

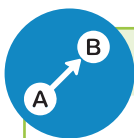
A practice-oriented guide, adapted from ongoing research across medical schools
 A more detailed analytical treatment of these findings is in preparation for peer-reviewed publication.

Two complementary frameworks



Normative pathway (Kern & AAMC)

- “Build the ideal curriculum from scratch”
- Formal needs assessment & objective writing
- A coordinated, longitudinal thread
- Often high funding needs (materials, experts)
- Thorough, standardized, evidence-based design



Real-world pathway (observed)

- “Build on structures already in place”
- Identifying openings in the existing schedule
- An opportunistic thread woven into courses
- Often low funding needs (repurposed resources)
- High likelihood of actually being implemented



Every school follows a different pathway

Successful initiatives emerge through different entry points depending on local resources, leadership, opportunities, and institutional context. The goal is not to reproduce another school's curriculum, but to identify a pathway that fits one's own environment.

Detailed comparison across dimensions

		Normative implementation framework	Real-world implementation
	Purpose	Guide curriculum development	Understand how implementation actually unfolds
	Nature	Prescriptive	Descriptive
	Sequence	Linear	Non-linear, multiple entry points
	Starting point	Formal needs assessment	Local opportunity, resource, or champion
	Primary focus	Educational design	Organizational change
	Logic	Planned	Emergent
	Leadership	Formal governance	Faculty champions + institutional support
	Resources	Assumed available	Variable, often improvised
	Barriers	Not central to the model	Central to the process
	Adaptation	Limited once designed	Continuous
	Outcome	A curriculum	A sustainable, institutionalized practice

The six implementation entry points



Clinician-champion

Begins with a clinician's firsthand experience of an educational gap.



Institutional opportunity

Begins when institutional change opens a window.



Existing resource

Begins by adapting a resource the school already has.



Community partnership

Begins with community programs that migrate into the curriculum.



Interprofessional collaboration

Begins with cross-professional teaching partnerships.



Research & evaluation

Begins with scholarship that builds evidence and legitimacy.

Barriers common across pathways



Time & workload

- No protected faculty time
- Scheduling conflicts
- Curriculum overload



Funding & resources

- Lack of dedicated funding
- Cost of local adaptation
- Facility access



Culture & perception

- Seen as peripheral
- Faculty skepticism
- Professional silos



Leadership & governance

- Competing priorities
- Leadership turnover
- Lack of clear ownership



Coordination & sustainability

- Coordinating stakeholders
- Sustaining partnerships
- Champion dependence



Evaluation

- Limited evaluation capacity
- Lack of longitudinal data
- Limited time for scholarship

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