

## Making sense of ethnography and medical education

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**OBJECTIVE** This paper aims to locate the ethnographic tradition in a socio-historical context.

**METHOD** In this paper we chart the history of the ethnographic tradition, explaining its roots and highlighting its value in enabling the ethnographic researcher to explore and make sense of the otherwise invisible aspects of cultural norms and practices. We discuss a number of studies that have provided detailed and context-sensitive accounts of the everyday life of medical schools, medical practitioners and medical students. We demonstrate how the methods of ethnographic fieldwork offer 'other ways of knowing' that can have a significant impact on medical education.

**CONCLUSIONS** The ethnographic research tradition in sociological and anthropological studies of educational settings is a significant one. Ethnographic research in higher education institutions is less common, but is itself a growing research strategy.

**KEYWORDS** education, medical, undergraduate/\*methods; ethnography/methods; research design; culture; social science/education; observation/methods.

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### INTRODUCTION

Ethnographic research methods have been in use by sociologists and anthropologists since the earliest

years of the 20th century.<sup>1,2</sup> They have been used to study aspects of medical education and training for nearly 50 years. There have been ethnographic studies of medical education in North America and the UK.<sup>3–10</sup> They have documented recurrent key features of everyday life, teaching and learning in a wide variety of institutional settings, and at different levels of professional training. We shall illustrate and develop our argument here with reference to that well established literature, as well as other research literature on occupational socialisation more generally, together with ethnographic research in medical settings that has potential relevance for the study of medical education. Ethnography is not a single research 'method'. The term does not define a single strategy of data collection, nor a strategy of data analysis. It is, rather, a general approach to the exploration and understanding of social settings and social processes which has become more prominent in recent decades.<sup>11,12</sup>

### The ethnographic tradition

Ethnographic research has several sources and inspirations, the principal 3 of which are social anthropology,<sup>13,14</sup> community studies<sup>15</sup> and urban sociology.<sup>16</sup> All depend on longterm fieldwork in a social milieu and we shall consider each in turn. The modern discipline of *social anthropology* was founded on the conducting of ethnographic fieldwork, where anthropologists committed themselves to protracted periods of personal engagement in their chosen research sites. In earlier years, this almost always meant field research in an 'exotic', overseas culture. The emphasis was largely on small-scale societies and involved face-to-face encounters. The ethnographer characteristically encountered a strange cultural world, in which social arrangements, systems of social relations, belief systems – indeed, the entire repertoire of cultural and social organisation – were different from those of his or her own (Anglo-European or North American) background culture.<sup>17</sup>

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## Overview

### What is already known on this subject

Qualitative methods are gaining popularity in research into medical education.

The focus of qualitative research is on interpretation and meaning.

Critics regard qualitative research as descriptive, small-scale and lacking in rigour.

### What this study adds

It locates both the ethnographic tradition in general and its uses within medical education research in particular, within a socio-historical context.

It demonstrates the ways in which the approach can assist in the exploration and understanding of social settings and social phenomena.

It rejects as overly simplistic the positivist, naturalist debate.

It identifies and illustrates the ethnographic commitments that underpin ethnographic traditions and argues that it is necessary to appreciate these guiding principles in order to understand how ethnography is used.

### Suggestions for further research

Ethnography can be used to allow researchers to make sense of the everyday life of medical educators and those they seek to educate.

Given the enormous policy changes that have impacted on medical education, there is a need for close and prolonged ethnographic engagement with medical students, junior doctors and other health care professionals in order to explore and change the many assumptions that exist in these settings and which are taken for granted.

Ethnographic understanding was predicated on cultural difference and the intellectual work of learning a new cultural system, followed by the act of transla-

ting between 2 cultures. In recent decades, anthropologists have become increasingly preoccupied with research 'at home', studying local cultures and systems within 'western', 'developed' or 'cosmopolitan' settings.<sup>18</sup> There are close parallels between the traditional settings of 'classic' anthropology and those of 'community studies' conducted on the basis of longterm fieldwork.

*Community studies* were concerned with local manifestations of pre-industrial or pre-modern social life at the margins or in the interstices of modern, complex societies. There were, broadly speaking, 3 main types of 'community' documented: rural settlements, based on agriculture;<sup>19,20</sup> 'urban villages' that exhibited close-knit, local and relatively homogeneous social relations,<sup>21</sup> and localised, culturally distinct settings based upon a dominant traditional industry – coalmining<sup>22</sup> being a classic example.

The third historical tap-root of the ethnographic tradition is to be found in *urban sociology*, often – but by no means exclusively – associated with the study of deviance.<sup>23</sup> These origins lie in American sociology, especially in Chicago. It paralleled the inspiration of anthropological fieldwork, but urban sociologists paid equally close attention to the city's neighbourhoods. Typically, they documented subcultures and contrasted the extremes of wealth and poverty in a metropolis.<sup>24,25</sup>

After World War 2 a second Chicago school developed further styles of ethnographic field research, with a major emphasis on studies of work, occupations, professions and education.<sup>26</sup> Its leading figure was Everett C. Hughes and the group around him in Chicago included Anselm Strauss, Blanche Geer and Howard S. Becker.

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## ETHNOGRAPHIC COMMITMENTS

If we are to understand how ethnography is used, it is vital to know how it is informed and underpinned by a number of fundamental ideas. These guiding principles are applicable to the broad range of ethnographic work across the different disciplines. They are outlined below.

### Meaning

Ethnographic research is predicated on the principle that social life is meaningful. Social actors, those individuals in the particular cultural framework being studied, who have cultural knowledge and awareness,

engage with one another and with the world about them in the light of their interpretations and understandings of actions, objects and communications.

### Process

Social life is not a matter of fixed entities and structures. Identities are also changeable, while meanings are always available to negotiation and redefinition.

### Context

Social actions and social identities make sense in context. Phenomena cannot be analysed divorced from their social and cultural contexts. Analysts have to pay close attention, therefore, to *local* cultures and subcultures.

### Knowledgeable actors

Social actors are knowledgeable, being thoroughly socialised into their own culture. They have a wide repertoire of social competences and skills. This is often 'tacit' knowledge. It is not explicitly taught, and actors are not consciously aware of the rules, conventions and stocks of knowledge that they use and draw on in everyday life.

### Rational actors

It is an assumption that social actors behave in a rational manner. However, there are no universal, context-free criteria for rationality. Sociological or anthropological analysis does not consist of evaluating the rationality of actions and actors by comparing them with a general model of rationality, nor of comparing the actions of others with those of one's own cultural background.

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## CULTURAL RELATIVISM

As an *analytic* principle, therefore, the ethnographer adopts a posture of cultural relativism. That is, one attempts to understand a social organisation or a cultural system in its own terms, 'from within'. This is a methodological principal, which underpins the ethnographer's capacity to make sense of social phenomena. It is not to be identified with ethical relativism or indifference. Ethnographers may have moral stances on phenomena, but moral condemnation alone will not help them to explain or understand how and why people do what they do, nor to make sense of social states of affairs.

### The everyday world

The ethnographic exploration of a social setting is not devoted to an examination of the unusual, the exotic, the overtly dramatic or the outré. It is concerned primarily with the ordinary, mundane reality of everyday social life. It is used to address the routines of ordinary activities and ordinary social actors.

### The everyday world is accomplished

Ordinary everyday social realities do not just 'happen' and they certainly do not happen 'naturally'. They have to be made to happen, through the socially organised actions of social actors. The tacit skills and background knowledge of social actors are brought to bear and deployed in making the social world possible.

Given these, and similar, general commitments, social scientists who undertake ethnographic research have a characteristic way of setting about their work. As we have already indicated, ethnographic research implies that a social researcher commits him or herself to a sustained engagement with a given social milieu. This includes a process of cultural learning. The ethnographer places him or herself in the position of the 'marginal' person, the 'socially acceptable incompetent' in order to learn the cultural knowledge and everyday practices that constitute the culture in question. Likewise, he or she learns about the social relationships and social institutions that constitute the social structure of their setting.

When the social anthropologist – at least in the classic mode – encountered an 'exotic' culture different from his or her own, then it was relatively easy to occupy the role of the stranger or novice. When ethnographers in anthropology or sociology study aspects of their own culture nearer to home, they must make a greater effort of imagination. If one is studying a setting that is familiar – such as one's own place of work or occupational group – then it may prove especially demanding, but even more pressing, to suspend one's tacit cultural assumptions.

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## ETHNOGRAPHIC METHODS

Ethnographers develop their cultural learning through *participant observation*.<sup>27</sup> As the term implies, this means that the researcher learns about the social world through direct engagement with it. The extent

to which the researcher actually *participates* in social events and actually *performs* social acts depends hugely on the nature of the research site, and, within it, the nature of the activities being undertaken at any given time. Clearly, if one is, say, working with accident and emergency teams, the ethnographer can participate in a range of social encounters (such as informal conversations, mealtime or coffee-breaks) with staff, and can be an unobtrusive observer of how patients and others wait. But he or she is not going to participate to the extent of triaging or treating patients.

What is important about participant observation is the general methodological commitment to the investigation of everyday social life *in situ*. It is not an approach to research that lends itself to short-term work. It depends upon the time taken for the field researcher to gain an adequate understanding of the local social structures, institutions and cultural conventions. There is no algorithm to determine the optimum length of fieldwork. In principle, fieldwork can and should continue until the analyst is no longer acquiring significant new information about the setting. In practice, practical limits of time and other resources may foreclose fieldwork before such saturation has been fully achieved. The degree of saturation actually achieved in any given period of fieldwork will depend on the complexity of the field site, its relative familiarity, and the relative breadth of the researcher's interests.

The allocation of time and effort in the field is organised in terms of *sampling* strategies. Ethnographic sampling differs from the sampling used in surveys, and is driven by rather different underlying notions of representation. It is more akin to opportunistic or purposive sampling. The ethnographer will try to allocate periods of time for observation/participation on the basis of sampling key features of his or her research site. Purposive sampling of this sort, driven by the ethnographer's developing analytic interests, is often referred to as *theoretical sampling*.<sup>28</sup>

Ethnographic fieldwork is not confined to any single mode of data collection. Participant observation is a defining feature of ethnography, but is not the only method. Ethnographers will typically include interviews with key informants in their repertoire of data collection strategies. Interviews of this sort differ markedly from those employed in survey research. They have been accurately described as 'conversations with a purpose'. Indeed, in the context of sustained ethnographic fieldwork, 'interviews' and

spontaneous 'conversations' may be all but indistinguishable. In addition to such 'naturally' occurring encounters, more formal interviews may also be enacted. Again, however, these have a characteristically conversational tone and structure. Questions are not posed in a predetermined order, nor are they necessarily couched in standardised formats.<sup>29,30</sup>

The material acquired from observations and conversational interviews is transformed into 'data' systematically. Observations are not undertaken merely for the observer to glean general impressions on the collective personal experiences of settings and events. Detailed observations are in turn transformed into detailed fieldnotes.<sup>31</sup> The ethnographer turns his or her participation and observation into long, detailed and concrete reconstructions of what was said and done. An hour's observation may result in several hours of writing and several thousand words of text. Likewise, interviews are recorded wherever possible and transcribed. The degree of detail that goes into the transcription of interview materials varies according to one's analytic purposes. If the interviews are to be analysed primarily for *content* – as evidence of students' or teachers' perspectives and reported experiences – then a fairly broad transcription will suffice. If the ethnographer intends to pay more explicit and detailed attention to the forum of the talk, the context and setting in which the exchanges occur, as well as the content, then a rather more detailed transcript may be required. There are standard conventions for the representation for speech in transcribed materials.

Ethnographic fieldwork was originally developed to aid in the understanding of oral cultures. Clearly, in contemporary developed societies – especially in professional and academic settings – the culture is a literate one.<sup>32</sup> Institutions are self-documenting. Medicine and medical education are permeated by the activities of reading and writing. The ethnography of medical education may, therefore, also incorporate the collection and analysis of documentary sources, such as curricular materials, minutes of meetings, newsletters and so on. Such materials, viewed from the perspective of the ethnographer, are not treated as 'hard' evidence of what 'really' goes on. Rather, the ethnographic study of an organisation like a medical school will treat such documents as data. In particular, they will be inspected for their taken-for-granted assumptions, their rhetoric, their intended effects upon readers and audiences, and the uses to which they are put within the organisation.

Participant observation, open-ended interviewing and documentary analysis are the main research strategies associated with ethnographic research, as is the collection of visual materials. These include the analysis of visual culture in the research setting (signs, symbols, artistic products), the collection of photographic images and the creation of film or video records of everyday life. Ethnographic film has been one of the main modes of work for social anthropologists for many decades.<sup>33,34</sup>

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## COMMON MISCONCEPTIONS

There are several misconceptions concerning ethnographic research. Firstly, it is quite often assumed that participant observation may not be valid because the presence of an observer will affect the observed action. It is easy to think of some occasions when that might be a strong possibility. One-off 'inspections' of educational settings are very likely to generate demonstration lessons, with teachers and students on their best behaviour. However, ethnographers do not base their work on such one-off visits; nor do they present themselves as expert evaluators (although they may be perceived erroneously as having evaluative intentions). It strains credulity and would strain social actors' dramaturgical skills to suggest that actors are able to transform their ordinary behaviour, such as the performance of work tasks, over the period of weeks or months that ethnographers normally spend in the field!

A second misconception results in the criticism that participant observation is necessarily 'subjective'. It needs to be emphasised that ethnographers are not engaged in a vague and impressionistic accumulation of personal 'experience' in their chosen research setting. They observe what is said and done with careful attention. They make careful documentary records of what they observe. They observe and collect other data over protracted periods of time. They analyse those data systematically. In consequence, the process is 'objective' as ethnographers only record and work with observable and recordable data. They recognise and acknowledge that they are part of the social world that they seek to study. This commitment to reflexivity is central to the research process. As Hammersley and Atkinson note:

'All social research is founded on the human capacity for participant observation. We act in the social world and yet are able to reflect upon ourselves and our actions as objects in that world.

By including our own role within the research focus and systematically exploiting our participation in the world under study as researchers, we can develop and test theories without placing reliance on futile appeals to empiricism, of either positivist or naturalist varieties.'<sup>2</sup> (p 21)

In that sense, therefore, ethnographic research is just as objective as any other, and can lay claim to high levels of validity.

A third misconception sees ethnographic research as generating only self-contained 'case studies' that have little or no continuity. Little could be further from the truth. Within particular disciplines and specialist fields there are to be found consistent and coherent sequences of ethnographic studies. In the sociology or anthropology of education, for instance, there is a major strand of ethnographic studies at all levels of educational provision that manifestly constitutes a developing intellectual tradition with shared research problems and a collective research paradigm.<sup>32</sup> The research tradition on medical education itself, far from being a series of disjointed case studies, forms a demonstrably cohesive research strand.

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## THE ETHNOGRAPHY OF MEDICAL EDUCATION

There is a long tradition of ethnographic research on medical education. Ethnographic methods informed the 2 classic American studies of medical students and their collective experiences that were conducted at the end of the 1950s. The first of these – *The Student Physician* – was a collective research enterprise based on several major medical schools.<sup>3</sup> Under the general leadership of Robert Merton (among America's foremost sociologists), the published work drew on a multi-method and multi-site research strategy. Amongst its most notable and enduring contributions is the chapter by Renée Fox, who went on to undertake several major ethnographic projects on medical innovations and clinical settings. Fox's essay 'Training for uncertainty' explored how medical students came to terms with and made sense of the various dimensions of uncertainty in their own knowledge and in the application of medical knowledge more generally.<sup>35</sup> Notwithstanding Atkinson's later critique of Fox's account,<sup>36</sup> subsequent discussion of medical uncertainty in the sociology and anthropology of medicine has been influenced by Fox's classic work.

*The Student Physician*<sup>3</sup> reflected a distinctive view of professional socialisation. The emphasis was on the institutional mechanisms whereby medical students acquired professional medical values. Quite different in emphasis, and grounded in a more thoroughly ethnographic research strategy, was the classic *Boys in White*.<sup>4</sup> The distinctive perspective that the Chicago team took was derived from the sociological study of work and occupations. They stressed students' collective responses to the pressures and problems of medical student life. They, therefore, focused on the nature of student culture in medical school, drawing an explicit parallel between student cultures in universities and shop-floor cultures in workplace settings. Workers and students alike established shared perspectives on their shared problems and collective responses to shared demands. In response to the heavy demands imposed by their teachers and the formal curriculum, the medical students worked out ways to render the demands more manageable. They employed 'selective negligence': in other words, students did not even attempt to absorb all the information they were deluged with, but attempted to set what industrial sociologists had called their 'level and direction of effort'.

A third, and most bleak, account of an American medical school, published by Bloom,<sup>37</sup> documented a highly segmented and divided institution, in which the 'student culture' was even further removed from the manifest ideals of the faculty. These 3 classic studies of American medical schools display between them the strengths of the ethnographic approach. They provide detailed, context-sensitive accounts of students' experiences and shared learning strategies. They furnish a sense of the everyday reality of the medical school that is far more detailed and insightful than any provided by the repeated surveys of students' reported ideals, values and attitudes undertaken during the same period. The hidden curriculum and student culture are revealed through participant observation and ethnographic interviewing.

In the USA, the original studies of basic (postgraduate) medical training were paralleled and extended by ethnographic studies of interns. Miller's<sup>38</sup> account of the trainees in an elite internship programme emphasises how these junior hospital doctors 'learn the ropes' and engage in 'situational learning' in order to cope with the everyday demands of the job. Mumford's<sup>39</sup> study of interns provides a similar account of the everyday realities of US junior hospital doctors. Light's detailed description of psychiatrists

in training takes the ethnographic tradition somewhat further.<sup>40</sup> Light documents how young American psychiatrists negotiate and cope with the varied intellectual and pragmatic demands of a segmented specialty.<sup>40</sup>

In the UK, Atkinson conducted an ethnographic study of 'bedside' teaching in the Edinburgh medical school.<sup>7</sup> He was much less concerned with student culture, and much more specifically focused on how clinical medical or surgical knowledge is transmitted in clinical teaching. For many years Atkinson's remained the only published ethnographic study of medical education in the UK. Much more recently Sinclair published an anthropological ethnography of a London medical school, paying particular attention to the collective rituals of medical student life.<sup>8</sup>

What all of these ethnographic studies – now spanning over 40 years – show is the value of ethnography in making sense of everyday life in medical school. Through close and prolonged engagement with staff and students on a day-to-day basis, the ethnographic researcher is able to document their ordinary, practical activities and concerns. He or she is in a position to make sense of the otherwise invisible aspects of medical school culture, of the hidden curriculum of medical instruction, and of the unintended consequences of change and reform. The ethnographic research tradition in sociological and anthropological studies of educational settings is a significant one. Ethnographic research in higher education institutions is less common, but is itself a growing research strategy.

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