

Submitted: 14 December 2022
Accepted: 22 March 2023
Published online: 4 July, TAPS 2023, 8(3), 62-64
<https://doi.org/10.29060/TAPS.2023-8-3/PV2926>

Expanding social contribution of medical schools: One perspective from a regional medical university in Japan

Sachiko Kasamo, Satoshi Ozeki, Hiroyasu Inoue & Seiji Matsumoto

Institutional Research Office, Asahikawa Medical University, Japan

I. INTRODUCTION

There is growing interest in social responsibility around the world in order to accomplish a sustainable society. Indeed, modern universities cannot be ivory towers unrelated to society. It would not be an overstatement to say that without interaction and contribution to society, the university's survival and development are unlikely.

It is frequently said that the university fulfils three different missions: education, research, and social contribution. J. A. Perkins, the eminent theoretician of higher education in the 1960s, proposed there are three aspects of knowledge that must be understood as they have their institutional reflections in the university's three missions (Perkins, 2016). For knowledge itself to have significant power, there must be communication and interaction between the newly acquired knowledge, its transmission, and its application. The above concept began in the United States and has since been widely adopted as three major missions in many universities worldwide. Despite these three missions, however, depending on the university's expertise and readiness, and the resources and support received from external organisations and individuals, the university may be more active on some missions and less active on others.

Some with a conventional conception of "social contribution" may wonder "why now?", as the results of both "education and research" are ultimately returned to society. However, the major difference is that while the

conventional efforts of the university were at the level of individual responses by faculty members and others, the current "social contribution" is positioned as the essential function of the university. Expectations for universities have changed significantly, and universities have changed in a variety of ways; universities are now required to use knowledge for society from various perspectives. The greater the need to contribute to society and the greater its role, the more we need to question the meaning of "social contribution" in relation to the traditional roles of "education and research" in the university.

II. GLOBAL CONCEPTS OF SOCIAL ACCOUNTABILITY IN MEDICAL SCHOOLS

The concept of social contribution is embedded in the social accountability of medical schools. The World Health Organization defined it as "the obligation to direct their education, research and service activities towards addressing the priority health concerns of the community, region, and/or nation they have a mandate to serve" (Boelen & Heck, 1995). Following this, the Global Consensus for Social Accountability of Medical Schools defined a socially accountable medical school as one that "responds to current and future health needs and challenges in society, re-orientates its education, research and service priorities accordingly, strengthens governance and partnerships with other stakeholders and use evaluation and accreditation to assess their performance and impact" (Global Consensus for Social Accountability of Medical Schools [GCSA], 2010). This

document also emphasised the significance of enhancing medical schools' ability to address the demands and difficulties of providing healthcare for citizens and society at large, in accordance with the fundamental principles of quality, equity, relevance, and effectiveness. In addition, the criteria for ASPIRE-to-Excellence Award for Social Accountability by Association for Medical Education in Europe provide a practical framework for medical schools to consider when examining their own social contribution. This award itself gives schools the opportunity to be acknowledged globally for their excellence in education, which also covers social accountability (Mori et al., 2022). These internationally accepted concepts should always be kept in mind when promoting social contribution activities in medical schools.

III. SOCIAL CONTRIBUTIONS IN JAPANESE MEDICAL SCHOOLS

Japan might be one of the unique countries to set clear objectives regarding the university's social contribution in legislation. There are two revisions that have pushed the idea of social contribution forward as a fundamental function of the university (Hosono, 2014). First, the 2006 Revision of Basic Act on Education, Article 7 stated, "Universities, as the core of scholarly activities, are to contribute to the development of society by cultivating advanced knowledge and specialised skills, inquiring deeply into the truth to create new knowledge, and broadly offering the fruits of these endeavours to society." Second, 2007 Revision of School Education Act, Article 83(2) stated, "Universities shall contribute to the development of society by conducting education and research to achieve their objectives and by providing the results widely to the society." In light of these key statement revisions, the mission of the universities has changed along with the social trends, and more direct social contributions are being sought.

The importance of social contribution is also emphasised by Japanese medical schools. The recent study has analysed the Japan Accreditation Council for Medical Education accreditation documents of 45 medical schools against a global framework, and revealed that social contribution is identified to be one of the key components in the main category of "issues in society" for social accountability (Mori et al., 2022). As an essential aspect of social contribution, the need for an individual's lifelong learning has increased by an accumulation of factors, such as disaster-related disruptions, pandemics, and the ageing population with longevity. Medical schools can certainly use their strengths as health experts to assist in health literacy and well-being for the members of communities. In addition, the government has long been prioritising, promoting,

and advancing lifelong learning in Japan, in recognition of global challenges and social changes. Therefore, social contribution activities by medical schools can come into play to satisfy the need of individuals, society, and the country.

IV. SOCIAL CONTRIBUTION THROUGH COMMUNITY LECTURES: A CASE FROM A REGIONAL MEDICAL UNIVERSITY

Here, we share an example of ongoing direct social contribution activity at our university. The university positions social contribution as a significant role and mission in Educational Philosophy, and our "Community Lectures (haken kouza)" constitutes one of the essential elements in this role. This activity began in 2002 to meet the local community's lifelong learning needs, and the university's members have been giving lectures at the request of local public organisations. There are over 350 different topics offered to date. The lecture themes are not limited to medical and nursing topics, but also include educational and cultural topics. Between 2016 and 2019, we provided over 600 lectures to the local and regional communities. As the northernmost medical university in Japan, it is necessary to devise something unique to the region that makes the best use of the regional characteristics, and we firmly believe that there is a stage for the university to play an active role.

V. WHAT, THEN, IS THE SOCIAL CONTRIBUTION OF UNIVERSITIES

We acknowledge that the above Community Lecture is just one example, and in fact, social contribution can take many forms and shapes and be offered at various levels. The social contribution made by universities must not be merely the provision of free labour or lending facilities, but should fully utilise the characteristics of the university as the base for intellectual creative activities. In other words, the knowledge acquired and transmitted through the university's education and research activities should be returned to the local community by the mechanism of social contribution with the aim of improving the lives and welfare of the local population. The ideal relationship between the university and the community should not be a one-way relationship but should be a reciprocal one; where the community benefits from the intellectual and human resources of the university through community cooperation, and the university makes effective use of the region as part of its education and research.

In addition, activities such as international collaboration, regional collaboration, industry-academia-government collaboration, and training programs are all solid initiatives aimed at giving back to society in a more direct way. The university faculty and staff have been

independently engaged in these activities as experts in their respective fields. These include serving on committees of administrative agencies, supporting science education in schools, joint research with industries, and public lectures for non-students. They voluntarily carry out these social contribution activities (without even recognising them as such) alongside their busy daily clinical duties, teaching and research. However, these activities are often missed or not subject to systematic evaluation by the universities. In the future, these activities should be highlighted and evaluated as important activities that play a role in the functions of universities. We hope this article will stimulate interest in expanding social contribution in the university context. For future work, we plan to review other areas of social contribution activities conducted at the university.

Notes on Contributors

Sachiko Kasamo reviewed the literature, conceptualised and took the lead in writing and editing the manuscript.

Satoshi Ozeki contributed to the conception and revision of the manuscript critically.

Hiroyasu Inoue contributed to the conception and theoretical ideas of the manuscript.

Seiji Matsumoto supervised and gave critical feedback on the intellectual content of the manuscript.

All the authors have read and approved the final manuscript.

Acknowledgement

We sincerely thank Ms Misako Sato (Institutional Research Office's administrative staff) and the Research Support Section of Asahikawa Medical University for their support.

Funding

There is no funding source required for this study.

Declaration of Interest

All authors have no conflicts of interest to disclose.

References

Boelen, C., & Heck, J. E. (1995). *Defining and measuring the social accountability of medical schools*. Geneva: World Health Organization.

Global Consensus for Social Accountability of Medical Schools (GCSA). (2010). *Global census for social accountability of medical schools*.

<https://healthsocialaccountability.sites.olt.ubc.ca/files/2011/06/11-06-07-GCSA-English-pdf-style.pdf>

Hosono, M. (2014). Kokuritsu daigaku niokeru syakaikoukenkatsudouno genjyou to kadai. [Current Status and Issues of Social Contribution Activities at National Universities]. *The Journal of Science Policy and Research Management*, 29(1), 44-49.

https://doi.org/10.20801/jsrpm.29.1_44

Mori, H., Izumiya, M., Hayashi, M., & Eto, M. (2022). Current perception of social accountability of medical schools in Japan: A qualitative content analysis. *Medical Teacher*, 1-8.

<https://doi.org/10.1080/0142159X.2022.2140033>

Perkins, J. A. (2016). *The university in transition*. Princeton University Press.

*Seiji Matsumoto

Institutional Research Office,
Asahikawa Medical University,
2-1-1-1, Midorigaoka-Higashi,
Asahikawa, Hokkaido,
078-8510, Japan
Email: matsums@asahikawa-med.ac.jp