

THE NEED FOR MEDICAL SCHOOLS TO REFORM

Traditionally, the teaching of medicine stresses on disease and its management in a clinical setting. Care is based through patient-visits or admissions and doctors control care. The training emphasizes on the need for knowledge of the diseases in order to manage them. As such the principle is to plan the training to satisfy the tasks expected of these doctors in such a setting.

From the early sixties, the tasks of doctors had taken a gradual change. Medical schools globally have taken a balanced approach as the norm in their curriculum whereby the emphasis is to prepare doctors for the primary, secondary and tertiary levels of care. The community problems and needs have been given the focus of attention in the educational process, more so because these doctors will be working amongst these communities upon graduation. As such, the promotive, preventive and rehabilitative aspects of tackling diseases and other health issues need to be emphasized. The community too, just like the individual patient needs to respond in many ways so as to stimulate the learning effectiveness. It is an accepted fact that students learn better when they are actively involved and they receive

immediate responses from the subjects they are learning about.

I am glad to note that the Faculty of Medicine, University of Malaya had embarked in this community-oriented teaching since 1998. Various programmes like CFCS, DPHS, CRP and OMHS where community involvement is essential had been instituted or continued in NIC. Students are directly involved with the community in their learning process. In addition, the approach to teaching and learning has been added with initiatives like 'Self Directed Learning', 'Problem Based Learning' etc., in order to support the fact that what students find out for themselves are better understood and remembered.

In the future care will be based on a continuous relationship between the doctors, individuals and the community. The patient or community is in the driving seat. I am confident that upon graduation, these doctors who have been trained in NIC will be able to start working effectively and comfortably from 'day one' upon appointment.

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