

FROM THE LITERATURE

In the News

An opinion

Research in Medical Education

Although not the most recent issue, I would like to draw your attention to the October 2004 issue of *Academic Medicine* (2004:79(10)) that appears in conjunction with the proceedings of the 43rd annual conference on Research in Medical Education, which took place in Boston, MA, USA, on 7–10 November 2004.

The October issue is entirely devoted to Medical Education Research. It carries seven articles on issues facing the Medical Education Research Community as well as eight case studies of productive medical education research programs. This issue should not be missed by anyone interested in conducting this type of research.

Academic Medicine is the Journal of the Association of American Medical Colleges, and consequently some of the articles are mainly relevant for the USA. This is for example the case in Wartman's contribution "Revisiting the idea of a national center for health professions education research" and for Carline's "Funding in medical education research: opportunities and issues". However, most contributions are relevant for researchers all over the world.

Wartman reveals that in the period 1994–2003, 24,028 articles have appeared about medical education in nine (somewhat arbitrarily chosen) journals, reaching a readership of over 600,000.

Dauphinee and Wood-Dauphinee address the need for evidence in "Medical education: the development of best evidence medical education as an opportunity to inform, guide and sustain medical education research". They conclude that very few studies actually meet the current standards for evidence due to the great difficulty in conducting methodologically rigorous studies in the complex interaction called education. Shea, Arnold and Mann ("A RIME perspective on the quality and relevance of current and future medical education research") argue that a general framework is needed to integrate future educational research and to push the field towards new knowledge. Regehr continues along these lines when he describes the current "trends in medical education" after a thematic review of the literature in four key journals since 2000. The areas he describes are: curriculum and teaching issues; skills and attitudes relevant to the structure of the profession; individual characteristics of students, and the evaluation of students and residents. He also states

that programmatic lines of research are necessary to build knowledge and understanding of the domain. In “Understanding the debate on medical education research: a sociological perspective”, Albert suggests that we could look into research conducted by other professional groups than educators and learn from the way these other fields address common issues as “should research be aimed at responding to practical needs or should research add to theory”. Finally, Chen, Bauchner and Burstin seem to have chosen in this debate, in their paper “A call for outcomes research in medical education” claiming that it should be multidisciplinary, broad based and focused on patient-centered outcomes.

In the next part eight case studies are given of productive medical education research groups: Dartmouth Medical School, Johns Hopkins University Medical School, University of California San Francisco School of Medicine, University of Kentucky School of Medicine, Faculty of Medicine University of Maastricht, University of Michigan Medical School, University of Toronto Donald R. Wilson center for Research in Education, and the University of Washington School of Medicine. The centers have been chosen after a review of the literature of the past five years. The lessons to be learned from these descriptions are too many to be quoted here. In my view the most general and still important is that the quality of the research environment is crucial for the productivity of a group. An individual or a small group in isolation does not seem to be able to develop a steady flow of new knowledge, however inspiring a brilliant leading researcher at such an institution might be. In my view this is one of the most important lessons: good research flowers on the ground of collaboration, among faculty and between schools. The field is complex enough without competition between those who study it. Joint efforts to come closer to new knowledge is strongly called for.

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References

- ALBERT, M. (2004). Understanding the Debate on Medical Education Research: A Sociological Perspective. *Academic Medicine*, 79(10), 948–954.
- CARLINE, J.D. (2004). Funding Medical Education Research: Opportunities and Issues. *Academic Medicine*, 79(10), 918–924.
- CHEN, F.M., BAUCHNER, H. & BURSTIN, H. (2004). A Call for Outcomes Research in Medical Education. *Academic Medicine*, 79(10), 955–960.
- DAUPHINEE, W.D. & WOOD-DAUPHINEE, S. (2004). The Need for Evidence in Medical Education: The Development of Best Evidence Medical Education as an Opportunity to Inform, Guide, and Sustain Medical Education Research. *Academic Medicine*, 79(10), 925–930.

- REGEHR, G. (2004). Trends in Medical Education Research. *Academic Medicine*, 79(10), 939–947.
- SHEA, J.A., ARNOLD, L. & MANN, K.V. (2004). A RIME Perspective on the Quality and Relevance of Current and Future Medical Education Research. *Academic Medicine*, 79(10), 931–938.
- WARTMAN, S.A. (2004). Revisiting the Idea of a National Center for Health Professions Education Research. *Academic Medicine*, 79(10), 910–917.