



# EDUCATION FOR HEALTH

## EDITORIAL

### Co-Editors' Notes 21:3

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*Co-Editors, Education for Health*

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Articles in this issue of *Education for Health* are a health educator's delight. They span the educational front from issues in the training of medical students to approaches to enhancing the skills of their faculty. Papers address needed improvements in the learning environment and learning experience, curriculum design and innovation, and innovations in educational institution design.

Dolmans and colleagues elicit opinions from the students of their Dutch medical school about factors that help and hinder learning in the hectic clinical clerkship environment. Students raise issues of too little supervision and feedback and inadequate organization of students' time and activities. On a related topic, Small *et al.* explore students' perceptions of the skills required for a smooth, non-stressful transition from the classroom to the clinical-clerkship learning environment. Students who were about to make the transition foresaw the need for nuts-and-bolts doctoring skills, like taking patient histories and presenting cases orally. In contrast, students who had recently weathered the transition had come to value the more subtle skills of time management, self-care and negotiating one's relationships within the health care team.

Shankar and colleagues in Nepal describe a voluntary human sexuality educational module for their medical students, where issues and sensitivities are explored through role-playing, case scenarios and essay writing. In our *Personal View* section, Jan van Dalen, an associate editor of *Education for Health*, advocates for nationwide collaborations among health educators to articulate agreed upon educational goals and preferred curricular approaches as a step to building common understanding and action. Fostering curriculum innovation is also the central theme that emerges from an interview with Dr. Sarah Kiguli of Uganda's Makerere University, conducted by Jane Westberg, another of the journal's associate editors.

In one of two papers describing innovative approaches to faculty development, Anshu and colleagues describe a longitudinal, principally on-line skills development program developed by the Christian Medical College in Ludhiana, India. In a *Letter*,



Omer *et al.*, describe a faculty development collaboration between the Huhimbili University in Tanzania and the University of California, San Francisco in the U.S.

Roger Strasser, Dean of Canada's new Northern Ontario School of Medicine, describes his school's unique curriculum and educational approaches. Particularly unique among educational institutions is how clearly this school's leaders articulated the population health needs, the educational theory and supportive data that underlie their school's mission, design and innovations. On a related topic, Mopida and Dambisya assess the career preferences and forces influencing pharmacy students at the University of Limpopo in South Africa, a country they note has a gross misalignment between where pharmacists practice and where most of the population receives care.

An interesting *Policy Report* by Mokuau and colleagues from the University of Hawai'i describes a community-based participatory approach they used to engage kūpuna, Native Hawaiian elders, when creating a center to provide technical and research assistance to meet local health and social needs. And in a *Book Review*, Mardge Cohen addresses the cultural, moral, historical and policy issues surrounding the topics of a recently published book, *HIV and AIDS, Vulnerability of Women in Asia and Africa*, edited by Kiran Prasad and U.V. Somayajulu.

As always, we hope you will learn from and enjoy the papers of this issue.

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