

The integration of medical education and health care system in the Islamic Republic of Iran: a historical overview

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Introduction

In 1985, an act was passed by the parliament of the Islamic Republic of Iran which established a new, integrated Ministry of Health and Medical Education. This Ministry was now responsible not only for the health care of the people but also for the education of health personnel. Internationally, it is an accepted fact that many of the major accomplishments in the area of public health, for which our country is justly famous, have been due to the establishment and expansion of an excellent health care network and its integration into our universities of medical sciences. This integration is both innovative and pioneering and has had important implications for the health care system in Iran (Marandi 1996).

The two main reasons for the integration of medical education and the health care system in Iran were as follows:

- 1- To upgrade the quality of health personnel training in general and medical education in particular, by changing it from a traditional, theory-driven, academic form of education to a more community oriented education.
- 2- To make the country self sufficient in meeting the demand for health personnel.

The quality of health care has always been an issue for those working in the field. The same concern has been raised frequently on the international scene as well. The Declaration of Edinburgh is clear reflection of the concerns raised by the ministers of health, ministers of higher education, deans of medical schools, university professors, experts in both fields of medical education and public health who were all present in two important meetings. The meetings were held first in August 1988 and again in 1993 in the United Kingdom. In brief, the declaration stressed the importance of making medical education community oriented because traditional medical education is mainly oriented toward curative medicine for hospitalized patients, and ignores the communities and the great majority of individuals who are not hospitalized.

In this article, I will be concentrating mainly on the second reason for the integration: that of supply and demand of health personnel and how these shaped the move towards integration.

Shortage of health personnel

Prior to the establishment of the Islamic Republic in 1979, the shortage of health personnel was a very serious issue, and often the only measure taken to solve this problem was to hire foreign physicians and nurses.

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The magnitude of the shortage of health personnel was not recognized. The main two reasons were the fact that rural areas were entirely a forgotten issue, and that there was no systemic planning for the country's health care system. In general, preventive medicine and public health were completely neglected throughout the country.

At that time, an acceptable curative care was only available in a few of the larger cities. In some of the provinces there were only a few Iranian physicians and in the rural areas there were virtually none. In order to obtain an acceptable level of health care, people had to travel to one of the larger cities, where they were faced with very crowded physicians' offices and hospitals. There were long waiting lists for many procedures and surgeries.

The more recent shortage of health personnel can be traced to several interlocking factors. Following the victory of the Islamic Revolution, a fairly large number of Iranian physicians left the country. Among them were some well established and well known physicians. This migration was viewed with much apprehension within the country and parliament repeatedly asked for action to be taken to remedy these losses. The effects of what seemed to be an endless migration of physicians were further heightened by the imposed war with Iraq which appeared to have no end in sight. The high number of war casualties required a considerably larger number of physicians and other health workers than the system could provide.

Apart from the problems of supply, demand for a better health care system increased, which placed an even greater burden on an already over-stretched system. The Islamic Revolution had enlightened the villagers and the deprived people of their rights and, justly, gave them much hope and higher expectations for a better life, which obviously included a better health care. This

generated a greater demand for hospital beds and health manpower in general and physicians in particular. During this period, the country's population rose sharply giving rise to further demands on the system. In addition, frequent travel to industrialized countries by many Iranians and the ease of access to information regarding health care in those countries created a demand for a better health care system and obviously a larger number of physicians.

Meeting the demand

In order to meet the shortage, permission was sought to recruit more foreign physicians. However, neither the cabinet, nor the parliament was in favor of doing this. There were two major reasons for turning down such a course of action. The country was already paying over one hundred million dollars annually to the 6000 foreign physicians working in Iran. The other reason was the fact that their performance was far from satisfactory mainly because of cultural differences and the language barrier. Attempts were made repeatedly to hire a better caliber of physicians through public recruitment drives in foreign countries, and then testing those recruited for their suitability but these efforts were unsuccessful because of the objections raised by governments in those countries.

The gravity of the situation was such that the then Ministry of Culture and Higher Education was approached and was requested to increase the intake of medical students. In spite of numerous and lengthy meetings with two successive ministers and their deputies over a two-year period and despite the transfer of a number of hospitals from the Ministry of Health to the Ministry of Culture and Higher Education, they were unable to increase the number of medical students.

Following the temporary closure of the universities of Iran, the High Council for the Cultural Revolution was established. The medical branch of the Council meticulously and with the

participation of a large number university professors and experts studied the issue of health manpower training and particularly medical education. In this consultation exercise, over two hundred letters from professors and experts containing plans and suggestions for change were reviewed very carefully, and often in the presence of the writers themselves. The major concerns reflected in those letters regarded two issues; first, the quality of our medical education and second, the shortage of health personnel in general and physicians in particular.

As a result of meetings and extensive discussions at different levels regarding the proposals and recommendations for change, the High Council for the Cultural Revolution eventually approved the integration of health manpower training and medical education with the health services. A bill was prepared accordingly to take away all health related schools, institutions and colleges from the Ministry of Culture and Higher Education and integrate them with the Ministry of Health. In 1985, the bill was passed in the cabinet and then in parliament. According to the new law, the Ministry of Health and Medical Education was to be established which was now responsible not only for the health care of the people but also for medical education. According to the law, medical education included the training of health personnel as well. Universities of Medical Sciences were established.

There was opposition to this integration and at one point certain members of parliament who were not happy with the new law proposed a bill to dissolve the newly established Universities of Medical Sciences and also the Ministry of Health and Medical Education. The Parliament rejected the new bill. This meant reconfirming the newly established Ministry of Health and Medical Education along with the universities of medical sciences.

Parallel to the formerly mentioned meetings and discussions regarding the future of medical education, the Ministry of Health also tried to estimate the number of physicians and other health personnel needed. With this in mind, the Ministry invited a number of professors and experts along with some of the deputies of the Minister of Culture and Higher Education and the Minister of Health to look into the issue. The individuals consulted discussed the present situation and the future need for health manpower within a scenario of a prosperous economy as well as less robust one. After a lengthy and exhaustive consultation process, a document was prepared which provided the guidelines on how to increase the number of students, for how long, and also when and how to start decreasing their numbers in the future. Based on this, the Ministry of Health and Medical Education increased its intake of the students

Despite this careful planning and the desire to harmonize supply and demand, there was a sharp rise in the number of students being enrolled in medical universities. Several factors contributed to this rapid increase. One was a change in the selection procedures to enable students to enter universities based on their ideology as well as merit. This increased the number of students to one and a half times more than what the Ministry had planned.

Another factor was the establishment of the Islamic Free University. This university accepted a large number of students for many newly established centers, which were not accredited and often not even known to the Ministry of Health and Medical Education at the time. A third factor was with the fall of the Soviet Union, a huge number of young people mainly with a poorer high school background rushed into the universities of the newly independent countries and also into the universities of other so called "Eastern Bloc" countries. The majority of those universities were financially in a precarious position and