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Bleak future for pre- and paraclinical postgraduates in India

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In a bid to encourage medical graduates to opt for postgraduation in pre- and paraclinical courses, the Odisha Government, in January 2018, hiked the stipend for students pursuing these courses in state-run medical colleges (1). The state government also announced additional financial assistance of Rs 18,000 per month for pre- and paraclinical postgraduate students, along with the stipend money. The state's Health and Family Welfare Minister, Pratap Jena, said this would be applicable to both in-service and direct postgraduate students (2). This announcement in the newspapers gave rise to much discussion in the social media.

Does the announcement seek to cover up the appalling state of postgraduate medical education in the pre- and paraclinical fields in India? It is not uncommon to see many pre- and paraclinical postgraduates struggle to find jobs in their field of specialisation. It is also common to see such postgraduates being forced to take up posts like that of medical officer, just to make ends meet. Their postgraduate education in academic subjects or research does not give them any assurance of employment. Eventually, they feel cheated at having wasted three or four years to achieve an MD in such a specialisation. "No job opportunities after such specialisation", "No takers for such courses and the seats go vacant"¹. Does this ring any alarm bells?

We have to seek effective solutions to the perennial problems plaguing pre- and paraclinical sciences in India. Why are there hardly any takers for these courses in most medical colleges

in the country? Is it because of the dearth of job prospects? A poor postgraduate curriculum? Or is it something beyond this?

If the job prospects are poor, we need to explore why. Is it because candidates are only looking for opportunities in medical colleges? Teaching posts in medical colleges have dwindled drastically because the Medical Council of India has slashed faculty requirements in the pre- and paraclinical departments (3). Is it because the age of retirement in many colleges has been raised? Is it that pre- and paraclinical specialists are underpaid by private colleges, and are used by many colleges for unpaid clerical and administrative work? Is there any scope for growth and development in such specialisations? Does the current postgraduate training adequately prepare students to meet future challenges? Are there other reasons for the deplorable state of pre- and paraclinical postgraduate education?

It is high time we take responsibility for the state of medical education in our country. These questions can be solved scientifically through extensive discussion with all stakeholders, using qualitative methods like focus group discussions or semi quantitative methods. The production of so many postgraduates in pre- and paraclinical sciences with hardly any job opportunities in their respective fields is a serious concern. We have to seek solutions for these problems more diligently and scientifically.

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Note

¹ These were responses to the announcement found on WhatsApp group chats.

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