# The Research on the Development of Higher Medical Education in China

Jinyu Zhang and Hongman Wang

Abstract—The research reviews the historical change of China's higher medical education, focusing on the definition, initial time, and development stage. Some research limitations exist: 1) The definition of higher medical education needs to be studied further; 2) There are different opinions about initial onset and name of china's medical education; 3) The different theories of development stage should to be unified. Based on that, data should be reconciled to form a standard paradigm.

 ${\it Index Terms} {\it --} {\bf Development, \ historical \ change, \ medical \ education.}$ 

### I. INTRODUCTION

The medical education in this study refers only to Western medical education. China's medical education has existed for more than 100 years [1]-[3]. It has undergone many stages of the origin, development, reform. In spite of making great contributions to China and the world, it has not yet been included on China's subject list [4]. Studies show there is more empirical research in China's medical education than theoretical research; more realistic than historical [5]. Through reviewing the scholars' research on the history and development, this paper analyzes the history of higher medical education and its characteristics to provide guidance for its healthy development in the future.

### II. METHODOLOGY

The article discusses the historical change of China's higher medical education based on research obtained from the China national knowledge infrastructure (CNKI) database and relative books. The author selected the literature pertinent to the definition, initial time and development stages of China's medical education.

## III. FINDINGS

A. The Definition of Higher Medical Education Needs to Be Studied Further

All the concept should have its own extension and

Manuscript received January 30, 2018; revised August 9, 2018. This work was supported by Chinese Society of Medical Education under Grant 2016B-JYS002.

Jinyu Zhang is with Peking University Institute of Medical Humanities, 38 Xueyuan Rd, Haidian District, Beijing, 100191, China; She is also with Peking University School of Nursing, 38 Xueyuan Rd, Haidian District, Beijing, 100191, China (e-mail: zhjy@bjmu.edu.cn).

Hongman Wang is with Peking University Institute of Medical Humanities, 38 Xueyuan Rd, Haidian District, Beijing, 100191, China (corresponding author: Hongman Wang; e-mail: pkuwhm2006@163.com).

connotation [6]. Medical education is an important part of higher education [7]. Can we define higher medical education according to the concept of higher education? "Higher education means education for senior professionals [6]". Based on that, higher medical education is "to cultivate education for senior medical personnel". The premise of this definition is higher medical education is defined as a subordinate concept of higher education. But higher medical education should involve two major disciplines, medicine and pedagogy. Obviously, the discipline extension does not cover the field of higher medical education completely. Some studies also interpret higher medical education from the perspective of medical education. "The so-called medical education refers to education activities that train health professionals in a planned and organized manner according to the needs of society. Higher medical education, on the other hand, is a college-level medical college education [8]. " I agree with it. But what is the narrow definition? This should be explored further.

## B. There Are Different Opinions about Initial Onset and Name of China's Medical Education

Four theories exit regarding the onset of China's higher medical education. 1) It started in the early 19th century [9]; 2) modern higher medical education began in the early 19th century [3]; 3) late Qing period (1840-1911 Year) is the initial stage of modern higher medical education [10]; 4) modern medical education has been established in our country since 1881 [11]. Seen from the above, the different theories show that all originated during the 19th century, but the exact time is not specific in the literature. Furthermore, terminology varies, such as "higher medical education", "modern higher medical education "," modern medical education ". Why are there different terms? It is not only related to the lack of a clear definition of the concept, but also to scholars' different opinion.

From the scholars' study, it is found the words "modern", "recent", and "contemporary" [12]-[15] appear. In order to understand the development of higher medical education in different historical periods, this study consulted the "China Time Table" [16], which clearly marked "Modern China (1840-1949) The People's Republic of China (1949-) ". But there is no definite period for the word modern. It can be seen that there are different definitions of different research categories for scholars with different definitions of the term "modern" [17]. Therefore, this study argues that it is necessary to further study and discuss the origin of higher medical education in China only by using date as the different interpretations of period.

C. Research on the Development Stage and Characteristics of China's Higher Medical Education

78

The research retrospectively reviews the history of the development of China's higher medical education. This study

analyzes the following six studies reported by domestic scholars on the stages of development (Fig. 1) [10], [18]-[22].

NO.	ISSING	PERIOD													
	YEAR	BEFORE 1840	1840-1911	1911-1927	1927-1949		1977-1981	1982-1985	1986-1991	1992-1998	1999-2004	2005 2006	2008	2009	2012
① [10]	2014		The initial stage - the late Qing period	Development Stage - BeiYang Government Period	Improvement Stage - Nanjing National Government Period					,					
② [18]	2012	Outstanding Traditional Chinese Medicine	New China: The shift - Western medicine is getting closer.				After the Founding of New China: Development of Single Subjects - Training Specialist Medical Professionals.  21st century trend of higher medical education and diverse and integrated development.						and pro	spect:	
③ [19]	2009		The Opium War of 1840 to the establishment of the People's Republic of China in 1949: Difficult to Development-Experienced with the Westernization Movement, the Republic of China, and the Jiefang War Period Medical Education Curriculum				Curriculum Setting of Higher Medical Education after the Founding of New China: From the Founding of New China to the Pre-Cultural Revolution-the Soviet model; during the Cultural Revolution - Deviation from Science; Since the Reform and Opening up - Regression and Reconstruction								
④ [20]	2008	Apprentice medical professional training mode (less developed early medical education)					tics of	Comprehensive medical professional training mode (from the 1980s to 2008): the integration of disciplinary system, the combination of theory and clinical. Focus on individual characteristics, and improve the health care system and related education, and make full use of various educational resources international to cultivate innovative medical personnel.							
⑤ [21]	2006						Adjusted recovery period	Priority development period	Exploring period of reform	Function expansion period	High- speed expansion period	Stable development period			
⑥ [22]	2004		1949-1988: The held the short a including the fi three-year syste				edium-term ar undergra	system duate system,	After 1988: clinical medicine long school system began to develop.						

Note: The years in shaded parts are not reported in the literature.

Fig. 1. Research on the development stage of higher medical education in China.

As seen from Fig. 1, study 2 and 4 report the changes in the development from the Opium War of 1840 to the publication of the studies. However, the timelines are quite different. Scholars hold different views. From the other studies in Table 1, we also find most researches divide the stages based on major historical events such as the Opium War, New China's founding and the Cultural Revolution. The research content covered historical changes, the development model, curriculum, training, academic evolution and reform. But the timelines are not unified. The comprehensive and integrated historical staging method requires further study by scholars.

Research in Fig 1 Article 6 divides the academic development of medical education in China into two stages: the period of short and middle semester from 1949 to 1988 and the period of middle school and long semester after 1988 [22], [23]. According to the discussion of domestic experts, it also can be roughly divided into three stages [24]: 1) short-term practice and controversy: in 1979-1988, there are three to six years of different academic system of higher medical education in China. Although the three-year junior college short-term education system has exposed its drawbacks, in order to meet the needs of health care workers in the vast rural areas, associate degree education has not been canceled and has been continuing until now. Implementation and Adjustment of Seven-school System: With the development of medical education and the demand of multi-level medical training after the reform and opening in China, since the fall of 1988, 15 schools including Beijing Medical University have been approved to run a 7-year advanced program in medical education. 52 schools hold seven-year medical education by 2002 [2]. Since 2015, the Ministry of Education has adjusted the enrollment of seven-year clinical medicine students to "5 + 3" integrated clinical personnel training mode [25]. 3) Appeal to the eight-year system: the eight-year medical education aims to cultivate students with generous humanities and social sciences that meet the needs of our country's social and economic development in the 21st century and Basic knowledge of natural science, a solid theoretical foundation of medical theory, strong clinical ability, great potential for development, and a high comprehensive quality of clinical medicine high-level personnel [7]. Up to now, a total of 14 schools, including Peking University, Tsinghua University and Fudan University, have set up eight-year medical education in our country.

With the change of people's demand for health professionals, the professional setting of medical education in our country has undergone a process from less to more and more to less. From the beginning of establishment of China, there were only medical, oral, health and pharmacy four undergraduate majors. Adding to seven types of undergraduate in 1954 (pediatrics, Chinese medicine, traditional Chinese medicine), and then gradually expanding to 1987 nine categories of 57 professional. After adjustment, it was reduced to nine categories of 37 majors in 1993 [15], and revised to 11 categories in 2011 and 36 majors [1]. Professional adjustment and setting have played a positive role in promoting medical education personnel training in different periods, but some scholars also point out that the current specialty catalog does not reflect the characteristics of modern medical personnel training, and does not include medical interdisciplinary and new disciplines, lack of knowledge of medical humanities and social sciences [26], while there is an excessive degree of specialization [1], which is the same point of this study.

## D. Paradigm in the Study of Higher Medical Education

Foreign scholars have studied more and more, and have made some researches on the progress of science and technology [27], [28], the selection of educational theory [29] and the paradigm shift [30]-[34]. Domestic research is rare. Yang Cailing proposes the paradigm of higher medical education [35]. Some scholars have studied such issues as the higher medical humanities education paradigm [36], the teaching paradigm [37]-[39] and the qualitative research paradigm in the medical education research [40]. Because higher medical education involves two disciplines of medicine and education, its research area is so wide that scholars pay much attention to the perspective of research. As an interdisciplinary field of study, higher medical education is lack of the paradigm of the community of beliefs, values and techniques common.

## IV. RESULTS

Throughout history, the origins and development of higher medical education in China are closely related to health and education policies in the era countries. It is not only affected by major events. Therefore, from the historical development and changes of higher medical education, this study argues that we consider all the factors synthetically and explore the process of development and changes of higher medical education in China by using the paradigm concept. In order to meet the challenge of higher medical education in the new situation and the shortcomings of the urgent need to be improved [1], [41]-[44], higher medical education will be studied further from the paradigms view.

# REFERENCES

- Y. Ke, Redefining the Reform of Chinese Medical Education in the 21st Century, Beijing, CHN: Peking University Medical Press, 2014, p. 318.
- [2] L. Y. Yang and M. H. Yang, "An analysis of the curricular program changes of the higher medical education system in China," *Researches in Medical Education*, vol. 9, pp. 202-294, March 2010.
- [3] Y. Wang, H. Wang, and X. L. Zhao, "Analysis of the present situation of higher medical education and teaching reform," *Science & Technology Information*, p. 81, Jan. 2014.
- [4] Degree Committee of the State Council, Ministry of Education, "Degree award and personnel training subject directory," CHN, Mar. 8. 2011.
- [5] H. M. Wang, "Medicine" Step by Step: Study on Quality Education Modes and Countermeasures in Colleges and Universities, Beijing, CHN: Peking University Medical Press, 2015, p. 1.
- [6] D. B. Wang, I Am in Peking University Health Science Center for 50 Years, Beijing, CHN: Peking University Medical Press, 2006, p. 387.
- [7] X. L. Yin, L. Guo, H. J. Meng, and T. Wang, "A review of medical education research in China: Based on papers published in 5 medical education journals in 2007," FUDAN Education Forum, vol. 9, no. 1, pp. 87-91, Jan. 2011.
- [8] C. T. Zhang, An Introduction to Higher Education, Beijing, CHN: People's Education Press, 2010, p. 465.
- [9] D. B. Wang, Study on the Reform of China Medical Education Management System and Academic Degree, Beijing, CHN: Peking University Medical Press, 2006, p. 265.
- [10] X. Y. Yang, "Development trend of medical education and higher medical education," *Technology Innovation Guide*, no. 24, pp. 245, 247, Aug. 2009.
- [11] M. Y. Li, "Enlightenment of higher medical education in America and Japan to China," *China Market*, no. 22, pp. 177-178, May 2015.

- [12] G. Y. Wang, "The historical changes and enlightenment of modern China higher medical education," *Medicine and Society*, vol. 27, no. 1, pp. 91-93, Jan. 2014.
- [13] Y. A. Du and D. W. Xu, "Understanding and countermeasures of quality of higher medical education in public education background," presented at the Annual Meeting of Medical Education in Zhejiang, Ningbo, Zhejiang, 2007.
- [14] H. Y. Gao, "Research on the reform of contemporary higher medical education in China," M.S. thesis, Dept. Medical Examination, Third Military Medical University, Chongqing, CHN, 2006.
- [15] Y. Zhou, "An analysis on the reconstruction of medical ethical spirit in modern higher medical education," *Chinese Journal of Medical Education*, vol. 30, no. 2, pp. 231-232, 235, Mar. 2010.
- [16] C. L. Yang, "The harmonious development of humane spirits and modern higher medical education," *Journal of Henan Radio & TV University*, vol. 23, no. 2, pp. 96-97, Apr. 2010.
- [17] H. Y. Gao, Y. G. Wang, and W. U. Feng, "Retrospective study of the development of contemporary higher medical education in China," *Northwest Medical Education*, vol. 14, no. 2, pp. 136-137,142, Apr. 2006.
- [18] Chinese Library Classification, Fourth Edition, Beijing: Beijing Library Press, 1999, p. 1141.
- [19] D. L. Ceng, Y. Q. Luo, "On the problems in times division and explanation in the fourth revision of Chinese library classification," *Library and Information Service*, vol. 48, no. 9, pp. 112-116, Sept. 2004.
- [20] R. Y. Huang, "Trend and change about developing mode of Chinese higher medical education," *Medicine and Philosophy*, vol. 33, no. 21, pp. 56-58, 62, Nov. 2012.
- [21] R. Y. Huang, "Historical changes and enlightenment of curriculum setting in higher medical education in modern China," *Medicine and Philosophy (Humanities and Social Sciences Edition)*, no. 1, pp, 77-78, Jan. 2009.
- [22] R. Hu, "Preliminary exploration on the evolving path and development trend of high-level medical talents cultivation," *Chinese Higher Education Research*, no. 4, pp. 25-27, Apr. 2008.
- [23] H. Y. Gao, Y. G. Wang, and W. U. Feng, "Retrospect of reform and development in contemporary China higher medical education," *China Higer Medical Education*, no. 4, pp. 52-53, Apr. 2006
- [24] X. H. Ji, J. F. Wang, and Y. Ma. "An analysis of the evolution and development trend of the system of higher medical education in China," *Jiangsu Higher Education*, no. 1, pp. 39-42, Jan. 2004.
- [25] J. K. Sun, "Analysis and enlightenment of academic system of higher medical education in China and foreign countries," *Medical information*, no. 11, pp. 26-27, Nov. 2013.
- [26] Y. Q. Wu, "The status and development of academic system of higher medical education in China and foreign countries," M.S. thesis, Dept. School of Public Health, FuJian Medical University, Fujian, CHN, 2009.
- [27] Ministry of education, the State Health Planning Commission, the State Administration of traditional Chinese medicine, Opinions on Deepening Medical and Teaching Cooperation to strengthen the Reform of Clinical Medical Talents (Teaching and Research [2014] No.2), June. 30. 2014.
- [28] Y. T. Chen, W. L. Hu, and P. Xie, "Medical education discipline directory problems and countermeasures," *China Higher Medical Education*, no. 7, pp. 15-16, July 2010.
- [29] S. Rose, "Teaching old dogma with new tricks and technology: Educational paradigm shifts in graduate medical education," *Clinical and Translational Gastroenterology*, vol. 6, pp. e78, Mar. 2015.
- [30] K. C. Chretien, L. M. Yarris, and M. Lin, "Technology in graduate medical education: Shifting the paradigm and advancing the field," *J Grad Med Educ*, vol. 6, no. 2, pp. 195-196, June 2014.
- [31] A. A. Kost and F. M. Chen, "Socrates was not a pimp: Changing the paradigm of questioning in medical education," *Academic Medicine*, vol. 90, no. 1, pp. 20-24, Jan. 2015.
- [32] D. E. Benor, "A new paradigm is needed for medical education in the mid-twenty-first century and beyond: Are we ready?" *Rambam Maimonides Med J*, vol. 5, no. 3, p. e18, July 2014.
- [33] N. B. Mehta, J. B. Young, and J. K. Stoller, "Just imagine: New paradigms for medical education," *Academic Medicine*, vol. 88, no. 10, pp. 1418-1423, Oct. 2013.
- [34] V. N. Naik, A. K. Wong, and S. J. Hamstra, "Review article: Leading the future: Guiding two predominant paradigm shifts in medical education through scholarship," *Canadian Journal of Anaesthesia*, vol. 59, no. 2, pp. 213-223, Feb. 2012.

- [35] R. T. Kasuya and D. H. Sakai, "Patient-centered medical education: Has an educational paradigm finally found a name?" *Hawaii J Med Public Health*, vol. 72, no. 2, pp. 63-65, Feb. 2013.
- [36] R. Badea, "Medical education of students and residents A new paradigm?" Medical Ultrasonography, vol. 14, no. 3, pp. 175-176. Sept. 2012.
- [37] C. L. Yang, "On ecological paradigm of medical higher education paradigm in China," *Search*. no. 8, pp. 188-191, Aug. 2014.
- [38] T. J. Shi, "Thoughts on high medical humanistic education paradigm innovation under the view of recognizing meanings," *Soft Science of Health*, no. 3, pp. 159-161, 171, Mar. 2015.
- [39] L. H. Zhou, Y. L. Zhang, H. Xiao, "Discussion on the teaching paradigm reform of life science courses in medical colleges and universities," *Era Education*, no. 7. pp. 200-201, Apr. 2015.
- [40] Y. L. Song and H. Liu, "Analysis and reconstruction of ideology and politics teaching paradigm in medical colleges and universities," *Daqing Social Science*, no. 3, pp. 140-141, June 2014.
- [41] Y. J. Ren, "Study on the teaching paradigm of ideological and political theory in medical colleges - Take the course of 'an introduction to Mao Zedong Thought and the Theoretical System of Socialism with Chinese Characteristics'," *Technology Horizon*, no. 21, pp. 31-47, July 2013.
- [42] C. Zhang and C. Zeng, "Qualitative research: Another paradigm of medical education research," *Medicine and Philosophy*, vol. 31, no. 17, pp. 72-73. Sept. 2010.
- [43] J. L. Hou, W. M. Wang, and Y. Ke, "Effects of social changes on higher medical education and implications for reform," *Chinese Journal of Medical Education*, no. 1, pp. 6-9, Jan. 2014.

[44] B. Z. Sun, "New battle cry of medical education reform in the world in 100 years," *Chinese Journal of Medical Education Research*, vol. 10, no. 1, pp. 1-5. Jan. 2011.



1979. She got her bachelor's degree in nursing from Peking University, Beijing, China in 2002 and her master of nursing from Peking University, Beijing, China in 2007. She is now a current Ph.D student in Peking University Institute of Medical Humanities. Her study field is medical sociology. She is also a teacher working in Peking University School of

Zhang Jinyu was born in Beijing, China on May 5

Nursing.



Wang Hongman received her PhD degree from traditional Chinese medicine of Peking University, Beijing, China in 1998 and served as a postdoctoral researcher at Peking University (China) in 1999-2000. Her research is focused on social decisions and social sciences, global health and social development. During the last 15 years, she has published over 100 papers, 7 monographs, and given

about 100 invited lectures in various meetings and conferences. Now she is a professor and head of the Center for Health and Social Development, Institute for the Medical Humanities of Peking University Health Science Center