



# Who has the right to speak for the public's health?

## Negotiating legitimacy and representation in a mandatory ethnographic project in a medical school curriculum

Wednesday 24 April 3pm – 4pm

### Speaker

**A/Professor Peter Nugus**

McGill University, Montreal, Canada



### Location

**Larry Saha Room**

Haydon-Allen Building #22, Room 2175,  
University Avenue, ANU

This lecture is free and open to the public

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Social scientific research on medical education, particularly from a sociological perspective, has grown considerably in the last two decades, given the insights it is seen to offer on professional socialization generally. Despite posing important questions about the legitimacy and representation relating to decisions regarding the public's health, medical education has attracted less research attention among political scientists and theorists. The idea of deliberative democracy allows us to contemplate the possibility that one's interests can be represented even indirectly, such as through representation. Despite reforms, formal medical education remains a fundamental structure for reinforcing medicine's claim to autonomy, exclusivity and discretion on account of the value to society of its specialized and uncodifiable knowledge. Little research on medical education has focused on situated negotiation over the interests, priorities, power and legitimacy of different voices in shaping the content of medical education. This seminar considers mixed-method data on overlapping and conflicting student, teacher and institutional views on and responses to the introduction and journey of a mandatory ethnographic project in an undergraduate medical program in Canada. Responses reflect students' desire to learn "real medicine"; institutional value placed on student perceptions; and teacher perspectives on the role of medicine in society. The seminar outlines the patterns and power differences in attempts by various actors to secure the capital to legitimate their voices. Appeals to the need of society were no match for the legitimacy afforded student and faculty perceptions of the primacy of "bio-medicine" in the medical curriculum. This research contributes to how the idea of deliberation can aid the understanding social institutions in complex societies. The findings might also guide understanding of the way social fields operate in professional education programs, in complex, specialized systems, and where normative rationales for legitimacy are ambiguous. In the case of health care, it is questionable whether current individualistic reforms to medical education, such as teaching professionalism and promoting medical humanities, are sufficient to represent the health care interests of the populations that pay for medical education systems.

**Peter Nugus** (MAHons, MEd, PhD) is a sociologist and ethnographer, Acting Director of the McGill University Practice-based Research Network (PBRN), Assistant Professor in the Department of Family Medicine and Research Scientist in the Institute of Health Sciences Education at McGill University, Montreal, Canada. After graduating with a PhD from UNSW, Peter undertook post-doctoral fellowships at UNSW, the Netherlands Institute for Health Services Research, and in the Sociology Departments of UCLA and Columbia University, the latter two on Endeavour and Fulbright fellowships, respectively. Peter's ethnographic and participatory research in emergency departments, health professions education, and various hospital and community settings, in various countries, and teaching, has focused on workplace and organizational learning, care coordination, culture and identity in complex organizations, and translation and mobilization of knowledge. Peter's first-authored articles have appeared in *Social Science & Medicine*, *Sociology of Health & Illness*, the *British Medical Journal*, *Journal of Sociology* and the *Australian Journal of Political Science*, among others. His research is currently supported by grants from the Social Sciences and Humanities Research Council of Canada (SSHRC), the Canadian Institutes of Health Research (CIHR), and the Fonds de Recherche du Québec – Santé (FRQ-S).

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