Teaching poverty and health: Importing transformative learning into the structures and paradigms of medical education

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Paulo Freire, a 20th Century critical pedagogue and educator, advocated a paradigm of transformative education that emphasized working “with”, rather than “for” the oppressed in regaining their liberation. As a paradigm of education that emphasizes equity and social justice, transformative learning aims to improve societal structures by inspiring learners to become agents of social change.¹ In medical education, structural barriers within educational institutions may limit the full realization of truly transformative education.² This research drew on qualitative case study methodology to examine how tutors with lived experience of poverty, as members of a group that faces structural oppression, understood their participation in a workshop on poverty and health that is part of the undergraduate medical curriculum at the University of Toronto. Our findings centred around two broad themes: incongruities between transformative learning and the structures of medical education; and unintended consequences of transformative education operating within the dominant paradigms of medical education. As a study of a single course operating within the structures, hierarchies and paradigms of medical education, this research enables consideration of the institutional structures that limit the potential of transformative education initiatives. To be truly transformative, medical education must not only integrate marginalized persons into teaching to subvert the structures of oppression, but must also be open to transforming the structures that maintain social inequity. As social values and societal norms change, it is critical that medical education encourages reflexivity and invites discussions about changes that will enable and allow movement towards greater social justice and equity.