# Audio file

[Episode 11 - Ghaith Alfakhry (11 April 2025).mp3](https://unioxfordnexus-my.sharepoint.com/personal/educ1167_ox_ac_uk/Documents/Transcribed%20Files/Episode%2011%20-%20Ghaith%20Alfakhry%20(11%20April%202025).mp3)

# Transcript

00:00:13 Speaker 1

Welcome to Conversations in MedEd - the people behind the research.

00:00:26 Speaker 1

Hi, Ghaith. Thank you for joining us today. It's great to have you.

00:00:30 Speaker 2

Thank you very much. Thank you for having me.

00:00:32 Speaker 1

Of course, maybe you can just introduce yourself to listeners. Who are you? Where are you based? What are you doing?

00:00:40 Speaker 2

So I'm Ghaith Alfakhry, I'm a dentist by education.

00:00:46 Speaker 2

I transitioned to medical education sector and I became a researcher and kind of more of an advocate, now the Executive Director, director of AMES, which is the Association for Medical Education in Syria.

00:01:03 Speaker 2

Now most of my work focuses on developing medical education in Syria and resource limited settings, and I inspire a lot of my work from various global research.

00:01:16 Speaker 2

Uh.

00:01:19 Speaker 2

If I would like to say, how did I first come to into medical education, it's it's a bit of a long story, to be honest, but.

00:01:26 Speaker 2

I'll try to make it brief.

00:01:29 Speaker 2

So in my and now I'm based now I'm currently visiting in Syria. I'm supervising a project. The establishment of my organisation. But most probably I'll be going back to the UK afterwards. Or maybe the gulf, because I have worked there.

00:01:48 Speaker 2

So my story with medical education is I was when I was my in my undergrads and studying the history. Of course, the history is not a, you know, cheap kind of education. Although the education is free, the materials treating patients is all on your own financial account.

00:02:06 Speaker 2

So it can be expensive.

00:02:09 Speaker 2

So I started teaching English as a second language. Uh.

00:02:16 Speaker 2

As a teacher, I tried to several institutes. I failed first year, then the second year. You know it worked. I became an English language teacher and my third year at dental school.

00:02:30 Speaker 2

I so I was working part time. I got a lot of courses and I got really into education. The thing is, the institute that I was working on, he didn't just allow anybody to teach. So he gave me a book, the practise of English language teaching. Its book was by Jeremy Harmer. So it has a lot of the sciences of teaching.

00:02:51 Speaker 2

And learning and so a lot of these things.

00:02:54 Speaker 2

That I almost traded almost all of it and I got really inspired by how how? Let's say I wouldn't say the word scientific, how structured the teaching process need to be. It's not, you know, as I first experienced in Syria and what makes some teachers great, what makes others not so and what how.

00:03:15 Speaker 2

And learning be facilitated and so on. So I got really enthusiastic about it, really passionate about it. And I got into it like really hard and I've, you know, done really well as an English language teacher. My students used to like me and stuff.

00:03:32 Speaker 2

Then in my 4th year fourth year.

00:03:37 Speaker 2

Yes.

00:03:41 Speaker 2

Dental student it. It was pretty devastating here for me because like it was just one subject and because I missed the date of that, you know module. So I didn't take the exam, it was very stupid mistake. But it's not, you know they moved the date so but I didn't know that they moved the date. So it's a it was an honest mistake.

00:03:59 Speaker 2

So. So in that year, I didn't have much to do, so I was left with a part time job and a lot of time free time that I did not know where to go with.

00:04:10 Speaker 2

So I was thinking of doing some research and I was drawing drawing some drafts.

00:04:16 Speaker 2

And you know.

00:04:18 Speaker 2

Thinking of what subject will I research? What am I interested in? So the first thing I got is to see. So I observed the phenomenon which is a lot of the Arabic countries, all of the Arabic countries.

00:04:31 Speaker 2

Teach medicine in English, except for Syria, which teaches.

00:04:36 Speaker 2

Of course, other other countries do have some modules in Arabic, but medicine in General English is the language of instruction. In medical these medical, dental and health professional schools. But it's here, it's not Arabic is the language. Of course. That's because of the bath party agenda. And you know, it's one of their, you know, their tools.

00:04:56 Speaker 2

To uh, control the country. One of their messages selling messages to uh.

00:05:03 Speaker 2

Preserve the Arabic identity of Syrian.

00:05:07 Speaker 2

So I started to research whether English or Arabic which whether English or Arabic should be the language of Instructure currently and the topic was more complicated than I first thought. It wasn't as a matter of preference, it was.

00:05:25 Speaker 2

Like you can't just uh, move students and make them learn in another language.

00:05:33 Speaker 2

That easily, it's it's a much difficult process. So I started reading research, reading opposite opinions, reading why they started teaching in English. I got the generally of other countries that try to enforce their cultures on Arabic countries, so that's why they pursued English. I got, you know, some Arabic countries.

00:05:53 Speaker 2

Seeing you know the global north, as you know the leader or authority. So that's why they teach in Arabic.

00:06:01 Speaker 2

I studied some financial reasons for it because like they don't have a lot of resources to translate all this material in English into Arabic immediately, so they just transitioned into English.

00:06:14 Speaker 2

So there were it was a very multifaceted phenomenon.

00:06:19 Speaker 2

So I.

00:06:21 Speaker 2

The research participated in a national scientific research competition at the school, and I won.

00:06:27 Speaker 2

First place.

00:06:29 Speaker 2

And you know from there, from there on, it's sparked, you know, this is the first spark in medical education and actually one of the most people that I I released still has time into this day is my professor.

00:06:42 Speaker 2

Who's who really helped me and, you know, guided me through the scientific research process.

00:06:48 Speaker 2

He studied. He studied prosthodontics at Newcastle University. He got a PhD there and he was really educated in terms of scientific research. But it's more of a scientific natural sciences research, more of a it's not much of a social sciences research aspect.

00:07:06 Speaker 2

But I learned nonetheless. I learned a lot of it. I learned a lot from him, and I learned as much as possible. He was truly uh, you know, helpful. Although you know, there's nothing much to have in helping a student doing independent research. Yeah. Or the university.

00:07:22 Speaker 2

It's our research is not funded. Usually it's student-led. Yeah. And they usually focus on getting credit to get to publish research. And so that when they travel, they can, you know, for example, get their get better opportunities, get a better edge.

00:07:40 Speaker 2

And after graduation, I, you know, I was really, uh, I decided that I want to go into medical education.

00:07:47 Speaker 2

I thought like my mission in life, there are there are a lot of dentists in this world, you know, there are a lot of great dentists and I I I honestly know it myself. I thought I can't compete with this you know with these good dentists. But but I could I could become a decent dentist but I think my fault in life would be medical education I think.

00:08:08 Speaker 2

This country leader really needs some bonds. Who can you know, draw a road map for this country to a better future? Because this is not how medical education should be.

00:08:20 Speaker 2

You know, I suffered a lot as a dental student, you know, because I knew how. How real education need to be. I saw that the wide discrepancy between how students are taught and how the ideal situation is. So there were a lot of, you know, treating students.

00:08:40 Speaker 2

As a workforce rather than, you know, trying to teach them while they learn patients sometimes get in the harm's way because of there is enough, not enough supervision.

00:08:51 Speaker 2

Assessment not being very honest, fair or, you know, really well designed. So these these things, you know, really made me boil inside, you know, this feeling that, you know, there's something, there's something someone needs to do something about this. But The thing is nobody can see it. That's the situation. Nobody can see that.

00:09:11 Speaker 2

Like, what's wrong with this and what the alternative needs to be so?

00:09:18 Speaker 2

I got myself into this and said like, OK, nobody's going to do it, you know, I'm going to put myself in this road and try to do as much as, as good as I can as best as I can. And I did a lot of research. I did research on learning environment. I did research on self-assessment because I did research on self-assessment.

00:09:38 Speaker 2

Assessment because a lot of the supervisors and teacher, we're just, we're just not interested in teaching. Of course there are exceptions, but because they are not very well paid, they are not very well compensated and they're not worth well taught in, you know, in teaching.

00:09:54 Speaker 2

The most of the most of the distinguished students usually come from those self driven students to make themselves better. And you know students amongst themselves, you know, second year students usually get help from 4th year students and you know, so on. So it's more of a collaborative process rather than, you know, there's a teacher and he he's there.

00:10:13 Speaker 2

To help me. So there the teacher was not usually there and he's usually away at his own hospital or clinic.

00:10:21 Speaker 2

So I started focusing on self-assessment and peer assessment, trying to make students maximise the use of these learning approaches.

00:10:32 Speaker 2

Uh, so that they can maximise their benefits of learning themselves because you know, there's no other way here, so you need to figure out how to improve yourself on your own. Well, at the same time, try to get as much help as possible from peers, from teachers available, you know, try to make do, let's say with what available resources.

00:10:54 Speaker 2

And I published multiple papers on it. I was, you know, every time because Syria is very isolated in nature. It's, you know, we have sanctions and everything. So there wasn't much communication with the, you know, outside world. But in research I find I found a way I found a way to connect with other experts who could really.

00:11:13 Speaker 2

You know, inform my research and the review was the review process. I didn't take it as a challenge or as an bureaucratic obstacle to get my research published. I saw it as an opportunity to learn.

00:11:23 Speaker 2

Yeah. Each time a researcher or a reviewer points out a certain gap. In my research, I usually OK, I'll acknowledge this. I will not try to cover it up. I'll acknowledge this. I'll see. I'll, I'll say what I did to avoid this, but next time in my next edition research, I'll try to avoid this. And I really started learning.

00:11:43 Speaker 2

Application or doing research became more about learning process each time I'm facing newer viewers, new challenges, learning more.

00:11:51 Speaker 2

Things this reviewer pointing me to this reference this reviewer pointing to that reference I'm reading this. I'm reading that so I I realised at certain point, yeah I think I you know I'm learning I'm learning from this process so I took advantage of this and I took.

00:12:08 Speaker 2

You know, advantage of my passion in this, you know, for medical education and I have applied for achieving scholars.

00:12:15 Speaker 2

It's, uh, one year, you know, offered by the UK Government of CDO to study one year masters in the UK. So uh and I knew that they are looking for people like me who has like passion for a certain cause, passion to develop their country, a passion to fix something in their country.

00:12:31 Speaker 2

So I've applied for it. It wasn't that easy thing. It's like I tried 3 \* 3 years. So uh, first time I wasn't shortlisted second time I was shortlisted and was put on the waiting list.

00:12:45 Speaker 2

Uh, third time I was shortlisted and chosen and that was, you know, but each time, you know, I'm learning even though you know, the last time I got 2 scholarship, two different scholarship, one in Germany and the other one is in the UK. So one, the one in Germany was two years and in university so and the other one was in Oxford University. So they were both great.

00:13:04 Speaker 2

Universities. But I made the hard choice and chose, you know, research medical education is is much more developed in the UK than it is in Germany. So I chose, you know, the UK as a destination because I wanted to mingle with other.

00:13:19 Speaker 2

Those enthusiasts in medical education and are really found, you know, a lot of people just like yourself.

00:13:25 Speaker 1

Yeah, that's what we meant. No, thank you so much for sharing. It's really interesting to me to see how well, besides your personal resilience and your persistence and commitment and, you know, applying, applying, applying again until you're successful. I think that's one big take.

00:13:42 Speaker 1

I think the other is that your sort of growth mindsets are being open to learning. I think often when it comes to publishing and peer review, it can be quite daunting and uncomfortable. And yet you've really embraced it and see it as sort of an iterative process and a learning process. I think that's another great takeaway and also your advocacy based on your personal.

00:14:02 Speaker 1

Experiences. You know, I think it can be.

00:14:04 Speaker 1

Very easy to become sort of burnt out or disillusioned, and you've sort of gone in the other direction with this passion and this desire to improve things in your home country. And I just want to flag that all the sort of research that Ghaith has mentioned it is, has been published and doing it to get you to look at those publications and.

00:14:24 Speaker 1

Just building on that.

00:14:27 Speaker 1

You've obviously described a very challenging context in Syria and you mentioned aims for the Association for Medical education in Syria. What is that organisation? Why have you started it? What are you hoping that it achieves?

00:14:41 Speaker 2

So thank you for your question. This is a very good question. I wanted to touch on that. So in Syria, there is no cultural medical education.

00:14:53 Speaker 2

There is no culture that our teaching needs to be grounded with some kind of rule or people, experts in this, our own mentality. It's an old fashioned mentality which is, you know, we get the best person in this field. For example, we get the first person in cardiothoracic surgery and we get him to be the.

00:15:14 Speaker 2

Head of the school or?

00:15:15 Speaker 2

You know, head of the school and he'll run things very well. We'll expect him to run things very well because he's very well, very good in his field.

00:15:23 Speaker 2

It turns out this is.

00:15:25 Speaker 2

This does not. This does not apply. This does not work. Him being a brilliant cardiothoracic surgeon does not translate into him being a great teacher or, uh, like being able to transfer this knowledge and experience and skills to other people. This this does not work at all. Some people you know.

00:15:46 Speaker 2

You know it has.

00:15:48 Speaker 2

They're not. They don't know the basic the principles and the way a dental school or a medical school should be run or should be grounded with the curriculum, the the assessment, the learning environment, the policies, even the policies at a very basic levels, the learning policies.

00:16:08 Speaker 2

Are actually working against the student and the patients at the same time. So the student finds himself in like what should I do if I need to pass the exam? I need to do like something not very related to what I'm actually going to practise and this is was really frustrating for so many people.

00:16:28 Speaker 2

I.

00:16:29 Speaker 2

So I decide I decided, like uh, there needs to be something need to need to be done about this and it needs to come from a person who does not have any. Let's say, uh, profit, let's say wants to just improve this, you know, uh sector or raise this culture not for personal gain or not for anything like this. So I started.

00:16:50 Speaker 2

Teams, which is a nonprofit non governmental organisation.

00:16:55 Speaker 2

Of course, we're hoping to work with the Ministry of Higher Education and other universities, medical school, dental, schools, pharmacies, schools, but you know, being independent, being non governmental, being nonprofit helps us say what we believe say criticised.

00:17:14 Speaker 2

Openly not being bound by certain policies or certain people that not allow, do not allow us to say what needs to be said in certain kind of contexts. So I decided you know this needs to be an independent Organism.

00:17:28 Speaker 2

We might not have. We might not have the ability to implement changes in ourselves, but we can definitely, definitely stir these these pools and the Community and the medical education sector in a certain way and build a culture, build a culture of awareness, build a culture of advocacy advocacy.

00:17:48 Speaker 2

That this field need to be run by those by specialised people who know what to do, who know how medical students need to be taught, or at least trying to do their.

00:17:59 Speaker 2

Best to learn.

00:18:00 Speaker 2

You can't just leave it in the hands of people who are great in their field. That's amazing. They could, with certain training, do teach, but you cannot have a medical school run by just assertion. This does not work. He needs to be educated on so many levels, policy level, education, education.

00:18:21 Speaker 2

Strategies assessment strategies. So many things and it need to be.

00:18:27 Speaker 2

Let's say non political, non political as this is not a place where you show prestige to yourself as the Dean of the school or the Chancellor of the University. This is a place where it needs to come from the heart that this society needs. Something needs someone to let's say.

00:18:47 Speaker 2

Push the wheel further for development.

00:18:50 Speaker 2

And this is what we were lacking in the assets regime that's, you know, everyone's appointed by political for political reasons and so on. You know, there are of course there are some exceptions, but usually and bath party usually appointed has the appointments in their hands and they usually appoint people are affiliated with the government that usually implements.

00:19:10 Speaker 2

Policies or decisions just for their own, you know, or to support their own agenda, not for, you know, the benefit of the school or something that this is this can be very dystopian, but unfortunately it's the truth.

00:19:26 Speaker 2

I don't mean I don't mean to adopt a pessimistic outlook, by the way.

00:19:31 Speaker 1

No, you're coming across very hopeful and positive and passionate. I think despite the challenges and what is your vision sort of for the future of medical education in Syria like what do you want to achieve and how do you think you can get there?

00:19:47 Speaker 2

What I honestly would like the medical schools or the educations, medical education sector in Syria to avoid now it's coming out of.

00:19:50

Yeah.

00:19:58 Speaker 2

Out of Assad's regime, out of dictatorship, I just don't want them to go blind and adopt certain curriculum in a global North school.

00:20:08 Speaker 2

I think this could be a big mistake and it and it's easy to fall for. It's easy to see like so many schools adopting very, you know, Western global north uh curriculums and policies.

00:20:22 Speaker 2

But The thing is, we need to come from as you once told me, we need to come from the principles we need to have certain values. We need to understand.

00:20:30 Speaker 2

The community need.

00:20:31 Speaker 2

We need to understand our students who are our students, who are our community, who are our patients, what's this? School is built for? What's the ultimate object?

00:20:41 Speaker 2

It's not just teaching students to be good doctors. It's teaching students to be to help patients. You know, being a good doctor does not always translate into great care. You know, you need to foster this drive in students to help their communities and.

00:21:01 Speaker 2

Be committed to uh, let's say a better health care, conscious self, morally conscious, self healthcare.

00:21:12 Speaker 2

So and from that we can build things from the ground up and maybe even from the top down, adopting things where they where we see it fits. But I think it should be built meticulously and it's going to take some time. But I think this is the right way to go instead of just.

00:21:32 Speaker 2

You know, having a planned ready. OK, let's go.

00:21:35 Speaker 2

Let's go for it.

00:21:36 Speaker 1

I agree. I agree. You've said a lot of valuable things today. Maybe just one or two sort of take home messages or lessons that you've learned or maybe advice to others, whether they're researchers or educators or, you know, the healthcare workers you're wanting to reach any sort of take home messages for them.

00:21:54 Speaker 2

OK, now being a medical education expert, researcher. Consultant.

00:21:59 Speaker 2

Or in this field.

00:22:00 Speaker 2

Maybe it doesn't. Have you know it does not bring the same.

00:22:05 Speaker 2

Monetary value as being a doctor, a dentist or, you know, being in the health profession. It's not a business. Neither medicine is a business neither, and neither is medical education.

00:22:18 Speaker 2

But it's really rewarding. It's going to be very, very rewarding when you see, when you see that, you know this student, these students that you've taught became doctors and now they're helping community, the hundreds and thousands and maybe hundreds of thousands of patients. And you had a part. You had a contribution.

00:22:36 Speaker 2

Yes.

00:22:38 Speaker 2

You would not. You would not be wealthy. You're not gonna. You're not gonna be wealthy, but you're gonna be, you know, morally satisfied. You're gonna be happy with what you achieved. And at this time, Syria needs these medical education experts more than ever. So if you if you're in Syria, if you're Syrian or somewhere.

00:22:58 Speaker 2

You can help yourself or maybe become a medical education expert yourself.

00:23:05 Speaker 2

Definitely recommend this pathway if you are passionate about it.

00:23:09 Speaker 1

And on that note, I'll leave it, I agree, Ghaith has sort of issued the call, so get in touch with him. I'll have his contact details in the show notes. I'll have a link to his publications and to aims. So I wish you all the best. And transforming medical education in Syria. Thank you.

00:23:25 Speaker 2

Thank you so much. Thank you so much.

00:23:32 Speaker 1

I am Danica Sims, your host and producer.

00:23:35 Speaker 1

Thank you for joining conversations in MedEd.

00:23:39 Speaker 1

Hit subscribe and leave a review.

00:23:41 Speaker 1

I'd love to hear from listeners. So if you have any comments or questions or recommended guests, please get in contact with me.

00:23:50 Speaker 1

Contact details can be found in the show notes.

00:24:06 Speaker 1

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00:24:18 Speaker 1

The University of Oxford offers a part-time 2 year Masters in medical education through the Department of Education and Partnership with the medical school.

00:24:29 Speaker 1

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00:24:45 Speaker 1

Show notes.