Student Declaration on Social Accountability in Health Professions Education

World Summit on Social Accountability
Hammamet, Tunisia
April 2017

Endorsed by:
The International Federation of Medical Student Associations (IFMSA)
The Student Network Organization of the Network TUFH (SNO)
The International Pharmaceutical Students’ Federation (IPSF)
The International Association of Dental Students (IADS)
The International Veterinary Students’ Association (IVSA)
The Tunisian Medical Students’ Association (Associa-MED)
World Rural Doctors in Training (Rural Seeds)
Introduction

We, health care students worldwide, are joining together to address the need for action in the area of assuring the social accountability of our education, faculties and hospitals.

The global consensus on social accountability, highlighted the need for health professions training institutions to:

- Respond to current and future health needs and challenges in society.
- Reorient their education, research and service priorities accordingly.
- Strengthen governance and partnerships with other stakeholders.
- Use evaluation and accreditation to assess performance and impact.

Health care students include, but are not limited to; physicians, nurses, midwives, dentists, pharmacists, psychologists, social workers, paramedical workers, dietitians, veterinarians, chiropractors and therapists.

We strongly believe that these principles still form the fundamentals of health care. We strongly support the recommendations listed in the Tunis Declaration. In order for healthcare students and health professions training institutions worldwide to reach their full potential, and to support the communities we serve, we are calling for action in the four areas addressed in the World Summit on Social Accountability:

1. **Partnerships:** Embark on partnerships and actions with other health system stakeholders to help educational institutions become more socially accountable
2. **Competencies:** Facilitate the competencies that socially accountable health professionals should possess and have encouraged
3. **Accreditation:** Enable evaluation and accreditation systems that measure the impact of schools on people’s health
4. **Leadership:** Foster the institutional leadership, capacities, and governance structures needed for schools to become more socially accountable

**Partnership**

The Alma Ata Declaration on Primary Health Care addressed putting people at the centre of healthcare. Today however in many countries, meaningful involvement of communities, or students for that matter, in governance of local or national health systems, or decision-making at educational institutions, seems to be rare. Reforms in health professions education need to address the coordination between different sectors, both public and private, to align health systems and workforce planning as well as to create stronger links between education, communities and health service delivery. Too often, well intended decisions by one party have adverse effects in other areas. As an example, when governments increase the number of
entries to health professions training institutions, without increasing the learning facilities or investing in faculty development, the quality of health professions education is threatened.

Involvement of communities, patients, students and other health professionals are often referred to. However, when reviewing the levels at which the involvement takes place, these often remain superficial. There is a large difference between using other parties as information providers, or seeing them as actual partners in change. Academia, students and communities should be valued contributors in the advancement of health professions training institutions, not only as they bring the unique perspective of being directly involved in and seeing the consequences of education and educational reform, but also because we believe they are competent, active and constructive partners in the development and governance of health professions educational systems.

We call for:

● Health professions training institutions, governments and educationalists globally to collaborate with other stakeholders, especially communities, patients, and students, at all levels, in a meaningful manner. This means going beyond using them as sources of information, but actively involving them in planning, execution and evaluation of health professions education, starting from the setting of learning objectives, selection criteria for students, delivery of education, assessment of students and curricula, and accreditation.

● Health professions training institutions and student organizations to collaborate in the advancement of health professions education and to work in partnership to achieve the goals set out by the Global Consensus on Social Accountability.

● Health professions training institutions and governments to involve health care students from different professions in the decision making process on health education, as they can give a valuable input, specifically on social accountability.

● Student organizations to collaborate globally on a national and international level, to give all students worldwide a chance to make a change. Students from different cultural, geographical and ethnic background will give organizations a strength in delivering changes to health care education.

Competences

We believe in a world in which all students unite for health, and are equipped with the knowledge, skills and values to take on health leadership roles locally, and globally. The education of our future health workforce needs to reflect the competencies that are relevant to their local communities. We strongly believe that health professions education should adapt to the continuous changes of the society and to the different geographic needs in the world.
Students should be aware of not only the aspects of clinical care, but also health care system functioning and needs, policy making, health promotion, ethics, communication skills and work on their personal development.

Many students worldwide are still exposed to traditional, teacher-centered education, not providing the learning conditions and teaching methods students require to become competent health workers and global health leaders. There is a need for student centered teaching, problem based learning, integrated curricula, community based learning, electives with a core and systematic curricula.

Many faculties worldwide recognize the added value of competencies such as leadership and advocacy, however few have put in place mechanisms in order to formally assess or value what students have learned or their efforts to grow in these areas.

Additionally, we strongly believe in the importance of equal access to health professions education. As members of the health professions, health workers are given the privilege and responsibility of caring for patients. Through this trust created by society, health professions training institutions and health workers accept a responsibility to the societies they serve. Therefore, health professions training institutions need to ensure that all students, regardless of their background, have equal opportunities to become health care students.

We affirm that student organizations provide improvement of learning opportunities for students, enabling the development of valuable leadership skills and individual responsibility through organizing and participating in student activities and organizations.

We call for:

- Learning outcomes and the health professions curricula to reflect the competencies and abilities that are required of a practicing health worker, to be agreed on by all relevant stakeholders, and to take into account international reference documents such as but not limited to the *CanMEDS Physician Competency Framework*.
- The acquisition of all learning outcomes to be periodically assessed by health professions training institutions in order to evaluate the effectiveness of the learning process provided by the school and for the necessary improvements to be implemented.
- Health care students to be assessed before graduation to ensure they have all necessary competencies and abilities that are expected of a health worker.
- Health professions training institutions to provide career advice and guidance to all students, with a specific focus on more generalistic specialties.
- Governments, health professions training institutions and healthcare institutions to assure proper working and learning conditions, respect for the health profession, access to career progression, access to continuous professional development and remuneration according to the level of education and responsibility in society to assure the retention of healthcare professionals.
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- Health professions training institutions to orientate their education to an interprofessional and patient centered perspective. To achieve that, healthcare professionals must have appropriate knowledge, skills and attitudes and their education must be practical, interdisciplinary, and have a high emphasis on teaching professionalism.

- Health professions training institutions to move from a teacher centered approach to more student centered learning with empowerment of the students, flexible learning paths, an important elective component of the health professions curriculum and learning tailored to the needs of individual students.

- Health professions training institutions and relevant institutions to recognize the time spent and competencies acquired by health care students when they were abroad through both formal academic recognition (credits) as well as informal recognition of their added value.

- Health professions training institutions and governments to create systems where access to health professions education is based on ability, aptitude and potential of a candidate and not on their financial status, in order to increase the diversity of our future health workers and the ability of the health profession to be representative of the population it serves.

- Students to engage in national and international fora and student organizations in order to exchange ideas on the challenges they face, as well as discover new solutions in partnership with others.

- Faculty, teachers, and health professions training institutions to encourage students and to provide them with the space to participate in extracurricular activities that lead towards personal development and have a positive impact on their communities.

- To prepare students to work in rural and remote areas, as 50% of the world remains rural, and less than 30% of health workforce are in the rural and remote areas (WONCA, 2016).

- Institutions and faculties to support health professions students in a compassionate way that facilitates student empathy and decreases student and professional burnout

Accreditation

In order to provide the health care our communities need, we need to ensure that we will have the right health workers, with the right set of skills, in the right numbers, in the right places. Presently, we are observing a large increase in the number of health professions institutions globally. However, efforts to deliver quality education face various challenges, such as health care institutions lacking basic infrastructure and equipment as well as clinically competent staff or dynamic educational methods. The need for reforms and quality improvement in health professions education, the increase of the number of health professions training institutions
around the world over the last decades, as well as the goal of safeguarding the quality of healthcare systems in a world of increasing globalization and mobility of the health workforce, have increased the awareness of accreditation as a quality assurance tool. In this context, there is a need to develop an international accreditation system for health professions education to ensure the quality of education around the world, in collaboration with governments to ensure its consistent implementation. Even when the quantity of healthcare professionals increases, it is essential that the quality of education is never compromised. Health professions training institutions additionally have an obligation to be transparent of content of the educational programme towards the societies they serve, both as a means of social accountability as well as for external assessment of the quality of the educational programmes for all parties involved, including potential students and employers of health professionals or health professions education organizations that are responsible for accreditation of health professions training institutions.

We call for:

- Adequate planning of the number of entries in health professions training institutions in accordance with the teaching capacity of the school, which depends on the number of teachers and educational infrastructures and materials.
- Adequate planning of the number of entries in health professions training institutions in accordance with the needs of the country, both in the total number of needed health workers as well as the specific needs in specialties, to minimize waste of financial and human resources and to foster fair access to health professions training institutions according to the principles of social accountability in health professions training institutions.
- Continuous assessment of the number of entries in health professions training institutions done by health professions training institutions as well as governments, taking into account the feedback of teachers, students, employers of health professionals, patients and all those involved in health professions education.
- Health professions training institutions to have internal and external quality assurance programmes that are in line with the global WHO/WFME standards.
- Strong and reliable collaboration protocols for health centers or other off-site learning locations to assure adequate clinical training facilities for all healthcare students.
- Health professions training institutions to foster the development of Health professions Education Centers that should be responsible for the construction and advancement of the teaching and assessment methods, in accordance to the developments in health professions education.
- Health professions training institutions to make information on the educational programme including the curriculum and learning outcomes accessible for the public.
● Health professions training institutions to provide a document accompanying the diploma, providing a standardized description of the nature, level, context, content and status of the studies completed by the student to allow the diploma to be recognized internationally in order to improve international transparency and facilitate academic and professional recognition of qualifications. This information must be provided automatically in the end of the studies and without additional charges.

● Health professions training institutions to implement a system of credits based on the workload expected from students to achieve the learning outcomes to allow a better mutual recognition of degrees at global level and promotion of mobility.

● Students to be involved in all aspects of quality assurance. Students should not only be given the opportunity to contribute by providing data, but be included in analysis, interpretation, dissemination and implementation of the results. Students must be included as full members of expert committees involved in accreditation of institutions. Selection of students to the accreditation agencies must be done transparently and through specific criteria that guarantees selection’s fairness. Student Unions should be involved within this process. Accreditation agencies must provide training for students before they participate in this process. A pool of student reviewers should be created to take part of the review teams that carry out health professions training institutions’ reviews.

Leadership

Policy and governance play a major role in developing social accountability in health professions training institutions. Local curricular changes, new accreditation standards, and development of competencies, can only do so much without a strong, united strategic vision around the leadership role of key players. All stakeholders - schools, governments, accreditation bodies, student associations, international educational associations, must take an active role.

We call for:

● Governments, faculty, teachers, and health professions training institutions to lead by example as role models, who demonstrate social accountability through their actions rather than words. All institutions to ensure meaningful and true representation of all stakeholders in relevant processes.

● Health professions training institutions to provide learning opportunities that stimulate students to be advocates of improvement of healthcare and their leadership skills. The health professions training institutions should also facilitate and support extra-curricular activities to support, encourage and motivate student involvement.
• Health professions training institutions to reinforce their governance structures in education, research and healthcare delivery adhering to the principles of social accountability.

• Governments to support health professions training institutions in reforming their visions, objectives and educational strategies to respond to the needs of their communities. Health professions training institutions to provide teaching practice environments where leadership qualities can be developed and are not frowned upon.

• Health professions training institutions to create and/or guide leadership positions for students within the school system.

• Student organizations to make students aware of local and international conferences that they can attend, give students a chance to grow in their leadership skills and let them lead working groups and motivate students to take on active roles within student organizations locally and globally.

**Conclusion**

We, health care students worldwide, and the undersigned organizations, call for increased action on ensuring Social Accountability of health professions training institutions. We ourselves are committed to working towards the implementation of the Global Consensus on Social Accountability, and the Tunis declaration in our own communities, countries and globally. We commit to continue to lead initiatives that positively impact the communities that we serve. We will continue to collaborate with stakeholders to uphold these principles, and consider the involvement of students fundamental. We commit as student representatives and organizations to facilitate bilateral communication between universities and students, advocate on behalf of the students they represent, promote democratic processes within student organizations and the student representation at faculty level, communicate and collaborate with students and student organizations on local, national and international levels and advocate for transparent processes to facilitate student evaluation of health professions education.