

Challenges, Tensions, and Scholarship in Medical Education

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Medical education is an interdisciplinary field of knowledge which is based on explanatory bases and perspectives from both care sciences and behavioral sciences, particularly pedagogy but also psychology, sociology and social anthropology. Medical education spans three sectors: undergraduate, postgraduate, and the continuing professional development of established physicians. Studies within medical education cover individual and system levels, both within academia and within health and medical care. Medical education's ultimate aim is to supply society with a knowledgeable, skilled and up-to-date cadre of professionals.

Medical education is in a perpetual state of unrest. It is a place of increasing accountability and regulation because of its proximity to one of the prime socio-political concerns of government, that of the health of its people. There have been emerging concerns over patient safety, expansion of medical student numbers, regulatory requirements on working hours, and a staggeringly accelerated patient throughput. Tensions in the domain of medical education are not so much between different people holding clearly opposed points of view as between what best scholarly opinion holds to be most appropriate and the forces of either conservatism or change, though contradictions inherent to education can set scholars against one another. The type of conservatism that sets up tensions is often apparent in what people tacitly hold to be 'normal' or worthy of defending. The type of change that sets up tensions is driven by fashion, politics, or some other social force.

Improving teaching and learning is becoming a worldwide issue. The concept of 'scholarship of teaching' is a way of trying balance between teaching and research in the higher education system in which teaching is being undervalued. Medical education is complicated, contested, and highly political. In a complex and uncertain world we need to make the best decisions about education, training, and development. For that, we need both scholarly medical educators and educational scholars.