IMPLEMENTING SOCIAL ACCOUNTABILITY IN MEDICAL SCHOOLS

3 DAY WORKSHOP PROPOSAL
The World Health Organization, in 1995, defined Social Accountability (SA) in Medical Schools as “the obligation to direct their education, research and service activities towards addressing the priority health concerns of the community, region, and/or nation they have a mandate to serve.” Medical schools carry a far reaching social obligation along with their existence, which is expressed through their commitment to produce graduates able to effectively respond to priority health needs and the challenges of people and society as a whole. However, in order to be socially accountable, medical schools need to be dynamic and adjust freely to the growing and changing demands of the patients and community in which they serve, a principle which applies to all health professions’ education.

The 21st century presents medical schools and health systems with an important set of challenges: to improve the quality, equity, relevance and effectiveness in health care delivery; to reduce the mismatch within healthcare delivery; to redefine the roles of health professionals and to produce evidence of positive impact on the people’s health status. For medical schools to become more socially accountable, improvements are required in several layers of the education scheme: responding to current and future health needs and challenges in society, reorienting their education, research and service priorities accordingly, strengthening governance and partnerships with other stakeholders and using evaluation and accreditation to assess their performance and impact. Social accountability is essential to medical schools because it creates a dialogue between all parties and promotes constructive monitoring of the medical schools’ priorities to its students, (future) patients and communities. This process endeavors to improve the benefit of the communities and protect the rights of all those involved by holding the institutions accountable for their actions. The need for more Socially Accountable medical school has been recently recognized by the WHO Global Strategy on Human Resources for Health and the United Nations High Level Commission on Health Employment and Economic Development in 2016, thus intensifying international discussions and putting Social Accountability in the forefront.

Medical education does not exist to provide students with a way of making a living, but to ensure the health of the community.

Rudolf Virchow (1821-1902)
Founder of the field of social medicine
Relevance to Medical Students

The IFMSA

The International Federation of Medical Students’ Associations has shown great involvement in the field of Social Accountability in the last years, selecting it as one of its Global Focus External Areas, and produced significant results on an international level: from co-organizing the World Summit on Social Accountability in 2017 and receiving the AFMC Charles Boelen International Social Accountability award to publishing the Students’ Toolkit on Social Accountability together with THEnet in September 2017, offering students everywhere necessary tools to take action. However, while IFMSA has been advocating for Social Accountability internationally, local and national action is essential to achieve its implementation as well.

Through this workshop, we will provide participants with the knowledge, resources, skills and incentives to design initiatives and activities aimed at propagating the values of Social Accountability on a faculty- and community-level, as well as document the ways through which individuals can contribute to Social Accountability: for this person, participants will

Purpose of this workshop

The main purpose of this activity is to enhance the participants’ comprehension of Social Accountability and build their capacity in order to take action regarding its implementation. Medical students are major stakeholders in medical education and influencing curricula hence, as Social Accountability becomes more and more recognized and with greater evidence to support its positive impact within communities, they will need to develop a set of skills and knowledge to be able to address this growing need. Through attending this workshop, students will be able to both become informed advocates and evolve into change agents, able to translate Social Accountability into reality. At the same time, participants will gather the skills and tools needed to empower their peers locally, nationally and globally, thus exerting a ripple effect within medical student networks and the broader faculty networks.

What can you and your fellow students do to make your medical school more socially accountable?
Who should attend this workshop?

Primary target group for this workshop
Medical Students having a passion for community empowerment and socially accountable education that addresses the populations’ needs are the primary target group. Students with a particular interest for medical education are especially encouraged to participate, although no formal experience in student representation or medical education is required.

Secondary target groups:
The workshop could be an indispensable addition to any healthcare professions’ student, as the content of sessions will be applicable across health professions’ education and explore the broader importance and effects of Social Accountability in Education, Health Policy and the accountability of relevant stakeholders, such as educational institutions and health facilities involved with communities or policy makers.

Expected number of participants:
Minimum: 9 participants. Maximum: 20 participants.

Activity plan
The workshop will span across 3 working days (8 working hours per day). It will consist of a variety of formal and non-formal education methods to provide participants with the best learning and practice environment. Methods used will be:

- **Interactive Lectures**: Presentations delivered by experienced trainers using visual and hearing aids. Lectures will be performed to introduce participants to basic concepts and will provide space and time for questions and subsequent discussion.

- **Simulations and hands-on experience**: Simulations aim to involve participants directly into theoretical situations which are based on real life experiences. Participants will be provided with a unique opportunity to explore a real life situation in simulated but realistic settings, giving them a possibility to directly implement skills and knowledge acquired during the workshop. It will give the opportunity to enact a scenario, practice skills around that scenario, and explore the reactions and feedback to it.

- **Debates**: Participants will be encouraged to take a stand and enter debates, confront each other in a healthy way to foster productive discussion and develop their negotiation/argumentation skills.

- **Working groups and Brainstorming Sessions**: Small Working Groups allow time for everyone to speak and to feel involved. In addition, it will help the participants to brainstorm about many different topics and then to share the outcomes of their working groups with the others. Many topics can be discussed more effectively in Small Working Groups.

- **Individual working time**: Participants will also be given time to work individually on building activities adjusted to their local setting, come up with their own plans and ultimately, feed that back into the groups’ outcomes.

- **Games and Quizzes**: Platforms such as Kahoot will be used to put the newfound knowledge of participants to the test in an interactive and fun manner. We’ll also make use of a newly developed SA Quartet game. These will be used as positive reinforcement and opportunities for teamwork.
# Proposed agenda

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<th>Day 1</th>
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<th>Day 3</th>
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<td><strong>Introduction</strong></td>
<td><strong>Diving in</strong></td>
<td><strong>Planning to Action</strong></td>
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<tr>
<td><strong>Morning (09:00 - 13:00)</strong></td>
<td><strong>09:00 - 10:30</strong></td>
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<td>10:30 - 11:00 Break</td>
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<tr>
<td>11:00 - 13:00 Training: What is Social Accountability?</td>
<td>11:00 - 13:00 Work time: Strengths and weaknesses in your own educational system</td>
<td>11:00 - 13:00 Simulation: Building Grassroots Movements</td>
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<tr>
<td>**Lunchbreak</td>
<td>13:00 - 14:00**</td>
<td><strong>09:00 - 10:30</strong></td>
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<tr>
<td><strong>Afternoon (14:00 - 20:00)</strong></td>
<td><strong>14:00 - 15:30</strong></td>
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<tr>
<td>14:00 - 15:30 Presentation: What does Socially Accountable education look like? Sharing global best practices</td>
<td>14:00 - 15:30 Debate: Can good intentions cause harm?</td>
<td>14:00 - 15:30 Simulation: What would SA in your faculty look like?</td>
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<td>15:30 - 16:00 Break</td>
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<td>15:30 - 16:00 Break</td>
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<td>15:45 - 17:15</td>
<td>16:00 - 17:00 Simulation: Case studies</td>
<td>16:00 - 17:30 Training &amp; work time: How to be a change agent, design and take action</td>
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<td>Training: Meaningful Student Engagement</td>
<td>Training: Exploring successful narrative &amp; storytelling</td>
<td>17:00 - 18:30 Training: Exploring successful narrative &amp; storytelling</td>
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<td>17:15 - 18:15 Presentation: Students &amp; SA</td>
<td>17:00 - 18:30 Presentation: Students &amp; SA</td>
<td>18:30 - 20:00 Work time: Pledge Session III</td>
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<td>18:30 - 20:00 Intervention time: An individual’s guide to being Socially Accountable</td>
<td>18:30 - 20:00 Intervention time: How do we address the flaws</td>
<td>Closing &amp; Evaluation</td>
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Proposed agenda: Expected outcomes

Following these sessions, participants will be able to:

**Introduction:**
- Identify hopes, fears and expectations for the workshop.
- Set the social contract for the upcoming 3 days.
- Set 3 personal objectives to achieve within the next 6 months, related to Social Accountability.
- Distribute tasks among participants (eg Pledge Button coordinators, energy coordinators, minute takers etc)
- Create a comfortable working atmosphere and become acquainted with one another.

**What is Social Accountability:**
- Articulate their own beliefs and attitudes towards the role of Social Accountability in Medical Schools.
- Determine key elements and values of Social Accountability in Medical Schools.
- Explain the importance of redirecting health professions’ education towards addressing communities’ and patients’ needs, as well as the obligation of governments and faculties to follow the right principles to facilitate this process.
- Explain the importance of community based medical education and its connection with global health issues.

**What does Socially Accountability look like & Sharing Successful Examples globally:**
- List international organizations who work on Social Accountability and its implementation across faculties.
- Identify examples where Socially Accountable programming interventions produced positive outcomes for students and communities, as well as list said outcomes.

**Meaningful Student Involvement**
- Communicate the importance of student involvement in undergraduate education and the benefits that it can produce.
- Identify the scales of the Fletcher Ladder as well as which scale represents each participant’s faculty.
- Explain the potential role of student organizations in promoting and implementing principles of Social Accountability in Medical Schools and Education.
- Identify effective ways to involve students in the implementation of Social Accountability.

**Students & SA: What has been done so far**
- Communicate the background of IFMSA’s involvement with Social Accountability and what the outcomes have been in the past 3 years.
- Identify ways in which NMOs can directly get involved with the international work on Social Accountability.
- Identify the main international organizations working on Social Accountability in Medical Schools, as well as what their collaboration with IFMSA has been.
- Identify the main international events/conferences organized, dedicated to Social Accountability.

**An individual’s guide to being Socially Accountable**
- Explain what Personal Accountability is and how it is relevant for Social Accountability.
- Identify ways through which individuals can contribute to more socially accountable education and healthcare.
- Create the outline of the final Pledge button for medical students document.

**Social Determinants of Health & Universal Health Coverage**
- Identify common Social Determinants of Health and their influence, both on the general population as well as at risk communities.
- Explain what Global Health means and why Social Accountability is a relevant concept.
- Identify examples of effective local, regional, and national strategies for improving systems and policies that affect the social determinants of health.
- Identify the 3 levels of socially accountable care (micro, meso & macro).
- Explain the link between Social Accountability & Universal Health Coverage, as well as the ways through which Social Accountability can be a tool to achieve it.

**What are the flaws in the educational system?**
- Articulate the importance of assessment in the educational process.
- Explain the difference between formative and summative assessment.
- Identify the different assessment tools (such as written, practical, observational, peer etc)
- Identify the assessment criteria for Social Accountability (CPU Model, IFMSA Students’ Toolkit assessment tool, THEnet Framework, ASPIRE Criteria)
- Use the aforementioned criteria effectively to assess each participant’s school and produce individual reports.
› Identify specific systematic flaws that could be addressed by student action.

Social Accountability Debate: can good intentions cause harm?
› Clarify common misconceptions regarding the implementation of Social Accountability.
› Identify potential pitfalls that activities under the premise of Social Accountability may harbor.
› Exercise critical thinking and structure their argumentation.

Simulation: Case studies
› Compare and contrast different health and educational landscapes and how one affects the other.
› Critically assess the role and responsibilities of various stakeholders within communities towards health.
› Use their skills to identify potential solutions in health related problems, through Socially Accountable actions.
› Work collaboratively and with a multi-stakeholder approach to address community health problems through Socially Accountable actions.

Narrative & Storytelling
› Explain how & why stories enhance the transfer of information, as well as how stories relate with medicine.
› Define what Narrative Medicine is and how it interlinks with Social Accountability.
› Use personal experiences and transform them into powerful stories.
› Use structured storytelling to enhance presentations and identify the 5 C’s of good storytelling.
› Identify opportunities to use stories in advocacy, campaigning or in any efforts aimed at implementing Social Accountability.

How do we address the flaws in the educational system?
› Critically assess the performance of educational institutions in terms of Social Accountability.
› Identify realistic solutions to the flaws in the educational system in terms of Social Accountability and community engagement, through a multistakeholder approach.
› Identify the key stakeholders, able to ratify and execute the potential solutions.

Advocacy: Introduction & Basics
› Identify the components and steps of an advocacy strategy.
› Explain the 4 key principles to successful campaigning.
› Persuade, using negotiation techniques, key stakeholders to offer support.
› Articulate the call for action towards multiple stakeholders, as expressed in the IFMSA Policy on Social Accountability in Medical Schools.
› Identify specific key actions for NMOs as they have been outlined in the IFMSA Policy on Social Accountability in Medical Schools.

Building Grassroots Movements
› Identify resources needed to build a grassroot movement and sourcing techniques for their gain.
› Outline the 8 steps for building a grassroot advocacy movement.
› Set a plan for building an advocacy movement on the local or national level.
› Convey the importance of grassroots movements and list successful examples across various fields, worldwide.

What would SA in your faculty look like? & Addressing your personal curriculum
› Identify the purpose, contents and potential use of the IFMSA/THEnet toolkit on Social Accountability in Medical Schools.
› Describe at least three changes they can implement to better incorporate a Social Accountability perspective into their faculties in the interest of the communities they serve.
› Explain the methodology through which such changes would take place.

How to be a change agent, design and take action
› Approach problems with a solution-based thinking process.
› Identify the differences between divergent thinking and convergent thinking.
› Explain what the double diamond method is and use it effectively.
› Identify the steps to successful activity management.
› Build a local/national activity for Social Accountability.

The Social Accountability Pledge
› Refine final Pledge action points.
› Explain the content of the Pledge and its dual character (for medical students and for medical schools).
› Encourage faculty leadership to take the Social Accountability Pledge and assume action.
› Convince their peers to take the individual Pledge and join the global advocacy for more Socially Accountable curricula.
Impact, Feedback and evaluation

Feedback and Evaluation:
Feedback and Evaluation will be collected at the end of each day, as it gives the chance for honest opinion on the process and content of the workshop, allowing us to improve during the workshop and in the future. Moreover, a collective evaluation form will have to be filled in together with the post Impact Assessment form (see below).

Impact Assessment:
Participants will need to fill out an assessment form both 2 weeks before and after the workshop. The pre and post Assessment forms will be identical and aim to quantify the effect that the workshop had on participants in key areas of SA and will be evaluated against the expected outcomes of each session. Moreover, a 6-month follow up on participants will be completed to evaluate actions taken by them on a local/national level.

Objectives | Success Indicators
---|---
Provide knowledge about Social Accountability and its effect in communities, as well as skills for its propagation. | 75% total increase in knowledge-based questions on SA at the pre and post impact assessment. Handout materials and resources used to develop the workshop shared with participants within 2 weeks of completion. 75% of participants report increase in confidence to deliver sessions on SA. 75% of participants report increase in their confidence to take on leadership roles.
Empower and incentivize participants to develop activities at a local and national level. | 50% of participants report new activities on SA at 6-month follow up. 50% of participants report sharing the SA Toolkit with local faculty members and staff at 6-month follow up. 30% of participants report performing assessment of SA implementation on a faculty level at 6-month follow up.
Form an intra-regional and international network of SA advocates working & collaborating to promote SA | At least 1 workshop on SA organized by participants within a year, either on a local, national or international level. Creation of a database on SA workshop participants and relevant activities on SA developed subsequently to participation.
Provide understanding on international developments on SA and major stakeholders. | 75% of participants able to name at least 5 international organizations working on SA in health professions’ education at the post IA. 50% of participants provide facilitators with a list of all relevant SA stakeholders on a local level by the end of the workshop.
Enhance the Students’ Toolkit on Social Accountability with new materials. | Organization of the proposal, preparation documents and handout used and inclusion in the Toolkit of the 3-day workshop as an extra tool, within 3 months of conclusion. Produce the Pledge button, including a pledge for medical students and a pledge for medical schools in terms of working on SA, which will be included in the Toolkit, within 3 months of conclusion.

How will you impact your community?
Implementing Social Accountability in Medical Schools

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Follow up plan

As expressed in the Impact Assessment section, the workshop will include a pre and post assessment survey, including the evaluation of the workshop delivery in the latter. This way, facilitators can measure the effect the workshop had on participants, both through perception-based and knowledge-based questions. As part of the follow-up plan, participants will set 3 objectives to be achieved through their participation on the 1st day of the workshop, which will be followed up on through a post 6-month assessment, as well.

Moreover, workshop facilitators will need to fill in a report form, to track operational details of the workshop and preserve the institutional memory. Facilitators will also ensure to keep contact with the participants after the conclusion, through a mentoring system (preferably 1:4 ratio of mentor:mentees) and the establishment of a consistent communication channel to offer support and guidance, as well as a platform for participants to exchange outcomes and experiences.

### Objectives Success Indicators

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<td>Provide understanding on international developments on SA and major stakeholders.</td>
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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>- 6 months</td>
<td>Call for trainers &amp; participants</td>
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<tr>
<td>- 5 months</td>
<td>Selection of trainers</td>
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<tr>
<td>- 4 months</td>
<td>Selection of participants</td>
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<td>- 4 months</td>
<td>Deadline for pre-assessment survey</td>
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<td>Start of the workshop</td>
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<td>End of the workshop</td>
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<td>+ 2 weeks</td>
<td>Deadline post-assessment survey and facilitators report</td>
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<td>+ 6 months</td>
<td>6-month follow up with participants</td>
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<td>+ 8 months</td>
<td>Final report of the workshop’s outcomes and deliberation on continuation</td>
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Resources available

Available human resources (facilitators) will consist of experienced trainers, as well as invited guest speakers from organizations working on Social Accountability, patient- and community organizations, and educational experts.

Activity coordinators

**Responsible coordinator:**

Facilitator 1:

Facilitator 2:

Facilitator 3:

Guest speakers:

Contact information:

Find out more

This workshop proposal is part of the Students’ Toolkit on Social Accountability in Medical Schools (IFMSA/THEnet). Check out the full toolkit and additional materials at https://ifmsa.org/social-accountability

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