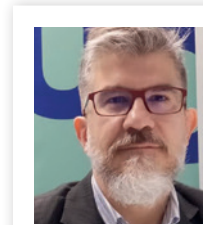


14 Rethinking healthcare workforce education



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Universitat Oberta de Catalunya is IAU HESD global cluster lead for SDG 3: Good Health and Well-being

The pandemic has highlighted the importance of the SDGs and their interconnections in empowering societies to meet global challenges and accomplishing Agenda 2030. The purpose of medical education is to train medical and healthcare workers who provide the care we need. When technological breakthroughs cause shifts in healthcare, medical education needs to adjust accordingly. Moreover, the current situation has clearly placed healthcare workers in the centre of the storm. Therefore, medical education is crucial in empowering healthcare workers to face current and future challenges.

The IAU SDG3 Cluster, one of the subclusters of the IAU Global HESD Cluster, identified the following lessons for medical education that were learned from this pandemic:

- **Health and disease in an interconnected world**

We need to make all students are aware that epidemics are no longer only local or regional, but global. The interconnected world means we share diseases, that local strategies are no longer the only solution. Therefore, our students need to understand that the challenges we will face need systemic and global solutions; and to tackle them, healthcare professionals need to understand the complexity of global and political relations.

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In addition, the role of international institutions is crucial in the current interconnected world, and healthcare professionals should learn to link health strategies with policies and implementation designs, to exchange, and to understand these complexities beyond the national or local context.

• A need for interdisciplinary and interprofessional education

Interdisciplinary medical education concerns the links between medicine, public health and planetary health. Climate change affects every aspect of our lives, from the air we breathe and the food we eat to the increased risk of pandemics and natural disasters, and the social disruption that these crises cause. After the COVID-19 crisis, we should adopt a planetary health approach, since protecting the environment is an essential strategy for avoiding other major health crises. This should be intensively taught, from medical schools to continuing medical education.

Therefore, interprofessional medical education including public health and environmental sciences is a must. Interprofessional education with nursing and other health sciences is also needed. Teamwork is essential for healthcare delivery and the sooner medical students interact with other healthcare professions, the better.

In addition to that, we will witness a service transformation, from hospital based to population-based care. This implies a community-based approach in the medical education curriculum without forgetting patient-centred health or citizen-centred health. We are transitioning from seeing a patient as passive complier to a co-producer of wellbeing.

• Learning soft skills to overcome uncertainty

During the COVID-19 pandemic, many health workers – especially those working in the front line – have been confronted by the necessity to make difficult medical decisions and priorities in acute situations. This, together with long work shifts and lack of adequate protective equipment has led many to experience extremely stressful working environments.

This increased pressure has added a tremendous load on health systems, as they have been burdened with increasing loads of technology management and administration. These types of increasing pressures have already pre-pandemic been seen to lead to increases in moral distress and burn-outs among health workers, and to many of them leaving the professions.

For these reasons, it is urgent that medical education to an increasing degree integrates the teaching of skills for confronting uncertainty and systems change to ensure a sustainable working life. These, as well as inner and transformative aspects, should thus be integrated into medical education curricula, as they can increase health workers' inner capacities, collaborative capacities and change-making capacities.

• Betting on e-health and e-learning

E-learning is not just about logging on to an online platform and engaging with others via Zoom. It is about how students can be motivated and engaged by harnessing a range of learning technologies and innovative approaches that really bring students from different professions together. This requires a redesigning of curricula and an adjustment in the education system at the policy and the implementation level.

E-Learning can be more flexible and allow students to study anytime, anywhere, and is associated with decreased costs. Higher education will become more accessible to those who previously could not gain access due to physical and geographical barriers. However, for medical education, hands-on experiences in handling patients are required. To that end, all healthcare organizations (facilities) at all levels around every country could be optimally utilized.

Finally, we do not know all implications and consequences of the pandemic on medical education, but we firmly think that health professionals will have to train much more than they did so far in digital health. For instance, the healthcare workforce needs to be familiar with medical apps in order to recommend the most useful ones to their patients, as well as to learn how to use social media for health promotion or use health data science for making medical decisions. One way to do so is to incorporate information and communication technology into their education.

Therefore, a responsibility but also opportunities to rethink higher education are currently emerging. These changes and responses to it are strengthening universities' leadership for future challenges. While the operating halls have been radically transformed during the last centuries, the lecture halls remain nearly the same. **We need to act now** and incorporate all the knowledge gained during this pandemic to transform the way we educate the healthcare taskforce.