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**Doctors of Tomorrow -  
Innovative Tracks In  
Medical Education  
Development**

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**Introduction & Significance**

The old conventional form of medical education is almost being discarded in most parts of the world and experiments made with new approaches and ways to educate future physicians. Most of the countries have already adopted changed curricula while some have resorted to the old traditional system. Pakistan is slowly feeling the impulse for a change and the medical educators have brought in some changes in the curricula very recently which still lack the use of a "track strategy" to introduce new methods of educating physicians of future.

Doctors of today are the outcome of urban and tertiary care-based training programme which results in gross maldistribution of physicians by geography and speciality. One educator noted these consequences:

"Doctors find themselves unaccustomed to assess and evaluate the health care needs and priorities of their own country and its people. They are incapable of providing or implementing preventive programmes. They are unprepared to work in the slums of the cities or to manage a rural health care team<sup>1</sup>.

This entitlement was forcefully expressed in the World Health Organization's Conference in Alma-Ata (1978) which confirmed the goal of "Health For All By The Year 2000"<sup>2</sup>.

Educators who are contemplating change in traditional schools can greatly benefit from careful analysis of strategies employed by schools that have succeeded in bringing about fundamental curricular change. They can select appropriate strategies and adapt and apply them to their own institutions.

The overall objectives for the new innovative approaches are:

- To train young doctors and other allied health staff to become community-oriented in dealing with problems of communities particularly the deprived and down-trodden population of Pakistan.

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- To integrate curative, preventive and promotive health care delivery through various field programmes with emphasis on Primary Health Care.
  - To strengthen the existing health services through the development and implementation of prototypes of health services in collaboration with local and national authorities.
  - To improve the information system and health system research and contribute to better national understanding of the health and services problems of Pakistan.

### **Conceptual Basis of the Medical Curriculum**

The main education system would evolve around community based Medical education focused on population groups and individual persons which takes into account the health needs of the community concerned.

The terms community-based education and problem-based learning are usually understood to mean two strategies for facilitating community-orientation. A programme or curriculum is considered community-based "if it consists of an appropriate number of learning activities in a balanced variety of educational settings, i.e. in both the community and a diversity of health care services at all level, including the tertiary care hospitals"<sup>3</sup>. Community-based education is based, in part, on the belief that it is necessary to bring those studying for health professions into direct contact with the community environment in order to train them appropriately to practise in the community after graduation.

Problem-based learning has two educational objectives: the acquisition of an integrated body of knowledge related to the problem and the development or application of problem solving<sup>4</sup>.

Community oriented learning is concerned with both concepts and skills. The various programmes deal with the learning of concepts relating to such subjects as community organization, population needs, epidemiological analysis and health education, as well as for the development of immediate "on-site" problems solving skills.

The approach of community health sciences to undergraduate medical education is to facilitate learning on the part of the students to enable them to deal with the health and development problems of communities on a socially sensitive, methodologically sound basis, strictly integrated into a community health planning cycle incorporating cyclic steps: community assessment which involves gathering and analyzing relevant data; identifying key problems; setting priorities among those problems; planning solutions in the form of PHC programs and systems; implementing, monitoring and evaluating those programs and systems; and continuing with further iterations of the planning or problem solving process<sup>5</sup>. This approach is being followed by the Aga Khan Medical College, Karachi.

Educational development centres at the national level can play a vital role in the educational developmental activities in training health manpower according to the needs of the country with strengthening of teacher training, research and a function in promoting continuing education of all health personnel. There also remains the old problem of coordination between the producers of health manpower: the training institutions and the users: the health services. The need for collaboration between health services and health manpower development is as great today as it ever was but there is lack of coordination and collaboration between these two parties. The education development centres must find a way of bridging the gap.

#### References

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