

# Integrating Social and Behavioral Sciences Into the Pakistani Medical Curriculum is Essential

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## ABSTRACT

The majority of respondents who took part in a survey were of the opinion that there should be a greater focus placed on behavioural and social sciences within the curriculum of medical schools. This is done to ensure that graduates of medical schools will be able to practise medicine in a manner that is both safe and effective. Despite the fact that behavioural and social sciences make significant contributions to the effectiveness of health care delivery, traditional medical school curricula have not traditionally placed a significant amount of focus on the study of these subjects. This article's objective is to provide the reader with a more in-depth comprehension of the value of social and behavioural sciences in medical education as well as the breadth of their application in a variety of different settings. Additionally, it discusses the areas of social and behavioural sciences that are significant to medicine, as well as the efficacy of incorporating them into the curricula of medical schools in order to educate and train future medical professionals to practise medicine in a manner that is fully informed.

**Place of Study:** Foundation University Islamabad

**Study Duration:** February 2022 to July 2022

**Study Design:** Empirical research

**Conclusion:** This study examines the importance of teaching future doctors about medicine's social and behavioural aspects. It gives medical school educators the latest information on how to best teach medical students to succeed in the medical industry. Medical educators, administrators, policymakers, and other stakeholders must work together to integrate social and behavioural sciences into medical curricula.

**Keywords:** Medical curriculum's courses, the social and behavioral sciences, and the foundations of medical education.

## INTRODUCTION

A multitude of interconnected biological, psychological, social, cultural, behavioral, and economic elements influence human health and illness. According to Cuff, Vanselow, and Curricula (2004) and McMahon (2001), the behavioral and social sciences have significantly contributed to these professions' research-based knowledge. Knowledge derived from research can affect how physicians approach patient care, diagnosis, and prevention<sup>1</sup>. It has been demonstrated that social influences, psychological variables, psychological factors, and biological elements all impact health and disease. To be considered competent professionals, medical practitioners must be cognizant of the society in which they practice and the conduct of its members, i.e. people. Otherwise, they will be unable to treat their patients appropriately. Medical practitioners will be able to improve their communication skills, demonstrate more desirable professional behavior, increase their self-awareness and ethical reasoning, and have a higher understanding for cultural and societal diversity as a result of this information<sup>2</sup>. Behavioral and social sciences should be incorporated into medical education to a higher extent than is now the case, despite the fact that this is unanimously accepted as the best practice.

**The academic subfield known as social and behavioral science together:** Social science broadly studies human behaviour and how it affects the world. Yet, "social science" can be defined in several ways. This includes studying other cultures and how individuals interact with their surroundings. It helps governments, policymakers, and other organisations function and explains how societies like ours work<sup>3</sup>. It broadens our universeview beyond our personal experiences. This includes medical and academic workers.

Social sciences include demography, social research and statistics, geography, economics, education, law, social history, and politics. "Social sciences" covers a wide range of academic disciplines. Social sciences include sociology, psychology, and public policy. Clinical practise and medical education are increasingly incorporating social science theories, methods, and perspectives. Social sciences have been part of the curriculum in

several countries since the 1960s. Psychology and sociology are most related to medicine. Especially in medical education. Behavioural science includes sociology, social and cultural anthropology, psychology, biology, economics, geography, law, psychiatry, and political science. Sociology, social and cultural anthropology, and psychology are examples<sup>4</sup>. "Social science" studies behaviour. But, "behavioural science" can also refer to many other academic fields that study human behaviour. In the 1950s, "social sciences" gained popularity in US academia. Even while "social sciences" and "social studies" are sometimes used interchangeably today, some authors maintain that there is a substantial distinction between the two. Compared to "social sciences," "behavioural sciences" are more experimental.

**The importance of social and behavioral science courses as required curriculum is highlighted:** A physician's education is inadequate if it doesn't include a grasp of how behavioural and social factors affect human health and disease, how they can be improved, and how a physician's life experiences affect their relationships with patients. Behavioral and social factors affect health and disease.

Many studies have shown that medical schools must include courses in the behavioural and social sciences to provide their students the right knowledge, skills, and mindset. Medical schools must provide students with the right knowledge, skills, and attitudes, according to these findings. Medical students must graduate with the information, abilities, and attitudes to practise medicine. This gives medical students the knowledge, skills, and attitudes they need to succeed as doctors. Notwithstanding the fact that medical students receive little instruction in behavioural and social sciences, which improve health care, medical school prioritises biological and biomedical subjects. Despite the notion that the above professions should educate medical students, this is not the reality.

To maximise health care efficacy and results, certain interactional competencies must be considered in the clinical encounter. These interactional competencies directly affect the quality of the clinician-patient relationship. Four categories describe these abilities: These skills include collecting a patient's

medical history, interacting with them, advising them, and managing their behaviour. UCSF's School of Medicine has created six key business study subjects. Behavioral and social sciences cover these fields. This was done to include these in future medical school courses<sup>5</sup>. To reach this goal, we searched the medical literature for relevant and empirically supported papers and research.

According to Cuff et al. and Waldstein, the following six subfields can be investigated under the umbrella of the social and behavioral sciences:

- The study of patient behaviour focuses on the contribution of patients' actions to the health promotion and illness prevention initiatives of a community. If medical students are aware of the types of patient behaviours that pose health risks, they will be better equipped to provide patients with the appropriate interventions and to change their patients' behaviour. The physician is responsible for his or her own sense of well-being in addition to being accountable for his or her own sense of well-being<sup>11</sup>.
- Patient-physician interactions place a premium on the individual's capacity for efficient communication, which, as noted previously, is an essential part of medical practise.
- Social and cultural concerns in health care is a topic that covers what physicians must know and do to offer proper care to patients from a variety of social, cultural, and economic backgrounds. These can be classified as social, cultural, and economic concerns.
- Health policy and economics comprises all of the areas that medical students must know in order to have a complete understanding of the health care system in which they will work after graduation and the start of their employment. Because understanding the health care system will allow them to deliver superior care to their patients.

By searching the global literature on social and behavioural sciences in medical education, Sedigh Maroufi et al. identified six issues to examine. This course will include "mind-body medical experience," "sociocultural concerns," "facilitating behaviour change," and "professional relationship to health care." When we examined studies from around the world on how to integrate social and behavioural sciences into medical education, we found a few common patterns. Social and behavioural sciences are becoming increasingly important in medical education. It's predicted to continue. Meanwhile, medical programmes are under pressure to adapt to new information in core biomedical and life sciences and technology. This pressure has been building. Recently, this circumstance has increased pressure. This uneasiness is caused by all of these events happening at once. Innovative teaching methods that combine more flexible approaches to the massive volumes of knowledge that underpin professional practise are sought by medical schools. Because medical school curricula are becoming more fact-intensive. Integrated educational programmes that coordinate themes inside and outside of academic areas are being developed based on ongoing research on self-directed education approaches<sup>6</sup>.

In the future, medical education programmes should emphasise the value of multiprofessional techniques and social and behavioural science in curative and preventative health care. Because multiprofessional strategies can improve health care in many ways<sup>16</sup>. Students should be forced to take classes in a variety of subjects as part of their education. It is more vital to create an atmosphere where aspiring physicians are exposed to critical thinking across a wide variety of topics that build the social and cultural framework for medical practise than to include a specific subject in the training curriculum. Medical practice's social and cultural framework is shaped by many elements<sup>10</sup>. This situation must be established.

**Social and behavioral science's contribution to the education of medical practitioners and students:** The aspects of a person's life that have the greatest influence on their health, such as the amount of time they spend being physically active. This

information is valuable for diagnosis, therapy selection, policymaking, the design of health care systems, and the development of technology to enhance health outcomes and reduce health care costs. Despite their impact on health and mortality, social and behavioral aspects are frequently overlooked in therapeutic practice.

There are numerous persons who fall beyond the realm of medical therapy, in addition to primary care physicians. There has been an increase in the number of inquiries posed to physicians requesting that they address these factors, and a number of clinicians have provided responses. Due to recent discoveries, the scientific and medical sectors are becoming increasingly interested in finding solutions to these problems.

**Incorporation of social and behavioral sciences into the curriculum of medical schools:** The incorporation of social and behavioral sciences into the curriculum of medical schools is an important and growing trend in medical education. This approach recognizes that health and illness are influenced not only by biological factors, but also by social, cultural, psychological, and behavioral factors. By integrating social and behavioral sciences into the curriculum, medical students can gain a deeper understanding of the complex interplay between these factors and health outcomes<sup>7</sup>.

There are several key benefits to incorporating social and behavioral sciences into the medical school curriculum.

**First**, it can help to address health disparities and improve the overall quality of care. Medical students who are trained to understand the social and cultural factors that contribute to health disparities are better equipped to provide care that is culturally competent and sensitive to the needs of diverse patient populations<sup>8</sup>.

**Second**, incorporating social and behavioral sciences into the curriculum can help to promote a patient-centered approach to care. Medical students who are trained in communication skills, cultural competency, and patient-centered care are better able to build rapport with patients, understand their needs and concerns, and provide care that is tailored to their individual needs<sup>9</sup>.

**Third**, incorporating social and behavioral sciences into the curriculum can help to prepare future physicians for the changing landscape of healthcare. With the shift towards value-based care and the increasing emphasis on prevention and population health, it is becoming increasingly important for physicians to understand the social and behavioral factors that influence health outcomes.

Overall, the incorporation of social and behavioral sciences into the curriculum of medical schools is an important step towards improving the quality of care, reducing health disparities, and promoting a patient-centered approach to care. It is important for medical schools to continue to prioritize and expand the teaching of these important topics in medical education.

In Pakistan, the incorporation of social and behavioral sciences into the curriculum of medical schools is an important issue that is gaining attention. While the traditional medical curriculum in Pakistan focuses primarily on biological and clinical sciences, there is a growing recognition that social and behavioral factors play a critical role in health outcomes and should be included in medical education.

The Pakistan Medical and Dental Council (PMDC) has recognized the importance of social and behavioral sciences in medical education and has included it as a mandatory part of the curriculum. According to the PMDC guidelines, social and behavioral sciences should be taught as an integrated part of the basic medical sciences curriculum, including topics such as medical sociology, psychology, and medical ethics.

However, there is still a gap between the guidelines and the implementation of these topics in the medical curriculum in Pakistan. Some medical schools have started to integrate social and behavioral sciences into their curriculum, while others have yet to incorporate these topics fully. To ensure the effective integration of social and behavioral sciences into the curriculum of Pakistani medical schools, it is important to provide faculty with adequate

training and resources to teach these topics effectively. It is also important to evaluate the effectiveness of these efforts through ongoing assessments and feedback from students.

In addition, collaboration between medical schools and other institutions, such as social sciences departments and public health schools, can help to promote the integration of social and behavioral sciences into the medical curriculum in Pakistan. Such collaborations can help to ensure that medical students are exposed to a broader range of perspectives and approaches to understanding health and illness, and that they are better equipped to provide patient-centered care in a culturally and socially sensitive manner.

## CONCLUSION

The significance of providing future medical practitioners with an education in the social and behavioural underpinnings of medicine is examined in this study. It supplies medical educators with the most recent information regarding the most successful techniques for preparing medical students to practise medicine with a well-rounded education in the most up-to-date information regarding the most efficient approaches. Cooperation from medical educators, the administration of medical schools, policymakers, and other stakeholders is essential in order to successfully include social and behavioural sciences into medical curricula. The faculty at medical schools should be equipped with the information, attitude, and skills necessary to do so through programmes designed to educate faculty. Medical schools that demonstrate a strong commitment to incorporating the social and behavioural sciences into their academic curricula stand a better chance of accomplishing the educational goals they have set for themselves.

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