

Results from Workshop 1.4A: Medical Education

Peggy Maguire, Director General of the European Institute of Women's Health (EIWH) and President of European Public Health Alliance (EPHA), opened the session. She explained the background to the workshop on medical education. The failure to acknowledge the impact of sex and gender (S&G) differences affects the quality of health care provision. There must be a commitment to mainstream an evidence-based gender perspective throughout medical curriculum including in graduate, medical, nursing, rehabilitation, pharmacy, continuing medical education and continuing nursing education programmes. This workshop examined how S&G consideration can be best integrated into medical education. The EIWH mapped stakeholders in delivery of care and medical education then used the information to generate a background briefing on integrating sex and gender into medical education, including exploring existing policy.

Ms. Maguire then summarised the workshop that brought together over sixty experts to discuss how to best integrate S&G into medical education organised by the EIWH and held at the European Economic and Social Committee in Brussels on 4 March 2015. The workshop sought to implement many scientific findings into practice and included a strong focus on the patient perspective. The workshop was divided into two panels and an interactive session. The first panel chaired by Professor Karen Ritchie explored examples on how to best integrate S&G in medical education through presentations of experts discussing best practice. The second panel chaired by Ms. Sinead Hewson examined moving forward, specifically looking at the opportunities to integrate sex and gender into medical education.

Dr. Petra Verdonk, co-chair from the workshop, presented the findings from the workshop. She explained that medical education is not only about physicians but all in the health care field. Dr. Verdonk explained the lack of EU policy with regards to medical education. The main policy framework is through the Bologna Process (1999), which seeks to voluntarily harmonise higher education. There is also EU legislation, (Directive EC/2005/360) that regulates the automatic recognition of the basic qualifications required for the practice of medicine, dentistry, general care nursing, midwifery, veterinary surgery, pharmacy etc. However, accreditation, regulation, evaluation of medical education is the responsibility of individual Member States. Therefore, Dr. Verdonk asked how we could bring about change. A central finding of the workshop was the importance of diversity.

Dr. Verdonk discussed that the workshop brought together a diverse group of stakeholders including but not limited to medical schools through an International Association For Medical Education (AMEE) and the Association of Medical Schools in Europe (AMSE), physician organisations with the Standing Committee of European Doctors (CPME) and student organisations through the European Medical Students' Association (EMSA) to brainstorm ideas on how to practically integrate S&G into medical education. Experts agreed that students are the drivers for change. The group called for action through the creation of alliances to integrate S&G on medical education both through top down and bottom-up approaches. The experts recommended that stakeholders develop and maintain alliances; execute projects at national and local levels; involve all health professions including nursing, pharmacy, health scientists, and more; develop innovative and digital education material, modules, symposia and train teachers.

Following Dr. Verdonk's workshop summary, **Dr. Ute Seeland** presented the experience of Charité in integrating S&G into medical education and their eGender learning

programme. She discussed first the national example of how Charité has successfully incorporated S&G throughout its medical curricula by including it throughout courses and well as in specific course on S&G. Dr. Seeland then went on to explain Charité's involvement at the European level where they have worked to develop the European Curriculum in Gender Medicine which included the development of eGender learning, an integral part of the blended learning education concept. eGender learning creates a common knowledge base through common training tools as well as targeting communication to researchers, teachers and students. Dr. Seeland said that efforts must be made to make sure that future doctors have adequate knowledge, practical and communication skills on gender and sex differences. However, there is currently a lack of European teacher training with an internationally recognised qualification on Gender Medicine. Gender is an important quality issue in medicine. Learning material with a patient-centered evidence-based S&G perspective is required, yet there is a lack of systematic communication between basic researchers and teachers. Efforts, such as eGender Learning, need sustained funding for continuation to address these gaps and update when new knowledge becomes available.

Dr. Katrín Fjeldsted, President of the Standing Committee of European Doctors (CPME) explained how CPME plans to support the findings of the workshop and put them into practice by using their network to disseminate workshop findings. Dr. Fjeldsted also informed that the CPME has set up a working group to draft a policy paper on sex and gender medicine. She invited stakeholders to provide information which could then be included into the policy paper. **Dr. Janusz Janczukowicz** stressed the need for formal structures to continue the work from the Project. He presented the steps that AMEE—an International Association For Medical Education will take to support the integration of S&G into medical education, which includes the creation of a special expert group on gender and gender medicine that he is in the process of creating with Dr. Verdonk. He is also writing a paper for the AMEE special meeting in September, and the AMEE Board is open to cooperate on the issue. **Ms. Maeve Cusack** remarked on her first-hand experience of the importance of involving a diverse group of professions including occupational nurses, pharmacists and others to develop good education.

Closing the session, **Ms. Maguire** called for all stakeholders to work together to create awareness of the need for the integration of sex, gender and diversity in all education and training in relation to healthcare at all levels.