence credibility, which in turn plays a role in research funding success (see Latour and Woolgar, 1986), meant that the pressure to appear ‘policy relevant’ seemed to be felt by interviewees in relation to outputs as well as grant applications (at least where outputs were likely to be heard/viewed by policy or funding audiences). There were no cases in which interviewees reported that they had been involved in promoting ideas which they (and their research) did not support. Rather, several of the interviewees who indicated that they aspired to challenge accepted policy approaches to health inequalities also reported that they had deliberately imbued their messages to policymakers with a sense of vagueness, reducing the extent to which these ideas were likely to be interpreted as a threat to dominant policy discourses. For example:
Senior academic: ‘If you have poverty and adversity of that nature, nothing’s gonna save you. Now, they [policymakers] are not gonna like hear that. […] We did produce papers which were - how can I put it? We weren’t coming out and saying we were absolutely sure that [blank] causes ill-health and there’s no element of selection.’

Indeed, one academic, who also worked as a policy advisor, described completely setting aside his/her actual beliefs about the significant changes that s/he felt public health required when addressing civil servants, choosing instead to focus on ‘more practical things’. Another described adopting different ‘guises’ when addressing policy and academic audiences:

Senior academic: ‘When I was working at [blank] and they are actually funded through [a government department], I think… they would have looked at me and said, ‘how can you not have read what is appropriate to say?’ So I think the censoring is actually self-imposed. […] There’s an unwritten understanding that I won’t rock the boat when I’m writing in that guise. So… at an academic event, I feel I’m me, […] I can be much more pointed in the points I want to make…’

In other words, these academic interviewees described adopting hybrid academic identities, which enabled them to undertake (at least to some extent) the kind of work they aspired to, whilst maintaining sufficiently high credibility with policy and funding audiences in order to maintain a successful academic career. This approach to contemporary academic life was succinctly described by the following interviewee:
Senior academic: ‘Sometimes [academics today] have to devise answers which are much more sophisticated than they used to be in terms of appearing to satisfy governments or departments… and yet… deliberately serving a double purpose of beginning to understand the bigger picture as well.’

These accounts are reminiscent of Wedel’s (2009) notion of ‘flexians’; a powerful new ‘shadow elite’, who shift between operating as business consultants, mass media commentators, think tank staff and government advisors, employing flexible personas and messages to suit these different guises. Although few (if any) of the academics who were interviewed are likely to be influential enough to warrant being categorised as part of Wedel’s ‘shadow elite’, they nevertheless exhibited many of the ‘flexian’ traits that Wedel observes.

**Concluding Discussion**

This paper directly responds to Harris’ call for academics to ‘be clearer about the roles we want to take and be recognized for,’ (Harris, 2005, p. 430). Through an analysis of the subjective accounts of academics involved in health inequalities research in the UK, the paper identifies references to five conceptually distinct academic identities. This section briefly outlines each identity and reflects on academic interviewees’ descriptions of the interactions and conflicts between these various identities, before considering the relevance of these findings for broader debates about the changing environment of twenty-first century academia.

Virtually all interviewees said something to indicate that they viewed academia as a market in which academics had to ‘sell’ their ideas (particularly to research funders
but also to academic peers, policymakers and, less commonly, journalists. This finding reflects claims that university environments are becoming increasingly business-like (e.g. Wedlin, 2008). Overall, the notion of academics as marketers of ideas was an identity most interviewees appeared to accept as necessary, though for most interviewees it did not seem to be a desirable identity.

In contrast, there were two identities to which interviewees appeared to aspire and most interviewees expressed a clear preference for one or the other of these aspirational identities. Taking Weber’s (1949) notion of ‘ideal types’ as a means of exploring these two, contrasting identities (i.e. focusing, first, on the ideals to which interviewees aspired, rather than the complex realities they described living), these identities can be described as follows: (i) academics who produce research which directly addresses immediate policy concerns and who work collaboratively with policymakers to ensure that this research is timely and accessible; and (ii) academics who produce outputs that, by critically challenging dominant discourses and accepted policy paradigms, contribute to substantial, longer-term social and political shifts.

Based on interviewees’ descriptions, the first of these ideals, which closely mirrors Gibbons and colleagues’ (1994) description of ‘Mode 2’ (applied, problem-solving) knowledge, is termed a ‘policy facilitator’ identity. The second ‘ideal’ concurs with the notion of academia captured in the following quotation:

Since the days of Bologna [when the first university of the Western world was founded in 1088], the university has always been the clown to the crown. Like Shakespeare’s fools it has purposefully existed outside of authority. Like Lear’s fool, academic freedom and institutional autonomy gave it the freedom

Inspired by this description, this paper posits that this more politically-driven academic identity might usefully be termed a ‘Shakespearean fool’ type identity. The choice of the label ‘fool’ is not intended pejoratively; rather it is informed by the fool in Shakespeare’s play *King Lear*, who functions ‘to disturb with glimpses of the confounding truths that elide rational formulation’ (Knights, 1966, p. 98). These were, in other words, academics who aspired to be ‘intellectuals’ in Edward Said’s (1994) sense of the word; individuals who critically challenge, ‘what the powerful or conventional have to say, and what they do’ (Said 1994, p. 17).

Several of the interviewees who aspired to the ‘policy facilitator’ type role framed the distinction between their own preferences and that of their less policy-orientated colleagues as illustrative of Gibbons and colleagues’ (1994) distinction between Mode 1 and Mode 2 work. Yet, it was clear that those who expressed a preference for a ‘Shakespearean fool’ type academic identity were not disinterested in influencing policy or the world beyond academia. Indeed, not a single interviewee described themselves or their work in a way which suggested they fitted the notion of a ‘Mode 1’, traditional academic. In other words, the ‘pure, ivory tower’ intellectual appeared to be no more than a mythical identity (at least for contemporary UK health inequalities researchers) but remained in currency as a useful (if somewhat inaccurate) caricature for those who believed academics should be concentrating on aiding policymakers directly. The key distinction separating those who aspired to a ‘policy facilitator’ type role from those who aspired to ‘Shakespearean fool’ type roles was not between those pursuing applied research and those pursuing more
traditional academic work but rather between those who aspired to contribute to contemporary policy decisions and those who sought to achieve longer-term, more significant social or policy change. This suggests that the widely cited ‘Mode 1 / Mode 2’ dualism is overly simplistic. It might, instead, be more helpful to conceive of a continuum of different types of research, with research that focuses on addressing short-term, pre-defined policy problems at one end; abstract, purely intellectual work at the other; and research focusing on longer-term, more significant social and policy shifts somewhere in the middle.

Having considered the identities to which interviewees aspired, it is important to note that few interviewees felt contemporary university environments were supportive of their ideal identity and, consequently, few appeared to have been able to pursue careers that matched these aspirations. However, all of those who aspired to a ‘policy facilitator’ type role appeared to have been able to pursue this identity to some extent and, although many did not conceive of themselves as ‘strict academics’, most were successful by traditional academic standards (having senior, permanent academic posts in research-focused universities). Further, interviewees generally suggested that the growing interest in ‘research impact’ was likely to better enable ‘policy facilitator’ type roles.

In contrast, very few of the interviewees aspiring to ‘Shakespearean fool’ type roles appeared to have achieved a career that was satisfactorily close to their ideal identity. Indeed, many feared they were likely to be viewed as unhelpful, even irrational, by those working with current policy discourses and that this could damage their ability to obtain research funds and, hence, to maintain/advance their academic careers. This fear seemed to be heightened by a widespread belief that academic posts had become increasingly precarious. The combination of an acceptance that research-active
academics are dependent on an ability to successfully market ideas to research funders, a perception that funders were increasingly interested in the policy relevance of research, and some deeply-held moral and political beliefs about the need for substantial societal change to address health inequalities, led some who aspired to a ‘Shakespearan fool’ ideal to adopt a chameleon-like identity, which this paper terms ‘flexian’ (following Wedel, 2009).

‘Flexians’ were academics who described consciously adapting their performances for different audiences in ways which allowed them to present critical, challenging ideas to academic peers but to re-cast their ideas in less challenging or more practical ways when addressing policy audiences. In this sense, adopting ‘flexian’ style identities may enable some academics to simultaneously reinforce and resist pressures to produce (directly) policy relevant research. However, the findings also suggest that trying to simultaneously perform these different roles can be deeply problematic, particularly due to the obvious tension in the data relating to claims about academic autonomy (a feature of academic identity that consistently appears to be highly valued; see, for example, Henkel, 2005). Several of those aspiring to a ‘policy facilitator’ ideal claimed that politically-motivated colleagues were too politically-biased to be objective, whilst, in contrast, some of those who aspired to a ‘Shakespearan fool’ identity claimed it was academics’ proximity to policymakers that called into question the autonomy of academic work. This division, which could be interpreted as an example of the ‘boundary work’ that Gieryn (1999) describes scientists undertaking, meant ‘flexian’ identities relied on individuals’ ability to maintain sufficient credibility amongst audiences with sharply contrasting views. It was clear from the accounts of interviewees who had adopted flexian identities that this was not only highly demanding but also, ultimately, often unsatisfying. For
working to maintain a sufficient level of credibility with policymakers, academics adopting ‘flexian’ identities were necessarily limiting the strength of their policy messages when addressing key audiences.

Further research is required to explore whether the findings in this paper have any relevance beyond the field of health inequalities in the UK but, at the very least, the paper provides support for claims that changing academic contexts are considerably shaping the role that academics feel able to play in society (e.g. Marginson and Considine, 2005). It also suggests that the dualism between ‘Mode 1’ and ‘Mode 2’ types of academic work can be misleadingly simple and that assessments of policy relevance and research impact ought to accommodate research seeking to make long-term (as well as immediate) contributions to policy.

References:


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