Short Communication

Perceptions about the standards of medical graduates in Pakistan: A brief literature review

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Abstract
Undergraduate medical education in Pakistan appears to be in turmoil due to various problems. One of the main reasons is the rapid growth of private medical colleges in a short period of time to meet the increasing national demands of doctors but without proper measures for standard maintenance and quality assurance. However, original research verification with a gross decline in standards is lacking. Efforts to reform the system cannot find credibility in the absence of evidence. To begin with simply interviewing senior consultants in tertiary care teaching hospitals in Pakistan to see if they perceive differences in standards of medical graduates from various medical colleges can provide such a proof. This short communication aims to provide a brief literature review of the perceptions about the standards of medical graduates and undergraduate medical education already published in the last two decades in some less validated forms.

Key Words: Standards; medical education; medical graduates; Pakistan.

Introduction
The overall perception of a decline in standards of medical graduates in a developing country like Pakistan, clearly indicates that undergraduate medical education is in a
turmoil facing many challenges. There are no proper measures in place for quality assurance and quality improvement to ensure that medical graduates are of an adequate standard to be safe and competent doctors. This situation has worsened with a rapid growth of private medical colleges. These institutions are contributing to meet the increasing national demands of doctors but without enough mechanisms for standardization and good quality education being in place. The outcome is that fresh medical graduates from various medical colleges, joining tertiary care hospital medical teams, demonstrate disproportionately large range of medical competencies and performances, from being totally incompetent to having excellent clinical competencies. Concerns about this crisis of medical education was raised frequently in the national media and it was highlighted repetitively by many educationists through editorials, opinions or short communications (Table1) but rigorous scientific research studies were not done so far which could have provided authentic evidence. Therefore, unless substantial evidence of substandard medical education leading to substandard products is available, recommendations for reforms cannot find credibility. Qualitative research projects can explore experiential and phenomenological evidence regarding variation of standards and existence of alarming low standards in the medical education of various medical colleges by studying their end products, the medical graduates though the experiences of their senior mentors. This is a part of writer’s commitment to work towards improving the quality of medical education in Pakistan; where there was one medical college in 1947 at the time of its inception, eight were added by the government with proper planning in the first decade and until 1990 there were only 22 (including only one private) but in the last two decades the number of medical colleges has increased to 132, more than 65 percent are private. This situation should invoke all the stakeholders reminding them of their social responsibilities.

Literature Overview
There is a scarcity of literature about medical education in Pakistan in general and about standards of medical graduates in particular. It was very difficult to find any
original works simply because no original research has been done so far regarding standards of medical graduates.

A thirteen-year audit of medical education publications in Pakistan: 2001-2013 which produced quantitative results, did not show a defined category of manuscripts about standards of graduates among the total of 118 publications. However, 16 (13.6%) manuscripts were not placed in any category and no papers about perceptions of standards were mentioned therein. This simple audit however, included publications from the four indexed medical journals of the country and excluded the 71 other local medical journals.

Only one original research paper, a qualitative study about problems of medical education in Pakistan, provided indirect evidence towards the low quality of medical education. Most of the other evidence consisted of opinions, editorials, short communications, commentaries and letters to the editors etc. The aim of study was exploring the problems of undergraduate medical education to know the causes of deteriorating standards of medical education and medical graduates in Pakistan. A qualitative design was the appropriate method as it was based on opinions and perceptions of 178 faculty members but instead of interviews or questionnaires their opinions had been recorded by facilitators in 13 workshops. The results relate to the original aim and enlisted the problems of medical education under headings of deficiencies in curriculum, faculty, students, teachers and assessment systems. The validity of the results is difficult to comment on as no other evidence was provided to verify them. However, being the only one in its category, this 20-year-old paper is a very valuable local evidence.

There is however a reasonable amount of evidence in the form of expert opinions to substantiate the existence of the issue. It was very rightly portrayed by Amin et al. that the current situation of a deteriorated state of medical education in Pakistan and India exactly resembled to what was happening in USA a century ago due to enormous growth of substandard private medical colleges in that region of the globe. They arrived at the conclusion that a century later almost all that described by Flexner in
his report ‘Medical Education in the United States and Canada: A Report to the Carnegie Foundation for the Advancement of Teaching ‘regarding the state of private medical colleges was being repeated in a different region of the world. This paper presented a comparative analysis of the situation of medical education comparing it to similar situation in a different part of the world a century ago. It provided lessons to learn either by following the report and changing our systems or writing a similar report in a new context with demanding needs of current times.

Although Naqvi\textsuperscript{7} had produced a large list of problems of medical education, Nasim\textsuperscript{10} in her short communication thought that the main reason of decline in quality is that most of private sector medical colleges in Pakistan were lacking departments of medical education and their faculties were untrained. This observation was based on her personal experiences as a teacher in medical education. In an editorial of the journal of college of Physicians and Surgeons Pakistan, Biggs \textsuperscript{1} raised concerns that there is an ongoing unchecked growth of medical colleges in the private sector and the medical colleges in Pakistan seem to be indifferent towards their social responsibilities. He wrote that in ten years’ time (between 2001 and 2011) 18 medical colleges (4 public, 14 private) had been established only in the Punjab Province of Pakistan. The main challenge, he thought, that the medical education in Pakistan faced, was, absence of a system to keep a check of standards of individual medical colleges.

Similarly, in an opinion article Awan\textsuperscript{3}very honestly exposed the current state of the medical education highlighting the kinds of medical graduates being produced and how focusing more on quantity and neglecting good quantity and standards could be dangerous to the health system of a country in the long term. Although, this article was based on the author’s opinions and his personal experiences, but it provided a very honest picture of the situation. Several other educationists have also raised such concerns in their editorial opinions or commentaries\textsuperscript{2,10-16}. 
Conclusion

This short communication forms the meagre, accessible local evidence about the standards of undergraduate medical education in Pakistan. Based on this information, it would recommend more extensive qualitative research to provide robust scientific evidence regarding the standards of newly qualified medical graduates in Pakistan. This authentic evidence is in fact urgently needed to acquire credibility and empowerment for the many voices asking for drastic reforms in undergraduate medical education in Pakistan.

Disclaimer: The literature review was part of an assignment submitted to the university of Edinburgh during my master’s in clinical education course, an assignment is an educational activity and not published. However, it was submitted through Turnitin and scanned by it for similarity and cleared.

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References

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Table 1

<table>
<thead>
<tr>
<th>Author/ Date</th>
<th>Title of the Editorial/ Opinion/ Commentary</th>
<th>Name of the Journal</th>
<th>Main Theme</th>
<th>Selected words quoted from Authors / Recommendations</th>
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<tr>
<td>Afridi MK. (1962).</td>
<td>Medical Education in Pakistan</td>
<td>Journal of Medical Education</td>
<td>Description of what was done in Medical Education in the first decade of Pakistan</td>
<td>‘it is most undesirable to have different levels of medical education in the country’</td>
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<td>Ali SM, Shamim MS. (2014).</td>
<td>Way forward for Departments of Medical Education in Pakistan</td>
<td>Journal of Pak Medical Association</td>
<td>Newly formed Depts of Education in Pakistan to fulfil the PMDC regulations need Actual trained staff</td>
<td>‘Accreditation and quality assurance is one of the toughest terrains for any medical institute in Pakistan’</td>
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<td>Awan AK (2016).</td>
<td>Trading-off quality for quantity: Mushrooming of Medical Institutions and quality of medical education in Pakistan</td>
<td>International Journal of Pathology</td>
<td>The potential risks for a society in the long term with incompetent graduates is highlighted.</td>
<td>‘Are we letting the entire medical education system of Pakistan lose its integrity by building colleges that lack quality and infrastructure’</td>
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<td>Biggs JSG. (2013).</td>
<td>The Social Responsibilities of Medical Colleges in Pakistan</td>
<td>Journal of college of Physicians And Surgeons Pakistan</td>
<td>Portrays the rapid explosive growth of private medical colleges and shows concerns about social responsibilities</td>
<td>‘Standards of any kind require firm data and this is an area that appears to be in need of work in Pakistan’</td>
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<td>Author(s)</td>
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<td>Gadit A AM. (2010).</td>
<td>Professional competence assessment: is it a wakeup call for Pakistan?</td>
<td>Journal of Pak Med Association</td>
<td>Discusses various Professional assessment mechanisms in developed regions of the world and recommends Pakistan to form its own.  `‘Every now and again media would report negligence by doctors leading to deaths or complications.’‘</td>
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<td>Nasim M. (2011).</td>
<td>Medical education needs to change in Pakistan</td>
<td>Journal of Pak Medical Association</td>
<td>Narrates various deficiencies of the medical education system in Pakistan `how can we change our medical education programme to meet the society's need?’</td>
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| Rajput AM. (2012).         | Medical Education in Pakistan                                        | Journal of International medical college Pakistan | General overview about the state of medical education in Pakistan. `‘In Pakistan, medical education at national level is facing multidimensional issues’
<p>| Shaikh SH. (2009).         | A Reform Agenda Outline for Medical Education in Pakistan            | Journal of college of Physicians And Surgeons Pakistan | Focuses on recommendation s to produce competency based assessment systems in Pakistan. <code>‘ Provision of competent doctors----- is the responsibility of institutions and regulating bodies’ | | Siddiqui FG, Shaikh NA. (2014) | Challenges and Issues in Medical Education in Pakistan.            | Journal of Liaquat University Medical Health | General overview of the poor state of medical </code>‘Two factors, that are in the control of the medical colleges is the quality of teach- |</p>
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<td>Syed S. (2015)</td>
<td>Medical Education: Dangerous Doctors</td>
<td>Daily Dawn Pakistan</td>
<td>‘Describes in detail the wrong decisions of exaltation of medical colleges to universities without trained staff in place by political forces for their own vested interests and the situation of medical education in Pakistan. ‘A host of new academic programs offering MS, MD and PhD degrees were started without proper planning and often without adequate and qualified faculty members’.</td>
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<td>Tariq M, Ali SA (2014).</td>
<td>Quality assurance and its application in medical education</td>
<td>Journal of college of Physicians And Surgeons Pakistan</td>
<td>Discusses regarding various ways of quality assurances in higher education and in particular about medical education. ‘there is a dire need of an indigenous quality assurance model for our medical institutes to keep pace with international standards’</td>
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