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# **Original Article**

Reforming Medical Education in Pakistan Through Strengthening Departments of Medical Education

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# ABSTRACT

Early medical education departments, notably in the United States, were well-known for their origins as medical education research institutions. Objective: According to this study, Pakistan's medical education may be improved by creating new departments of medical education and training. Methods: The Punjab Health Department conducted this crosssectional survey from August 2021 to November 2021. Participation in the research was open to people from all areas of life. The study included all the city's medical schools that were approved by the PMDC and situated inside the city's boundaries. Responses were from medical college faculty members who had been solicited to participate in the survey, such as department chairmen. Results: In the study, 200 people are participating, and their data was acquired from that group. Every single person who has been nominated for the position was interviewed. Students' assessments (72.2 %) came in second, followed by faculty development (70.7 %), curriculum development (70.7 % ), and educational research (66.6 % ). Conclusion: For the last argument, it is claimed that DMEs with a long history of success can play a key role in strengthening medical education. Policy, governance, and regulatory challenges should be addressed by the Ministry of Planning and Development, and medical universities in Pakistan, as well as technical capabilities in these areas at medical and dental schools across Pakistan.

### INTRODUCTION

Historically, medical education departments in the USA operated as research and development centers for medical education. To reach a larger audience, George Miller and Edwin Rosinski founded their medical education research institutes, following Hale Hamm's lead. In the year 2000, there were 61 medical schools in the United States with an office dedicated to medical education, which did more than just conduct basic science studies. Because of US and Canadian medical education advancements, several Canadian medical schools have established medical education departments [1]. In order to fulfill public demand, incorporate educational advances into teaching and learning, and educate more physicians in locations with low resources, many medical schools now have DME departments [2]. Professors must teach, research, and grow faculty [3], as is offering guidance and assistance on curriculum creation and evaluation. Until recently, Pakistan's university system did not have a systematic training program for new faculty members. CME and CPD initiatives at several universities were gaining traction [4]. In certain medical schools, departments for medical education were part of both the undergraduate and graduate programs, while in others, the departments were independent entities. Across the country, however, a framework for medical faculty professional progress was needed. For the first time in 2008, A DME was mandated by the Pakistan Medical and Dental Council (PMDC)[5-7]. The medical literature on change management advocates including those most affected by the change. To make a long-term impact, it is critical to communicate widely with all relevant parties, convey the importance of the change, gain their buy-in during the planning process, empower

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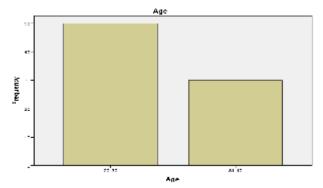
employees to take ownership, and establish a sense of community[8].

### METHODS

The Punjab Health Department conducted this crosssectional survey from August 2021 to November 2021. People from many walks of life were invited to participate in the study. The study included all of the city's medical schools that were approved by the PMDC and situated inside the city's boundaries. Responses were from medical college faculty members who had been solicited to participate in the survey, such as department chairmen. A questionnaire was prepared to obtain information regarding DME structure and function. The authors prepared the initial version of the questionnaire only after comprehensive literature research. The guarantee of confidentiality reassured participants. The study's resource individuals were given the questionnaire and requested to agree verbally and in writing. On a PC, it took roughly 25 minutes to finish. The investigator also created a checklist based on a questionnaire to validate the data. SPSS version 19 was used to gather and analyze the information. The mean and standard deviation were used to summarise all data.

### RESULTS

In the study, 200 people participated, and their data was acquired from that group. Every single person who has been nominated for the position was interviewed. Students' assessments (72.2 %) came in second, followed by faculty development (70.7 %), curriculum development (70.7 %), and educational research (66.6 %). What challenges have they encountered in strengthening DMEs at their particular institutions? Participants were asked to make critical suggestions for improving medical education at their institutions. DMEs may only be created at institutions if they have senior leadership's complete support, Enhanced collaboration with PM&DC, and full-time hires of educated and competent professionals.



**Figure 1:** Age-wise distribution of studied population.

Figure 1 shows that There were 100 participants, 50 of who were between the ages of 20 and 30, and 30 of whom were between the ages of 31 and 40, according to the demographic data on age. Moreover, half of the individuals who participated in the poll were less than 30 years old. The data was obtained solely from females because all of the nurses in the service hospital are female and just seven of them are male.

| Barrier   | Frequency | Percentage |
|---|-----------|------------|
| Lack of infrastructure and resources  | 13        | 72.2       |
| Lack of qualified and trained HR  | 12        | 66.6       |
| Resistance from faculty and top management  Lack of authority and coordination with PM&DC | 11 7      | 61 38.9    |

**Table 1:** Improving Pakistan's medical education is hindered by several obstacles

### DISCUSSION

Clinical and dental research aims to enhance disease prevention and treatment by expanding scientific understanding [9]. To provide the best possible treatment for patients, students benefit from the knowledge they get via exams [10]. Postgraduate examination plans have been linked to clinical research participants [11-12]. From the beginning of their clinical careers, students have a positive attitude toward research [13]. Few studies have found evidence to support common-sense activities in the context of improving undergraduate exam comprehension and abilities, despite widespread agreement on the importance of doing so. Research at Princeton University in the United States found a reduction from 14.7% to 11.7% in the percentage of graduating clinical understudies with strong exploration aspirations [14]. Since it directly affects the general public's health, clinical calling research is critically essential. In the realm of clinical research, there is always a need for improvement. Because of this, evidencebased medicine has been widely accepted and has a wide range of applications. No matter how advanced the clinical investigation, the type of treatment delivered to patients will be impacted. As a result, we are seeing attempts at the institutional level to improve the quality of undergraduate clinical and dental research [15]. Students preparing for a future in clinical medicine might benefit from learning the fundamentals of reasoning, thinking critically, and developing a favourable attitude toward research as early as their undergraduate years [16-19]. Those college students who do well on their exams are expected to adhere to the evidence-based medical philosophy and pursue research-based projects in their post-graduate

education[20].

### CONCLUSION

Finally, well-established and well-functioning DMEs can have a major impact on the overall quality of medical training. Policy, governance, and regulatory challenges should be addressed by the Ministry of Planning and Development, the Higher Education Commission, and medical universities throughout Pakistan, as should technical capability in these areas at medical and dental institutions across the country.

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