



## Social accountability in medical education

**Catherine Nicholson, MD Student; Iain Robbé, Division of Community Health and Humanities**

**Purpose:** The purpose of this research was to illustrate the recent trend of social accountability in medical education to tailor admission processes and curricula to best meet the needs of the region that a particular medical school serves and how it can be successful in addressing health disparities and inequities. **Methods:** Searches were carried out on Canadian and Australian literature using the keywords of “social accountability in medical education.” The databases searched were PubMed via the National Center for Biotechnology Information, International Recognition of Excellence in Medical Education: Social Accountability (ASPIRE), Training for Health Equity Network (THEnet), and World Health Organization. **Results:** The literature identified exemplar case studies at Northern Ontario School of Medicine (NOSM) in Canada and James Cook University (JCU) School of Medicine in Australia. The activities of NOSM and JCU demonstrated that an explicit socially accountable mandate in conjunction with socially accountable admission processes and curricula can have successes in reducing health disparities as well as positive socioeconomic impacts in the region the medical school is mandated to serve. Also, the research demonstrated how these medical school programs addressed their region’s rural physician shortage by aiming to replicate the demographic distribution of their mandated regions through admission policies and by implementing a longitudinal integrated clerkship program. Furthermore, research indicated that in order to support the social accountability mandate and policies, guidelines about social accountability activities need to be included into accreditation processes. **Conclusions:** Today, health inequities are persisting between urban and rural communities and between and within indigenous populations and other disadvantaged or socioeconomically deprived groups. NOSM and JCU School of Medicine are examples of what can be accomplished in two different settings when a social accountability mandate is applied to a medical school’s activities. THEnet Training for Health Equity Network and ASPIRE to Excellence have put forward models that could be used to evaluate a medical program’s commitment to social accountability. Since social accountability is a priority in undergraduate medical education at Memorial University of Newfoundland, this research could be beneficial for development, assessment, and evaluation of socially accountable activities at MUN in the future.