INDIAN JOURNAL OF MEDICAL SCIENCES

VOLUME62NUMBER3MARCH2008

EDITORIAL

Apolipoprotein E and cardiovascular diseases			
Erdembileg Anuurad, Lars Berglund			85
ORIGINAL CONTRIBUTIONS			
Multidimensional health status of HIV-infected outpatients at a tertiary care center in north India Naveet Wig, Ankit Sakhuja, Sunil Kumar Agarwal, Deepika C. Khakha, Saurabh Mehta,			
Madhu Vajpayee			87
What women think about their husbands' opinions might influence women's An explorative study	s body image:		
Gity Sotoudeh, Shahla Khosravi, Mojgan Karbakhsh, Farahnaz Khajehnas Hamid Reza Khalkhali	iri, 		98
Apolipoprotein E polymorphism and its relation to plasma lipids in coronary P. P. Singh, M. Singh, D. P. Bhatnagar, T. P. Kaur, S. K. Gaur	heart disease		105
Neonatal thyroid screening in a mild iodine deficiency endemic area in Iran Mohammad Najafi, Gholam Hossein Khodaee, Mohammad Bahari, Masou Mostafa Mazlom Farsi, Fatomeh Kiani			113
LETTER TO EDITOR			
Public-private partnership in immunization service provision in Sri Lanka S. B. Agampodi, D. A. C. L. Amarasinghe			117
PRACTITIONERS' SECTION			
Networking in medical education: Creating and connecting Avinash N. Supe			118

Published by Medknow Publications Pvt Ltd.

A-109, Kanara Business Center, Off Link Road, Ghatkopar (E), Mumbai - 400075, India The journal is published and distributed by Medknow Publications Pvt Ltd. Copies are sent to subscribers directly from the publisher's address.

It is illegal to acquire copies from any other source.

118

PRACTITIONERS' SECTION

NETWORKING IN MEDICAL EDUCATION: CREATING AND CONNECTING

AVINASH N. SUPE

ABSTRACT

Social networking is being increasingly used as a tool of choice for communications and collaborations in business and higher education. Learning and practice become inseparable when professionals work in communities of practice that create interpersonal bonds and promote collective learning. Individual learning that arises from the critical reconstruction of practice, in the presence of peers and other health professionals, enhances a physician's capability of clinical judgment and evidence-based practice. As such, it would be wise for medical schools, whose responsibility it is to prepare students to make a transition to adult life with the skills they need to succeed in both arenas, to reckon with it.

Key words: Education, interprofessional relations or interdisciplinary communication or cooperative behavior or communication or social networking, knowledge sharing or diffusion of innovation

The word "network" (*plural*, "networks") has different meanings in different contexts. Commonly, network means any interconnected group or system (e.g., a network of roads crisscrossing the country). However, it is also used as a directory of people maintained for personal advancement (e.g., to get a job in today's economy, it is important to have a strong network). Over the last decade, there is a new meaning assigned to the word "network" - a system of multiple computers

Director, GSMC-FAIMER Regional Institute, and Professor and Head, Department of Surgical Gastroenterology, Seth G. S. Medical College and K. E. M. Hospital, Mumbai, India

Correspondence:

Dr. Avinash N. Supe, Sangeeta Towers, 6th Floor, Chembur, Mumbai - 400 071, India. E-mail: avisupe@gmail.com

and other devices connected together to share information (e.g., the copy machine is connected to the network so that it can now serve as a printer).

NETWORKING IN EDUCATION -BUILDING COMMUNITIES AND SHARING KNOWLEDGE

Networking refers to the art of creating interdependent or interconnected groups or systems for the mutual benefit of all members of the system. In medical education, it would mean "the conscious creation of interconnected relationships among various students, teachers, and other stakeholders with similar interests, either directly or through intermediaries, for the purpose of achieving common or individual 119

120

goals, sharing resources, as well as social communications."

"Networking Is First About Building Relationships... Approached With Respect And Honesty (Young)."^[1]

YOUR NETWORKS EVOLVE WITH YOUR PROFESSIONAL NEEDS

Networking means different things at different stages in your career development. As your priorities change, so do your professional priorities and the means by which you choose to find new associates. In schools and colleges, you have network amongst co-students and sometimes among teachers. In later life, you have network at the place of work or practice, developing along with your social and family networks.

It has been my observation that medical professionals in the beginning of their medical practice tend to view their job as an extension of their education. Going to work is like going to school; and just as in college, where you made friends of your classmates, the tendency at work is to make friends of your co-workers. The line between your professional life and your social life is blurred; so the tools you use to connect with your friends tend to cross those boundaries as well.

As your career develops and you mature, the tools you adopt to develop and maintain your professional contacts evolve as well. At some point, you start separating your professional and personal life. You start looking for fulfillment in different places, which means you start compartmentalizing your home life, family, hobbies, and work. In the same way, you start compartmentalizing the tools you use to maintain those different relationships. At workplace we use tools such as meetings, lunches, as well as group work, to foster networks. At the professional level, one uses conferences, workshops, as well as task forces, to create such networks. In India, family get togethers, festivals, as well as marriages and other functions, offer an environment conducive for building social networks.

Online social networks are, in essence, the same as traditional social networks, i.e., a group of people who are affiliated to one another through either personal connections (friends, family, work colleagues) or areas of common interest (football fans, favorite bands, travel interests). What differentiates online social networks from any other traditional network is the ease with which members can interact with one another and enhance their offline relationships through the functionality of online social networking sites.

On the internet, you start using tools such as LinkedIn, Jigsaw, and NETSHARE to maintain your professional connections. These types of services are more geared to professional networking and provide information in a context where you are clearly indicating that you are looking for professionals who can assist you, not online friends. Common popular networks used all over the world by students are "Myspace", "Facebook" and "Orkut". Though controversial at times, these are best social networking tools for the net-savvy Indian younger generation. The age group of 18 to 25 years accounts for the majority of the traffic at these sites and will certainly testify that interaction here has long since overtaken plain old conversations. But can social networking sites work beyond dating and friendship to emerge as platforms for careers and educational resources?

These professional networking sites could broaden their offerings to make themselves more effective. Being able to share photos is useful, and basic personal information such as whether a contact likes golf or collects wine can be useful in a business context. But all in all, these professional sites are designed to help you connect with like-minded professionals in a way that promotes dialog. In medical education also, there are now many strong networks, both offline and online. Faimer^[2,3] is a good example of an effective medical education network. It connects more than 300 education leaders from more than 40 countries to share views, ideas, and resources, as well as to work together for various tasks, publications, and programs.

Of course, as you advance up the educational ladder - as you reach the principal or dean level - the challenges of professional networking become more complex. Since we all have limited time and resources, we should take a hard look at the tools we are using today to manage our professional relationships. Are you able to give them enough time and attention and are the relationships connecting you with the right people in the right way? Is there something about associations or conferences that you still find valuable or are you getting more educational leads from FAIMER or other networks or do you need both? As with everything, you get as much out of your networking tools as you invest; so allocate your time and resources wisely.

SOCIAL NETWORKING AND EDUCATION^[4,5]

Social networking sites are, by definition, places on the internet where people converge around shared interests or causes. One can specify one's education, university, occupation, industry, company, title, career skills, and career interests. It thus becomes a mini résumé itself.

There are also a large number of communities dedicated to education. These cover a variety of issues such as online tutorials, institute listings, academic resources, etc. In India as well, there are now sites such as "MedRec" or "Smartteach" that have student's communities and provide rich educational resources. Many medical schools in India now have wireless networks and provide web resources for students. These are welcome changes and allow students to study at their own pace and convenient time. One can also find information on a specific educational topic from the global community that would clear away any confusion one might have on issues concerning a particular field or the latest developments. Communities share their own experiences and help others in decision making. Nonmedical coaching institutes too have an online presence. These institutions (e.g., Mahesh Tutorials in Mumbai) offer coaching for class 10 and 12 board exams and have communities for each of its branches. Students discuss with professors, listen to lectures, clear difficulties, and arrange meets. One of the discussion threads in this community is regarding placement of previous batch students.

NGOs are also walking up to the potential of social networking sites. 'Asha for Education' is

one such community. Asha, a nonprofit initiative dedicated to educating underprivileged children in India, aims to discuss fund-raising, new initiatives, and current events through these communities.

TYPES OF SOCIAL NETWORKS

Social networks can be of various types:

- 1. Based on the strength, the network can be close, moderate, or distant.
- 2. Based on type of relationship.
 - Trust-based: on mutual interest; emotional connection; competence
 - Conveyance: of meaning; information; solutions; favors; friendship
- 3. The networks can be small or large. Depending upon the density and ties amongst the network participants, they can be sparse or dense.
- Networks can be diverse and can have different hierarchy levels, as well as involve various organizational units. Network like INclen can cross geographic boundaries.

Putting all together, the patterns of network can be:

- High affiliation: These are dense but small networks with similar interests. They have strong ties and are of nondiverse nature. They share the same information, same world perspective, same support; have the same motivation; and are cohesive.
- High efficiency: These are sparse but large networks. These are diverse and have weaker ties compared to affiliation networks. There are many contacts that do not know each other but are a great source of power.
- Best: The best network one can have is

a blend of both - high affiliation and high efficiency.

BENEFITS OF SOCIAL NETWORKS

If you have a rich network, what do you do with it? In my experience, there are three key aspects to social networking that sustain user interest. These are guite basic and comprise 1) a sense of community, 2) the development of friendships, 3) ease with which they can interact with other users and ultimately learn from them. Networks can be solutions looking for a problem to solve or an opportunity to exploit. If there is one rule of networking, it is that in an optimized personal network - less is more - you leverage a minimal number of contacts in order to maximize your work efficiency and effectiveness. Other nonessential contacts may provide benefits, like a sense of belonging, friendship, or juicy gossip. From a narrowly utilitarian perspective, however, the time invested in maintaining these network contacts does not provide sufficient work-related returns.

LIMITATIONS OF NETWORKS

The major limitation of community resources is authenticity. The accuracy of answers to queries is open to debate. As with all resources online, social networking sites too face the problem of quacks and incorrect information. Spamming and obscenity are common phenomena as well.

One of the other claimed limitations is that connections made on social networks are superficial and short-lived as the amount of effort required to make connections is minimal. However, if any such community has short

121

contact sessions or events, these connections become more deep and useful. FAIMER network is a classic example of this.

THE IMPORTANCE OF NETWORKING

Sometimes the expression "it's who you know" is true when it comes to your work. By meeting people involved in medical education, you can gain valuable insights into a profession and get your name noticed. This will help you build a network of contacts. Network is also very useful for sharing educational resources.

Communities of practice (CoPs)

Physicians interact with peers and mentors to frame issues, brainstorm, validate and share information, make decisions, and create management protocols, all of which contribute to learning in practice. CoPs offer great potential for enhancing workplace learning among physicians. It is likely that working together in this way creates the best environment for learning that enhances professional practice and professional judgment.

Parboosingh^[6] makes a case for interactive learning with peers and mentors in the workplace as an effective and efficient way to offer continuing medical education. He claims that learning through reflective practice is an effective way to improve a physician's practice and judgment because 1) people learn most naturally when faced with a problem-solving experience and 2) learning that is constructed by the individual results in action. Parboosingh underlines the need for skilful reflection in this learner-centered approach and advocates the critical reconstruction of practice to facilitate effective reflection. According to community of practice (CoP) theorist Etienne Wenger,^[7] learning and practice become inseparable when professionals work in CoPs, groups that share an interest in a domain of human endeavor and who engage in collective learning that creates bonds among them. Physicians working in care delivery units naturally form CoPs and give priority to the activities the CoP generates rather than the needs of individuals.

IMPORTANT NETWORKING TIPS

- Get organized prepare a summary of your skills and the kind of position you want.
- Set realistic goals create a plan for yourself that's easy to execute, such as obtaining three or four new contacts a week.
- Be prepared effectively communicate your strengths and career goals.
- Be organized keep a record of all persons you've spoken to, including their full name, phone number, and/or e-mail, plus notes from your conversation.
- Follow up make sure to thank all contacts for their time and stay in touch on a regular basis.

SUMMARY

Social networking is being increasingly used as a tool for communications and collaborations, a tool of choice in business and higher education. Learning and practice become inseparable when professionals work in communities of practice that create interpersonal bonds and promote collective learning. Individual learning that arises from the critical reconstruction of practice, in the presence of peers and other health professionals, enhances a physician's capability of clinical judgment and evidencebased practice. As such, it would be wise for medical schools, whose responsibility it is to prepare students to make a transition to adult life with the skills they need to succeed in both arenas, to reckon with it.

ACKNOWLEDGMENT

The author thanks Dr. John Norcini, Dr. William Burdick and Dr. Page Morehan, FAIMER, ECFMG, USA, as well as Dr Rita Sood, Professor of Medicine, AIIMS, India, for their suggestions while preparing this manuscript.

REFERENCES

- 1. Young KK. Networking 101: Some basics for colleague contact. Scientist 2000;14:32.
- 2. Norcini J, Burdick W, Morahan P. The FAIMER Institute: Creating international networks

of medical educators. Med Teach 2005;27: 214-8.

- Pemba SK, Kangethe S. Innovative medical education: Sustainability through partnership with health programs. Educ Health (Abingdon) 2007;20:1-5.
- Creating and Connecting Research and Guidelines on Online Social and Educational Networking. NATIONAL SCHOOL BOARDS ASSOCIATION report released in September 2007. [cited on 2008 Mar 8]. Available from: http://www.nsba.org.
- Harden RM. Change building windmills not walls. Medl Teach 1998;20:189-91.
- Parboosingh JT. Physician communities of practice: where learning and practice are inseparable. J Contin Educ Health Prof 2002;22:230-6.
- [Communities of Practice. Available from: http:// www.chsrf.ca/knowledge_transfer/pdf/digest_ 20060817_e.pdf. [cited on 2008 Mar 8].

Source of Support: Nil, Conflict of Interest: None declared.