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The Medical Education Research Landscape: Focus Areas and Key Scholars

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Abstract

Advancing innovation and enhancing quality in medical education depend on how clinician-educators and researchers engage with educational research. To encourage such engagement, we developed a visual framework that maps central topics in medical education research alongside key scholars in the field. Through individual virtual interviews with editorial board members from nine leading medical education journals, we explored their perspectives on significant research areas and the experts they most closely associate with each. The resulting data were analyzed to generate thematic categories and to identify frequently cited contributors. 21 editors participated, and their insights informed the creation of the *Medical Education Research Library*. This resource highlights 13 major topics, with assessment emerging as the most prominent, and documents recognized leaders such as van der Vleuten, ten Cate, and Norman. The identified themes largely reflect established trends, while areas such as workplace-based learning, equity, diversity and inclusion, physician well-being and burnout, and social accountability represent growing domains of interest. Envisioned as an open educational resource, the library will evolve through ongoing contributions from educators and researchers, broadening perspectives and fostering evidence-informed innovation in medical education scholarship and practice.

Keywords: Evidence-informed practices, Evidence-informed scholarship, Medical education, Medical education research, Research use

Introduction

Medical education research (MER) plays a critical role in driving innovation and enhancing the quality of medical education. Yet, for many novice clinician-educators, engaging in scholarly work within MER can feel overwhelming [1]. The field often appears as an "alien culture" with its own specialized concepts and methodologies [2], while limited time further restricts their ability to integrate research evidence into practice and scholarship [3, 4].

Previous efforts to promote the use of MER have included highlighting priority research areas [5, 6], identifying highly cited works [7, 8], and mapping

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publication trends across journals [9, 10]. Although bibliometric studies offer valuable insights into publishing patterns and individual contributions, they do not provide a concise or accessible overview of central MER topics and the scholars linked to them. Their word-heavy presentation styles are also less practical for busy clinician-educators [11]. To address this gap, we developed an introductory visual resource that illustrates key MER topics alongside associated experts.

Materials and Methods

Editors of medical education journals possess unique perspectives on the field and play a decisive role in judging the significance of submitted work [12]. We therefore invited all editorial board members from the 10 highest-impact medical education journals (2022 impact factors) to participate in one-on-one virtual interviews. Invitations were sent via publicly available email addresses and included an information letter. Interviews explored participants' views on essential MER topics and

the experts they most closely associated with each. Verbal informed consent was obtained, and the study was approved by our University's Office of Research Ethics and Integrity (#S-11-21-7569).

Data were analyzed using content analysis [13]. We began by developing preliminary categories informed by previous bibliometric studies. Transcripts were reviewed line by line, with highlighted segments coded into these categories. New categories were created for topics not captured in the initial scheme. Coding disagreements were resolved through discussion. A second review of the transcripts was conducted to identify and record the occurrence of named experts for each topic. Topics mentioned by at least two interviewees were classified as "key," and all named experts were included in the final mapping.

Results and Discussion

Out of the 81 editorial board members contacted, 21 agreed to participate. These individuals represented 9 of the leading journals in the field: Academic Medicine, Advances in Health Sciences Education, BMC Medical Education, Canadian Medical Education Journal, Journal of Continuing Education in the Health Professions, Medical Teacher, Perspectives on Medical Education, Teaching and Learning in Medicine, and The Clinical Teacher. Insights from these interviews informed the development of the Medical Education Research Library (Figure 1), a visual framework that organizes key MER topics together with experts identified by participants.

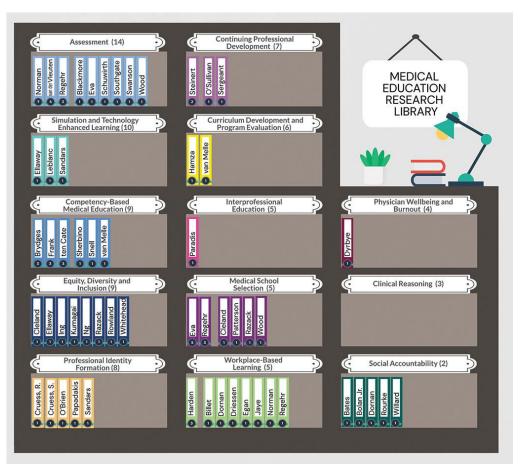


Figure 1. Medical education research library

The *Medical Education Research Library* visually depicts central MER themes alongside the experts linked to them. Each "shelf" symbolizes a distinct topic, with the bracketed number on the right showing how many

interviewees mentioned that theme. Topics are arranged in order of frequency—from most frequent to least—progressing from the top left to the bottom right. Within each shelf, labeled paper organizers denote the identified

experts, with the number below indicating the number of participants who recognized that individual as a leader in that area.

The Medical Education Research Library serves as an introductory visual guide to current priorities in MER and the experts most associated with them. The identified themes correspond closely with established patterns in the literature, including well-documented areas such as learner characteristics, admission processes, and assessment [6, 7, 14]. Similarly, past studies have highlighted physician competencies, curricula, and teaching approaches as enduring focal points [5–7]. More recent emphasis has been placed on methodological approaches, program evaluation, and educational technologies [5]. This study further underscores a rising focus on workplace-based learning and points to newer domains of inquiry, including equity, diversity, and inclusion, physician well-being and burnout, and social accountability.

By offering a concise visual overview, the library enables clinician-educators to quickly locate relevant topics and experts when seeking evidence to guide, refine, and advance their teaching and scholarship. This accessibility can also facilitate manuscript preparation and career advancement [15]. For researchers, the library provides an opportunity to situate their own work within the broader MER landscape, to identify potential mentors, collaborators, or reviewers, and to consider ways to expand the scope of topics represented [5, 10, 16–18]. At the same time, the resource highlights only a small pool of experts, drawing attention to the need for broader recognition of diverse scholarly contributions. Notably, the experts most frequently cited were predominantly male, Western, and affiliated with highly ranked institutions—an observation that reinforces importance of questioning who is regarded as authoritative in MER and of amplifying a more diverse range of voices [10].

It is essential to recognize that this version of the library represents the views of a single stakeholder group—journal editors—and, more specifically, those who participated in the study. We aim to offer a starting-point resource that the broader medical education community can build upon and diversify. We hope it sparks dialogue about what counts as a "key" topic in MER, who is recognized as an expert, and why others may be missing. Ultimately, our goal is to develop the *Medical Education Research Library* into an open, living educational resource that continually evolves, promoting innovation

and enhancing the quality of medical education through evidence-informed scholarship and practice.

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References

- 1. Surry L, Reddy S, De Fer TM, Narayanan V, Seehusen DA, Wells M, et al. "Make it count twice": studying curricular innovations. J Gen Intern Med. 2022;37(9):2139–43.
- McGaghie WC. Scholarship, publication, and career advancement in health professions education: AMEE guide No. 43. Med Teach. 2009;31(7):574– 90
- 3. Doja A, Lavin Venegas C, Cowley L, LeBlanc VR, Cranston A, Spadafora SM, et al. Barriers and facilitators to program directors' use of the medical education literature: a qualitative study. BMC Med Educ. 2022;22:45.
- 4. Goldszmidt MA, Zibrowski EM, Weston WW. Education scholarship: it's not just a question of 'degree'. Med Teach. 2008;30(1):34–9.
- 5. Ji YA, Nam SJ, Kim HG, Kim Y, Kim SM, Kim JH, et al. Research topics and trends in medical education by social network analysis. BMC Med Educ. 2018;18:222.
- 6. Regehr G. Trends in medical education research. Acad Med. 2004;79(10):939–47.
- 7. Azer SA. The top-cited articles in medical education: a bibliometric analysis. Acad Med. 2015;90(8):1147–61.
- 8. Azer SA. Exploring the top-cited and most influential articles in medical education. J Contin Educ Health Prof. 2016;36(Suppl 1):S32–41.
- 9. Madden C, O'Malley R, O'Connor P, Byrne D. Gender in authorship and editorship in medical education journals: a bibliometric review. Med Educ. 2021;55(6):678–88.
- Maggio LA, Costello JA, Ninkov A, Artino AR Jr, Driessen EW, O'Brien BC, et al. The voices of medical education science: describing the published landscape. Med Educ. 2023;57(3):280–9.

- 11. Trivedi SP, Chin A, Ibrahim A, Nasser H. Infographics and visual abstracts. J Grad Med Educ. 2021;13(4):581–2.
- Forsberg E, Geschwind L, Levander S, Wermke W. Peer review in academia. In: Peer review in an era of evaluation. Cham: Palgrave Macmillan; 2022. p. 3– 36.
- 13. Hsieh HF, Shannon SE. Three approaches to qualitative content analysis. Qual Health Res. 2005;15(9):1277–88.
- 14. Levine DM, Barsky AJ 3rd, Fox RC, Lo B. Trends in medical education research: past, present, and future. J Med Educ. 1974;49(2):129–36.
- 15. Castiglioni A, Aagaard E, Spencer A, Anderson M, Park YS, Tekian A, et al. Succeeding as a clinician educator: useful tips and resources. J Gen Intern Med. 2013;28(1):136–40.

- Albert M, Rowland P, Friesen F, Lingard L, van der Vleuten C, Gruppen L, et al. Barriers to crossdisciplinary knowledge flow: the case of medical education research. Perspect Med Educ. 2021;11(3):149–55.
- 17. Obeidat AS, Alhaqwi AI, Abdulghani HM. Reprioritizing current research trends in medical education: a reflection on research activities in Saudi Arabia. Med Teach. 2015;37(suppl 1):S5–8.
- 18. Paton M, Kuper A, Paradis E, Ajjawi R, Dornan T, Ginsburg S, et al. Tackling the void: the importance of addressing absences in the field of health professions education research. Adv Health Sci Educ. 2021;26(1):5–18.