

EDITORIAL**CALL FOR A FORMAL CURRICULUM OF PROFESSIONALISM**

Professionalism is considered to be the mainstay of health care providers. All stake holders including the public, administrators, doctors advocate for high levels of professionalism¹. Accordingly professionalism is now an essential competency of a medical doctor². Association of Medical Colleges recommended inclusion of a core curriculum for professionalism in all medical schools of North America in 1999³. A formal curriculum for professionalism has since been implemented in most of the Western medical schools; and is strongly advocated for the rest. In this context, AMEE guideline no. 61 gives a stepwise road map for professionalism curriculum designing including a process of sequentially developing an agreement on institutional definition of professionalism; evolving a vertically integrated plan of learning through all years; planning learning strategies; ensuring positive impact of formal, informal and hidden curricula; and strategizing assessment and evaluation of learning⁴.

Professionalism has been defined by American Board of Internal Medicine (ABIM) as "constituting those attitudes and behaviors that serve to maintain patient interest above physician's self-interest"⁵. De Camp et al identified interpersonal professionalism encompassing prerequisites for effective and adequate contact with patients and other healthcare professionals; public professionalism relating to the demands society places on the medical profession; and intrapersonal professionalism covering demands that have to be met to function effectively and adequately in the medical profession as an individual as the three themes within the concept of professionalism⁶. Communication, ethics and continuous professional development are considered to be the areas which include most of the elements of professionalism⁴. Altruism (keeping patient needs above self), accountability (to self, profession & society), excellence, duty,

honor / integrity and respect for others have been described as six essential elements of professionalism by ABIM⁵. ABIM, American College of Physicians-American Society of Internal Medicine Foundation and European Federation of Internal Medicine enlists professional competence; honesty with patients; patient confidentiality; maintaining appropriate relations with patients; improving quality of care; improving access to care; a just distribution of finite resources; scientific knowledge; maintaining trust by managing conflicts of interest; and professional responsibilities as the essentials in the Physicians' charter on professionalism⁷. Areas of public professionalism highlight the social contract with society. Societal context brings in national and cultural differences⁸. A study by Cruess et al describes professional qualities of a doctor to be universal; however differences have been noted in roles of a doctor in different cultures. These cultural differences should be taken into account in defining professionalism for curriculum planning⁹.

Curricular considerations for professionalism should include a detailed instruction plan along with assessment and evaluation strategy⁴. It is considered that students enter medical colleges naïve and with idealism. The naivety is replaced by practical wisdom through a process of attainment. The attainment process includes positive influences of a planned curriculum for professionalism, its implementation through appropriate instructional tools, strategic assessment and positive role modeling (by senior faculty) through five years of medical college. On the other hand, idealism transforms into cynicism (a belief that people are generally selfish and dishonest) through a process of attrition because of negative influences of inappropriate as well as hidden curriculum (negative role models and unhealthy work environment) during the course of training. Literature greatly emphasizes on

controlling hidden curriculum, which is defined as a 'set of influences that function at the level of organization and institutional culture'. Thus the challenge we face as educationists during the five years is to maximize attainment through conversion of naivety to practical wisdom; and retention of idealism by reducing attritional factors creating cynicism¹⁰. Aga Khan University Medical College demonstrated similar level of professionalism attitudes among final year and first year students. It was argued that the professionalism curriculum employed has been able to prevent process of attrition; however, it was noted that those attitudes were below the desired levels, and the need to review the training process was felt to enhance the process of attainment¹¹. It is thus evident that this process happens over five years of training, thereby highlighting need for a vertically integrated professionalism curriculum spanning over the whole duration of undergraduate education⁴.

The instructional strategies for the development of professionalism and its assessment are required for both cognitive and affective (attitudes) domains of knowledge. Addressing the cognitive component is considered relatively easy to establish⁸. University of Health Sciences, Lahore has taken initiative in this context by introducing the subject of Behavioral Sciences¹². Instruction, development, assessment and continued practice of the affective domain of professionalism continue to be a challenge⁴. Role modeling, social responsibility, religious obligations and accountability were considered to have fostered development of professionalism, whereas uncongenial educational environment and absence of a formal curriculum were considered detrimental to the cause in the students of a private dental college of Pakistan¹³. Role modeling and good work environment, in addition to white coat ceremony, reflective practice with diaries, critical incident reporting and other routinely practiced instructional tools need to be employed strategically at various stages of learning based on the principles of adult

learning. Peer assessment, objective structured clinical examination, direct observation by faculty, critical incidents reports, learner maintained portfolios and 360° evaluation may be viable assessment tools⁴. Nationally, Islamic International Medical College has developed and introduced a spiral curriculum with a vertically & horizontally integrated PERL (Professionalism, Ethics, Research & Law) module addressing professionalism using instructional and assessment strategies for both cognitive and affective domains¹⁴. An evaluation process highlighting the strengths and identifying the pitfalls should be a mandatory requirement for quality assurance of such programs; as was the initiative on part of Aga Khan University Medical College^{4,11}.

Professionalism has been identified as one of the main competencies in the practice of medicine². Realizing its importance, professionalism curriculum was implemented across the developed world in the last 15 years³. Few of the national institutions have developed and introduced curriculum for professionalism^{11,14}. However, it remains a part of the informal and hidden curriculum in most of the medical and dental colleges of Pakistan. This editorial should serve as a call for development and implementation of a formal curriculum for professionalism in medical and dental colleges of Pakistan. The institutions, which have already developed and employed such curriculum, should be the leaders in providing evidence in the local context^{11,14}. This indeed becomes a combined responsibility of all health care fraternity to have an impact within their circle of influence to be the role models; and national responsibility of regulatory authorities, curriculum developers and the health care teaching fraternity for development and implementation of an appropriate professionalism curriculum suitable to local needs.

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