

**GROUP MEETING
ON MEDICAL EDUCATION
KHARTOUM, 9-13 DECEMBER 1968**

WORLD HEALTH ORGANIZATION
EASTERN MEDITERRANEAN REGION

WORLD HEALTH ORGANIZATION
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REPORT ON
SPECIAL GROUP MEETING ON MEDICAL EDUCATION
KHARTOUM, 9 - 13 DECEMBER 1968

NOTE: The views expressed in this Report do not necessarily reflect the official policy of the World Health Organization.



Participants and Observers who attended the WHO Special Group Meeting on Medical Education
photographed with Sudan's President of the Supreme Council, H.E. Sayed Ismail El Azhari
Khartoum, 9 - 13 December 1968

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I INTRODUCTION

The Special Group Meeting on Medical Education met from 9 - 13 December 1968 in Khartoum, Sudan. This Meeting is a follow-up of the previous meetings on Medical Education organized by the World Health Organization Regional Office for the Eastern Mediterranean (Teheran 1962, Alexandria 1963, Alexandria 1966, Baghdad 1967) to review the development of Medical Education in the region with a view to its further progress and promotion. The establishment of an Association of Medical Schools in the Middle East was proposed initially in the Teheran Meeting (1962) and followed up by the formation of an Interim Organizing Committee which emerged from the Baghdad Meeting (1967). The official formation of the Association became a priority item on the Agenda of this Meeting. In addition, two important items, namely Teaching Methods in Medical Education and Student Affairs, were added to the Agenda (ANNEX I).

1. OPENING SESSION

The Meeting was officially opened on Monday morning, 9 December 1968, at the University of Khartoum, by His Excellency Sayed Ismail El Azhari, President of the Supreme Council of State. His Excellency welcomed the participants and wished the Meeting success in its deliberations, His Excellency emphasizing, among other things, the importance of training medical man-power for developing countries. He concluded as follows:

"It is time for us now to promote efforts for the progress of our nations and, at this junction let us acknowledge with gratitude the work of the World Health Organization for its backing in this humane field and let us be hopeful with the birth of the Association of Medical Schools in the Region."

Following this, H.E. Dr. Abdel Hamid Saleh, Minister of Health, addressed the Group stressing the role of the physician in the overall development of the country involved.

Dr. A.H. Taba, Director, World Health Organization, Eastern Mediterranean Region, expressed his thanks to the Government of the Sudan and the University of Khartoum for having acted as host and for their active participation in the Meeting. He emphasized the interest of WHO in the promotion of medical education and extended the full co-operation of the World Health Organization.

Dr. O.M. Osman, Vice-Chancellor, University of Khartoum, and Dr. M.A. Haseeb, Dean, Faculty of Medicine, University of Khartoum, welcomed the Group and expressed their wishes for a successful meeting.

2. ELECTION OF OFFICERS

The following officers for this Group Meeting were elected by the participants (see ANNEX II):

Dr. M. A. Haseeb
Dean, Faculty of Medicine
University of Khartoum, Sudan, as Chairman

Dr. A.H. Sorour
Dean, Medical Faculty
Cairo University, UAR, as Vice-Chairman

Dr. Nazeer Ud-Din Ahmad
Dean, Nishtar Medical College
Multan, Pakistan, as Vice-Chairman

Dr. C.M.H. Mofidi
Dean, Faculty of Public Health and
Director, Institute of Public Health Research
Teheran University, Iran, as Rapporteur

3. ADOPTION OF THE AGENDA

Dr. M.R. Farid, WHO Public Health Administrator, Education and Training,
a.i. introduced the Provisional Agenda which was officially adopted (Annex I).

II TEACHING METHODS IN MEDICAL EDUCATION

Dr. F.L. Huston, WHO Temporary Adviser, introduced the subject for
discussion and emphasized the following points:

The foundational material for the discussion of teaching methods in
medical education was predicated on ten basic premises which stressed the
critical importance of a clear statement of educational objectives. These
objectives aid in the selection of teaching methods by defining what is
expected of the student. Once this is known, one can look at the available
methods and more easily select the method or combination of methods which
have the most promise of producing the desired results - in the learner.
Education seeks to change the learner in pre-determined ways by adding to
his knowledge, developing his skills and/or modifying his attitudes.
Teaching methods are like tools and as no one tool will do all things
neither will a single teaching method accomplish all things. Modern

teaching techniques are attractive and expensive, many schools are not equipped to use them, and so it is necessary that these, too, be analysed to determine which of them, from a practical as well as economical point of view, will most effectively aid in achieving the objectives.

The discussion of teaching methods was limited to the traditional modes which almost any institution can carry out with existing staff. The emphasis given was that of identifying the kinds of educational objectives to which each method would be most appropriately suited.

The lecture method was stressed as the method of choice where large amounts of information (knowledge) must be transmitted to large groups of students.

The small group or seminar method was discussed as a technique which is gaining much popularity in modern health education. The intimacy it provides and the intensity achievable in the teacher-student interaction marks this as a method most suited to objectives dealing with attitudes and synthesis of knowledge.

The demonstration process is vitally necessary to education in the healing arts. It serves an optimal role in achieving the foundations, "the how" of skills, a necessary precursor to the actual performance.

Objectives dealing with skills cannot be achieved through demonstration alone. At some point, the demonstration process must give way, gradually, to the "practice" method. Here the student, under guided instruction, must begin "doing". In health education there is no known substitute for achieving the desired complex skills involved in patient care !

Man-machine interaction was introduced as a separate method in the discussion of teaching machines. The anthropomorphic dummy, computer assisted instruction techniques, and other simpler methods of programmed instruction were covered. Also mentioned as an innovative method of instruction was the use of live "programmed patients" (actors and actresses)

as applicable to almost any institution.

In a summary statement, the group was reminded that the excitement and mystique of modern teaching methods must be weighed against institutional capability and economic considerations. It was also reiterated that every teaching method must be selected from the foundation of practical, clear, measurable, change-oriented educational objectives.

During the discussion period the following major issues were raised:

- a) There exists a lack of teaching skills, knowledge of pedagogy and the teaching-learning process on the part of most medical school Faculty members.
- b) Consideration should be given to obtaining valid student reactions relative to the teaching methods used and the effects of these methods on their academic experiences.
- c) The desirability of using a variety of teaching methods in a complimentary, supportive fashion.
- d) The use of examinations as assessment devices, teaching tools and as guides to assisting students in strengthening weaknesses rather than as punitive, inadequate grading devices.
- e) There may be some wisdom in using selected students as teachers and/or leaders of discussion groups with or without a faculty member in attendance.
- f) The paucity of good lecturers in medical schools was raised. It might be desirable to consider other teaching methods where such deficiency exists and where these other methods would produce the same or, preferably, better results.
- g) The need to educate both the teachers and the students in the knowledge that the teaching-learning process is not the sole responsibility of the teacher and the institution. It is one which must be shared and in which the student must accept an active role.

- h) A candid recognition that institutional capabilities differ and that the latitudes and limitations thus enjoyed or imposed must be actively considered in the selection and implementation of teaching methods.
- i) The attraction and retention of basic science faculty must be strengthened through increased remuneration, closer interaction and even some overlapping with the clinical faculty. With the introduction of student fellowships and stipends, many interested medical students can be encouraged to remain in the basic science fields after the receipt of their degree. (It is gratifying for many to know that some countries in this Region are embarking on training programmes at the graduate and post-graduate levels in the basic medical sciences.)
- j) The shortage of good text books and journals, the inadequacy of library facilities and the inability of many students to use the facilities which are available, appear to be an area requiring intensive and immediate remedial action in many countries of the Region.
- k) The introduction and utilization of audi-visual aids must be carefully considered. It is necessary to study initial costs, maintenance, existing regional facilities, the relative merits of super-sophisticated devices with a frank appraisal of the extent to which they will be productively used in the teaching-learning processes. With respect to computers, due regard must be given to the availability and retention of the highly skilled programmers and technicians needed to keep the units functioning properly.
- l) The utilization of community resources, such as museums and other public educational facilities, might well be a fruitful method of

expanding the capabilities of the institutions in certain countries of the Region.

- m) The entire community in which a medical school is located should be maximally used in increasing student awareness of the realities of medical practice.
- n) In places where a faculty of education exists as part of the University complex, every effort should be made to bring the two faculties together in scholarly dialogue and mutual assistance.
- o) The extreme value of the extensive assistance which the World Health Organization has rendered was referred to with great appreciation. WHO's contributions in the preparation of teachers, librarians and other medical school staff members through its fellowship programmes; the provision of teaching supplies and equipment and the organization and participation of staff in conferences, seminars and personal counsel were evident in the intensity and diligence which the group displayed during this discussion.

III STUDENT AFFAIRS

The paper prepared on the subject by H.E. Dr. A.W. El Borolossy, Minister of Higher Education, United Arab Republic (in his capacity as WHO Temporary Adviser to the Meeting), was introduced in absentia by Dr. G.E. Rifka. He outlined the many problems encountered by medical students. Those deserving particular attention include inadequate housing, limited finances, insufficient counselling, language barriers, shortage of text books and library facilities, overcrowded classes and inadequate student health service. Two items were suggested in the paper for further study:

- i) A survey of student affairs in some medical schools in the Region.

- ii) A study of student failure in some medical schools in the Region. This study should include causes and remedies.

This was followed by a presentation on the same subject by Dr. D.S. Ali, Dean, Medical College, University of Baghdad. He defined the welfare of the medical student as an organized effort to improve his scientific, academic, social and economic conditions thus facilitating his success and enjoyment of his medical education. In this context the selection of the medical student is of utmost importance. It would be ideal to select a student who is physically and mentally fit, open-minded, intellectually curious, humane in outlook, aware of his responsibilities. He should also have a broad background of knowledge and a motivation to study medicine. Other factors affecting student welfare are curriculum and teaching methods, the examination process, physical facilities and extra-curricular activities.

The faculty member should be a person dedicated to teaching. He should like his students, be ready to help them and give his full time to the academic process and student guidance and welfare. The "open door system" was emphasized as a means for facilitating communication with students. This system is likely to lead to early diagnosis and resolution of situations which might adversely affect their academic progress.

During the discussion, emphasis was placed on the need for increased attention to a resolution of the many problems faced by the students during their years in medical school. There is an obvious need for wider application of the type of research and study being carried on by Dr. D.S. Ali (Iraq) and his staff.

IV ESTABLISHMENT OF THE ASSOCIATION OF MEDICAL SCHOOLS IN THE MIDDLE EAST

The Report of the Meeting of the Interim Organizing Committee for the establishment of an Association of Medical Schools in the Middle East, Alexandria 24-26 June 1968* was introduced. The background of the formation

*Document EM/MTG.IOC.ASSOC.MED.SCHLS./6 EM/Ed.Tr./148 EMRO 0168 June 1968

of the above Association which originated in the Teheran Conference on Medical Education (1962) and was followed up in subsequent Meetings, was outlined. The Chairman then opened the floor for discussion of the proposed Constitution.

The group engaged in a lengthy discussion relative to the name of the Association. Several titles were suggested and recorded. These titles were: Islamic, Inter-Continental, Avicenna, Razi, TALIMUTIB, Middle East and North Africa, West Asia and North Africa, Near East, Eastern Mediterranean, and Mediterranean. None of these was accepted by the Group as the official title of the Association. It was subsequently agreed that the title (Association of Medical Schools in the Middle East) should be retained until the meeting of the General Assembly when this question would be reconsidered.

It was proposed that the Association should be opened to individual membership. Inasmuch as there was divided opinion on this subject, it was agreed to refer the matter to the Establishment Committee for further study and subsequent recommendations.

The remainder of the Constitution was reviewed and modified with particular reference to the composition of the General Assembly, functions of the officers, voting, membership dues and auditing of the accounts. The Constitution was then voted and approved unanimously as amended.

In order to maintain continuity, provisional articles concerning the formation of an Establishment Committee were presented and approved.

The following were elected to serve on this Committee:

- Dr. D. S. Ali (Iraq)
- Dr. A.W. El Borolossy (UAR)
- Dr. M.A. Haseeb (Sudan)
- Dr. S. Karatay (Turkey)
- Dr. C.M.H. Mofidi (Iran)
- Dr. R.E. Nassif (Lebanon)
- Dr. M.A. Shah (Pakistan)

Dr. A.S. Darwish (UAR) was elected as alternate to Dr. El Borolossy should the latter be unable to participate in this capacity. It is to be noted that Doctors D.S. Ali, A.W. El Borolossy, C.M.H. Mofidi and M.A. Shah were members of the Interim Organizing Committee whose contributions during the preparatory phase have been most impressive.

V RECOMMENDATIONS

In the light of the deliberations of the Meeting, the following recommendations emerged:

A. Teaching Methods

1. Medical educators should seek the co-operation and advice of specialists in educational methodology to solve the many-faceted problems involved in medical education. This might be most feasible in universities where faculties of medicine and education co-exist.
2. That once the Association of Medical Schools in the Middle East has been established, a sub-committee should be appointed to investigate, advise and make recommendations in the acquisition, utilization and exchange of audio-visual equipment and the instructional materials used in them.
3. That a sub-committee of the Association of Medical Schools in the Middle East be appointed to study methods of financing fellowships and facilities for the training of medical School Faculty members in educational theory and methodology. The possibilities of WHO assistance in this field should be explored.
4. That the subject of evaluation in medical education be presented as a specialized workshop-seminar at some future meeting of this Group.
5. That each school should analyse and, where necessary, revise its examination methods with due consideration to the educational value rather than the punitive aspects of these methods.

6. That intensive study, with the help of WHO, be initiated to upgrade the number and quality of medical text books and library facilities.
7. That WHO assist , within its capabilities, competent departments and institutions in the Region to produce various teaching aids (slides, films, mounted specimens, museum pieces, single concept films etc.,) for the use of the teaching institutions in the Region.
8. That, wherever centres of excellence exist and are used for training teachers in particular medical disciplines, WHO should consider the possibility of providing staff and facilities enabling such centres to offer instruction in educational methodology and pedagogy pertinent to medical education.

B. Student Affairs

9. Since student welfare is a critical aspect of academic success, the medical school administration should place emphasis on improving student health services, health insurance, adequate housing, extra curricular activities, social and cultural experiences, and adequate counselling through the "open door" policy.
10. That the Association of Medical Schools in the Middle East consider establishing a special group of members who will study, exchange information and otherwise interact on all aspects dealing with student affairs.
11. That research in medical education focussing on student affairs and the causes of student failure be expanded.

C. Other Subjects

12. That programmes for teaching basic sciences at the graduate level should receive constant support and encouragement from WHO through provision of professors, fellowships and teaching supplies.
13. That more extensive effort should be made to encourage the use of clinical faculty members in the teaching of basic medical science subjects, where they are qualified to do so.
14. That each medical school should have a maximum number of full time basic science teachers encouraged through adequate remuneration, interaction with clinical colleagues and other stabilizing attractions.
15. That every effort be made to identify, early in their course of study, the medical students who show an interest in, and a capacity for, the basic medical sciences. Such students should be encouraged with stipends and/or fellowships to follow these interests.
16. That WHO would continue to sponsor periodic meetings on medical education in the Region, in close consultation and collaboration with the new Association. Provision of grants to the new Association by WHO, within its budgetary limitations, should be considered.
17. That each participant arrange a meeting of the Faculty of his Medical Schools to carefully review and discuss the contents of this report.

VI CLOSING SESSION AND ACKNOWLEDGEMENT

During the closing session, the draft report was reviewed and approved by the participants. The Group expressed their gratitude to the Government of the Republic of the Sudan and to the authorities of the University of Khartoum for the excellent arrangements made which contributed greatly to

the success of the Meeting. Their generous hospitality will long be remembered.

The participants expressed their full appreciation to Dr. A.H. Taba, Director, World Health Organization, Eastern Mediterranean Region, for placing the facilities of WHO at the disposal of the Meeting and for his personal efforts in promoting medical education in the Region. The valuable contribution made to the Meeting by Dr. Henry van Zile Hyde WHO Adviser/Consultant, was openly expressed. Commendations were also extended to Dr. M. O. Shoib (WHO EMRO), Dr. E. Braga (WHO HQ, Geneva), and Dr. M.R. Farid (WHO EMRO).

Appreciation was also expressed to the WHO Temporary Advisers to the Meeting, namely, Dr. F. L. Husted and Dr. G.E. Rifka, for their valuable assistance and contribution. The Group recognized the excellent administrative arrangements and secretarial services provided by the National Committee and by Miss C.L. Cartoudis (Conference Officer) and Mrs. L. Soliman (Secretary).

The participants from Iran extended an invitation to hold the next meeting on Medical Education in Iran.

ANNEX I

AGENDA OF THE MEETING

1. Introduction by the WHO Director, EMR
2. Election of a Chairman, two Vice-Chairmen, and a Rapporteur.
3. Adoption of the Agenda.
4. Teaching Methods in Medical Education.
5. Student Affairs (social, cultural, educational, etc.)
6. Presentation and discussion of the Report prepared by the Interim Organizing Committee for the Establishment of an Association of Medical Schools in the Middle East.
7. Approval of the Revised Draft Constitution by the Participants.
8. Conclusions and recommendations.
9. Closing Session.

ANNEX II

FINAL LIST OF PARTICIPANTS

IRAN

Dr. D. Kazemi
Chancellor
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Ahwaz

Dr. G. Motamedi
Chancellor
Isfahan University
Isfahan

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Meshed

Dr. A. Ghavami
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Pahlavi University
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Dr. J. Montasser
Dean
Faculty of Medicine
Tabriz University
Tabriz

Dr. A. Pouyan **
Chancellor
National University of Iran
Teheran

Dr. M.A. Hafizi
formerly Dean
Faculty of Medicine
University of Teheran
Teheran

**Did not attend

IRAQ

* Dr. D.S. Ali
Dean
Faculty of Medicine
University of Baghdad
Baghdad

Dr. A.K. Jawadi
Dean
College of Medicine
Mosul University
Mosul

LEBANON

Dr. R.E. Nassif
Director
School of Medicine
American University of Beirut
Beirut

PAKISTAN

Dr. Syed A.K.M. Hafizur Rahman **
Dean
Chittagong Medical College
Chittagong

Lt. Col. A.F.M. Burhannudin **
Dean
Dacca Medical College
Dacca

Prof. Nurul Islam
Dean
Post Graduate Medical Institute
Dacca

Brigadier (Dr.) S.H.A. Gardezi
Principal
Liaquat Medical College
Hyderabad and
Dean
Medical Faculty
Sind University
Pakistan

* Prof. M.A. Shah
Dean
Dow Medical College
Karachi

*also Member of the Interim Organizing Committee
** Did not attend

PAKISTAN (Cont'd)

Prof. A.A. Wyne
Dean
Fatima Jinnah Medical College
for Women
Lahore

Prof. A. Hamid Sheikh
Dean
King Edwards Medical College
Lahore

Dr. Nazeer Ud-Din Ahmad
Dean
Nishtar Medical College
Multan

Prof. S.M A. Zaidi
Khyber Medical College
Peshawar

SUDAN

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Damascus

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Prof. A. Chadli
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UNITED ARAB REPUBLIC

Dr. A. Darwish
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Alexandria

* Dr. A.W. El Borolossy **
Rector and Dean
Faculty of Medicine
Assiut University
Assiut

Dr. M. Nagi El Mehallawi
Dean
Faculty of Medicine
Ein Shams University
Cairo

Dr. A.M Mottawei
Dean
Faculty of Medicine
Al Azhar University
Cairo

Dr. A.H. Sorour
Dean
Kasr El Aini Faculty of Medicine
Cairo University
Cairo

Dr. I.A. El Naga
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Mansourah

Dr. L. Bayoumi
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Alexandria University
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Dr. M A. Soliman
Vice-Rector for Research and Graduate
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* also Member of the Interim Organizing Committee
** Did not attend

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Professor of Microbiology
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Dr. S. Karatay
Director
E.N.T. Clinic and
Dean
Istanbul Faculty of Medicine
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Dr. O. Yigitbasi
Director
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OBSERVERS TO THE MEETING

LIBYA

Dr. Raouf Ben Amer
Dean
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Benghazi

SAUDI ARABIA

Dr. H. El Ghazayiry **
Dean
Faculty of Medicine
University of Riyadh
Riyad

**Did not attend

MEMBERS OF THE INTERIM ORGANIZING COMMITTEE

IRAN	Dr. C.M.H. Mofidi Dean, Faculty of Public Health and Director, Institute of Public Health Research Teheran University <u>Teheran</u>
IRAQ	Dr. D.S. Ali Dean College of Medicine Baghdad University <u>Baghdad</u>
PAKISTAN	Dr. M.A. Shah Dean and Professor of Ophthalmology Dow Medical College <u>Karachi</u>
UNITED ARAB REPUBLIC	Dr. A.W. El Borolossy Rector and Dean Faculty of Medicine Assiut University <u>Assiut</u>

ADVISER/CONSULTANT TO THE INTERIM ORGANIZING COMMITTEE

Dr. Henry van Zile Hyde
Director, Association of American
Medical Colleges
Division of International Medical Education
Washington DC, USA

WHO SECRETARIAT

Dr. A.H. Taba	Director	WHO Regional Office for the Eastern Mediterranean
Dr. M.O. Shoib	Director of Health Services	WHO Regional Office for the Eastern Mediterranean
Dr. E. Braga	Director, Division of Education and Training	WHO Headquarters
Dr. M.R. Farid	Public Health Adminis- trator, Education and Training, a.i.	WHO Regional Office for the Eastern Mediterranean

WHO SECRETARIAT (Cont'd)

Dr. G.E. Rifka	Temporary Adviser	WHO Regional Office for the Eastern Mediterranean
Dr. F.L. Husted	Temporary Adviser	WHO Regional Office for the Eastern Mediterranean
Miss C.L. Cartoudis	Conference Officer	WHO Regional Office for the Eastern Mediterranean
Mrs. L Soliman	Secretary, Education and Training	WHO Regional Office for the Eastern Mediterranean

