

A Call to Enhance Transparency Among Egyptian Medical Schools

Wagdy Talaat

Suez Canal University

Mariam A. Amin (✉ dr.mariamasaad@gmail.com)

Ain Shams University

Mohamed Reda Bassiouny

Mansoura University

Nancy Hussein Hassan

Zagazig University

Omayma Hamed

Armed Forces College of Medicine

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Abstract

Background: Transparency in providing information in higher education became a very important and basic matter especially after internationalization of medical education. The Egyptian Society for Medical Education (ESME) aspires that Egyptian medical schools would work more towards transparency and openness for greater effective feedback. Literature review revealed almost zero results related to the transparency situation in Egyptian medical schools.

Methods: This study was carried out to estimate the transparency of medical schools' websites information concerning their accreditation process through reviewing forty Egyptian medical schools' official websites, as well as through the National Authority for Quality Assurance and Accreditation of Education (NAQAAE) website searching for two major transparency criteria. Each criterion was further subdivided into several information elements. Data were registered and analyzed using the Research Electronic Data Capture (REDCap). Authors excluded, from data analysis, the newly established schools that are less than five years which were not obliged to apply for accreditation yet.

Results: Research results showed that only thirteen colleges recorded being accredited on their websites; however very limited amount of data was available about the process, dates, and documents. The accreditation information of these thirteen schools was confirmed by information on NAQAAE website. Other information concerning other important elements such as accountability and future plans were almost completely missing.

Conclusion: Authors concluded that due to lack of essential information on the Egyptian medical schools' websites about their institutional accreditation situation, serious steps should be taken from both the medical schools and the national accrediting body to encourage the openness and to ensure the transparency towards the accreditation process and results in Egypt.

Background:

Quality assurance and accreditation has always been a challenge for higher education institutions to ensure their appropriate status among their peers both locally and internationally. In 2020, the World Federation for Medical Education (WFME) has made it clear that the decisions on accreditation of medical programs must be made available to the public. Furthermore, publication of the self-study and accreditation reports providing the basis for the decisions should not remain a secret for others to learn from (1). In addition, inspection of an institutional curriculum as well as its learning and teaching methods is mandatory to make sure that students' are being taught effectively thus guaranteeing them accountable for optimal patient care later on (2).

In Egypt, medical schools undergo a five-year accreditation cycle by the National Authority of Quality Assurance and Accreditation of Education (NAQAAE) (3). A mandatory part of accreditation is making the institutional vision, mission, strategic goals publicly available. It is well acknowledged that higher education quality is best provided within the context of the mission of an institution as well as their

educational programs. In the era of the national reform of the whole medical curricula; the accreditation reports are important to demonstrate the actual situation for each faculty (4).

In this article, authors highlight the current status on transparency in providing information of medical schools in Egypt and provide recommendations on how these medical schools might improve their openness and transparency.

Transparency is well-defined in different contexts. Scholars agree on the fact that being transparent does the institution a major good; it allows the public to gain information about the construction and management of a certain entity. Transparency has also been advocated to substitute many regulations especially in political life where authors have adopted the idea that information availability is cheaper and more effective strategy than the command and control rule widely implemented (5).

Internationalization of medical education has increased the number and variety of higher educational programs' providers both nationally and globally. This has increasingly made it difficult for students to choose where and what to study; to a level that may require to be customized to their needs, plans and abilities. It is a striking observation that most of the medical schools in Egypt, whether before or after acquiring accreditation, share minimal information of their curriculum mapping, accreditation process or outcomes on their websites. Some institutions even do not announce their mission or vision statements, though this is being an important prerequisite to apply for accreditation. It is a concept of being transparent in offering information over their platforms for students as well as for the public. The Egyptian Society for Medical Education (ESME) aspires that Egyptian medical schools would work more towards transparency and openness for greater effective feedback (6).

Methods:

From October to December 2021, we independently reviewed forty Egyptian medical schools' official websites as well as through the NAQAAE website searching for two major transparency criteria. Each criterion was further subdivided into several information elements. These elements were adopted from "The Basic Medical Education WFME Global Standards for Quality Improvement". These standards guide institutions for proper evaluation of their educational practice within their local contexts (7). We selected some elements that have direct relevance to the subject of transparency and openness in medical education. Authors modified these components of accreditation framework by excluding some information aspects about accreditation standards that have weak relevance to our study. Aspects of each information element are recorded as being present (as of a website text or a downloadable document) or not present. Data were registered at the Research Electronic Data Capture (REDCap) (8) hosted at the server of Egyptian Neonatal Network (9). To analyze each information element across all medical schools, we tabulated descriptive statistics for all accreditation information elements across the forty schools.

Results:

Out of the twenty-five schools surveyed, twenty-three belong to state universities and two private. Twenty-three of these medical schools have optimized websites that appear on search engines, the other two medical schools required more than one search engine to find the website. All websites display the age and a brief history on the establishment of the school. The displayed age helped authors to identify the newly established schools that are less than five years. These schools were excluded from our data analysis since no application for accreditation was yet done on their part. Websites are translated to English language for foreign students in twenty-one schools only. The remaining schools' websites are only shown in Arabic, one has even a non-active website that gives error each time authors tried to reach it. Also, fifteen schools regularly updated their websites and only twenty displayed full contact information about their staff and administration for any inquiries (Table 1).

As regards the vision and mission statements and whether or not information was clearly available to the public, twenty-two colleges display their vision and mission statements. Only thirteen medical schools display their goals and nine display the values adopted by their leadership (Bar chart 1). Clearly identified and well-structured vision and mission statements define the purpose of any organization and initiates a sense of belonging in the administrative staff and faculty. These statements, when present, outline the path for success that everyone in this entity should follow. Vision and mission statements should be announced to stakeholders to present the image of the organization. In addition, these are guides for properly designed goals and values (10).

The finding that 54.2% of Egyptian medical schools have no sign of their curriculum outlines or their teaching and learning methods announced to students, was the most striking. Only 45.8% have displayed the curriculum outlines as part of their undergraduate bylaws and not in a separate section that is easily reachable over their website. Some of which, however, still abide to the old bylaws without revising their websites since 2016 (Table 1). Over the years of technology invasion, websites have proved to be a virtual window into programs. They help provide an initial influence for many candidates with no prior information on a certain course whether in undergraduate education or postgraduate experiences. However, many discrepancies have been found between the needs of applicants and what the websites of medical schools actually offer (11).

The main aim of this research was to evaluate the transparency of medical schools' websites information about their accreditation process. Only thirteen colleges recorded being accredited on their websites that was confirmed on NAQAAE website. In addition, only six schools were recorded as reaccredited on the NAQAAE website but with no display of such important information over the schools' official websites (Bar chart 1). One medical school out of the twenty-five studied devoted one section of its website to display accreditation information, but even this information on the website was not in plain language and was not clearly disclosed (Table 1).

During the course of this study, authors decided to add extra information elements that can relate and interpret transparent attitude adopted by different medical schools. These criteria are as follows:

- a. Competencies and their Key Performance Indicators (KPIs): determining if the school has clearly displayed the competencies that their students should acquire by the end of their program and how the school is applying evaluation of these reached competencies. Nine websites present general information about competencies as part of the National Academic Reference Standards 2017 displayed on NAQAEE website whereas non displayed their plan of implementing how to reach these competencies and their expected KPIs either on institutional, program or course levels.
- b. Self-studies: three schools disclose their self-studies. Two documents of which are buried under the quality assurance unit achievements and missing from school's home page.
- c. Annual reports: only two out of twenty-five made their annual reports available to the public. However, even these reports were dated to 2018–2019 with no recent updates.
- d. Social Accountability: which is the readiness of medical schools to respond to the health needs of its society. It demonstrates the ability of these schools to organize its education in a way that has the highest impact on the community's health (12). Websites of medical schools should reveal this information clearly to its students. Websites of Egyptian medical schools, surveyed in this study, returned zero colleges displaying their social accountability role. On an external database, only one university is recognized as being socially accountable (13).
- e. Independent student opinion: websites of two medical schools only showed results of student feedback on the institutional educational activity, curriculum, and facilities.
- f. Resources (Human, Physical, Technical and Financial): three medical schools presented short notes on their resources mainly human resources. One of these schools only had a full directory about their academic staff and their accomplishments.
- g. Future plans or reform: whether medical schools are ready with a future plan or a reform to enhance their effectiveness and their graduate educational level; was surveyed on different schools' websites. It is surprising that only three displayed briefly plans about institutional reform of their infrastructure and patients' services. However, educational information for reform that might affect accreditation was not mentioned.

Table (1): revealing the percentage of availability of different variables in medical schools in Egypt.

Criteria	Percent of Presence in Egyptian Medical Schools (%)
1. Presence of a website that addresses full accreditation information	
Optimized website that appears on search engines	95.8%
At least a section in the institutes' website completely devoted for displaying accreditation information	4.2%
Findings from the accreditation processes are plain-language descriptions	0%
Regular updates	62.5%
Availability of English translation for foreign students	84%
Availability of search tool and /or discussion board that concerns accreditation data.	4.2%
2. Comprehensiveness of accreditation data/information on the website that includes:	
Current accreditation status and history of accreditation	52%
Curriculum outline	54.2%
Vision	88%
Mission	88%
Goals/objectives	52%
Values	36%
Competencies	36%
Self-study	12%
Annual reports	8%
KPIs: institutional, program & courses levels	0%
Independent students' opinion	8%
Social accountability	0%
Resources (Human, Physical, Technical and Financial)	12.5%
Future plans/reform	12.5%
Full contact information	83.3%

Discussion:

According to the Ministry of Higher Education website, highlighting the Egyptian sustainable development plans till 2030; the strategic objectives are totally directed towards improvement of the educational systems to simulate the international standards. This will increase competitiveness in educational institutions that can ensure best educational outcomes (14). To achieve such objectives, reform of the medical curriculum in Egypt was done in 2017 for all medical schools. However, this curriculum is not displayed on websites, just announcing only bit by bit to students on yearly basis serving the educational context. No transparent presentation of the curriculum is available to encourage feedback from the public or to stimulate the healthy competitiveness between medical schools as aspired by the ministry's objectives.

Since transparency is considered as an announcement of the accountability of medical schools towards the community they serve, boosting transparency of the educational process and outcomes of higher education institutions is becoming a central goal of the higher education authority all over the world (15).

The major component of the public includes the patients approaching these schools' hospitals for proper healthcare service. The community is considered as the institutions' main stakeholders. Transparency also reports for the communicability between these schools and their students as well as other medical schools either locally or globally. Announcing clear curricular data of teaching and assessment is crucial for continuous monitoring, reviewing and evaluation (16). Teaching and assessment data will facilitate easy transfer of students among the different medical schools in one country or even globally.

Applying transparency should provide all information about accreditation practices and judgment. This should be more abundantly revealed and more readily accessible to all stakeholders thus committing everybody to the shared responsibility concept (17). This way might drive medical schools towards Continuous Quality Improvement (CQI) and engaging with the public to enhance better healthcare service.

If transparency is missing, trust follows too. Medical schools should aspire being trustable enough among their students, faculty, staff, other schools and most importantly their community. Transparency increases awareness of the society towards the quality of medical schools' educational program. Recent advances in assessment and curriculum development have emphasized the importance of involving the human population in health professions education (18). If we want the civil society to peer review the medical college and become involved in training medical students as well as in curriculum development, then transparent information should be promoted by medical institutions to increase public accountability (15).

The NAQAAE mission statement affirms that quality assurance of any educational institution, and its program must be in accordance to the institution acknowledged mission statements and declared goals. A mission sensitive program helps gaining confidence of the community towards its graduates. In addition; accreditation of an institution should meet several criteria, among which comes the fact that the institution should possess an internal audit system working on supplying annual reports of the institutional development and improvement (4); which in turn reflects how important disclosing information is.

The concept of openness to judgment ought to be accepted within Egyptian medical schools' culture aiming that it can drive these schools towards working on improvements and detecting their weaknesses and curricular pitfalls in a highly collaborative environment. Such change in the mindset will enhance intra-institutional learning as well as focusing on the development of the healthcare services and enriching human health.

Egyptian medical schools frequently celebrate their improved World University Ranking. The World University Ranking is based mainly on scholarships to internationally published research. This process is unfair to evaluate successfulness of a medical school as regards undergraduate medical education. On the other hand, although these rankings could misrepresent the mission of medical schools, they still have influence over the public. Embracing transparency in both medical schools and their accrediting bodies can enhance a paradigm shift in public perception through freely available accreditation reports that will better reflect the medical schools' mission, performance, resources, extents of improvement and exclusive features instead of relying solely over these rankings (19).

An important aspect that can be added to the transparency criteria is the presence or absence of a university hospital affiliated to the medical school. WFME has made it clear that resources should be enough and suitable for medical students to acquire their sufficient learning and training (7). These resources include human, physical, technical, and financial resources.

Having outlined all criteria for transparency and their advantages; some leadership may reject the idea of being totally transparent as it increases the possibility of public interference within decision making inside medical schools. Such interference may negatively influence students' application to certain institutions. It can also lead to perception of this institutional staff as being inferior to others in different medical schools. Another concern may be that announcing transparent weak points that a certain institution is working to improve, can enhance negative financial effect thus minimizing the institutional ability to employ good staff. This can be overcome by shifting the competitive attitude between educational institutions to a more collaborative apprehension of working as a whole not as parts (15). However, trying to shape public opinion can be the drive for medical schools to be more transparent aiming to gain trust and acknowledgement to the importance of the medical schools' work.

Unfortunately, due to cultural beliefs in the middle east, some of our medical schools conceive transparency as the concept of "airing one's dirty laundry" adhering that it should be avoided. However, having freedom in providing information and openness to criticism might spare the institution financial burdens by learning from experiences of other schools who have faced similar challenges and how they were able to overcome them (20).

Conclusion And Recommendations:

Many authors have suggested ways to promote transparency and openness within educational contexts. It is worth mentioning that being transparent and open promotes by itself the accountability of the medical school towards the community which it serves. Information disclosed should be linked to

encouraging change inside the institution rather than constraining to judgmental efforts. Data offered should be prioritized according to being critical in driving the public to positively monitor the outcomes of the medical school, and to help in pertaining the best ways to achieve these outcomes. Transparency and accountability are the two main aspects that can control corruption and help reduce its consequences (21).

Furthermore, enhancing the concept of using the available information to help institutional development, teaching administrative staff and faculty so that all institutions have the same goal towards promoting the healthcare service in Egypt.

List of Abbreviations:

Egyptian Society for Medical Education (ESME)

National Authority for Quality Assurance and Accreditation of Education (NAQAAE)

Research Electronic Data Capture (REDCap)

World Federation for Medical Education (WFME)

Key Performance Indicators (KPIs)

Declarations:

Compliance with Ethical standards:

This research article has been approved by the “National Committee for Scientific Research Ethics”. Serial number for approval: NO-B045 (V-1).

Consent for Publication:

Not Applicable

Availability of Data and materials:

The data that support the findings of this study are available from medical schools ‘websites; but restrictions apply to the availability of the analyzed data, which were used under license for the current study, and so are not publicly available. Data are however available from the corresponding author upon reasonable request through email.

Competing interests and Funding:

Authors disclose no conflict of interest and declare that no funding was received for conducting this study.

Authors' Contributions:

Professor WT had the idea for the article and was one of the major editors; Professor OH performed the literature search; Dr. MAA and Dr. NHH collected the data, drafted the work, Professor MRB analyzed the data. All authors thoroughly reviewed and critically revised the work. All approved the final work for submission.

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Figures

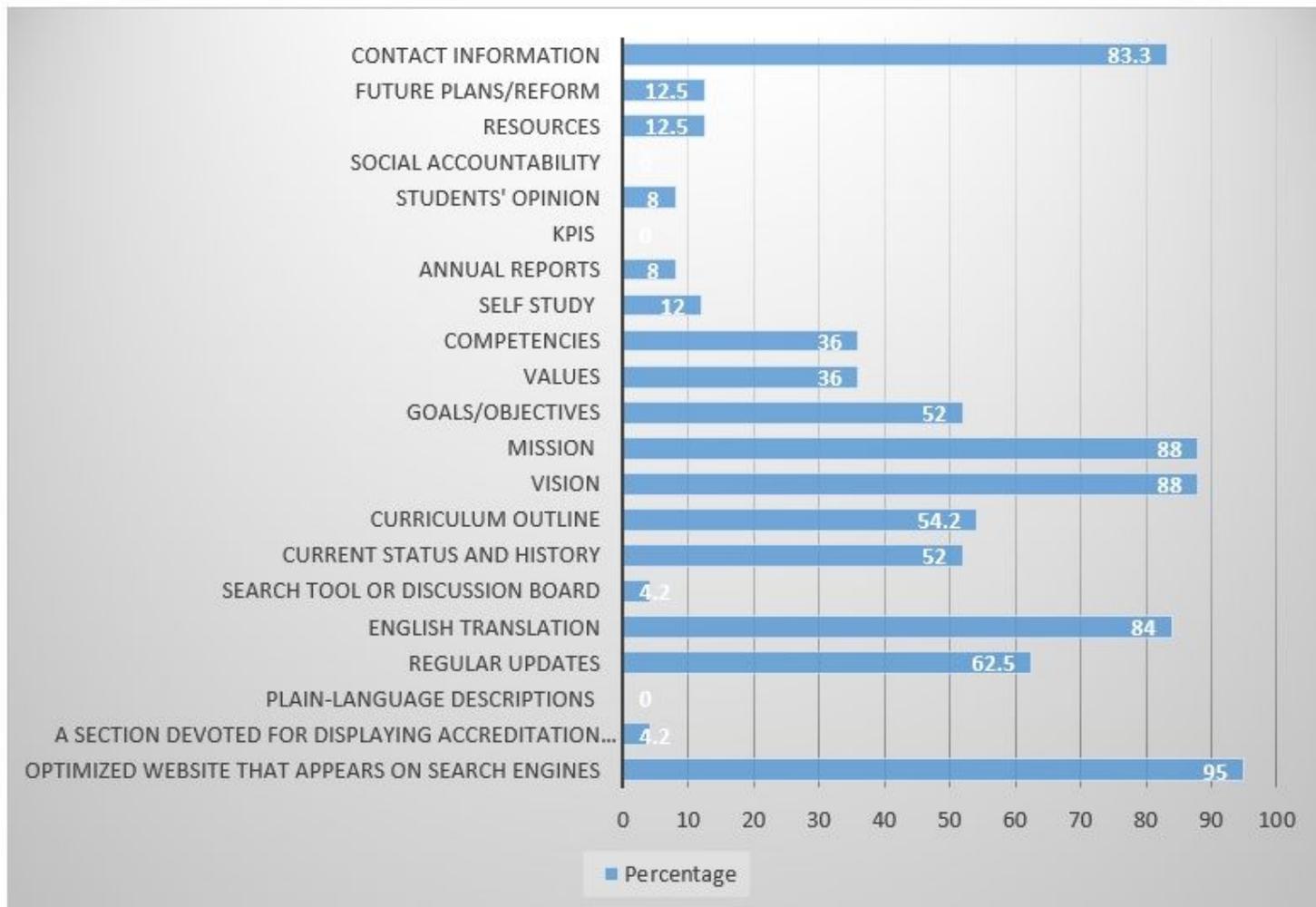


Figure 1

showing the availability of data on medical school' websites.