



Editorial

Current Status and Future of Undergraduate Medical Education in Libya

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Medical education in Libya has a long and complex trajectory, reflecting both the country's aspirations for modern health care and the persistent challenges of political instability, resource limitations, and global integration (1). The first medical faculties in Benghazi and Tripoli were established in the early 1970s, modeled on international curricula and taught in English, with foreign professors forming the backbone of the teaching staff. These institutions produced generations of physicians who served nationally and abroad. Yet, over time, the system has struggled to adapt to contemporary demands, with outdated curricula, insufficient infrastructure, and shortages of qualified faculty undermining its capacity to deliver high-quality medical training (1,2).

The current state of medical education in Libya is characterized by fragmentation and uneven quality. Several studies have highlighted that Libyan medical schools fail to meet a significant proportion of international accreditation standards (3). This gap has serious implications for the credibility of Libyan medical degrees, the mobility of graduates, and the ability of the health system to respond to national needs. Moreover, the reliance on traditional didactic teaching methods, limited exposure to clinical practice, and inadequate integration of modern educational technologies further exacerbate these shortcomings (4). Continuing medical education (CME) has emerged as a vital mechanism to address these deficiencies. Institutions such as Sebha University have established CME units with the mission of promoting lifelong learning, modern teaching methods, and faculty development. These initiatives aim to maintain physicians' competencies, introduce new technologies, and foster active learning approaches (5). However, CME in Libya remains underdeveloped, with limited national frameworks, inconsistent implementation, and barriers posed by political instability and resource scarcity. The absence of a coordinated national CME policy has hindered the ability to institutionalize lifelong learning across the medical profession (6). The adoption of international accreditation standards, particularly those set by the WFME, has become a

strategic priority. Libyan scholars and policymakers have emphasized the importance of aligning medical education with WFME criteria to ensure international recognition and credibility (7). In February 2024, the National Center for Quality Assurance and Accreditation of Educational and Training Institutions (NCQAAETI) achieved WFME Recognition Status for ten years, marking a historic milestone for the country (8). This recognition not only enhances the credibility of Libyan medical schools but also facilitates international mobility for graduates, particularly in regions where WFME accreditation is a prerequisite for postgraduate training or licensure.

Despite this achievement, the path forward remains challenging. WFME recognition provides a framework, but its successful implementation requires sustained investment in faculty development, infrastructure modernization, and curricular reform. It also demands political commitment to transparency and accountability in higher education governance. Without these measures, WFME recognition risks becoming symbolic rather than transformative. Furthermore, CME must be integrated into national health policy to ensure that physicians remain competent in the face of rapidly evolving medical knowledge and technologies (9,10).

In conclusion, medical education in Libya reflects both resilience and fragility. The legacy of strong foundations contrasts sharply with systemic gaps in quality and accreditation. CME initiatives demonstrate promise but require national coordination and sustained investment. The WFME recognition of NCQAAETI offers a historic opportunity to rebuild trust and modernize curricula, yet its success will depend on faculty development, infrastructure enhancement, and political commitment. If pursued with urgency and transparency, Libya's medical education system can reclaim its regional leadership role and align with global standards.

Conflict of interest. Nil



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