

Social Accountability Accreditation of Medical Schools in Iran: A Medical Education Emergency

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To the editor

Accreditation of medical education in Iran is currently carried out in four levels: institutional accreditation, educational centers accreditation, programs accreditation and continuing medical education accreditation. These accreditations are carried out periodically by representatives of the country's medical schools selected by the Ministry of Health and medical education (MoHME). In all of these accreditations, from the evaluation of the educational courses to the quality of education in different educational settings from faculties to hospitals are examined.

Now there are two basic questions: "To what extent is this type of accreditation correct?" and "What role do final customers of healthcare services, the general population, play in these accreditations?"

To answer the first question, we must understand the differences between the two concepts of accreditation and evaluation. Educational accreditation is a type of quality assurance process under which services and operations of educational institutions or programs are evaluated and verified by an external body to determine if applicable and recognized standards are met (1). The educational accreditation program, which is carried out internationally by the World Federation for Medical Education (WFME) is a practical example of real accreditation (2). From this comprehensive definition, it is

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clear that educational accreditation must be done by institution(s) outside the educational service providers including medical school's staffs and faculties affiliated to MoHME. In fact, what is currently being done as a medical education accreditation in Iran is a kind of internal evaluation of medical education, which can be considered as an introduction to educational accreditation.

It has been decades since the concept of "social accountability of medical schools" was firstly introduced by the World Health Organization (3). Since then, most discussions and writings in Iranian medical educational communities have examined the various aspects of "socially accountable medical education (SAME)". The general population, however, focuses more on accountability of medical schools for their healthcare service providing rather than educational and research accountability. In fact, neither what is considered as SAME nor meeting the healthcare needs of the general population does it mean that medical schools are socially accountable. Socially accountable medical school as I said before, focuses on the ultimate impact of education, research and service delivery on promoting community health (4). People in a community where enough public health is well-promoted have enough health literacy, know the risk factors of diseases and the ways to deal with them, and have enough control over their health to prevent diseases. In this sense, the social impact of the SAME and activities of socially accountable medical schools should be to promote community health and not just supplying community healthcare needs as

some have claimed (5).

A review of Iranian medical education accreditation measures shows that in most cases, social accountability of medical schools has not been addressed. Therefore, it seems that the formulation of accreditation measures based on social accountability of medical schools, as has been done for educational activities of medical universities (6), should be considered to assess and confirm the ultimate impact of medical education, namely the promotion of community health. Only by having such an accreditation checklist real customers of the healthcare system can contribute to the accreditation of medical schools' social accountability.

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