

Research in Medical Education

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“When medicine can be evidence based why should medical education and educational decision making not demand evidence!”

Research in medical education began just over three decades ago with a small group of clinicians and educational researchers at the medical school in Buffalo, New York. Since then it is rapidly expanding all over the world with India being no exception, though we are still in a stage of infancy.

During the last ten years medical educationists in India have slowly made their presence felt and today they are there where they should be- in the National Medical education policy making forums.

The goal of medical education has always been directed to provide competent physicians who could ultimately deliver high quality health care. To achieve this, the system uses diverse and need based processes.

In spite of the fact that lot of emphasis is being given today to health care and improving the quality of life of the patient, reports of multiple medical errors, variation in quality of care and prescribing habits is also being documented. Hence more attention needs to be given to the source of these issues which could largely be due to the health providers attitude, skill and knowledge.

Therein lies the huge scope to examine the role of medical education in health care outcomes and only concerned efforts in structuring good educational research protocols could give answers to such questions. Influence of medical education on individual knowledge, performance, skill or sensitivity to patient care while working in a health care system cannot be undermined.

Quality medical education provides quality improvement in patient safety in medical care. Clinical outcomes are directly related to quality in medical education and hence better health care is the responsibility of the medical education community. Moreover, there is a cry to improve health care and a call for accountability. Only an elaborate medical education research effort will help develop

a sound evaluation and outcome measure that will influence curriculum changes with the sole purpose of improving health care.

Medical educational research should be directed towards creating studies that investigate the effect of medical education and has the strength to measure the outcome of medical education.

There are challenges in medical education research in India which are unique in nature. Among the fundamental difficulties in doing meaningful medical education research are anaemic funding, lack of incentive, paucity of readily available data set to examine the performance of medical graduates at workplace, biases about the subjectivity of the research, individual variations, difficulties in measuring the outcomes and the variable support from management.

Medical universities in India are responsible for providing medical education, research and health care services. They have to constantly respond to the health needs of the society and modify their educational policies. Thus proper planning for educational research in line with the objectives of the vision and mission of the medical education will go long way in improving the overall health care system in India.

Panacea, Journal of Medical sciences publishes papers describing original research in all areas of medical field. In the last few issues we have been inviting medical educational research papers, since research in medical education has contributed substantially to the understanding of learning process, educational decision making and generation of educational policy documents. This section in the journal encourages original work in educational research in medical science that will foster understanding and development of medical education that will ultimately help quality health care.