From the OMA’s perspective, the #CareNotCuts social media campaign has already been a success. The reaction online has been incredibly positive, with the public, physicians and other health care providers all engaging in the discussion, according to OMA President Ved Tandan (@VedTandan).

“We are happy to see that many physicians have been inspired to carry the conversation onto other online mediums, such as blogs, to express their concerns and educate the public on the impacts that these cuts will have on patient care,” Tandan stated in an email.

As of Mar. 2, the hashtag #CareNotCuts had been used more than 7500 times and tweets including the hashtag had reached more than 2.4 million Twitter accounts, according to the OMA. During the same period, engagement on OMA’s Facebook page increased by around 300% and posts related to the campaign were shared more than 3000 times.

“We’ve learned that social media is a valuable tool for advocacy and we’ve had great success in connecting with online communities who are able to amplify our message and share information more widely,” Tandan stated in the email. “While a social media campaign may not change the government’s decisions, the #CareNotCuts campaign gives physicians and patients an online platform to voice their concerns, give feedback and suggestions, and participate in discussions with people they may never have the opportunity to meet in real life.” — Roger Collier, CMAJ

No more “internes”: CAIR rebrands

Internes? Most Canadians don’t spell it with the second “e,” but that wasn’t all that was outdated about the moniker Canadian Association of Internes and Residents (CAIR).

Internships ended in Canada more than two decades ago, and CAIR has apparently been discussing a name change for almost as long. Now it’s actually happened. After consulting with board members, stakeholders and residents, CAIR has a new name: Resident Doctors of Canada.

The term “interne” is a vestige of how the medical education system used to work, says Laura Spragge, the group’s communications manager. Canadian medical school graduates used to serve one-year internships to obtain general licences to practise medicine and could then opt to pursue specialty training. But that ended in 1993.

“This year was a particularly good opportunity for rebranding because we also underwent many other transformations,” says Dr. Christina Nowik, the association’s president.

These changes include a governance review and a new strategic plan to focus on training (including curriculum development, accreditation and examination policy), wellness (to help residents become “healthy and resilient doctors”) and representation (as the “unified voice” of Canada’s 9000 residents).

It was time to make CAIR “a more modern and streamlined organization,” says Nowik. Feedback on the changes has been positive so far, although she acknowledges that there is always confusion accompanying a name change. “CAIR was a nice acronym, I have to admit!”

CMA President Dr. Chris Simpson congratulated Nowik and the association on the changes and praised the group for providing excellent representation for residents. “I know these changes will help to further cement that strong support.” — Amy Thatcher, CMAJ