

THE IMPORTANCE OF CONTEXT IN UNDERSTANDING PROFESSIONALISM

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“...professionalism has no meaningful existence independent of the interactions that give it form and meaning. There is great folly in thinking otherwise.”

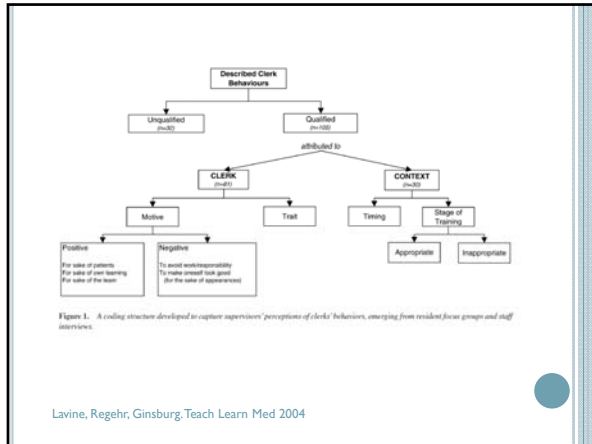
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Fred Hafferty, 2008

- OBJECTIVES
- What do I mean by context?
 - Why is it important to professionalism?
 - What sorts of contexts exist?
 - Discuss!

- CONTEXT, CONFLICT, RESOLUTION (GINSBURG, REGEHR ET AL, 2000)
- First wrote about context as a missing element
 - Evaluations gave no consideration to the *setting* of the behaviour and *external factors* involved
 - Examples from the literature on deception
 - Internal medicine residents' willingness to lie depends on situation (Green et al, 2000)
 - 87% of practicing physicians would use deception in some cases (Novack et al, 1989)

- RELATIONSHIP BETWEEN ATTITUDES AND BEHAVIOURS IS COMPLEX
- People generally act in accordance with their attitudes **(0.4)**
 - Subject to much external influence
 - When social pressure is **high** AND required behaviour is **difficult**
 - Attitudes only account for small effect
 - Most of behaviour is driven by the situation
- Rees and Knight: Theoretical insights... Acad Med 2007;
Wallace: Rev Gen Psychol 2005



TYPES OF CONTEXTS: MICRO & MACRO

- Getting better (or at least more aware) of micro
 - Pressures and stressors unique to students
 - Student ethics - guidelines
 - Addressing hidden curriculum, e.g.

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- Not as aware of macro-context, e.g., stage of training
 - Proto-professionalism (Hilton, 2005)
 - Students prioritize different elements (Rudy 200; Ginsburg 2005)
 - Pre-clerkship students approach dilemmas differently (Ginsburg, subm)

OTHER MACRO CONTEXTUAL ISSUES

- Stage of training
- Timing
- Clinical environment and personnel
- Transitions
 - Between stages of training
 - Between clinical rotations
 - Between elements of a rotation (daily)

PROFESSIONALISM IS NOT A STATIC CONCEPT

- Definition can be based on:
 - Group defining it
 - Codes of conduct, legal documents
 - Specific medical contexts/cultures
 - Society, media, culture, religion, etc
 - Moral/ethical frameworks
 - Specific behaviours
 - Values, qualities, attitudes
 - Define it by what it's not

Bryden, Ginsburg, Ahmed, Professing Professionalism: Are We Our Own Worst Enemies? Acad Med e-pub Jan, 2010

MORE POTENTIAL CONFLICTS...

- Differences exist between doctors' and patients' definitions of professionalism (Boudreau et al, 2008)
 - Some elements of definition did not resonate strongly
 - Some had negative connotations
- What society wants vs. what individual patients expect

HOW DO WE RESOLVE THIS?

- Can't continue to ignore the context of behaviours
 - But obviously hard to address in every instance
- Recognize some macro context issues
 - Take steps to address major negative influences
 - Teach and evaluate based on stage of training



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- Recognize some macro context issues
 - Take steps to address major negative influences
 - Teach and evaluate based on stage of training
- Consider the possibility that there is no "universal" definition or framework for understanding and evaluating all of professionalism in every context or situation



DISCUSS!!!

- For references, comments, complaints, etc:
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