

# Medical education in Sudan: future perspectives

Being a large tropical African country, Sudan offers the Sudanese clinicians and researchers golden opportunities for research on different issues like communicable, non-communicable diseases, social and psychological sciences, in addition to medical education. With a history dating to 1924, medical education continues to evolve rapidly in Sudan. Despite its strengths and weaknesses, it had positive influences on the health system, locally and regionally (1). In this special series, entitled "What the Future Holds for Medical Education in Sudan", we have tried to shed the light on different aspects of medical education in Sudan.

For example, Diab *et al.* queried the capability of medical schools to provide a solution for health workforce imbalance through formal and hidden curricula. They thought that hidden curriculum devalues some specialities, and as long as it remains unopposed by the formal curriculum; students are driven away from these specialities. Moreover, although the World Federation of Medical Education (WFME) highlighted the importance of formal career advice, it is still an area of non-compliance by medical schools.

Innovations in medical education were made in 1975 when Professor Bashir Hamad introduced the concept of community-oriented medical education in Africa at Gezira University (2-5). The Faculty of Medicine, Gezira University (FMUG), has a long and pioneer reputation in community-oriented medical education. Therefore, it is not surprising that the FMUG can lead social accountability in Africa and the Middle East. A review article quantified ten unique features that will qualify FMUG to lead social accountability. This review also mentioned four potential areas of innovations that FMUG can adopt in social accountability.

In a review article, Ahmed *et al.* discussed why doctors should consider a Ph.D. degree to be independent researchers and leaders in clinical research. They explained the benefits of research for the clinicians, patients, hospitals, medical schools and the community.

In another narrative review entitled "Current and future clinical research in Sudan: an opportunity for everyone to choose research in medical education, communicable and non-communicable diseases", Ahmed and his co-authors proposed steps that will enhance and strengthen research in Sudan. Realizing that investing in research will help in keeping people well, and open new venues for health services in Sudan, they highly recommend that every doctor in Sudan should engage in research activities so that current and future patients can benefit from the outcomes of these research activities.

During the pandemic of COVID-19, the appreciation and enthusiasm for research and medical teaching increased not only in Sudan but worldwide. However, the research output in Sudan was not to a satisfactory level. The challenges and barriers related to the culture and customs that influence the chance for men and women to participate in academic medicine in Sudan were highlighted in this special series. Furthermore, possible solutions to overcome these problems at different levels (individuals, research teams, universities, government and the issue of perception and promotion of research culture) were suggested.

Currently, the Sudan Medical Specialization Board (SMSB) is the only postgraduate body in Sudan for the training of medical doctors at the postgraduate level. In this special series, the researchers proposed that SMSB offers an MD-Ph.D. programme at the postgraduate level with a duration of 6–7 years, with a Ph.D. in clinical epidemiology. They detailed the essential skills and features that are needed for a successful epidemiologist who will graduate from the Sudanese postgraduate programme of MD-Ph.D. The structure and the future directions of the graduates of the MD-Ph.D. programmes and how they can bring significant benefits for the conduction of research in Sudan were documented. Not exclusively, the MD-Ph.D. programme in Sudan will lead to the establishment of new generations of clinical scientists who will be able to shed light on the behaviour of different diseases in Sudan, including COVID-19, and how to apply appropriate strategies in management and prevention.

The articles included in this special series reflect the authors' viewpoints, opinions, or suggested ideas. As editors, we believe that the future holds a lot for medical education in Sudan through revised curricula, social accountability, and active engagement of clinicians in researching diverse areas according to the health system needs. This special series is written in accordance with the *Journal of Public Health and Emergency* reporting guidelines.

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#### References

- 1. Fahal AH. Medical education in the Sudan: its strengths and weaknesses. Med Teach 2007;29:910-4.
- 2. Hamad B. Interdisciplinary field training research and rural development programme. Med Educ 1982;16:105-7.
- 3. Hamad B. Problem-based education in Gezira, Sudan. Med Educ 1985;19:357-63.
- 4. Hamad B. Community-oriented medical education: what is it? Med Educ 1991;25:16-22.
- 5. Hamad B. Establishing community-orientated medical schools: key issues and steps in early planning. Med Educ 1999;33:382-9.







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