

## 'Focus on quality medical education'

07 May 2014 | Views | By BioSpectrum Bureau

### 'Focus on quality medical education'

Health and education are the two cardinal parameters of all-round development of a society. When it comes to medical education, these two elements get fused because it can be considered as the foundry through which trained health manpower gets generated.

This in turn helps build the backbone of an effective healthcare delivery system and ensures that preventive, promotive and curative healthcare is available to all.

It was in the historical city then known as Madras that India's first medical college of modern medicine opened in the year 1835.

This was followed by another one in Goa in 1840 and, thereafter, in Calcutta and Bombay. Since then, the pace of growth of medical education in India has been steady and continuous.

There are currently a total of 2,248 medical colleges worldwide, out of which 387, or about 13.5 percent, are in India. In fact, our country is the largest producer of trained health manpower in the world.

The annual intake capacity of the MBBS course in India is over 48,000 annually. The postgraduate avenues for degrees and diplomas taken together account for 28,000 seats while 917 seats are available for super-specialty.

This means that around 29,000 medical graduates are being added to the existing pool of medical manpower in the country each year.

The cumulative registry maintained by the Medical Council of India in the form of the Indian Medical Register lists over 8 lakh medical practitioners of modern medicine who possess recognized medical qualifications.

The growth of medical education in India also needs to be seen from the view point of the demographic dividend. There was a time when India's burgeoning population was considered a bane.

However, in terms of demography, it has turned out to be a boon. In fact, as much as 52 percent of our population is today below the age of 25 years while nearly 72 percent is below the age of 35. India has the highest percentage of young people in its fold compared to other countries, and this unique demographic dividend would continue for another 25 to 30 years.

This is a crucial time window which offers us an opportunity to transform this youthful population into a precious human and intellectual resource.

Medical education has to broadly confirm to the objectives of higher education laid down in the report of the First Education Commission under the chairmanship of Dr S Radhakrishnan.

He said that higher education needs to cater to training, research and extension activities that culminate in sustainable development of the society.

In pursuit of this vision, the 11th Five Year Plan has spelt out that higher education, including medical education, shall be governed by the trinity of access, equity and equality.

Access and equity are governed by laws derived from the constitution. Quality in medical education, however, remains a matter of concern and we need to take measures to tackle this issue.

The Medical Council of India, created by the Parliament as the country's premier regulatory body, is seized of this mandate.

To ensure quality in medical education, we need regular updating of the curriculum, formulation of crystallized objectives, and training the trainers for the desired output. Latest teaching tools and technology have to be blended with appropriate modes of evaluation.

The Indian Medical Council Act, 1956, needs to be amended for vesting the Medical Council of India with jurisdiction and authority for accreditation of medical schools through a National Accreditation Board.

Also important is evolving a National Perspective Developmental Plan for the location of medical schools all over India in a planned and phased manner. To improve quality in education and address common concerns, we need to network with medical councils of other countries.

In terms of trained health manpower, only four countries in the world -- Brazil, Russia, India and China - will be able to boast of a surplus over the coming decades.

India's existing educational infrastructure makes us the most dominant player in the segment. To benefit from this opportunity, all we have to do is to evolve India's medical education in a format that is fully positioned to meet the requirements of doctors, nurses and medical technicians all over the world.