Mediterranean Journal of
Pharmacy & Pharmaceutical Sciences
www.medjpps.com

ISSN: 2789-1895 online
ISSN: 2958-3101 print

COMMENTARY

The need to revive the legacy of education in Libya

Dhastagir S. Sheriff

Independent Research Fellow Chennai, TN, India

Received: 12-06-2022, **Accepted:** 18-06-2022, **Published:** 30-06-2022

HOW TO CITE THIS

Sheriff DS (2022) The need to revive the legacy of education in Libya.
Mediterr J Pharm Pharm Sci. 2 (2): 7-9. [Article number: 62]. https://doi.org/10.5281/zenodo.6780443

Keywords: Education, evaluation method, Libya, medical education, university education

"University a place of holistic learning and cultural crucible so essential for our medical research"

Libya is a country with great scholastic minds and intellectuals. They have some older universities like Al-Fateh University, Tripoli, Al-Arab Medical University, Benghazi or Garyounis University and Libyan International Medical University (Private). Some of the courses conducted by these universities were recognized throughout the world. Civil unrest and the devastation created by the internal conflicts had dented the whole country affecting education to a great extent. Educational institutions are the pillars that build responsible citizens with social and economic commitment. The recent reporting of the decline in the standard of education in world rankings has affected many intellectual minds including faculty from different universities in Libya. The ranking is not a reflection of the standard and standing of many university members belonging to all the faculties including humanities, science and medicine. It will be wise to introspect and reflect on the status of education and the role of universities in the upliftment of the standard of education. A university is a place where new ideas germinate, strike roots and grow tall and sturdy. It is a unique space which covers the entire universe of knowledge. It is a place where creative minds converge, interact with each other and construct visions of new realities. Established notions of truth are challenged in the pursuit of knowledge. Keeping this definition of university do we have such an atmosphere of vertical and horizontal integration where there are intradepartmental and interdepartmental meetings of scientific minds? Only a few universities do have such cooperative learning and research orientation [1]. A positive cooperation between basic fundamental and clinical research will help develop the core of medical research. The development of basic fundamental research depends upon the availability of a knowledge base, physical facilities, and adequate funds.

Animal house with tissue culture system: For modern experimental research to take place we need a standard animal house, tissue culture set up, knock out or transgenic mice with experts to maintain them. To make such facilities affordable and available, universities or institutes of higher education could think of a common animal house with trained staff to breed and maintain experimental animals or tissue culture facilities to encourage and undertake meaningful research work.

ISSN: 2789-1895 online
ISSN: 2958-3101 print

Central university laboratory: A common university research laboratory with all equipment facilities and a maintenance department could be formed which could cater to the needs of research workers within the university as well as from other universities. This will minimize the cost; and avoid duplication and maintenance of instruments. Even such services could be offered for nominal costs to outside research workers who conduct their research in their respective colleges with minimum facilities. Such an approach will help develop fundamental research and will promote research within the university and affiliated colleges.

E-learning, virtual library, smart boards and video conference: E-learning, virtual library and video-conferencing are the latest trends followed in many higher centers of education. Hospitals and medical schools do follow such computer-based systems for medical records, medical imaging, diagnostics, teaching and treatment. Thus, there is a global demand that e-learning may become a part of routine medical education. The networking library facilities, journals and documentation center are another area of great concern. The absence of such facilities cripple's research work and prevents the development of basic science subjects like physics, chemistry and biology, so essential for any field whether engineering, pure science or medicine or allied subjects. A city with so many universities could cooperate (including the deemed universities) to have a common library with different sections of learning providing ready reference material, journals, and documentation to those who seek such help.

Statistical center: Another important area is a good statistical center where thousands of students with their project work could submit their work for statistical evaluation and attend *short-term courses* to get acquainted with the computed statistical packages available such as SPSS.

Medical education unit: Training junior staff members in teaching methodologies, curriculum development, evaluation methods and group dynamics must be a regular feature of the university.

Undergraduate teaching

1. The admission procedure needs to be strict.
2. Need to have students with bachelor's degree qualifications which will prepare them to learn in an international language,
3. Will have the mental maturity to study medicine,
4. The student number admitted must be manageable,
5. Must develop methods of reading standard textbooks (international standards - not limiting to writers of local publishers),
6. Interactive lectures with smart boards,
7. With the COVID-19 pandemic online teaching has become a routine method of education,
8. Internet connectivity with 4 G facilities needs to be made available,
9. Cisco-Webex, Google Classroom, Zoom, Microsoft, and other available virtual classroom facilities need to be introduced in the University IT department, and
10. Classrooms with networking facilities need to be created and maintained.

Evaluation methods: Multiple choice questions based on the notes or sheets given will not totally evaluate the student's caliber. The question papers need to be structured in such a way that analyses the writing ability, knowledge testing and thinking abilities of the students. The paper could be with very short answer questions - say two marks. Along with MCQs that need to be standardized like having 2/3 on the basic aspects of the course and 1/3 on applied aspects. Semester's system along with credit-based evaluation will be more suitable than the present evaluation methods conducted because of the numbers.

ISSN: 2789-1895 online
ISSN: 2958-3101 print

Practical classes: To make them meaningful - these could be based on objective structured practical examination (OSPE) methods: See the enclosure for Biochemistry as an example. The hue and cry to start higher centers of learning like Indian Institutes of Technology, and all Indian Institute of Medical Sciences in every city will add to existing concrete structures without a proper knowledge base. The knowledge base always requires competent research scientists, teachers and research workers who could develop existing centers into institutions of excellence. Particularly, it is true of basic medical and clinical research in our medical universities and medical colleges. Apart from such physical facilities, we need clinical teachers who could teach as well as help research in our medical institutions. One must understand teaching is a learning process. Learning involves three steps: remembering information, thinking, which is the rearrangement of information and learning which is making use of the learned information in a thought process until the person becomes fluent. Thus, a true teacher works with individuals and helps them in their efforts to learn how to learn. Flexner A [2] laid emphasis on the scientific basis of medical practice paving the way to kindle intellectual curiosity in the learner's mind. With time, there is now an unlimited transformation from clinical practice to research. It was the integration of investigative research with teaching and patient care that made the field of medicine dynamic. The shift from patient care to molecular events helped develop medical research at the cost of clinical teaching to laboratory research [3]. This is followed by the economic need wherein to generate revenue the physician was forced to provide care for paying patients. This has resulted in eroding the time span spent by the clinical teachers for teaching. Thus, one must realize the importance of responsible clinical teaching which is so vital for medical students to become *accomplished, responsible* and *service-minded*. To accomplish this goal, medical education needs to balance knowledge, skills and values inculcated during their period of learning with teaching and research [4]. The university needs to be built with a strong knowledge base, faculty with proper coordination between teaching, learning and developing clinical skills with teaching hospital fully equipped to deal with such requirements. Libya has universities with such infrastructure faculty and great students. Libya has stalwarts who can build the Libyan Education system as it has all the experts in the field of education. It needs a stable government, security and policies to bring back the glory and legacy of Libyan education.

Conflict of interest: The author declares that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.
Ethical issues: Including plagiarism, informed consent, data fabrication or falsification and double publication or submission were completely observed by the author.

References

1. Cheah JT (2010) Clinical academics should and must teach. Lancet. 375 (9712): 376. doi: 10.1016/S0140-6736 (10)60165-1
2. Flexner A (1940) I remember, the autobiography of Abraham Flexner, pp. 414. New York, Publisher: Simon and Schuster. ASIN: B000I8FJMS.
3. Berger TJ, Ander DS, Terrell ML, Berle DC (2004) The impact of demand for clinical productivity on student teaching in academic emergency departments. Academic Emergency Medicine. 11 (12): 1364-1367. doi: 10.1197/ j.aem.2004.07.015
4. Ludmerer KM (2003) Learning to heal. The development of American medical education. Transaction of the American Clinical and Climatological Association 114: 2410253. ISBN-13: 978-0801852589.