

## The fate of health professions education as a profession: a road less travelled

Syeda Sanaa Fatima<sup>1</sup>, Rahila Yasmeen<sup>2</sup>

### Abstract

**Objective:** To explore the views of academics about the identity of Health Professions Education as a discipline, its fate and sustainability as a profession.

**Method:** The qualitative exploratory study was conducted from February to July 2021 after approval from the ethics review committee of Islamic International Medical College, Riphah International University, Rawalpindi, Pakistan, and comprised both fulltime and part-time health professions educationists of either gender teaching in different institutions of seven cities of Pakistan; Taxila, Kamrah, Rawalpindi, Peshawar, Lahore, Multan and Karachi. Using Professional Identity theory, data was collected through semi-structured one-on-one interviews which were conducted online. The interviews were transcribed verbatim, coded and thematically analysed.

**Result:** Of the 14 participants, 7(50%) had qualifications and experience of other specialities as well, while 7(50%) were pure health professions educationists. Overall, 5(35%) subjects were from Rawalpindi, 3(21%) were serving in multiple cities including Peshawar, 2(14%) were from Taxilla and 1(7.5%) each was from Lahore, Karachi, Kamrah and Multan. Accumulated data led to 31 codes with 3 themes and 15 sub-themes. The main themes were identity of health professions education as a discipline, its fate and sustainability.

**Conclusion:** Health professions education has established its identity as a discipline in Pakistan, with independent, fully functioning departments in medical and dental colleges across the country.

**Keywords:** Health professions education, Future, Health professions educationists, Profession. (JPMA 73: 264; 2023)

**DOI:** <https://doi.org/10.47391/JPMA.5358>

**Submission completion date:** 18-01-2022 - **Acceptance date:** 10-09-2022

### Introduction

The Pakistan Medical and Dental Council (PMDC) remained the main regulatory body for medical and dental education in Pakistan.<sup>1</sup> In 2008 the PMDC officially notified to all the undergraduate medical colleges in the country to establish a Department of Health Professions Education (DHPE). As a result of the notification, many medical colleges started opening DHPEs in their setups, but a single faculty member from some other department remained responsible for the duties of Health Professions Education who was responsible to perform his/her duties in the parent department as well.<sup>2</sup> In 2020, the PMDC was dissolved and replaced by the Pakistan Medical Commission (PMC).<sup>1</sup> The reason for this change was to look into the country's educational issues and to strengthen the regulations along with the target of ensuring public safety and restoring the medical education inviolability.<sup>3,4</sup> The future of HPE remained at the crossroads because of its ill-defined career path and the deficiency of structured posts.<sup>5</sup> Amid such challenges, the establishment of PMC further increased uncertainties and confusion. As explained in literature, the

change in policies of governing bodies in an education system for improving quality impact the discipline's possible future. As a result of these developments the complexity and uncertainty about the future of the medical education system increases.<sup>6</sup>

The current study was planned to explore the views of health professions educationists about the identity of HPE as a discipline, as its fate and sustainability as a profession.

### Subjects and Methods

The qualitative exploratory<sup>7</sup> study was conducted from February to July 2021 after approval from the ethics review committee of Islamic International Medical College (IIMC), Riphah International University, Rawalpindi, Pakistan, and comprised both fulltime and part-time health professions educationists of either gender having a Masters degree in HPE and teaching in different institutions of seven cities of Pakistan; Taxila, Kamrah, Rawalpindi, Peshawar, Lahore, Multan and Karachi.

Professional Identity framework was used for the study.<sup>8</sup> Moreover, qualitative exploratory design is commonly used for research in education and social sciences<sup>9</sup> and helps improve understanding of how people's individual experiences give meaning to reality by exploring the perspectives of participants using a constructivist paradigm.<sup>9,10</sup>

<sup>1</sup>Department of Medical Education, Riphah International University, Islamabad, Pakistan; <sup>2</sup>Department of Health Professions Education, Riphah International University, Islamabad, Pakistan.

**Correspondence:** Syeda Sanaa Fatima. e-mail: fatimasanaa554@gmail.com  
ORCID ID. 0000- 0002- 1669- 0523

The sample size Of 14 participants was raised keeping in view the literature available, using convenience purposive sampling technique.<sup>10</sup> Data was collected till the point of saturation. The participants were approached through emails, contacts and the LinkedIn app.

One-on-one open-ended semi-structured interviews were conducted online using the online Zoom platform. The questionnaire was designed based on a systematic literature review.<sup>10</sup> Expert validation was done through 5 HPE professionals having experience of >5 years each. The questionnaire was then pilot-tested. The interviews of the participants were recorded after getting consent. The one-on-one interview is an effective tool used in qualitative research and provide indepth knowledge about the perspectives, ideas and opinions of a small number of participants.<sup>11</sup>

The qualitative data obtained was organised, transcribed verbatim and manually analysed thematically. The interview transcripts were coded line by line. Conflicting and interesting quotations were highlighted and comments regarding them were entered in a Microsoft Word document. Initially, a quite a codes were identified which were reduced after merging. Themes and sub-themes emerged during thematic analysis. Since the researcher was also an HPE professional, therefore throughout the study, another researcher was kept involved to ensure triangulation and bias reduction. The findings were interpreted and comparison was done with what is already known through published literature.<sup>10</sup> During the study, reflexivity was written and every component was aligned along with a comprehensive description of every step of the process. Moreover, the position of researchers and participants were also explained to ensure dependability, internal coherence and conformability.

## Results

Of the 14 participants, 7(50%) had qualifications and experience of other specialities as well, while 7(50%) were pure health professions educationists. Overall, 5(35%) subjects were from Rawalpindi, 3(21%) were serving in multiple cities including Peshawar, 2(14%) were from Taxilla and 1(7.5%) each was from Lahore, Karachi, Kamrah and Multan. Accumulated data initially led to 71 codes which were then merged into 31. There were 3 themes and 15 subthemes.

The first theme was 'Identity as a discipline' which had 6 subthemes (Table 1).

The most common and frequently stressed upon comment was that this discipline is an emerging field that has shown

development in the last few years.

*"A decade back it was a new and interesting field in Pakistan. It was very well received and got a boom as well. Every university or institute was trying to adopt it" (P7).*

The main reason for this development was that the curricular reforms were supposed to be imposed and for this change trained faculty was required.

*"PMDC, now PMC, has introduced the concept of curricular reform, a hype for medical education has developed ... institutes are searching out educationists to provide support for this initiative" (P3).*

Secondly, the role of the regulatory body remained important in the development of identity which was another most frequently discussed subtheme.

*"PMDC played a very important role by including it in specialities list and has accepted it as a speciality. The PMDC also defined job structure, career path and postgraduate education in HPE ... In Pakistan, medical education is in a rapid transformational stage. Leadership is clear about this change and is in control of it and directing it towards the right direction" (P4).*

The second theme was 'Sustainability as a profession' which had 5 subthemes (Table 2), and 6(43%) participants explained that it is a sustainable profession because necessary awareness has been created. Stakeholders now know the importance of HPE profession. The complexity regarding duties of HPE professions requires training and dedication. That is why the postgraduate qualifications have started in many universities in the country.

*"Having said that, it means that as this awareness has become more widespread and the reason is that the people who are making decisions are among those who have already done masters or courses and have realized its importance. So this will sustain" (P9).*

*"... (E)ducation has become objective and complex, so it is required that it is taken seriously. With over 100 medical colleges, if they do not take it seriously, they are themselves going to suffer so that is why HPE is going to stay" (P4).*

Unclear sustainability or poor sustainability of the profession was also among the comments. The main reasons explained by the participants were the frequently changing, confused or under-developed policies of regulatory bodies.

*"... [A]s the authority is in hands of individual universities ... non-reputed or underdeveloped institutes will not hire them so it is sustainable only in reputable institutes and will get*

<b>Table-1: Theme 1 with codes, quotes and subthemes.</b>			
<b>Quotes</b>	<b>Codes (13)</b>	<b>Sub-themes (6)</b>	<b>Theme-1</b>
P4 <i>"Medical education in Pakistan has over the years come along a long way There is no going back now as in the past 10 years it has seen rapid advancements"</i>	Rapid advancements (3)	Emerging discipline	Identity as a discipline
P8 <i>"Initially not well recognized but gradually making its place"</i>	Initially not recognized but gradually developing		
P11 <i>"Initially there was retaliation among faculty with regards its identity because stakeholders and senior professors were thinking that because of this profession their subjects identity will be lost As Health Profession Educationists talk about Integration the basic and clinical faculty got insecure"</i>	Initially faced faculty retaliation with regards to identity		
P9 <i>"I think that in the last few years Medical Education has been able to establish its identity as a separate discipline But many medical colleges are giving Medical Education its due importance and due weightage"</i>	Has established identity as a separate discipline	Separate discipline	Identity as a discipline
P12 <i>"Initially people were of opinion and in fact still few think of it as an extra burden on other disciplines."</i>	Extra burden on other disciplines	Still struggling as a discipline	
P1 <i>"Need a lot of time to establish its identity as a separate discipline"</i>	Time will establish the identity		
P4 <i>"With the passage of time it has even strengthened this confusion is going to stay there for some time but I am hopeful that with the passage of time it is going to take its shape"</i>			
P5 <i>"As a discipline, HPE has not established its identity so far"</i>	Identity not established as a discipline		
P4 <i>"PMDC played a very important role by including it in specialities list and has accepted it as a speciality" "PMDC also defined job structure, career path and Post-graduation education in HPE Now under PMC whatever criteria they define, they will not be able to deny the importance of medical education and it will remain there clear demarcations of roles, for example, defining HEC roles and how they are going to deal with it"</i>	PMDC role in identity development(4)	Role of regulatory bodies in HPE identity as a discipline	
P4 <i>"PMC regulations at this stage are very confusing" "Maybe PMC leadership has remained unable to take stakeholders in confidence to clear their vision. At times we get very conflicting news from PMC and stakeholders are confused" "In Pakistan medical education is in a Rapid transformational stage. Leadership is clear about this change and is in control of it and directing it towards the right direction"</i>	Confusing PMC regulations (4)		
P6 <i>"profession is flourishing even the new PMC has appointed the Medical Educationists in their Department of Medical education they have members as medical educationists"</i>	Appointment of Medical Educationists in PMC		
P5 <i>"It will depend upon how PMC, principals of the Institutes and authorities identify it"</i>	PMC, principals of the Institutes and authorities will effect identity		
P3 <i>"when the developed countries promoted Medical Education it became popular in developing countries as well"</i>	Globalization (2)	Global effects on HPE identity in Pakistan	
P4 <i>"we are influenced by global advancements because were connected globally with others"</i>			
P3 <i>"In Pakistan the need for curricular reforms involved senior Medical Educationists, thus emphasizing the importance of recognizing it as a speciality and separate entity we must make them realize that there is a need to improve our curriculum and teaching and learning ..." "PMDC now PMC has introduced the concept of curricular reform, a hype for Medical Education has developed institutes are searching out Educationists to provide support for this initiative"</i>	Curricular reforms helped in recognizing it as a separate entity (2)	Role of Curricular reforms in HPE identity	

wiped off from underdeveloped institutes because there are no policies regarding faculty strength, qualifications and promotions in this department" (P13).

"The difference will be that the HEC [Higher Education Commission] criteria are more stringent in Basic Sciences or Medical Education, so they expect that if you would like to be an assistant professor in Medical Education, you should be at least a PhD and not simple Masters" (P9).

Although most of the participants were of the view that the governing bodies are supporting the sustainability of this profession in Pakistan by introducing an integrated competency-based curriculum, making the department

mandatory in medical and dental colleges, thereby accepting its importance.

"PMC is promoting competency and integration of curriculum, ensuring its sustainability" (P1).

"... [A]ccording to PMC regulations, HPE is mandatory as a department as well as a profession ... already a 6-month certificate course is mandatory for the whole faculty" (P12).

The third main theme was 'Fate as a profession' and had 4 subthemes (Table 3). The most common subtheme was that fate of HPE is dependent on the regulatory bodies and it is the regulatory bodies who must play their role in this regard.

**Table-2:** Theme 2 with codes, quotes and subthemes.

Quotes	Codes 11	Subthemes 5	Theme-1
P6 <i>“these programs of MME and MHPE are flourishing so there is sustainability and internationally and nationally it is accepted that we need such people who have the skill of medical education”</i>	HPE will Sustain and develop (6)	Sustainable profession	Sustainability as a Profession
P13 <i>“Difficult to sustain as the authority is in hands of individual universities. Universities and institutes running MHPE programs will hire Health Professions Educationists otherwise non reputed or underdeveloped institutes will not hire them so it's sustainable only in reputable institutes and will wipe off from faculty of underdeveloped institutes because there are no policies regarding faculty strength, qualifications and promotions in this department.”</i>	Individual universities making sustainability difficult	Difficult Professional sustainability	
P2 <i>“PMC is itself in developing stage so not very clear about sustainability”</i>	PMC under development leading to unclear sustainability	Sustainability not clear	
P5 <i>“At this point in time the sustainability is precarious there are different forces in Pakistan who do not want to recognize HPE as a speciality or its presence as a separate entity. They would rather like to establish HPE as an associate sort of presence and with no effective voice”</i>	Threatened independent identity leading to unclear sustainability		
P1 <i>“it's sustainable but time is required you see everywhere integration is being asked so there are chances for sustainability. I think it is sustainable but it's a long run”</i>	Time is required for sustainability	Conditional sustainability	
P7 <i>“Sustainability is good but there are certain problems. You know everybody started doing it and the true essence was lost because faculty did it just for the sake of doing it. Good, dedicated and interested Health professions educationists are very few in Pakistan.”</i>	Sustainable but not smooth ride		
P6 <i>“PMC regulations are actually supporting medical education”</i>	Governing bodies supporting HPE (4)	Role of governing bodies in sustainability	
P14 <i>“Actually stakeholders at higher hierarchy have started to accept it and seeing the results. Very good things in PMC regulations when the policy discusses 7 start doctors and its explanation. The level 7 integrated curriculum”</i>	HEC criteria are stringent		
P9 <i>“If you have done Masters in Health Professions Education or in any basic sciences so you are only qualified to become a senior lecturer. This is the main difference (with stress) which is going to happen now. . . . . which will be in line with the directives of HEC. . . . . The difference will be that the HEC criteria are more stringent in basic sciences or Medical Education so they expect if you would like to be an assistant professor in Medical Education you should be minimally a PhD and not a simple master”</i>			
P3 <i>“I don't think that PMC will bring some drastic changes in Medical Education”</i>	PMC policies will not affect HPE		
P2 <i>“It depends If PMC is not supporting HPE then the sustainability is shaky as emerging institutes will not try to develop DHPE as they see that PMC is not backing it”.</i>	Without PMC support the Sustainability of HPE is shaky		
P5 <i>“The PMC is itself in its developing stage and they are still developing their policies so basically in future PMC policies will decide the sustainability of this profession”</i>	PMC is still under development to decide sustainability		

*“I think PMC must clearly define its role, the leadership role it has, it is their responsibility to define their scope of work, and define what they want to do and what not to do, and define who is going to perform the functions which are abandoned by them. The community or stakeholders must talk to the PMC to clearly define roles and responsibilities and policies for HPE and how to progress with this profession. HEC doesn't have the capabilities or faculty or system to deal with medical college affairs, but if PMC is not willing to work on these areas, then PMC decides who will do it and train and help the HEC to perform the functions” (P4).*

However, others said international bodies would also work for the sustainable fate of HPE profession, and that institutes will promote this profession because they have realised its importance as well.

*“... [E]ven if such regulations from PMC emerge which goes against the HPE it is well realised by the institutes that they need separate departments of HPE for every institute” (P1).*

Whosoever has the authority to decide the fate of the profession, HPE is a reality that became evident in most of the transcripts and emerged as a subtheme as well. It has a bright future and will further progress with time.

*“I think it is going to go more beyond, of course. I mean it has a good sustainable fate” (P6).*

Another subtheme was that fate is uncertain or threatened because of the emergence of PMC in Pakistan.

*“But the fate of HPE is inversely affected as it has created uncertainties about it” (P14).*

**Discussion**

The current study is a unique qualitative study that addressed the uncertainties regarding the future of HPE in Pakistan, providing a platform to stakeholders to gain information and plan according to the changing scenario.

HPE in Pakistan has developed tremendously as a profession over the last many years.<sup>5,12</sup> However, while all

**Table-3:** Theme 3 with codes, quotes and subthemes.

Quotes	Codes 11	Subthemes 5	Theme-1
P2 <i>"The Fate is dependent on the PMC regulations Higher authorities or governing bodies must support and own the Health Professions education"</i>	HPE will Sustain and develop (6)Fate is dependent on Regulatory bodies (5)	PMC influences HPE fate as a profession	Fate as a Profession
P4 <i>"I think PMC must clearly define its role, the leadership role it has, it's their responsibility to define their scope of work and define, what they want to do and what not to do and define who is going to perform the functions which are abandoned by them The community or stakeholders must talk to the PMC to clearly define roles and responsibilities and policies for HPE and how to progress with this profession. HEC don't have the capabilities or faculty or system to deal with medical college affairs but if PMC is not willing to work on these areas then PMC decides who will do it and train and help the HEC to perform the functions"</i>	PMC must play its leadership role in deciding fate support HEC		
P1 <i>"Not affecting or impacting as such. Even such regulations from PMC emerge which goes against the HPE it is well realized by the institutes that they need separate Departments of Health Professions Education for every institute"</i>	PMC regulations have no impact On fate but Institutes realizes HPE is required (2)	Bright fate & future	
P8 <i>"its future is bright because recognizing bodies are giving stress on it It's not only PMC who can guide the fate and future of HPE but international bodies too"</i>	Future bright as international bodies play role in addition to PMC (4)		
P4 <i>"it has a positive future and fate. A good professional is always in demand"</i> P6 <i>"I think it is going to go more beyond of course I mean it has a good sustainable fate"</i>	The Good sustainable fate of HPE and will progress further (2)		
P5 <i>"at this point with the emergence of PMC we are not sure in which direction it will go and things turn out in future"</i>	With PMC emergence Fate is not clear	Uncertain fate	
P14 <i>"But the fate of Health profession education is inversely affected as it has created uncertainties about it."</i>	PMC inversely affected the fate	Threatened fate	

medical and dental colleges had an HPE department, the same was mostly being run by a single faculty member. No well-defined departments were encouraged in the medical and dental colleges of Pakistan.<sup>13</sup>

The current study showed that HPE has developed its identity as many institutes have started offering different degree programmes in the discipline. These programmes are well structured (Table 1). These findings were in line with literature.<sup>14</sup>

The participants had a view that HPE in Pakistan has a good future, fate and is sustainable because initially the PMDC made it compulsory for promotions, and then PMC encouraged it through introducing curricular reforms.<sup>15</sup> The reforms demand skilled faculty.<sup>16</sup> In different medical and dental colleges of Pakistan, HPE professionals were being hired as skilled faculty.<sup>2</sup> Moreover, these professionals train the rest of the faculty to remain up to date with the changing demands of medical education.<sup>2</sup> It is important to note that international regulatory bodies like the World Federation for Medical Education (WFME) also encourage positive developments in medical education which are resulting in the sustainability of HPE<sup>3</sup> (Tables 2-3).

The current study showed that although the local governing body has been changed in Pakistan, causing confusion, but overall sustainability and future of HPE have not been adversely affected. It is so because HPE has diverse roles to play for quality medical education, and institutes will not take the risk of compromising on the

quality of medical and dental education.<sup>17</sup>

It is evident through literature that the future of HPE is bright and it is going to develop further. It is because of its importance which is realised by the stakeholders, especially the national and international governing bodies and universities.<sup>18</sup> In Pakistan, medical education is striving to achieve international standards.<sup>3,13</sup> In addition, literature showed that HPE departments are necessary for quality medical and dental education. Moreover, its diverse roles, especially in the domains of curriculum, research and faculty development, promote its sustainability.<sup>19</sup>

The current study has its limitations as more participants representing more geographical locations across the country would have improved the generalisability of the findings. Moreover, there was no representation from the entire Balochistan province.

## Conclusion

Despite changes in policies and regulatory bodies, HPE has established its identity and its future is bright as an independent department in medical and dental colleges of Pakistan. However, it is up to the institutes and the regulatory bodies to set the direction of this profession.

**Acknowledgement:** We are grateful to our teachers, peers and colleagues for helping us out during the research.

**Disclaimer:** The text is based on a thesis done for the attainment of Masters degree in Health Professions Education.

**Conflict of Interest:** The first author Dr Syeda Sanaa Fatima is currently affiliated with Department of Medical Education, Pak International Medical College, Peshawar.

**Source of Funding:** None.

## References

1. Siddiqui ZS. Medical education at crossroads: Recommendations from a national study in Pakistan. *Pak J Med Sci* 2018;34:772-5. doi: 10.12669/pjms.343.15377.
2. Ali SM, Shamim MS. Way forward for Departments of Medical Education in Pakistan. *J Pak Med Assoc* 2014;64:732-3.
3. Wajid G, Sethi A, Mahboob U. Strengthening technical capacity of the regulatory authority in Pakistan to bring reforms in medical education. *Khyber Med Univ J* 2019;11:201-3. DOI: 10.35845/kmuj.2019.19903
4. Qureshi MA, Aziz-ur-Rab S. The Fledgling Medical Education in Pakistan: Challenges and Recommendations. *Rawal Medical J* 2013;38:325-7.
5. Sethi A, Ajjawi R, McAleer S, Schofield S. Exploring the tensions of being and becoming a medical educator. *BMC Med Educ* 2017;17:62. doi: 10.1186/s12909-017-0894-3.
6. Faghihi A, Hoseini Moghadam M, Yamani N. Analysis of the Key Factors Affecting the Future of Medical Education Discipline in 2025 Based on STEPV Model: A Qualitative Study. *Adv Med Educ Pract* 2020;11:191-201. doi: 10.2147/AMEPS241747.
7. Caelli K, Ray L, Mill J. "Clear as Mud": Toward Greater Clarity in Generic Qualitative Research. *Int J Qual Methods* 2003;2:1-3. Doi: 10.1177/160940690300200201
8. Monrouxe LV, Rees CE. Theoretical perspectives on identity: researching identities in healthcare education. In: Cleland J, Durning SJ, eds. *Researching Medical Education*, 1st ed. New York, United States: John Wiley & Sons, Inc, 2015; pp 129-40. doi: 10.1002/9781118838983.ch12
9. Merriam SB, Tisdell EJ. *Qualitative Research: A Guide to Design and Implementation*, 4th ed. San Francisco, CA: John Wiley & Sons, Inc; 2015.
10. Creswell JW, Creswell JD. *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches*, 5th ed. Los Angeles, CA: Sage Publications, Inc; 2018.
11. Boyce C, Neale P. *Conducting in-depth interviews: A guide for designing and conducting in-depth interviews for evaluation input*. Watertown, MA: Pathfinder International; 2006.
12. Thomas LR, Roesch J, Haber L, Rendón P, Chang A, Timm C, et al. Becoming outstanding educators: What do they say contributed to success? *Adv Health Sci Educ Theory Pract* 2020;25:655-72. doi: 10.1007/s10459-019-09949-7.
13. Latif MZ, Wajid G. Reforming Medical Education in Pakistan through strengthening Departments of Medical Education. *Pak J Med Sci* 2018;34:1439-44. doi: 10.12669/pjms.346.15942.
14. Trede F. Role of work-integrated learning in developing professionalism and professional identity. *APJCE*. 2012; 13: 159-67.
15. Nasim M. Medical education needs to change in Pakistan. *J Pak Med Assoc* 2011;61:808-11.
16. Ali SK, Baig LA. Problems and issues in implementing innovative curriculum in the developing countries: the Pakistani experience. *BMC Med Educ* 2012;12:31. doi: 10.1186/1472-6920-12-31.
17. Bendermacher GWG, Dolmans DHJM, de Grave WS, Wolfhagen IHAP, Oude Egbrink MGA. Advancing quality culture in health professions education: experiences and perspectives of educational leaders. *Adv Health Sci Educ Theory Pract* 2021;26:467-87. doi: 10.1007/s10459-020-09996-5
18. Qureshi AZ. From the year 2050; a glimpse of medical education in the future. *J Pak Med Assoc* 2014;64:327-30.
19. Ahmed I. Are Medical Education Departments in Pakistan, Performing as in Other Parts of The World? *Isra Med J* 2018;10:132-3