

The following document contains the ‘front matter’ (the abstract and contents) of my PhD:

Taking Education Seriously: Developing Bourdieuan Social Theory in the Context of Teaching and Learning Medical Ethics in the UK Undergraduate Medical Degree.  
Queen’s University Belfast. 2011

Whilst the entire thesis is publically available in the library of Queen’s University Belfast I have chosen not to upload a complete copy to the web as, at the time of writing, I am working on various publications. However anyone who wishes to have a copy of the entire thesis or any of the chapters for personal use can obtain one from me on request.

Nathan Emmerich

December 2011

[nemmerich01@qub.ac.uk](mailto:nemmerich01@qub.ac.uk)

[nathan.emmerich@gmail.com](mailto:nathan.emmerich@gmail.com)

**Taking Education Seriously:  
Developing Bourdieuan Social Theory in the Context of  
Teaching and Learning Medical Ethics in the UK  
Undergraduate Medical Degree.**

**Nathan Emmerich  
(BA, MA, M.Res.)**

**Submitted in accordance with the regulations for the Degree of PhD.**

**School of Sociology, Social Policy and Social Work  
Queen's University Belfast**

**December 2011**

## Acknowledgements

The first person that deserves to be acknowledged is Sally Wheeler, without whom this thesis would never have been started.

I would like to thank my supervisors Professor Lindsay Prior, Dr Matt Wood, Dr Maeve Rae, and Ciaran Thomas Burke who acted in first, second, clinical and honorary capacities respectively. I'd also like to thank those whose medical ethics education classes they kindly permitted me to observe and those who gave up their time to participated in interviews, both of which have significantly informed my views. Thanks to you all. I'd like to make particular mention of Professor W.G. Irwin, for kindly corresponding with me and reading an early draft of the appendix.

Many people have helped me along the way, either personally or professionally, and often both. Thanks to Dr Marian Duggan, Dr Siún Carden, Dr Julia Hynes, Dr Barry Lyons, (soon to be Dr) Nicola Ingram, Dr Caragh Brosnan, Professor Linda Mulcahy, Professor Ruth Chadwick, Professor Ian Young, Professor Søren Holm, Dr Duncan Wilson, and Dr Darryl Gunson. The staff of Queen's University Belfast Libraries, and particularly of the Medical library, deserve honorable mention for their ongoing assistance and comprehensive document delivery service. As do library and archive staff at the British Library, the Wellcome Collection and the Royal Society of Medicine.

I would also like to acknowledge the various organizations that have provided me with funding and so contributed to the development of this thesis. First Atlantic Philanthropies who generously funded the PhD itself. Second all those who have provided funds and/ or sponsorship for the various events I have organized: the Wellcome Trust; the Foundation for the Sociology of Health and Illness; Cesagen; the British Sociological Association; Wiley-Blackwell; Nuffield Bioethics; Northern Ireland Forum for Ethics in Medicine and Healthcare; and Queen's University Belfast, particularly the School of Law for their administrative support. Third all those who have provided me with funds to

travel and participate in various conference and other events: the Foundation for the Sociology of Health and Illness; the Society for Applied Philosophy; the Academy of Social Sciences; the European Society for Philosophy Medicine and Healthcare; the History of Bioethics conference, University of Manchester 2011; Nuffield Bioethics; Belfast Health and Social Care Trust; the School of Sociology, Social Policy and Social Work, Queen's University Belfast; and Research and Regional services, Queen's University Belfast.

Thanks are also due to my parents, particularly for their biannual contribution to my library.

The final person who deserves acknowledgement is Sally Wheeler, without whom this thesis would never have been finished.

## **Contents:**

Acknowledgements .....	i
Contents: .....	iii
Abbreviations: .....	vi
Abstract: .....	vii
1: Taking Education Seriously: A Thesis Overview.....	1
1.1. Introduction: .....	1
1.2. Enculturation and Socialisation:.....	6
1.3. Two Distinctions from Modern Apprenticeship Theory .....	11
1.3.1. Between Formal and Informal Education .....	12
1.3.2. Metaphors for Learning: Acquisition and Participation .....	14
1.4. Ordinary Language Philosophy: A Wittgensteinian Thread .....	16
1.4.1. Language Games and Forms of Life.....	18
1.4.2. Meaning as Use .....	21
1.5. Conclusion.....	24
2: A Winchean Methodology for doing Social Theory.....	26
2.1. Introduction: Peter Winch’s Idea of a Social Science .....	26
2.1.1. From Forms of Life to Modes of Social Life.....	30
2.1.2. Modes of Social Life and Ways of Knowing:.....	35
2.2. Doing Social Science: For a Social Scientific Perspective on Ethics and Morality .....	39
2.2.1. Between Morality and Ethics: An Interlude.....	44
2.2.2. Anthropological Perspectives on Morality and Ethics.....	47
2.2.3. Zigon’s Anthropological Perspective on Morality and Ethics.....	49
2.3. Reflections on Empirical Work:.....	57
2.3.1. Research Ethics as Research Governance.....	58
2.3.2. Ethics as Mantra.....	60
2.3.3. Absent Philosophy .....	62
2.3.4. Exit Philosophy, Enter Practice.....	65
2.3.5. Medical Ethics as a Secondary Medical Specialism .....	66
2.4. Conclusion.....	68
3: The Sociology of Medical Education and Bourdieuan Professional Reproduction: Towards the Enculturation (through Participation) of Medical Ethics .....	70
3.1. Introduction.....	70

3.2.	The Sociological Literature: .....	71
3.3.	Bourdieuian Studies in the Sociology of Medical Education .....	75
3.3.2.	The Medical School as Field .....	79
3.3.3.	The (Medical) Habitus in Medical Education and Training.....	82
3.4.	The Medical Habitus and its Dispositions: Making Doctors.....	87
3.4.1.	Sinclair’s Dispositions:.....	89
3.4.2.	Sinclair’s Dispositions 2: A Critical Engagement for a Medical Ethical Disposition .....	93
3.5.	Cognising the Habitus.....	96
3.5.1.	From Mundane Reflexivity and Consciousness to Medical Reflection .....	99
3.5.2.	Developing a Disposition for Medical Ethics Education .....	103
3.5.3.	Thinking Dispositions .....	103
3.5.4.	Medical Ethical Thinking Dispositions .....	112
3.6.	Conclusion .....	116
4:	The Recent Development and Current Practices of Teaching Medical Ethics to Medical Students in the UK. ....	117
4.1.	Introduction .....	117
4.2.	The Distinctive Nature of UK Medical Schools.....	118
4.3.	Delineating the Present: Tomorrow’s Doctors.....	127
4.4.	1993’s Tomorrow’s Doctors: Promoting an Integrated Curriculum. ....	130
4.4.1.	Re-Visioning Tomorrow’s Doctors: 2003, 2009. ....	133
4.5.	Medical Ethics and the UK undergraduate medical degrees:.....	136
4.6.	A Brief History of UK Medical Ethics:.....	137
4.6.1.	Medical Ethics Education Prior to Tomorrow’s Doctors:.....	139
4.6.2.	Medical Ethics Education Post Tomorrow’s Doctors:.....	144
4.7.	Conclusion: Three Generalised Approaches to Medical Ethics Education on the UK Medical Degree.....	148
5.	From Reflection to a Cognitive Apprenticeship: .....	153
5.1.	Introduction: .....	153
5.2.	On Reflection .....	156
5.2.1.	Schön’s Ideal of Reflective Practice and the Reflective Practitioner	157
5.3.	Metacognition:.....	165
5.3.1.	Dialogical Metacognition.....	169

5.4.	Towards a Cognitive Apprenticeship .....	172
5.4.1.	The Idea of a Cognitive Apprenticeship .....	176
5.5.	Conclusion.....	183
6:	On Bourdieuan Thinking Dispositions and Cognitive Apprenticeship in Medical Ethics.....	186
6.1.	Introduction: .....	186
6.2.	Bourdieu and Language.....	187
6.2.1.	From Grammar and Grammatical Rules to Ethics and Ethical Principles. ....	189
6.3.	What is Enculturated in a Cognitive Apprenticeship? .....	194
6.3.1.	The Enculturation of Concepts.....	194
6.3.2.	The Enculturation of Metacognition .....	195
6.3.3.	The Enculturation of Thinking Dispositions.....	198
6.4.	Conclusion: Cognitive Apprenticeship and (Cognitive) Habitus:.....	202
7:	Conclusion .....	205
7.1.	Introduction .....	205
7.2.	Revisiting Zigon’s Cartography of Morality and Ethics .....	206
7.3.	Reflexive Implications: .....	209
7.3.1.	Medical Ethics Education: .....	209
7.3.2.	Implications for Philosophical Applied Ethics .....	214
7.4.	Concluding Remarks: .....	216
Appendix:	Remaking Medical Education: From General Practice to Medical Ethics: Prof. W.G. Irwin and the QUBMS .....	221
A.1.	Introduction .....	221
A.2.	Prof. W.G. Irwin and the Founding General Practice at QUB .....	224
A.2.1.	Teaching and Researching Education in General Practice .....	227
A.2.1.1.	Dr Campbell Moreland .....	230
A.2.1.2.	Teaching Terminal Care .....	231
A.2.1.3.	The Warnock Committee.....	232
A.2.1.4.	Irwin’s Medical Ethics.....	234
A.2.2.	Teaching Medical Ethics in Belfast .....	237
A.3.	Conclusion.....	241
Bibliography.....		243

## **Abbreviations:**

AMA: American Medical Association  
ASME: Association of Medical Education (UK)  
BA: Bachelor of Arts  
BMA: British Medical Association  
BMJ: British Medical Journal  
BSc: Bachelor of Science  
DHSSNI: Department of Health and Social Services Northern Ireland  
FRCP: Fellow of the Royal College of Physicians  
GMC: General Medical Council  
GP: General Practitioner  
IME: Institute of Medical Ethics  
IRA: Irish Republican Army  
JASME: Junior Association of Medical Education  
JME: Journal of Medical Ethics  
LMG: London Medical Group  
MA: Master of Arts  
MSc: Master of Science  
NI: Northern Ireland  
PBL: Problem Based Learning  
PGCCE/ HE: Postgraduate Certificate in Clinical Education/ in Higher Education  
QUB: Queen's University Belfast  
QUBMS: Queen's University Belfast Medical School  
RCGP: Royal College of General Practitioners  
SCM: Student Christian Movement  
SLT: Socio-Cultural Learning Theory  
SRHE: Society for Research into Higher Education  
SSC: Student Selected Components  
SSK: Social Studies of Knowledge  
SSM: Student Selected Modules  
SSME: Society for the Study of Medical Ethics  
UMS: Ulster Medical Society



## **Abstract:**

This thesis attempts to develop a social theoretical perspective on professional reproduction in order that we can take education seriously. Social theories of professional reproduction tend to focus on socialisation as an informal process whilst largely ignoring the formal educational experiences of students. Through the development of the term ‘enculturation’ I demonstrate that formal education and informal socialisation can and should be considered as related phenomena. I make use of the formal medical ethics education that occurs during contemporary undergraduate medical education in the UK and ideas of the moral socialisation of medical students as the ground for the more detailed exegesis that occurs in chapters 3, 5 and 6. In chapter 1, I set out a Winchean position on the ‘doing of social theory’ and, based on the anthropological perspective of Jarrett Zigon, I give an account of ethics and morality that informs the remainder of the thesis. I also offer some reflections of the nature and origin of my view of medical ethics as an aspect on the field of medicine and medical education.

Through a consideration of sociological studies of medical education, and the Bourdieuan social theory many of them have adopted, I argue, in chapter 3, that if we are to accommodate the ‘ethical enculturation’ of medical students within a social theory of professional reproduction then we must develop a more cognitive perspective on habitus. To this end I make use of the psychological and educational idea of ‘thinking dispositions.’ In the subsequent chapter (4) I give a historical account of the development of ‘medical ethics’ within medical education. Against assumptions that modern medical ethics is in some way a phenomenon external to medicine I show that its advancement within the medical school is consistent with wider changes in medical education culminating in the GMC’s ‘Tomorrow’s Doctors’ (1993). I provide more detailed support for my view in the appendix where I present a ‘case study’ of the development of medical ethics education in the Belfast Medical School through a consideration of the career of W.G.Irwin, one of the first Professors of General Practice in the UK and Ireland.

In chapter 5 I discuss the idea of the reflective practitioner and reflective education both of which have a wide degree of currency in medical and professional education. Whilst learning from the lessons of research on reflection for the purposes of considering formal medical ethics education I narrow the grounds of my enquiry to metacognition. Drawing on recent anthropological research on apprenticeships and Socio-cultural Learning Theory (SLT) I make use of the idea of a cognitive apprenticeship to theorise formal medical ethics education as an aspect of medical education more generally.

In the final substantive chapter (6) I draw on Bourdieu's perspective on language as a social, and socially reproduced, phenomena in order to consider what the cognitive apprenticeship view implies for any understanding of medical ethics education from within a Bourdieuan view of professional reproduction. I consider whether we can consider concepts, metacognitive abilities and thinking dispositions to be produced through enculturation. I answer in the affirmative with the exception of thinking dispositions suggesting that the more appropriate process for describing the (re)production of dispositions, including thinking dispositions, is socialisation.

In the concluding chapter (7) I discuss the implications of the substantive views developed for the anthropological perspective on ethics and morality that I initially adopted as well as for the teaching and learning of medical ethics and the self understanding of philosophical applied ethics.