



# Time for tighter checks on medical schools?

The British students who have fled to Syria to work while studying in Khartoum have exposed the weakness of the system for accrediting medical schools worldwide, **Duncan Gardham** reports

**T**he UK General Medical Council is relying on foreign governments to approve the medical degrees it accepts with no further checks on the quality of teaching. The practice raises questions about the reliability of teaching in countries such as Sudan, which has been attracting students from Britain partly because medical colleges there are cheaper and easier to get into.

A group of 11 medical students and recently qualified doctors (believed to be seven Britons, one Canadian, one American, and two Sudanese) flew from Sudan to work in Syria in March, raising further questions about the influences that young students can come under while studying abroad.

Many of the students (above right), it emerged, came from UK families of Sudanese background and had been studying at the

University of Medical Sciences and Technology (UMST) in Khartoum, a private university established in 2007. Last week, seven British students were among a party of 12 from UMST, who travelled to Turkey, believed to be trying to enter Syria, the Foreign Office has confirmed.

UMST is one of 12 colleges in Sudan registered by the World Directory of Medical Schools ([www.wdoms.org](http://www.wdoms.org)), relied on by the GMC. Sudan is just one of several countries

## Islamic State creates jihadi health service

Many doctors in war zones seek to remain independent, but the situation in Syria and Iraq is forcing them to take sides

Since the militant group Islamic State took over large tracts of Syria and Iraq about a year ago local doctors have been forced to pledge allegiance or flee, aid workers have retreated, and the group is attempting to train or recruit a health service workforce made up of medical jihadists from around the world.

On 24 March Omar Hussain, a British man from High Wycombe, tweeted: "O Muslim doctors, stop treating the Kuffaar [infidels] & come Sham [Syria] & help

the injured mujaahideen [holy fighters]! Imagine the reward of helping a bro go back 2 battle!"

The group of medical students who left Sudan to work for Islamic State in March drew international attention to what seems to have been a steady flow of Western educated Muslim doctors drawn to support the militant group.

One, who describes himself as a "muhajir [emigrant] medical doctor" was tweeting under the alias Abu Layla al-Shami and featured a photograph with a

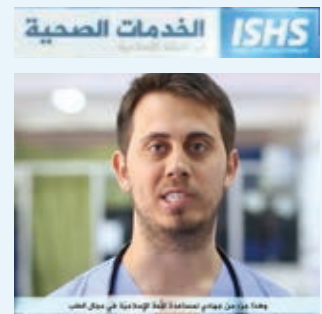
stethoscope and handgun. He wrote in January that he would be "posting medical advice to the mujahideen, including first aid tips" along with "health updates from the Islamic state" and the inevitable "analysis & advice regarding issues of jihad & aqeedah [belief]."

However, it was his tweet on 3 January that gained most attention from supporters of Islamic State, who re-tweeted it as proof that the group was able to run itself as a fully fledged state.

"First glimpses of the new Islamic state medical school . . . opening soon inshAllah in Raqqa," he wrote, accompanied by a picture of a smart, cement building with railings outside.

Later he added: "It's great to see that many people both brothers and sisters from a wide range of nationalities have applied to the Medical College."

The recruitment push continued with a video released in April that usurped the NHS logo and replaced it with "ISHS." It featured an Australian paediatrician called

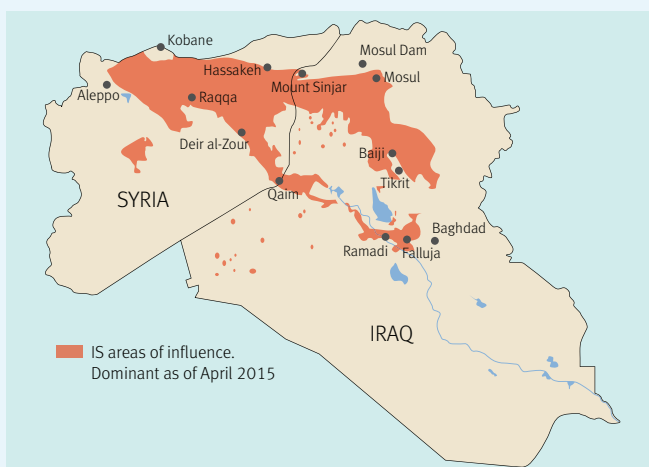


Tareq Kamleh, from Perth, whose mother is German and father is Palestinian (above).

Calling himself Abu Yousef Al-Australi, he called on Muslim doctors to move to areas controlled by Islamic State, saying there is no lack of medicine or equipment but qualified medical care is needed.

Yet little is known about what healthcare is really being provided to the thousands of civilians who give birth, get ill, and face death in the war zone that Islamic State controls.

Reports from Mosul in Iraq suggest that the fighters have attempted to force female doctors to be fully covered, including





## A group of medical students and doctors flew from Sudan to work in Syria in March, raising further questions about the influences that young students can come under while studying abroad

university offers a qualification accepted by the GMC.

Parents of the students who went to Syria explained that they saw the Sudanese medical school as a good way for their children to qualify while also getting in touch with their roots. It is not known how many students from families with origins in countries such as Sudan, Yemen, Somalia, or Pakistan are now studying in these countries, but new medical schools have opened in some of those countries, suggesting that this is a growing market. Pakistan, which provided 218 candidates for a licence to work in the UK last year (more than any other country), has 90 colleges registered in the World Directory of Medical Schools.

It's clear that some students are going to foreign universities because they didn't get the grades for their first choice of university.

One student who studied medicine in Khartoum explained on social media that he went to study there not to get in touch with his roots but because he had "missed out by a couple of grades" on an offer from a London university to study medicine.

He wrote on social media: "Had the choice of doing biomed but that don't fit in my future plans. Very close friend of mine already completed his first year in Sudan."

"Checked the uni with the General Medical Council and they said a degree from their [sic] is recognised in the UK. So Alhamdulillah [thanks be to god] still get to study medicine + it's recognised worldwide + in a Muslim country."

To practise medicine in Britain after studying abroad students have to prove that they have an "acceptable overseas qualification" and then pass the Professional and Linguistic

struggling against Islamic extremism that have medical schools on the list—Afghanistan and Yemen have six colleges each and Somalia has two. Syria has seven, including colleges in the contested cities of Homs, Aleppo, and Deir Ezzor. Sources familiar with the Sudanese medical world say that UMST does not have the same academic reputation as Khartoum University's medical school, once known as the Kitchener School of Medicine. Nevertheless, the private

wearing gloves, while treating patients. There are also reports of staff and patients being segregated so that women can only treat women and of female hospital staff being prevented from working after dark. The reports, based on un-named local sources, cannot be verified.

### Too dangerous to help

As would be the case anywhere else in the world, amid coordinated international bombing and fighting on the ground, the local population has more than ordinary medical needs. Yet even the hardest aid workers have had to keep away over the past year.

David Nott, a consultant general and vascular surgeon at the Royal Marsden, St Mary's, and Chelsea and Westminster hospitals, returned from Syria last October and admits it is now too dangerous except for supporters of Islamic State. In the space of a few weeks Aleppo, the highly contested city in northern Syria, went from "safe-ish" to a nightmare in which he dreaded every knock on the door, he told *The BMJ*.

Nott made three trips to Syria and has volunteered in many of

the worst war zones of recent times, from Bosnia to Afghanistan.

In Syria he started working in an area controlled by the moderate Free Syrian Army, which patrolled large swathes of Aleppo, and his biggest fear was the barrel bombs being dropped by helicopters of the Syrian regime, but that changed on his last visit.

"You don't ever know as a Westerner, how safe you're really going to be. All it takes is a phone call—and everyone has a mobile phone. A call could go to Islamic State, al-Nusra, or a faction of al-Qaeda. A knock at the door could be calling you for a casualty or to take you away. That's the issue, your safety can't be guaranteed, and not only because of the conflict. It is a really, really dangerous place to go at the moment."

In 2013, Nott said Aleppo was full of Islamic State fighters but they "weren't as extreme as they've become."

But in January and February 2014, the Free Syrian Army and Islamic State came into conflict as Islamic State set its sights on other rebel factions rather than the Syrian regime, and the factions fought back. One of the doctors



**"You don't ever know, as a Westerner, how safe you're really going to be. A knock at the door could be calling you for a casualty or to take you away"**  
David Nott, surgeon, London

from Aleppo that Nott had worked with decided to go on a diplomatic mission to heal the rift.

Islamic State "killed him, ripped his face off, and dismembered him just because this poor doctor tried to mend bridges," Nott said.

In most other conflicts "doctors are always looked after and treated with some reverence because they are able to cure people and alleviate human suffering," Nott says. In previous conflicts he had been able to treat both sides—Palestinians and Israelis in Gaza, Hutus and Tutsis in Congo.

But the threats in Syria began from President Assad's regime with the death of Abbas Khan,

the young British doctor who was detained by regime forces at a check point within a day of arriving in Aleppo and killed in custody.

"You have to enter the country illegally from Turkey and the regime looks at you as a terrorist—now you are a terrorist to one side and an infidel to the other. This is far more dangerous than other war zones."

"You have to go to dangerous places but I always think it's going to be alright. It's something in me; I don't believe that is unrealistic. I can offer help and that's all there is. If I don't go, no one will."

But thanks to Islamic State, even Nott believes it is too dangerous to travel to Syria now.

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## Sudan university at centre of radicalisation claims

UMST (pictured right) is owned by Mamoun Mohamed Ali Humeida, who is also the health minister for Sudan's capital territory, Khartoum State. UMST claims on its website to have been set up to serve the educational needs of Sudanese, African, and Arab students, but its fees of \$12 000 to \$13 000 a year mean that it is seen locally as "a place for rich kids," says a report by the news magazine *Africa Confidential*.<sup>1</sup>

It also offers foundation courses to students who have not completed qualifications equivalent to the UK's A levels.

Humeida is a staunch member of the ruling National Congress Party, the Islamist party that has run Sudan since a military coup in 1989. He owns a private hospital as well as several other training centres, according to *Africa Confidential*.<sup>1</sup>

There has been controversy over the influence of Islam in



education in Sudan, but UMST is not seen as particularly exposed to those elements, unlike the International University of Africa, also in Khartoum, whose students have gone on to join movements such as al-Qaeda, al-Shabaab in Somalia, and Boko Haram in Nigeria. Remarkably, even this university features on the World Directory of Medical Schools.

It seems, however, that an

organisation called the Islamic Cultural Association had been spreading radical views on the UMST campus, and in any case students would not have had to travel far to meet radical preachers in Sudan. Since the group of nine students left to work in Syria, Humeida has reportedly banned the Islamic Cultural Association from holding meetings at the university.

One of the students in the group who recently went to Syria, Lena Abdel Gadir, is reportedly an A grade student who grew up in a village in Norfolk and whose parents, who are of Sudanese origin, are both doctors. In Khartoum, she expressed support for radical Islamist groups through social media. However, she was following other Twitter posters who posted regular updates on Islamic State, expressed support for the killers of *Charlie Hebdo* magazine staff in Paris, and last August had shared a video by Ahmad Musa Jibril, a Palestinian American preacher popular with European and North American jihadists. Her embrace of extremist views was apparently worrying her parents, but she was unrepentant, tweeting, "You know times are rough when . . . your mum keeps referring to you as da3ish [ISIS]."

Assessments Board (PLAB) test, made up of a three hour multiple choice test and an hour and 40 minutes practical exam. The GMC also sets a minimum standard that courses must be taught in English and involve 5500 hours of study but does not check that the standard is met.

But Richard Wakeford, a fellow of Hughes Hall, Cambridge, and an expert in the assessment of professional competence, said that the "world gave up trying to actually accredit medical schools years ago, moving merely to list them, excluding only the ropiest."

Wakeford's research shows that the third most common nationality of people taking the PLAB test is British, indicating that thousands of students are travelling abroad to study medicine and then returning to practise in Britain.

The acceptable qualifications are based on the list compiled by the World Directory of Medical Schools.

The directory's website says that it seeks to "protect patients and to meet the needs of society," by ensuring that "a doctor has attended a genuine medical school of good standard, and has demonstrated the competence required to become a certified medical doctor." But it cautions that a listing does not denote recognition, accreditation, or endorsement by the World Directory of Medical Schools or by the partner organisations."

A new school is added to the directory when the government in which the medical college is located sends information to show that the college is "operational and recognised locally."

### Unregulated education

Niall Dickson, chief executive of the GMC, defends the system for accepting qualifications from overseas medical schools, saying that medicine was a "global profession" and that it would be "ridiculous to expect any medical regulator to quality assure every medical course in the world."

He added that there were "plenty of courses where we will not even consider applications from their graduates" and that doctors had to jump "a series of hurdles" before they are granted registration in Britain.

"Where we do have concerns about an overseas medical school, we do not allow graduates from that school to apply for registration," Dickson added. The world directory is a starting point—no more than that."

The GMC has recently reviewed the PLAB test and has embarked on a "series of changes as part of our ongoing commitment to maintain and increase standards," Dickson added.

Globally, there are moves afoot to try to strengthen the system for ensuring that these schools provide an education of a very high

standard. This will depend on accrediting agencies being established in every country or region to assess the quality of every existing and new medical school. Without the accrediting agency's stamp of approval, a graduate from a medical school in, say, Sudan would not be able to pass licensing tests to work in other countries.

"There are thousands of students going to unregulated private medical schools around the world," said Dan Hunt, co-secretary of the Liaison Committee on Medical Education, the authority that accredits medical education programmes in the US. "Sixty new private medical schools have opened in Brazil in the last four years. But they have no accrediting process there. A lot of entrepreneurs are taking advantage of people. It's a huge problem."

Hunt said that in the US the body that provides licensing exams for students who have trained outside the US, will from 2023 no longer accept any applicant from a medical school that is not recognised by an official accrediting agency.

But so far there are only three such accrediting bodies—one in Turkey, one for the Caribbean region, and the liaison committee in the US.

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