

## Academic Assessment in the Carceral Society

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The performance of university teachers is increasingly subjected to scrutiny and assessment. This contrasts with the historical concepts of the “ivory tower” and “academic freedom”. Academics are now exposed to forces that seek to regulate, control, curtail, define or shape their productivity. In this paper, we consider this assessment culture, in particular the evaluation of research performance, in the context of Foucault's concept of the “carceral” society in which “docile bodies” are under constant surveillance to ensure continuous efficient productivity. The negative impact that formal assessment can have on academics' teaching, research and relationship with the wider community is explored. These impacts may be particularly harmful within a vocational subject such as pharmacy, requiring as it does a mix of knowledge and skills originating in a wide range of scientific, social scientific and practice-related disciplines.

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### INTRODUCTION

The philosopher Jeremy Bentham (1748–1832) detailed architectural plans for a model prison

structure—the panopticon. The panopticon comprised individual cells, arranged one on top of another, with barred windows front and back. These cells formed a circular building at the centre of which was an elevated tower from where a single warder could survey the entire prison population, each individual silhouetted against the cells' windows. The inmates, however, could not know at any point in time whether or not they were under observation as the warder observed them from behind wooden blinds. This model of prison architecture was particularly notable as a highly efficient means for continuously assessing and monitoring the behaviour of its inmates. Continually exposed to the warder's observations (actual or potential), the prisoners became, in effect, their own warders—self-regulating their behaviour at all times in the knowledge that their every action could be under scrutiny, and punishment would rapidly follow any transgression of the prison's rules and regulations.

This use of architecture to control behaviour captured the imagination of the celebrated French philosopher and historian Michel Foucault

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(1926–1984), who in a series of path-breaking analyses of power in capitalist society developed Bentham's panopticon to explain how its principles for self-regulatory behaviour, no longer confined just to managing the prison population, have become insinuated into contemporary society. With the onset of industrialised mechanised production processes during the late 18<sup>th</sup> century, the panopticon's principles for self-regulation were taken up and adapted for application in other key institutions, to fabricate what Foucault terms the "carceral society"—a society of "docile bodies" under constant astute forms of surveillance to ensure the continual production of goods and services. Such institutions achieved regulatory control over individuals by subtly subjecting them to regular, ongoing assessment designed to regulate individual behaviour and performance in accordance with the aims of the institutions. A key feature of this process involves what Foucault calls "agents of normalisation"—individuals or institutions, responsible for continually exercising judgments on the way we behave, think and act—reinforcing an appropriate behaviour or way of thinking.

In this fabricated culture, the imperative to offer ourselves up to continual regulatory assessment from an ever expanding range of institutions becomes blithely accepted. Historically, the armed forces have provided a particularly stark example of an "agent of normalisation". Raw recruits would be transformed into soldiers by ensuring that they succeeded in the regular assessments required in order to "pass out". Social workers too, Foucault argues, operate as "agents of normalisation", in that they instrumentally regulate our behaviour by assessing our competencies as social individuals by, for example, judging our suitability to adopt a child, or look after our own children. That is, judging our competencies as "normal" citizens. The controlling features of panopticism are also identifiable in the health institutions of the 19<sup>th</sup> century. Here patients

would be required to submit themselves for surveillance and assessment by health professionals who would examine them for evidence of underlying pathology.

Whilst in the past, the myriad, pervasive and inescapable forms of assessment, whether in hospitals, the army, the family, or schools, were largely covert and subtle, they have in some areas become increasingly overt in recent years, with both positive and negative consequences for controlling the population. On the one hand, the "carceral society", with its "docile bodies" whose activities are continually subjected to assessment, is generating some resistance. For instance, the conceptual development of patients as health care consumers empowers them to resist medical surveillance by, for example, deciding on the basis of risk assessment not to make themselves available to conventional medical practitioners. The increasing number of mothers choosing not to immunise their children against childhood diseases is a case in point. On the other hand, technological advances mean that general health care now seeks to monitor not only the ill, but also the well population. Health professions now possess a mandate to examine whole subsections of the population under the pretext of preventing illness. The Human Genome project will potentially provide a stricture for health professionals to screen the entire population, including the screeners themselves, on the grounds that we are all at potential risk of illness, at the genetic level at least. Thus, the very agents of normalisation themselves become subject to surveillance.

Nowhere is the imperative of individual assessment in contemporary culture more transparent than in formal education. In our schools and universities, all who pass through are subjected to continual and unrelenting assessment of personal, social and scholastic development. Every student/pupil undergoes a process designed to reinforce the principle of individual performance through continual assessment and

regular examination. So too, are teachers and lecturers themselves increasingly experiencing individual scrutiny and "performance assessment". This process, especially evident in higher education, stands in stark contrast to the historical concept of the "ivory tower", where incumbents are not subject to external influences, and with the associated connotation of "academic freedom". Scholars, previously unfettered by surveillance, are nowadays increasingly subjected to forces which seek to regulate, control, curtail, define or shape their activities.

Contemporarily, in the UK these forces of surveillance take the form of the Subject Review panels of the Quality Assessment Agency (Teaching Quality), the Research Assessment Exercise (RAE) and the Transparency Review Exercise (which seeks accountability for public expenditure). While assessment and accountability *per se* are to be welcomed, and are doubtless valuable in enhancing efficiency, they may also stifle creativity and innovation by encouraging academics to tailor their activities to meet the exigencies of the assessment exercises. Within such a system, the successful academics (and institutions) will self-impose constraints on their academic "freedom" in order to comply with the criteria and performance indicators of a particular assessment system.

Although both the teaching and research performance of academics may be evaluated, the assessment of research activity is particularly well established in universities, internationally. The UK's formal research assessment procedures were instituted in the late 1980s and take place every five years. Since performance in this exercise has direct funding implications for institutions, it has become a dominant force in contemporary academic life. Thus, perversely, the very system which sought to monitor performance now virtually defines it. We will now turn to discuss how this carceral assessment culture, in particular research assessment, impacts on academic pharmacy.

## THE ASSESSMENT CULTURE HARMS TEACHING

Unlike research, the quality of teaching currently carries no direct significance for funding. The RAE has funding implications (from central government), thus institutions, managers and individuals must strive to ensure that the requisite numbers of "high quality" research publications are produced, within a defined time period, by each member of staff. Whereas a "good" researcher may be effectively excused from teaching, a good teacher cannot be excused from research activity, leading to a research-teacher tension within both institutions and individuals.

The place of teaching in academic life, the traditional *raison d'être* of university teachers, has thus become inverted, with research taking precedence, as entry to academia discounts higher education teaching as a vocation. This begs the question: "can an academic nowadays be both a committed researcher and teacher?" Most often, a self-selection process is generated i.e. those who do not "do" the research are "encumbered" with teaching. Since the RAE and universities' promotion procedures virtually decree that all academics should have a quantifiable research output, the "full-time" teacher within our universities is anachronistic. To make time available for research, and in the face of ever increasing numbers of students entering higher education, teaching has been subjected to the forces of rationalisation, resulting in, for instance, the proliferation of computer-assisted, web-based and distance learning, computer-marked MCQs, standardised textbooks, and an increased emphasis on self-directed learning. Such rationalised approaches to teaching have the effect of enabling greater numbers of students to be taught whilst increasing the academics' available time for research.

Research funding is increasingly targeted to non-applied sciences and specialist research,

with, at present, particular emphasis on biotechnology. Consequently, "generalists" with wide research interests, or individuals who are interested in both teaching and research, are increasingly rare, as institutions orient themselves and their research agendas best to obtain research funding and high marks in the RAE. Traditionally, the strength of the pharmacy degree has been its broad base—drawing from a range of scientific and more recently social scientific disciplines, to produce numerate, articulate individuals who can function as both scientists and health professionals. A very "specialist" teaching staff serves to undermine this strength. The co-existence of research and teaching within universities is clearly advantageous, allowing state of the art, pertinent science to "feed" into and inform undergraduate teaching. However, if the research which might "feed" into practice-based teaching becomes too specialised, then its perceived importance and relevance, imparted by specialist researchers, is largely lost to students studying for a vocational degree. As the full-time academic staff focus their activities on specialist research, the "professional" elements of the pharmacy degree are increasingly taught by practitioner-teachers, who most often operate outside the formal management structures of schools of pharmacy, and whose research is not directly included in research assessment. Not surprisingly, then, the research-based science and the taught pharmacy practice elements of degree programmes are evolving independently of one another.

The increasing importance of research rather than teaching activity also has broader effects on teaching. Whereas previously, the production of textbooks and other teaching materials were seen as a natural activity for an academic, the expenditure of time necessary for their production must now be weighed against how that time might be "better" spent. This was recently brought into sharp relief for us when we approached potential contributors for an undergraduate textbook we were editing. A number of

those individuals either refused or contributed reluctantly, because the research-dominated culture operating within their academic institutions meant that such activity was perceived as all but worthless.

### THE ASSESSMENT CULTURE HARMS RESEARCH

Published research follows the conservative academic and scientific model, being mainly targeted at a small number of like-minded peers. Ritzer (1998) has observed that the reward structure within academia is set up to honour such scientific work with recognition, stature, grant money, promotion and prizes. Hence, most academics will attempt to orient themselves to produce such work. Yet its publication in the most prestigious, specialist journals often involves small increments of knowledge and not the big paradigm shifts that are more likely to interest a wide audience.

In both the immediately previous and forthcoming RAE, the "quality" of individuals' research is assessed by reference to four selected publications (in addition to other materials provided by departments). Thus academics with research data for publication are increasingly driven to submit it to a journal with a high "impact factor", the established measure of a journal's "worth". With impact factors used as the measure of the quality of a piece of published research, the quality rating is based on the status of the journal rather than the quality of the paper itself. Impact factors are based on citation indices which reflect how often papers published in a journal are cited. Paradoxically, this may be inversely related to the quality of a piece of work, since a paper may be cited many times because it is fundamentally flawed.

The "publish or perish" pressures within universities encourages an emphasis on quantity, potentially at the expense of quality. This may result in a rush to publish work before it is fully

developed, publication of the same idea or finding on several occasions or publication of two short rather than one fuller length paper. Attempts to assess research are ultimately concerned with cost-efficiency, and in truth, "quantity" is generally more important than quality, and an individual's research effort is "assessed" on the basis of quantity in addition to the perceived "quality" of its place of publication. The true value of research, such as its ability to change attitudes, opinions, practice or policy is missed and is unquantifiable. Indeed, as has been pointed out, it is impossible to quantify the quality of an idea, theory or research finding (Ritzer, 2000).

#### THE ASSESSMENT CULTURE HARMS PHARMACY AND THE WIDER COMMUNITY

When we started out as lecturers, the primary criterion for choosing a journal in which to publish our research findings was the level of congruence between our research and the journal's readership. This is no longer viable. First, the need for academics to publish in high impact, often specialist journals, results in the establishment of an invidious pecking order of journals, with journals lacking impact factors or those with low impact factors firmly positioned at the bottom of that list (Taylor and Harding, 1997). Publication in such journals, which include the widely read "trade mags", such as those intended for practising pharmacists, or new journals such as this, which by definition cannot have an impact factor, may therefore "seriously damage your career prospects". Second, the traditional boundaries between long-established disciplines are breaking down. The proliferation of multi-disciplinary journals in health services research reflect this, and it is appropriate that research into pharmacists' activities is represented in these journals, so that pharmacists do not appear constantly to

be in the navel gaze. However, specialist or multi-disciplinary journals are often inaccessible to the practitioners who would be interested in, or might use, that research.

The constraints of research-oriented academic scholarship, the jargon, the elaborate statistics etc, tend to produce a style of work that does not lend itself to appropriate modification when aiming to reach a wider audience. Likewise, the style of writing prized by the most prestigious journals is one that is not attractive or accessible to a wider, general readership (Ritzer, 1998). Research-focussed academics will not be schooled, or inclined, to disseminate their findings and ideas to a wider audience, whilst those who do seek to address a broader audience are labelled "popularisers" and are not considered "serious" scientists or academics. Thus, the ability and inclination to bridge the divide between research and practice is being lost.

#### CAN THE CARCERAL CULTURE BE RESISTED?

The importance of assessment is undeniable in a rational, modern technologically fuelled society. However, as the sociologist Max Weber (1864–1920) pointed out, when rational processes become an end in themselves, they become irrational. This is evident in the current zealous pursuit of assessment in academia *per se*, and academic pharmacy in particular. Procedures ostensibly designed to reinforce the integrity of academia through quality assurance of its products—teaching and research—have systematically undermined the cultural ethos of academia. In effect, the assessment procedures, with their particular emphasis on research, have resulted in "cloned academics"—young, research-oriented, dismissive of teaching and teachers, forever in pursuit of grant money as an end in itself and seeking to publish extensively in the "right" journals. Such individuals are essentially conservative in nature, often explor-

ing and exploiting the predictable. In effect, they have become quintessential docile bodies, readily accepting the imperative of being assessed. However, such inflexible assessment procedures are not sustainable if the symbiotic relationship between scholarship and teaching is to thrive. If the published research in pharmaceutical science is of such a specialised nature that it no longer feeds directly into teaching, the corpus of teaching defining the training of pharmacists will gradually atrophy and eventually be whittled down to technical rather than academic learning. Pharmacy is a profession seeking to redefine itself, and base its practices on the best available research evidence. If academics within schools of pharmacy are not prepared to publish their research findings, ideas and opinions in the appropriate, rather than the right journals, accessible evidence upon which current and future practice should be based is inaccessible to those who most need it.

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**Note:** The opinions expressed in this paper are those of the authors, not their respective institutions.