

Empowering Global Dermatology Education in the JWDC

Awatef Kelati

Dermatology Department, University Hospital Cheikh Khalifa, and the University Hospital Mohammed VI. Faculty of Medicine, Mohammed VI University of Health and Sciences, Casablanca, Morocco

The focus on education in health sciences has significantly increased over time. Skin conditions are now identified as the fourth leading cause of nonfatal disease burden globally (1). Dermatologists play a crucial role in global health, as skin conditions are frequently the first visible signs of serious illnesses, including HIV, neglected tropical diseases; and more recently, COVID-19 (2, 3).

There is a considerable disparity in the level and pace of dermatology education worldwide (4). While education in developed countries (such as Europe and the USA) is considered to be flourishing, education in regions like North Africa, Latin America, and Asia is generally viewed as good. However, in countries, particularly in Africa, dermatology education faces significant challenges, and considerable efforts are needed to address these issues.

An interesting publication by Mosam et al (5) examines various dermatology training programs across Africa, categorizing them by region and country. They found a significant shortage of dermatologists relative to the continent's population. In West Africa, a unified curriculum is in place, which is followed by some English-speaking and most French-speaking nations. Countries such as Algeria, Egypt, Ethiopia, Morocco, South Africa, Sudan, Tanzania, and Tunisia have their own national dermatology curricula. However, thirty countries do not offer opportunities for dermatology specialization. The article suggests developing curricula tailored to local and ethnic skin types, created through continent-wide collaboration, to better address Africa's dermatological needs.

On the other hand, some educational initiatives were performed in teaching basic dermatology to medical students in developing countries, like Ethiopia as it was reported by Revankar et al. Interestingly, students who took the online course achieved notably higher scores on the final exam compared to historical results when similar content was taught in a traditional in-person format (6).

Other recent studies published have examined various ways in which traditional medical education can be enhanced through methods like teledermatology. The COVID-19 pandemic has created significant opportunities to expand the educational outreach of dermatologists globally, with some of the most important benefits likely to be seen in education. Indeed, improving access to high-quality dermatology education is a key priority for the global dermatology community and represents one of the most effective and efficient strategies to tackle ongoing challenges in the field (7).

Besides, one of the most efficient way to evaluate educational methods is giving feedback as it was discussed in an interesting publication of feedback and education in Dermatology Residency. Feedback is a two-way

process, with individuals at all levels providing and receiving feedback to collectively improve the field of dermatology (8).

In order to improve access to high-quality dermatological education across all regions, and to address disparities between developed and developing countries, the Worldwide Dermatology collaboration took this initiative and is currently working on many educational projects of basic dermatology for countries in need, and also cutting-edge sessions and workshops in specific topics for dermatologists all over the world.

This collaboration aims to enhance knowledge sharing, standardize practices, and foster research that can benefit communities globally, ensuring that advances in dermatology are accessible to all.

References

1. Prasad S, Bassett IV, Freeman EE. *Dermatology on the global stage: The role of dermatologists in international health advocacy and COVID-19 research*. Int J Womens Dermatol. 2021; 7(5):653-659.
2. Mosam A, Irusen EM, Kagoro H, Aboobaker J, Dlova N. *The impact of human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) on skin disease in KwaZulu-Natal, South Africa*. Int J Dermatol. 2004; 43(10):782–783.
3. Sun Q, Fathy R, McMahon DE, Freeman EE. *COVID-19 vaccines and the skin: The landscape of cutaneous vaccine reactions worldwide*. Dermatol Clin. 2021; 39(4):653–673.
4. Barber C., St. Claire, Ashack KA., Dellavalle RP. *Dermatology training across the globe*. Brit J of Derm, 2018; 178(5):1207–1208.
5. Mosam A, Todd G. *Dermatology Training in Africa: Successes and Challenges*. Dermatol Clin. 2021; 39(1):57-71.
6. Revankar R, Bilcha K, Befekadu A, Yeung H, Stoff B. *Free online dermatology course for medical trainees in Ethiopia: A pilot study*. JAAD Int. mars 2022; 6:20-6.
7. Kantor J. *Scalable global dermatology education*. JAAD Int. 2022; 6:143.
8. Duffy R. *Feedback and Education in Dermatology Residency*. Cutis. 2022; 110(6):E28-E30.