‘Just a GP’: what messages are undergraduate medical students’ learning about general practice?

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Please visit:
https://akoaotearoa.ac.nz/discourses-of-general-practice
Aim: To examine influences on medical student vocation choice in general practice by investigating prevalent discourses within medical education.
Method

Participants

Data Collection
When data saturation was reached there were 20 interviews conducted for second year students and 20 for trainee interns.

Analysis
Elements of a general inductive approach were used (Thomas, 2006) combined with a Foucauldian discourse analysis as described by Willig (2008) and Carabine (2001). Categories and themes were derived from the interview transcripts.
Theoretical Framework

Discourse

‘Discourse’ is commonly thought of as a linguistic consideration or concept, meaning passages of connected writing or speech.

Michel Foucault (1926-1984) used the term discourse to refer to:

• The production of knowledge through language.
• It defines and produces the objects of our knowledge.
• Is about language and practice, discourse influences how ideas are put into practice – uniting language and practice.

“the way language is structured determines the way that experience and consciousness are structured” (Burr, 2003 p. 48).
Theoretical Framework

A discourse of General Practice may include (adapted from Hall, 2001):

• The rules that deem what is ‘sayable’ or ‘thinkable’ about General Practice, (i.e. certain ways of talking about General Practice and being a general practitioner which includes excluding other ways of talking).

• The practices within institutions that deal with General Practice and General Practitioners (e.g. teaching general practice, or other specialists that interact with general practitioners in a working environment).
Theoretical Framework

The hidden curriculum:

- Wilson and Cunningham (2013) suggest that frequently, medical students are not formally taught about the role of the general practitioner. Therefore, what students do learn about being a general practitioner and general practice is from less formal learning.

- I suggest that students learn about being a general practitioner and general practice through the hidden curriculum or

“the undeclared non-explicit elements of a teaching and learning programme and its setting which students are exposed to and pick-up” (Smith-Han, 2013, p.22).
The specialty of general practice
Student: She [a GP] asked what I was doing and stuff – she tried to talk me out of it from being a GP anyway.

Kelby: What were her comments when you told her you were doing medicine?

Student: She just said it’s really hard on women, and like she’s got kids and she works part-time as a GP. And she’s – but she did obstetrics I think first and then became a GP. So I guess she was saying **that if you want to specialise** it’s pretty hard to have a family. (SY)
“A lot of people say ‘oh, are you going to specialise or are you going to just be a GP?’” (TI)

“It’s often sort of the registrars and the house surgeons that tend to be a little bit like ‘oh GPs’, you know, it’s not really a specialty” (TI)
Specialisation

What makes a specialty a specialty?

Weisz (2003) in writing about medical specialisation in the nineteenth century he illustrated that the emergence and development of specialisation in medicine was associated with five areas:

- The advancement of medical knowledge (via conducting research)
- The mastering of a particular area of knowledge
- Improving your skills as a physician
- Viewed as a prestigious position
- Viewed as having the most advanced medical knowledge
Specialisation

Advancement of medical knowledge - Conducting research

“I think a lot of people are very academic, and there is a lot of academia, research involve in it [surgery] as well. So, it’s trying to find new things, try new stuff. Generally I find that most of the surgeons I have worked with are either doing research or have done research or have that kind of air, whereas in general practice, I don’t know if there is, but it just doesn’t seem that obvious.” (TI)
Specialisation

The mastering of a particular area of knowledge

“Someone who is comfortable with perhaps having to learn a lot of things which means at times they perhaps don’t know things in such a good detail, and I think that takes a bit of – I guess, a bit of courage in some ways because to be able to cope with situations where you know you are not going to know everything about what you are dealing with. You have to in some ways accept that there will be situations where because you are covering such a wide range of things you don’t know things in so much depth, so you need to accept that there will be times where things are beyond your understanding.” (TI)
Specialisation

Viewed as a prestigious position

“I guess the GP often gets talked about as something - well, not really the lazy option, but yeah, he didn’t really want to put in any effort to do any specialty.” (SY)

“...you know, seems to be all over the place, and even in general practice themselves, you know, it’s ‘just a GP', that’s what it feels like.” (SY)
Summary

Medical students in this study did not view general practice as a specialty in its own right.

This research illustrates that the discourses that construct general practice and the role of the general practitioner, at the same time…

do not construct the specialisation of general practice, even though the professional bodies associated with general practice declare the discipline as a specialty.
Summary

So what?

Specialisation in medicine conveys many facets that medical students pursue during undergraduate training and also beyond (e.g. a mastery of advanced knowledge and skills).
References


