Challenges to Medical Student Interest in Community Medicine:
Results of Pan-Canadian focus groups

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In association with the
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The need for more CM specialists…

"On multiple levels, be it staffing for core public health functions or at the interface of clinical and public health activities, there is an **acute shortage of highly qualified personnel**."

-David Naylor, "Learning from SARS: Renewal of Public Health in Canada

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What do Community Medicine specialists do?

Community Medicine is that branch of medicine that measures the health needs of populations and develops strategies for improving health and well-being, through health promotion, disease prevention, health protection and public policy development.

Royal College of Physicians and Surgeons of Canada, http://rcpsc.medical.org

Purpose of study

To understand the perceptions and attitudes of medical students towards Community Medicine with the goal of identifying and coordinating needed improvements in education to improve literacy in public health and potentially increase recruitment into CM.

"If they are the PH officer they carry a badge and do lots of press conferences. Otherwise looking at a lot of numbers and determining trends, coming up with new policy and whatever else they can think to do (attend conferences?)"

Methods

- Five focus groups were conducted, with medical students from UBC, Winnipeg, Sherbrooke, McMaster and U of T, using computer-based response entry followed by discussion.
- 57 students in total; 10-12/location

What did medical students say?

1) Community Medicine is not seen as “real” medicine
2) Public health curriculum needs improvement
3) There are not enough role models

Medical students struggle to understand public health within the context of "real" medicine

The majority of students enter medical school to do clinical work

- "…I think [CM] is perceived as sort of wishy-washy, because of the not seeing patients and the meetings and conferences thing."
- "I am aware of only a few situations in which public health had a major influence on patient health. It's very technical and not very medical."
- "A MD degree does not seem to be required to work in community health….all the years spent studying medicine are not totally useful in that profession, so they are consequently wasted."

Community Medicine is not perceived to be an "exclusive" specialty

Not exclusive within medicine:

- "If I went into pediatrics and was interested in childhood obesity I could always pursue CM type projects, but if I did a residency in CM, I would not be able to practice pediatrics."

Not exclusive within society:

- "My peers feel overwhelmed: CM addresses topics which are beyond their control (SES, income, education)… effecting change through CM is a long and arduous process, therefore it is better to focus efforts on more immediate goals such as treating the ill."

Students are disillusioned, disengaged and disappointed with their public health education

- "PH gets very little good press in med school…some "SPin" and Snout" stuff, but after that, not much is said…most people don't really like it, are not interested in it, and pay very little attention to it"

In their curriculum, students do not emulate what CM specialists do

- " You go to an elementary school to observe the "health status of students" at school, which is fluffy and probably not what CM specialists do. It's unclear how this relates to you and what you're supposed to do about what you see there."

Delivery of public health education is unsatisfactory

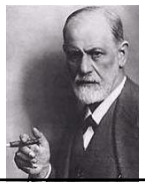
• "The lecture and discussion was so boring … all the interesting stuff was presented in such a way that it obscured the interesting"

• "How about spending as much time in smoking cessation clinics as we spend managing COPD?"

"STOP just defining concepts and start showing students HOW public health approaches are really applied!!"

Lack of Role models

- "CM is more intangible than other specialties and we don't get any exposure to CM practitioners. We never see how they matter to/interact with other specialties."
- "[CM] professors are…rarely dynamic and inspirational role models."
- "Attendings don't give you any PH experience… they don't ever target issues from a population health perspective."



Positive aspects of CM

- "Quite an honour to play a role at the societal level"
- "I feel that the skills obtained in a CM training program are more valuable and will allow one to contribute more effectively on an international scale. Most international work now, to have a significant impact, takes place on a larger scale in terms of looking at populations and infrastructure, rather than at helping solve short term, individual problems."
- "Community experiences are good because you actually see the barriers that people need to overcome and what people are trying to change."

Recruitment into Community Medicine

- Of all medical students who participated in the CaRMS residency match in 2006, only 0.9% of students ranked Community Medicine as their first-choice discipline.
- 17 spots across Canada available this year
- Two spots were left unmatched in the 1st iteration and filled in the 2nd iteration

In Comparison….

Specialty	% 1st Choice Discipline
Family Medicine	31.7
Internal Medicine	13.9
Radiology	4.0
Dermatology	1.4
Radiation Oncology	1.4
Community Medicine	0.9
Lab Medicine	0.6

Total number of applicants: 1936

CaRMS 2006 match. Excerpt from Table 10 - Discipline Choices of Canadian Applicants 2006 Match First Iteration
http://www.carms.ca/jsp/main.jsp?path=../content/statistics/report/re_2006#table10

Conclusion

- Medical students feel that public health is poorly covered in their current curricula.
- Greater connections to clinical (“real”) medicine are needed as well as experiential learning through “hands-on” public health activities
- The lack of understanding and exposure to the roles of CM specialists has strongly contributed to poor recruitment into Community Medicine.

Next Steps…

- Recommendations for improvements in curriculum and recruitment strategies are in development
- ? start a popular television show featuring Community Medicine specialists called “PHAC”…

In summary….

"It's hard to be an advocate for an area about which some people are so cynical. You feel like you need to constantly justify the importance of public health work, whereas other specialties don't feel the need to do so."

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