Figure 1: Program logic model for socially-accountable health professional education (SAHPE)

Theory of change for how socially accountable health professional education (SAHPE) institutions collaborating under THEnet contribute to health equity

Faculty has a process for critical reflection on the curriculum based on periodic assessment of, and accountability towards, the needs of its students and reference population (local communities and health systems)

SAHPE philosophy of THEnet

School's mission. values, governance and strategies are needs-based: centered on addressing health issues and social determinants of health among target populations, strengthening local health systems, and reducing health inequities

School has a participatory approach: governance and strategies are planned with meaningful input from all relevant stakeholders. particularly local government and communities, with a primary focus on the priority health and social needs of local communities

SAHPE activities **Faculty** Includes representatives from the geographic/cultural profile of the reference population Community-based practitioners are recruited and trained as student preceptors Staff development programs responsive to community needs Learners Taught the principles of socially accountable medical practice Targeted recruitment policy to actively encourage & support culturally, socially or geographically disadvantaged students Curriculum • Curriculum tailored to priority local community needs • Local government has input into the School's curriculum content and teaching activities • Integrates basic & clinical sciences with principles of population health and social sciences Pedagogy • Student-centered and problem-based pedagogic methods • Service-based learning occurs as a shared responsibility between the medical school, community and the local health system • Students trained to recognize and take action on health disparities Research • Reflects priority community health issues and the health of underserved groups • Has a focus on participatory methodologies & research partnerships with local communities **Community service** • The School engages and supports community and community health service providers in a manner which strengthens local health services and promotes the aspirations of community members • The School plays a role in advocacy and policy reform • The School gives community a voice on health service reform

SAHPE outcomes

Transformed graduates

- New SAHPE graduates have positive intentions for community-based service, and to address local health inequities
- Registered Graduates engage in client advocacy & broader health reform
- New SAHPE graduates have the appropriate clinical, social and cultural competencies to address priority health needs
- Registered SAHPE graduates adopt professional behaviors and choose their career and geographic practice location to address local health workforce needs

Health service support

SAHPE Faculty staff and students contribute to health service delivery in reference area

Health policy & practice

 Faculty staff have meaningful input into the development of regional health policies and health services

Regional impacts

'Fit-for-purpose' medical workforce

- Little or no geographic areas of health workforce shortage
- Culturally competent health service delivery that is cognizant of the social determinants of health
- All cultural and social groups in reference area have access to health services
- Responsive in addressing health inequities in the reference population

Long-term goals

and improved health outcomes*

Priority health needs are addressed in reference area

Continuous reduction in systemic, socially produced or preventable differences in the health of reference populations

Transformed communities

- Engagement by SAHPE students, graduates and staff strengthens the social fabric of local communities
- Community is an active partner in research and interventions to improve the health & well-being of its citizens

*While recognizing that health is determined by more than access to health services and a responsive health system, we believe both factors can make a significant contribution to population health and health equity.