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The influences of networks and weak ties on students by contributors to the MD program

Iain Robbé, Division of Community Health and Humanities

Purpose/Background: Granovetter's concepts (1973, 1983) of network theory and weak ties were used to analyse the activities of faculty as regards the CanMEDS roles and social accountability in the MD program. During the fall of 2013, information was collected for an application to the ASPIRE project for the recognition of international excellence in medical education in relation to social accountability by the Faculty of Medicine. The key issue for MD students in terms of social accountability is their understanding of the importance of engagement with their population to address the priority health needs of patients and communities. This engagement includes all seven CanMEDS roles. Based on pilot work in 2012/2013, it was hypothesised that networks of weak ties between faculty and students could influence these roles as regards social accountability. **Objective:** To analyse contributions to the MD program for their influences on the CanMEDS roles regarding social accountability. **Methods:** Twenty-five (25) faculty were purposively selected on the advice of the Dean's Office because of their contributions to the MD program. Responses came from 11 individuals through key informant interviews and from 13 individuals through email correspondence. One (1) person declined to participate. Data from the interviews and correspondence were analysed using thematic content analysis based on Granovetter's conceptualisations, the ASPIRE criteria, and the CanMEDS roles. **Results:** Positive influences: engagement in community research, partnerships for health improvement, knowledge translation. negative influences: difficulties engaging representatives in the population, collaborating with other health professionals, managing change in the context of local politics, experiencing career risks through health activism, reduced career status through family medicine practice. **Conclusions:** Consistent with Granovetter's concepts, faculty have weak ties to the students and powerful influences. For social accountability, these influences reinforced the roles of medical expert, professional, and scholar. They undermined the CanMEDS roles of collaborator, communicator, health advocate, and manager. Faculty contributing to the MD program need development through postgraduate and continuing professional education to improve their influences, which are often subtle (Kay, 2010), undiscussed and undisputed (Tett, 2012), and a significant part of the hidden curriculum (Hafferty, 1994). Social accountability teaching suffers particularly from negative influences (Beagan, 2003).