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As a celebration of our 20th anniversary, we introduce you to Dr. Jonathan Ng, founder of *The Meducator*. As a Health Sciences student in 2002, Dr. Ng started *The Meducator* in hopes of giving undergraduate students the opportunity to be involved in academia. Two decades later, we bring Dr. Ng back to discuss his original visions for *The Meducator*, how it compares to where we are now, and how we hope *The Meducator* will continue to grow in the next 20 years. Dr. Ng is currently a family physician who provides primary healthcare to the Ottawa community. Let this interview be an opportunity for us to reconnect with our roots.

WHY DID YOU START THE MEDUCATOR?

The idea for *The Meducator* came when I attended a journal club at McMaster, and I was really interested in getting involved in research. I attended the first meeting and nobody had article[s], nobody was actually talking about research, and I sat there feeling really dissatisfied. I wanted more out of the [McMaster] experience, and so I left that group wondering, 'What could fill that need?' There was nothing at McMaster that bridged that gap, because as a first-

year coming in, you're green. You haven't had experience with research. You're lacking the knowledge, the expertise, and the contacts. The medical research establishment is out there and, as a first-year, you have no bridge to that. *The Meducator* came about as a bridge, giving [students] that chance to get into [research] hands-on.

A big focus of Health Sciences was [about] understanding where knowledge comes from. Before university, I didn't have an understanding of how knowledge [gets] generated. How does research happen? How do [facts] come about? My first-year inquiry professor was the late Del Harnish, the Dean at the time, and he instilled that idea of peer review in me. I thought, 'Hey, why don't we use that idea for *The Meducator*?' It met the students' needs because they got to get in touch with researchers, [...] write a scientific article, [...] learn, [...] and be curious. They got something to show for it after they finished, and the researcher [could also] share their passion with students and the community. [BHSc] can say, 'Hey, our students did this, look at this amazing thing.'

WHAT WAS THE PROCESS OF STARTING THE MEDUCATOR LIKE?

The McMaster Student Union at the time required clubs to submit a constitution. We needed to decide [on] the rules: there was a Word document with four or five bullet points for the responsibilities of each position. I thought, 'What would this person need to do at a bare minimum? If they did this, would we end up with a publication?'

We'd need someone editing the articles. For medical research, we'd need someone for health ethics, and then we'd need someone to look after the layout design. We only had one person: Kianosh Keyvani, who [did] the yearbook at her school. [She] single-handedly put [the issues] together. [There] were also my friends, Terry Ng and Kapilan Kugathasan. We [were] excitedly discussing what *The Meducator* could be like.

The Meducator sells itself in health science: it's a rich experience that is beneficial for everyone. The experience of managing people and creating something [is] a great thing. There were a lot of people excited to be a part of it; [recruiting people] was never really a big issue. The bigger issue was finding writers. [They] come and go.

I had no idea how we were going to fund this. My initial idea was ads, like any other publication. [At] the later end of the year, I met with the Dean and asked him for funding, and he agreed. But for the first part, we attempted to find ads and [sponsors], and our funding pool was very low. I was ready to just print it on [office] paper and hand them out, if that's what *The Meducator* needed. When we actually had that first publication in hand, it was something special.

WHAT DID YOU DO AFTER LEAVING THE MEDUCATOR?

After *The Meducator*, I did medical school at McMaster for three years, and then I went to Queen's University to do radiation oncology, a research-intensive medical specialty. Three years into the program, there was a job crisis in radiation oncology, where it was unclear whether you'd be able to practice where you wanted, even if you [were qualified]. I had to do a bit of soul-searching. I wanted to practice medicine and [balance] family life. I had always been interested in medical research and the science of the human body. How do you mix that with caring for people? Radiation oncology was a great way to do that, because people were coming [in] with cancer, and you were using radiation to treat or cure them.

After three years of radiation oncology, I finished my family medicine residency at Queen's University, and then went into practice in Ottawa. The joy of family medicine is the relationship with your patients. Much like how *The Meducator* can be a bridge between first-year students and the medical research community, family doctors are a link between patients and the medical practice community. It involves bridging that gap to a specialist where you involve their expertise, whether we're applying [their] recommendations or explaining some of the complex things that they said.

[Family medicine] is totally not where I expected, and yet I couldn't be more happy with how things have turned out. The experience of caring for people never grows old. [It's about taking] someone in a position of suffering, using

your knowledge and resources to help them make sense of what's happening, and [giving] them the reassurance that they're gonna be okay. You're going to be there for them; even if things don't go well medically, you're able to support them. [The ability] to care for people in that way has been the joy of family medicine for me.

DO YOU STILL KEEP IN TOUCH WITH YOUR MEDUCATOR COLLEAGUES?

Yes, some. Pulling all-nighters, trying to get stuff done, finishing the editing... it forms a bond. Terry Ng is actually in Ottawa. He's a medical and college oncologist and researcher. We hang out; we're still in touch. Terry was the [vice-president]. He started *The Meducator* with me.

HAS STARTING THE MEDUCATOR INFLUENCED YOUR INTERESTS AND PERSONAL DEVELOPMENT?

The Meducator taught me how to respond to life's challenges. When life isn't the way that you need it to be, you can accept it and be unhappy; or, you can try to forge a new way and [create] the thing that you want. I was so fortunate to meet so many talented and amazing people, [and I learned] to trust that people [who] come together with a shared vision can make amazing things happen.

The Meducator teaches you how humbling it is to pull back the curtain [and] realize that knowledge [is not] as certain as you might have thought. When you start looking at things, like 95% confidence intervals and statistics, you realize [that] there's so much variability to the conclusions. [Knowing] where the data came from gives you more confidence, and also a humbleness about the knowledge that we have.

There really are no 100% certainties in family medicine. Every intervention has a range of effectiveness for different people. It teaches you the importance of follow-up, to make sure that you're not overconfident. You're aware that weird things can happen, so that you can be flexible. If you've ever been engaged in primary research, and you've noticed that you got a data point that was not expected, [... ignoring] that [means] you're probably not doing good research.

COULD YOU ELABORATE ON THE IMPORTANCE OF INVOLVING UNDERGRADUATE STUDENTS IN ACADEMIA?

The importance of involving students in academia is to give them first-hand experience. It's one thing to read about [research]; it's another thing to engage in it.

A quote from Del Harnish: "Learning is a contact sport." *The Meducator* gives students that opportunity to engage in writing an article. You learn about how [research] is

conducted, and where information comes from. That gives you a deeper learning experience, and an appreciation for research itself. I don't think that you can really learn that without getting your hands dirty.

The Meducator involves students by putting them into contact with [the researcher] as well. If they form a good connection, then they [get] welcomed into the lab, [and] that may help them dive into that passion. For people to [...] figure out what they like is helpful for individuals to find their own path.

BACK IN 2002, WHAT HAD YOU ENVISIONED FOR THE MEDUCATOR TO BECOME? HOW DOES IT COMPARE TO THE MEDUCATOR IN 2022?

I envisioned *The Meducator* to be a way for students to explore a research topic that they were interested in. How that [issue] would look like in physical form mattered less than the experience of having fun.

The heart of that process is still alive and well, and expanded upon by the editors. The process has become much more rigorous, and I think that's good for students and *The Meducator*. I am floored by the quality of the Critical Reviews, [...] what kinds of articles are coming out, and imagining what kind of experience the student is getting from the process of writing. I'm happy that you have been able to expand on that and make it a more rich process.

I really like that the idea of [...] experiencing things in the medical community is the theme of the various subprojects. I like MeduCollab, [MeduCurrent], the YouTube videos, [and] the interviews. [...] *The Meducator* is giving a great service to the people who are part of it, because if you're a first-year student and you go to someone, you're like, 'Hey? Can I just talk to you?' It's not as easy to access as if you go, 'Oh, I'm with *The Meducator* and I'm doing an article.' It can open doors for you.

[It] is such a visceral thing how beautiful *The Meducator* has become. I want to hug the issues! I haven't had that feeling of holding *The Meducator*, and that sense of amazement for a long time. I had not envisioned how well art would integrate into *The Meducator*, and I really like how that can merge with the writing to create something beautiful and engaging.

That's also what was missing for me from the journal club. Even if I would have been talking to other students, there wouldn't have been any real authority in the room. After we finish talking, it just evaporates into [thin air]. I didn't get to share my understanding in a community. There's no tangible thing that's there! It wasn't as rich of an experience as if there was an end product.

WHERE DO YOU THINK THE MEDUCATOR WILL BE IN 2042?

I expect to be tasting my articles in 2042!

So long as *The Meducator* has students engaging, [it] may expand and contract in whatever way it needs. So long as that heart is still there, *The Meducator* is willing to publish on [office] paper if we have to, and it continues to be beneficial, then there will be value and people will continue to [participate].

WHAT IS THE BEST MEMORY YOU HAD BEING ON THE MEDUCATOR?

The best memory would be every time we had an issue printed and you're holding the physical copy. You're really [appreciating] what everyone did to make this happen. My other favorite memories were all the moments where I got to see people act with passion and excellence. When I created the *Meducator* constitution and set the roles, there was so much freedom for people to go do something great with this. It was always a joy for me to see what people have done, and to go, 'Oh, wow! That's a great idea, that's fantastic! Oh, that's gonna be amazing!'

WHAT WAS YOUR FAVORITE PLACE ON CAMPUS?

Health Science Library.

WHAT DID YOU EAT DURING EXAM SEASON?

Whatever was in the Commons at the time, on the meal plan... [like] pasta. I think there was a Teriyaki Experience on campus. There was Subway, Pizza Pizza... you know, all this really healthy stuff.

YOUR BHSC EXPERIENCE IN 3 WORDS?

Inquiry was awesome.

WHAT DO YOU MISS ABOUT BEING A STUDENT?

The exciting sense of possibility. The Health Science community felt [like] there were open doors, and that the world lay in front of you. You're not sure where your life is going to go.