



Evaluation of Social Sciences Integrated Course for Health Education

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DESCRIPTION

Health sciences education has been aimed at creating doctors who possess scientific knowledge of illness and therapy as well as understanding of the social and personal circumstances in which patients' issues develops. Medical and dental educational institutions have included humanities and social science courses to their curricula despite the lengthy arguments and challenges involved in such a venture. Several schools, however, have formed an integrated approach under the umbrella of Medical Dental Humanities-Social (MDHS) education in place of providing distinct courses. An interdisciplinary approach to medical and dental education called MDHS aims to integrate pertinent learning opportunities from the humanities and social sciences into the practise of medicine and dentistry. The background to this transformation is the growing worldwide need for health care and welfare, as well as the conviction that future medical practitioners who have a firm grasp of the humanistic and social components of medicine would contribute more to human health and life. MDHS education may obtain a more convincing justification and broader contextualization by incorporating the humanities and social sciences. In light of developments in healthcare and society, studies on medical education have described the future duties of doctors.

Physician by the General Medical Council (GMC), The Role of World Federation for Medical Education (WFME), and The Five Star Doctor by the World Health Organization (WHO), medical education should incorporate integrated humanities and social sciences content, and educators should modify educational practises accordingly. These and other major health organisations promote dentistry and medical education that

equips students to become moral and compassionate professionals with a sense of social responsibility, leadership skills, critical thinking and research abilities, and a focus on lifelong learning. In assist learners understand the causes of diseases, how healthcare benefits are distributed, how healthcare practices affect patients, how medicine and dentistry are changing, and how socioeconomic, demographic, cultural, and personal factors affect health, medical and dental curricula.

The accurately measure the accomplishment of educational goals and programme performance is one challenge. Surveying student satisfaction has been the most popular way for gauging the success of MDHS courses; this approach is consistent fundamental level of programme assessment for educational institutions. However the focus of every curriculum's educational standard should be on the graduates' practical vocational proficiency student's ability to apply their information, abilities, and attitudes learned in school to the workplace and their adoption of long-lasting ambitions to improve their personal and professional circumstances are the best indicators of how effective their education has been. The fact that the humanities and social sciences are valued by individuals in scientific professions is another challenge. Many students studying medicine and dentistry believe that courses fusing the arts and social sciences with health sciences are therapeutically useless, unworkable, and even harmful. These courses are therefore placed lower on the academic food chain than biomedical and clinical courses. Also, some students find the writing tasks that these courses may entail to be burdensome or unsatisfactory. This inclination can be brought on by the humanities' and social sciences' underdeveloped understanding of fundamental ideas and research procedures in comparison to their competence in the biological and therapeutic sciences.

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