

Evolution, not revolution: the answer to problems of undergraduate medical education in Pakistan

Madam, twentieth century saw a transition from traditional to more innovative methods in undergraduate medical education in the developed parts of the world. Establishment of integrated curriculum and a switch to problem-based learning (PBL) from didactic learning were significant among these.

Curriculum integration is the "process of experiencing and understanding connections and, because of this, seeing things as a whole". In the domain of medicine it involves combining basic and clinical sciences to provide a holistic rather than a fragmented or segregated approach to learning. Problem-based learning, on the other hand is a student centered pedagogical technique used in integrated teaching. IT incorporates clinical scenarios that provide a platform to students as they work their way TO identify gaps in knowledge, set objectives and access required knowledge to solve the problems.

As compared to discipline-based curriculum, integrated curriculum provides coherence and prevents unnecessary repetition. It is in accordance with the natural process of learning that involves constructing meaning and understanding concepts and relationships. Similarly, problem-based learning is a more motivating and relevant way of learning that aids in development of social and cognitive skills.

In recent past, educators in Pakistan have stressed the need for such transformations. It is important however to have an insight into the needs of our system, resources that are available and pros and cons of the education strategies being sought before taking initiatives in this regard.

PBL, for its proposed advantages and an appropriate approach towards learning, has been put forth as a role model method of instruction. It is necessary however to know that fruits of successful PBL can only be reaped by proper implementation which involves considerable administrative, logistic and financial hindrances.¹ Moreover, equivocal evidence regarding influence of PBL on knowledge acquisition and role played by culture and language suggest

that developing countries need to be prudent in their pursuit for PBL.^{2,3} Further, PBL is only a mode of instruction and a PBL based curriculum would entail various levels of horizontal or vertical integration of curriculum. This means that changes leading to curriculum integration are a prerequisite to inception of PBL based curriculum.⁴

The concerns with problem-based learning and a dearth of available resources mean that only a minority of schools can only conceive effective PBL. For others, especially public medical schools, where number of medical students is quite large and facilities and resources scarce, such learning revolutions may not be possible and futile efforts may do more harm than good.

The correct course of action in these circumstances will be to evolve rather than to transform the system. Making small but meaningful changes in the current system within our resources would be helpful. Contemplating changes in the curriculum, for instance gradual integration of curriculum would also be a step in the right direction not only because curriculum changes are more important than modes of instruction but also because such changes will form foundation for important changes to come i.e PBL.^{5,6}

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