Experience of a New Kind: 
External Review of a Bioethics Centre

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Abstract

The first decade of doing bioethics through Pakistan’s Centre of Biomedical Ethics and Culture (CBEC) was an on-the-job learning experience with no similar centres in the region to show the way. Although periodic evaluations from faculty, students, alumni and others helped in developing the academic initiatives and research undertaken by the Centre, the risk of bias inherent in stakeholders’ opinions was always a possibility. The faculty therefore came to believe that an external review by a peer group would provide an impartial assessment of the Centre’s accomplishments and help identify future directions.

While external reviews of clinical departments of hospitals are routinely undertaken, no similar process for bioethics centres has been reported in the literature, necessitating the development of the entire review process de novo. Eight scholars from Pakistan and abroad, with relevant backgrounds, were invited to conduct the review over a four-day period. Their interactions included examining documents, attending academic sessions, and interviewing faculty,

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students and alumni. Their review report, while noting the academic and research achievements of the Centre in its first decade, also highlighted areas needing attention.

This paper shares with the international bioethics community the authors’ experience of organising an external review of a bioethics centre, and its short-term impact. Even though such reviews for bioethics centres are neither mandatory nor simple to conduct, an objective external assessment can prove invaluable for future planning. Based on this experience, the authors believe that other bioethics centres would also benefit from conducting this exercise.

Keywords: Bioethics Centre, independent peer assessed review, external review outcomes

Introduction

Bioethics made its appearance in Pakistan in the 1980s when it was informally introduced into the undergraduate curriculum of a private medical college in Karachi. It remained confined largely to this institution for the next 15 years, with occasional workshops and lectures in other institutions but no attempts to promote the subject in a formal, structured way, either by the government or by the private sector.

The decade of 2000 saw an increase in interest in ethics education within Pakistan. This change was partly spurred on by the requirements of ethical research and publication. Developments in international guidelines for research coincided with a growing awareness among scientists and researchers that publishing their work would require clearance from ethical review committees. This created the desire to learn about ethical guidelines and principles in research and other fields. Simultaneously, bioethics programmes were being increasingly offered in North American universities. In Pakistan, several individuals took advantage of the availability of one-year-long ethics programmes funded by the Fogarty International Centre of the National Institutes of Health, USA, which was supporting training programmes in USA, Canada, Australia and elsewhere. A handful of bioethics trained medical professionals became available in Pakistan and helped to popularise bioethics, leading to a demand for locally available bioethics education programmes. Simultaneously, there was the realisation that the relevance of bioethics education would depend on its ability to acknowledge the local realities that affect how people prioritise values and approach bioethical dilemmas and ethical decision-making.

The Centre of Biomedical Ethics and Culture (CBEC) was inaugurated against this backdrop in Karachi at the Sindh Institute of Urology and Transplantation (SIUT) in October 2004. SIUT is a public sector institution that provides free
healthcare services to people from across the country, irrespective of social status. This, together with its leadership role against unethical and exploitative organ trade in Pakistan, has established SIUT’s credentials as one of the most socially responsive healthcare institutions in Pakistan.

The primary objectives in establishing the Centre were: to create a resource in bioethics for Pakistan and the region; to enhance national capacity; to conduct socially and culturally relevant research; and to establish Pakistan’s presence and credentials within the international bioethics community.

CBEC’s two founding faculty had received their bioethics education in USA, where the discipline is consciously secular, individualistic and grounded in philosophy. Both realised the challenge in developing a bioethics centre in a Muslim majority country, where for many people religious and cultural values and duties to the family supersede the rights of individual members. Also, at the time, since no institution dedicated to bioethics existed in the region, the faculty knew that they would have to blaze their own trail. In the last decade, bioethics centres have emerged in some Asian countries, but within South Asia, CBEC is still the only centre dedicated to bioethics research and education.

In 2006, CBEC launched its flagship programme, a one-year Postgraduate Diploma (PGD) in Biomedical Ethics with the objective of introducing bioethics to healthcare professionals and developing bioethics knowledge and capacity in medical institutions. In 2010, the Centre added a two-year Master in Bioethics (MBE) programme for students drawn from different disciplines, including healthcare, social sciences and education. Run concurrently, the programmes are part-time, with on-campus modules and distance-learning components and have so far produced 66 graduates. Both programmes have generated interest outside Pakistan, particularly in Africa and South Asia, resulting in a number of foreign students being enrolled in them.

Decision for an External Review

Running CBEC’s academic programmes has been a learning process for the faculty, which has often had to create its own way forward. However, while setting one’s goals and standards can be convenient, there are inherent risks of complacency in the absence of an objective assessment of performance. While internal reflection and critique helped faculty learn from its experience, there was a realisation that internal assessments of the Centre’s progress may not be entirely unbiased. The Centre also benefited from feedback from guest faculty, visitors and well-wishers. However, such informal feedback and ‘evaluation’, while helpful and encouraging, did not provide a structured analysis of the wider
aspects of the Centre and its programmes. On the verge of completing its first ten years in 2014, CBEC faculty decided to seek a formal external assessment of its activities. A search for existing examples of such a process revealed that an external review of a bioethics centre was not reported in literature. However, both the founding faculty members of CBEC were familiar with such processes, given their medical background. External reviews for accreditation purposes are common in medical institutions and departments within institutions, through the Joint Commission, for example, in the USA, and through the Joint Commission International for institutions outside of the United States. Both bodies are involved in reviewing, evaluating and accrediting medical institutions.\textsuperscript{6,7} Also, Institutional Review Boards are often required to have accreditation and their members need to show evidence of some structured training to be part of the review process.\textsuperscript{8} There is less regulation on membership of ethics consultation service, but currently, there is some debate on the need for instituting guidelines for membership in ethics committees as well.\textsuperscript{9,10} However, the programmes and centres providing training and education to these bioethicists have traditionally required no such evaluation themselves, and rely only on self-critique for finding direction. Consequently, the faculty would have to create its own template for the process.

It was decided that the objectives of a structured, formal evaluation of CBEC by external reviewers would include an independent evaluation of the Centre’s academic programmes, assessment of their impact, identifying deficiencies and determining potential challenges to the Centre’s continued progress. Faculty also hoped that reviewers would suggest future directions for CBEC to consider. The SIUT Director endorsed the objectives of an external review by relevant, independent assessors.

**Selection of Reviewers**

The first challenge in initiating the review was to identify individuals with a suitable background and experience, who would be willing to commit the time and dedication necessary for the review. The eight individuals approved by the SIUT Director came from diverse backgrounds, including postgraduate training, public health, sociological research, medical education and heading a bioethics centre. All accepted the invitation of the SIUT Director, and the external review committee was formed in April 2014.\textsuperscript{11}

In addition, three bioethics-related scholars from the USA with close involvement in the evolution of CBEC and its activities, were also invited to submit their comments and recommendations. They included a medical sociologist, a
medical historian and a bioethicist-lawyer, the latter also having had the experience of teaching CBEC students.\textsuperscript{12}

**Process of Review**

The review, which took place from 7–10 May 2014, was timed to overlap with an ongoing teaching module, enabling the reviewers to meet students and observe classes. A conference room, together with Wi-Fi and computer facilities, was provided to the reviewers in the Medical Education Department of SIUT.

To help reviewers, a ten-year report prepared by CBEC faculty analysing the Centre’s activities and progress had been made available to them a month prior to the review. It described in detail the Centre and its faculty, its academic programmes and the output of the Centre. This document also reflected the faculty’s self-assessment of the Centre’s strengths and the challenges faced both in running current activities, as well as in planning future expansions.

The review process began with a presentation by CBEC faculty of the Centre’s activities over the ten years. Following this, the reviewers held several interviews and group interactions to gain deeper insight into the Centre and its programmes. The initial round of interviews included the SIUT Director, the CBEC Chairperson and the Centre’s Coordinator and subsequently other CBEC faculty members. Separate group discussions took place with current PGD students and with Karachi-based CBEC alumni. Reviewers also interacted with several out-of-town alumni, including one from Nairobi, Kenya, through Skype. Over four days, the reviewers spoke to 30 people either collectively or individually. All interviews were conducted in the absence of any CBEC faculty. The multilayered, multilevelled approach enabled reviewers to gain firsthand information and arrive at unbiased observations regarding the Centre and its activities.

Additionally, the reviewers had access to information on the CBEC website and were also provided additional documents, data and information they requested. CBEC faculty interacted with the team when invited for interviews. Table 1 shows the sequencing of interactions during the review period.

The team held several meetings while in Karachi, and their consultations with each other continued via email for several weeks after the review until their final report was generated. For the sake of convenience, the team had assigned different aspects of the review to different team members, which were later collated. This final report consisting of findings and recommendations of the review team was submitted to the SIUT Director in June 2014. The report led to several discussions by CBEC faculty about the reviewers’ recommendations and ways that these could be incorporated into the Centre’s activities.
Report Findings

The reviewers assessed CBEC’s decade-long achievements, highlighting areas that the review team found effective and others that needed attention. It also provided recommendations to help the Centre identify future directions and achieve its goals.

Impact: The reviewers believed that CBEC had managed to make an impact by developing bioethics capacity in Pakistan through its academic programmes.
and participation in bioethics activities at both national and international levels. Moreover, the Centre had attained recognition internationally in the space of a decade through faculty's participation in bioethics events and their membership in various international bioethics committees and associations. In their opinion, the Centre had managed to make a national impact through bioethics-related activities in the country and involvement in national organisations such as Pakistan's National Bioethics Committee (NBC). Two CBEC faculty members are part of the NBC and its two main subcommittees looking after research and healthcare ethics.

CBEC's academic programmes were assessed as having maintained a high academic standard, comparable to any other world-class programme. The reviewers believed that through its year-long Postgraduate Diploma in Bioethics (PGD) and two-year Master in Bioethics (MBE), CBEC had been successful in creating the future leadership of bioethics in the country and that this core group had the capacity to disseminate bioethics knowledge further and engage in culturally relevant research.

**CBEC alumni:** The review team noted that a majority of CBEC alumni continued to use their bioethics skills and knowledge in their parent institutions, sometimes with the involvement of CBEC faculty. They were particularly impressed at the level of follow-up and continuous mentoring that faculty provided to the graduates, which ensured their continuing commitment to bioethics and a productive alumni network. Interacting directly with alumni and students during the on-site review, the review team concluded that CBEC's programmes were viewed as “transformative” by many of them because they had made an impact not only on students’ knowledge, but on their ability to reflect and think critically.

**Focus on culture and religion:** Among the areas that the reviewers found most striking was the Centre's focus on the relevance of culture and religion to ethics education. Referring to the PGD and MBE programmes, the report noted that “constant attention within the educational programmes to the religious and moral bases of ethical behavior” gave local and cultural relevance to bioethics teaching. The word ‘culture’ was included in the Centre's name to reflect this reality because a bioethics that did not recognise the importance of religion and culture in the region would remain foreign and largely irrelevant to people's daily existence. The report concluded that CBEC “takes the ‘culture’ aspect of the Centre's title seriously, with a clear and critical survey of the influence of religion and also (gives) attention to the importance of the Humanities in ethics.”
Output: The reviewers assessed the practical output and research contributions of CBEC, including publications from the faculty and alumni. They found the publications were of “high quality”, with many appearing in regional journals of repute and contributing to the Centre’s impact internationally, while some were published in national journals.

An important contribution of the Centre was judged to be the short bioethics videos produced by CBEC and made freely accessible online. The films were described as excellent tools for disseminating bioethics knowledge and initiating discussion on healthcare scenarios that are contextually relevant to the region. As these videos are also being used for teaching purposes by ethics programmes in other countries, the team encouraged the Centre to continue these productions and disseminate them widely.

The Centre’s biannual newsletter Bioethics Links was considered effective in increasing visibility for the Centre. The newsletter is disseminated in an electronic format and is also printed and mailed widely. In addition to carrying articles from internationally known scholars, the newsletter also provides space for alumni to contribute articles and narratives of ethical challenges they have faced in their life and work.

Challenges and Recommendations

In addition to discussing the Centre’s strengths, the evaluation report also identified several areas needing attention and provided appropriate recommendations.

Academic programmes: The selection process for the PGD and MBE programmes was found to be rigorous with a good gender balance. However, it was noted that the programmes were almost entirely populated by health professionals, which was limiting the Centre’s sphere of influence primarily to the field of healthcare. To encourage diversity, the recommendation was to attract applicants from non-medical disciplines including philosophy, anthropology, social science, education and law. The reviewers also suggested increasing the number of foreign students.

Regarding the MBE selection process, the report indicated that perhaps the bar was set too high for selection, resulting in the exclusion of potentially good candidates. Describing CBEC’s MBE as a particularly challenging and academically rigorous programme, the reviewers were of the opinion that the one year allocated for completing the Master’s thesis may be insufficient, as all students are professionals with full-time jobs. To lessen the burden on MBE students, they suggested increasing the deadline for the thesis submission from
one to two years. While analysing the structure of the PGD and MBE pro-
grammes, it was also suggested that the credits of the PGD programme should
accrue towards an MBE degree so that students with a PGD enjoy tangible
benefit from their diploma, were they to go into the MBE track at some stage.

Another criticism of the academic programmes was that the duration of
teaching periods was long and the teaching quite intensive. Furthermore, the
heavy reading requirements for both the PGD and MBE were felt to be dif-
ficult for many students to fulfill. It was recommended that some readings be
substituted with other adult learning strategies such as videos.

While noting the thoroughness and usefulness of individual and collective
feedback that students gave to the faculty, the report also advised adding a
formal, written and anonymous mechanism whereby students could evaluate
faculty teaching in the programmes. It was believed that such a mechanism
would give greater objectivity to the evaluation process.

Research: The evaluation report indicated that although important research con-
tributions had been made by the faculty and its alumni, this was an area which
needed to be formally developed. The Centre was currently working without
a defined research agenda. Additionally, it lacked clear research structure, with
no trained researcher or biostatistician on board who could facilitate research.
The review team strongly stressed the need for developing a formal research
programme and engaging appropriately trained research faculty and staff to
facilitate it. They believed that this would give direction to research activities
and contribute towards more meaningful outcomes.

Collaborations and linkages: Even though CBEC is well known across the
international bioethics community, the Centre had made no efforts towards
establishing formal collaborations with reputed foreign entities. The report
specifically recommended efforts to attain the status of a WHO Collaborative
Centre for Bioethics and also to engage with other international agencies
in formal collaborations, not only for obtaining research grants but also for
developing and supporting academic programmes. It was believed that such
linkages would consolidate CBEC’s international standing and recognition.

The report also encouraged CBEC to reach out and engage national-level
organisations such as the Pakistan Medical and Dental Council, which regulates
medical and dental education, the College of Physicians and Surgeons of
Pakistan, responsible for regulating postgraduate specialisation in medicine, and
the Higher Education Commission, which is responsible for accreditation of all
higher-learning institutions in the country. Admitting that this was a “Herculean”
task, it was nevertheless considered essential to engage these agencies in order to move bioethics into the mainstream in medical education and research in Pakistan. With the standing that CBEC enjoyed at the national level, the reviewers considered that the Centre was up to this challenge.

**Staffing:** The report expressed concern at the limited number of faculty and staff engaged in different capacities at the Centre. Stating their concern that CBEC’s faculty could become “a victim of their own success”, the review team noted that although CBEC had made an impact on the national and international levels with a very small number of faculty, it would be difficult to maintain this level of commitment, let alone grow, without expanding the team. They identified that the core faculty of three individuals were involved in an immense amount of administrative, teaching and training activities with varying amounts of support provided by a few part-time faculty members. This makes it difficult to set research priorities and in the reviewers’ opinion, also carries the possibility of “burn out”. One of the most emphatic recommendations made in their evaluation report was to increase the staffing of the Centre. They thought that this was essential in order to sustain the Centre’s progress and ensure its growth in future, while maintaining the high standards already in place.

Recognising the fact that bioethics provided no employment opportunities in Pakistan, the report recommended developing career structures for younger faculty, in order to avoid disillusionment. It also suggested sabbatical periods for senior faculty members to prevent stagnation and provide opportunities for further growth in emerging areas of bioethics. Another recommendation was to diversify the CBEC faculty by including non-medical people, including social scientists. This was felt to be important in view of the richness of social science content included in the curriculum.

Noting that in the small core faculty everyone was doing everything, the evaluation report also recommended defining formal job descriptions and service structures for the staff and faculty.

**Short-Term Impact**

Within a year of being reviewed, some of the recommendations of the review committee have been put into place. One prominent area has been that of staffing. The faculty had long felt the need for expansion in human resource. This awareness gained credence following the review report and resulted in the addition of new staff at CBEC. Spurred on by the reviewers’ recommendations for formalising research, the Centre has set up a research unit. In line with
the report recommendations, a researcher with a social science background has been taken on board as the first step toward setting research priorities and streamlining the research process. Another secretary has joined the CBEC office as well, freeing up faculty from some of the routine tasks they were engaged in and creating space for academic and research work. The Centre has also taken some steps to formalise the work structure of faculty and staff by drawing up annual work plans through mutual discussion. Based on the findings of the report, the SIUT administration has also assigned a larger space to house CBEC in a new building, under construction, which will provide more office and teaching space to the Centre.

The review team wanted to see an increasing involvement of CBEC in bioethics organisations. Over the last year, five CBEC alumni have joined as members of the NBC, whereas four alumni are members of three Provincial Ethics Committees (PBC) of Pakistan, reflecting the increasing involvement of alumni in bioethics at the national level.

Conclusion

In the first ten years of its existence, CBEC followed a path of self-assessment to modulate its growth. However, on the verge of completing its first decade, the faculty believed that it was time for the Centre to undergo an external evaluation. Based on the experience of this review, the authors believe that the exercise was beneficial and educative because it provided an objective assessment of the Centre’s progress and gave recommendations for future growth. The benefits of the exercise became apparent to faculty even before the actual review took place as it initiated an internal dialogue among the faculty about CBEC’s current status and future directions, leading to the compilation of a comprehensive internal report that was submitted to the review team. The process for putting together this ‘ten-year report’ entailed three months of introspection and a great deal of analysis of CBEC’s ways of working and the sphere of its activities. Forced to step back and look critically at the Centre’s activities, faculty gained a better understanding of areas where previously they could not see the wood for the trees. For example, faculty members were aware that the Centre’s workload had been progressively increasing over the years and they were short-staffed. Nonetheless, the existing faculty and staff had simply taken on more and more work and had not pursued the matter of expansion with any seriousness till their own analysis and the review team’s strong recommendation brought the issue to the fore. Similarly, there was awareness that research activities needed to be developed. However, caught in a whirlpool of relentless
teaching and administrative responsibilities, the faculty found it difficult to pursue research projects or develop a definite research agenda for the Centre. The process of self-examination and the review team’s suggestions for strengthening the area of research gave clarity to their hitherto nebulous ideas.

The decision to undergo an external review was a challenge, both for the Centre as well as for the reviewers. The cost of flying in reviewers from abroad for an exercise that was not being practised elsewhere by other centres had to be justified to the Director. Fortunately, he was open to the challenge of a neutral evaluation and agreed to the Centre undertaking this external assessment. Another challenge was related to the review process. Since an external review of this nature had no precedence, even for the reviewers, the entire process had to be created from scratch. Consequently, the review team also gained invaluable experience.

The review required significant commitment in the form of financial costs, intellectual effort and organisational challenges, along with a substantial commitment from the reviewers. However, having gone through the review, CBEC faculty believes that it was ultimately worthwhile, and is an important exercise for other centres to undertake. Within the first year of the external evaluation, CBEC has already experienced benefits emerging from this exercise. In addition to giving credibility to the work that is being done at CBEC and affirming the impact that the Centre had made on both national and international levels, several administrative, research and academic changes have been put in place, based on the reviewers’ recommendations.

Bioethics centres seeking a critical review of their ways of working can follow, borrow and adapt the review process created by CBEC. It is hoped that the Centre’s experience will facilitate the process for those who choose to follow the same course.

Notes
3. An Internet search led to the following names of centres/institutes of bioethics in Asia: Center for Applied Ethics, Hong Kong Baptist University; Center for Medical Ethics and Professionalism, Singapore Medical Association; National University of Singapore Centre for Biomedical Ethics; The Chinese University of Hong Kong Centre for Bioethics; The Center for Bioethics and Medical Humanities at Gadjah Mada University Indonesia;
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11. List of reviewers and affiliations:

    1. Dr Alastair Campbell, Professor and Director, Centre for Biomedical Ethics, National University of Singapore, Singapore.
    2. Dr Richard Cash, Harvard School of Public Health and Visiting Professor, Public Health, Public Health Foundation of India.
    3. Dr Amar Jesani, human rights activist and Editor, Indian Journal of Medical Ethics, India.
    4. Dr Mala Ramanathan, anthropologist and researcher, Sree Chitra Tirunal Institute for Medical Sciences and Technology, India.
    5. Dr Aasim Ahmad, Chairperson, Bioethics Group, Aga Khan University, Karachi, Pakistan.
    6. Dr Tasleem Akhtar, Prof. Emeritus, Supervisor Master in Health Research Programme, Khyber Medical University, Peshawar. Senior Technical Advisor, Nur Centre for Research and Policy, Lahore.
    7. Dr Rizwan Azami, Vice-President, College of Physicians and Surgeons Pakistan, Associate Professor General Surgery, Aga Khan University, Karachi.
    8. Dr Asma Fozia Qureshi, Coordinator and Internal Reviewer, Chairperson, Department of Medical Education, SIUT.

12. List of external evaluators:

    1. Dr Paul A Lombardo, PhD, JD. Ethicist and Bobby Lee Cook Professor of Law, Center for Law, Health and Society, College of Law, Georgia State University, Atlanta.
    2. Dr Renee Fox, medical sociologist. Annenberg Professor Emerita of the Social Sciences, Department of Sociology, University of Pennsylvania.
    3. Dr Judith P Swazey, PhD, Ethicist and historian. Adjunct Professor, Boston University Schools of Medicine and Public Health, Boston, MA.

13. The review team’s assessment of the MBE echoed ongoing discussions among CBEC faculty about MBE admission requirements. Some of the faculty believed that the rigorous
standard of the MBE with its requirement of qualitative research, and the high level of English comprehension and writing ability required for the programme disqualified some otherwise promising applicants. Other faculty members were reluctant to modify the standard of a programme which, according to the review report, is comparable to world-class programmes, even though it meant having a limited number of applicants being able to “clear the bar”.