

“In Our Own Words”: Defining Medical Professionalism from a Latin American Perspective

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ABSTRACT

Background: Latin America has experienced a tremendous growth in a number of medical schools, and there are concerns about their quality of training in critical areas such as professionalism. Medical professionalism is a cultural construct. The aim of the study was to compare published definitions of medical professionalism from Latin American and non-Latin American regions and to design an original and culturally sound definition. **Methods:** A mixed methods approach was used with three phases. First, a systematic search and thematic analysis of the literature were conducted. Second, a Delphi methodology was used to design a local definition of medical professionalism. Third, we used a qualitative approach that combined focus groups and personal interviews with students and deans from four medical schools in Chile to understand various aspects of professionalism education. The data were analyzed using NVivo software. **Results:** A total of 115 nonrepeated articles were identified in the three databases searched. No original definitions of medical professionalism from Latin America were found. Twenty-six articles met at least one of the three decisional criteria defined and were fully reviewed. Three theoretical perspectives were identified: contractualism, personalism, and deontology. Attributes of medical professionalism were classified in five dimensions: personal, interpersonal, societal, formative, and practical. Participants of the Delphi panel, focus groups, and personal interviews included 36 medical students, 12 faculties, and four deans. They took a personalistic approach to design an original definition of medical professionalism and highlighted the relevance of respecting life, human dignity, and the virtue of prudence in medical practice. Students and scholars differed on the value given to empathy and compassion. **Discussion:** This study provides an original and culturally sound definition of medical professionalism that could be useful in Latin American medical schools. The methodology used in the study could be applied in other regions as a basis to develop culturally appropriate definitions of medical professionalism.

Keywords: Definition, Latin America, medical professionalism, mixed methods

Background

Medical education in Latin America has experienced tremendous growth in the past two decades. Countries such as Brazil, Ecuador, Colombia, and Chile have led this growth, experiencing a 3- to 5-fold increase in the number of medical schools. In 2015, there were 548 medical schools in Latin America, a number that was similar to the 541 schools reported

in Europe but much larger than the 193 institutions reported in Canada and the United States.^[1] The quality standards of these new institutions and specifically the development of medical professionalism during the formative process have been a matter of great concern for many academic leaders in the region.^[2-4]

Concerns on medical professionalism training in Latin America have grown due to a number of factors. First, evidence on the association between inappropriate behaviors at medical school and subsequent patient safety care problems and disciplinary actions against practicing physicians has been recognized.^[5-8] Second, there has been an increase in the

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