

Changing needs of medical education in Pakistan

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Medical education, encompasses a large variety of learning experiences. Broadly it includes premedical years, undergraduate education, house job clinical rotation, residency, subspecialty training, and continuous professional development. These phases of learning and training entails a medical student to become self-directed lifelong learner. The educationists acknowledge that traditional teacher centered medical education does not allow students to become self-directed learners. The changing expectations of society and newly defined roles of doctors' envisage them to become lifelong learners, through continuous professional development.

The continuous development in medical field, technological advancements and innovations in biomedical sciences has changed the requirement of medical education. The traditional curricula and teaching methodologies are no longer catering for the learners demand. Hence, the curricula reforms and change in traditional teaching methodologies is proposed to address the new health priorities.¹ In this regard the learner oriented and problem based approaches to learning were recommended by GMC. It aims at inculcating adult learning skills in the physicians, necessary to meet with the challenges posed by the community they need to attend.²

Self-directed learning is advocated as the most effective methodology in the field of medical education, which enables a learner to integrate latest developments and experiences into his personal and professional expertise.³ Self-directed learners are independent individuals who choose to learn for personal growth turn out to be lifelong learners. They are aware about their metacognition and are able to set goals and select appropriate strategies to achieve them. Self-directed learning approach also requires an essential transformation of conventional teachers to facilitator.⁴ This has significant

consequences in connection with faculty growth, with the apprehension that altering curriculum and teaching methodologies are unlikely to be useful provided trainers adopt to innovative methods as facilitators.⁵

Adult learning principles stresses upon the importance of conducive learning environment, facilitating students for effective and efficient learning. It is described as the "soul and spirit" projecting learners' sense of accomplishment, complacency and triumph.⁶ It not only enhances learning but also facilitates students to become lifelong self-directed learners.

Institutions should therefore, carve out the strategies and policies to address rapidly changing needs of medical education. Revamping curricula, faculty development and improving learning environment are few steps to bridge the gap facing this enormous challenge.

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