

Editorial

Medical Education as a Career?

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Lack of a career pathway threatens our medical educator supply

There has been much political celebration over the opening of new medical colleges in India especially Kerala in recent years. Regrettably, less attention has been paid to how, and by whom, these extra students and trainees will be educated. While medical education expertise underpins high-quality educational programs, it remains a struggle to fill positions in this evolving discipline.

Vacancies were triggered by teachers taking up positions elsewhere, with gaps eventually filled by senior professors from other medical colleges. Experienced teachers continue to shuttle between different colleges to meet the growth in demand created by increased student numbers in both new and established medical colleges. This "reverse musical chairs" situation raises the question: where will the next generation of medical college teachers come from?

Major curriculum reviews and the need to meet stringent accreditation standards across the continuum from entry level to continuing professional development programs have become core business for medical programs. Medical college teachers should have the expertise and commitment to lead and deliver evidence-based educational improvements, and to engage and motivate the many non-teaching clinicians for whom teaching is not a primary career. However, the lack of defined career pathways, a failure to formally recognize medical education as a specialty, and the emphasis on research at the expense of teaching have resulted in an erratic supply of medical educators.

Medical education offers diverse and meaningful work, ranging from designing and implementing medical programs to determining competency, providing pastoral support to students, training teachers and researching the impact of education. To a large extent, in our country teaching is provided opportunistically by clinicians. Only handful teachers possess formal education qualifications,

including PhDs in education; others simply possess enthusiasm and experience in supervising medical trainees. Further, perceived loss of income from clinical practice may deter medical graduates from choosing education as a sole career; many have a hybrid career that combines education with clinical services and research.

While this diversity reflects the delivery of medical education by educators from various backgrounds and by clinicians fulfilling professional obligations to teach, it creates difficulties for defining medical education as a specialist discipline with a standard career pathway. The UK Academy of Medical Educators describes medical educators as: *those who have committed a significant amount of their time, energy, and professional development to medical education and can demonstrate that this has become an important component of their career.*³

The most recently published international survey found educators come primarily from medicine (68%), but also from education (12%), basic science, psychology and other health professions. Few have formal qualifications (16% have a master's degree, 7% have a PhD), averaging 13 years of experience in education and 20 years in clinical medicine.⁴

To date, there has been no systematic analysis from our country to determine current and projected workforce requirements, hampering rational planning and career pathway development. Although medical education has professional standing in the form of dedicated societies, journals and conferences, it is yet to be recognized as a specialty and vocational scope of practice. The common scenario where a career in medical education is undertaken only after years of clinical practice is not sustainable. Teaching is considered integral to good medical practice for all medical practitioners, although fewer would be expected to pursue education as a specialist career.

Recommendation of a range of strategies to develop the medical education pipeline in different settings:

- *Medical students*: role modeling; peer-teaching opportunities; and, for motivated students, an education stream demonstrating that education is a viable and rewarding career
- *Medical graduates*: flexible teaching experiences for different levels of interest; opportunistic clinical teaching; teaching fellow students; qualifications in educational theory and practice; and mentoring by senior educators
- *Medical education specialists*: specialty recognition and resourcing to build capacity in medical education research.

As a first priority, we should call for an economic analysis of current and projected medical education workforce requirements across India, to provide baseline data. Without evidence and strategic development, quality medical education — and the quality of Indian medical graduates — will remain dependent on the serendipitous career paths of a few individuals.

REFERENCES

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