ORIGINAL RESEARCH

Medical Education: Views and Suggestions by Final and Prefinal Year MBBS Students at IMS, BHU

Uma Pandey¹, GyanPrakash Singh²

ABSTRACT

Introduction: Medical curriculum needs constant evaluation and necessary changes; usually this is done by experts in the field of medical education. But, medical education is meant for medical students. So, therefore we decided to do this questionnaire survey of our medical students. Objective of the study was to find out how good is the teaching/training in the IMS, BHU and also to find out whether students would like to give feedback and would it be useful in their future teaching and learning?

Material and Method: Questionnaire survey was done among the final and prefinal year students. Total of 98 questionnaires were collected. SPSS was used to calculate the data.

Results: Questionnaires were returned from 98 students (61 final year medical students, 37 pre-final year medical students) of the IMS. All the students were in age group of 20-27 years. 16% of students knew that IMS has Mentors and 22% knew their exact role. Students were largely influenced by their teachers; they feel they are their role models. Three students candidly wrote that they would like to become like this professor (wrote name of a particular professor). 38% wanted to become medical teachers.

Conclusion: This study shows that students still prefer chalk board teaching with occasional use of power point. They are also aware of innovative methods of teaching and learning and would like them to be used in the IMS, BHU. Feedback of teachers was felt to be most important by students and we should start it by open and closed method.

Keywords: Medical Education, teaching learning methods, students feedback, innovative methods

How to cite this article: Uma Pandey, GyanPrakash Singh. Medical education: views and suggestions by final and prefinal year MBBS students at IMS, BHU. International Journal of Contemporary Medical Research 2015;2(5):1211-1214.

¹Associate Professor, Department of Obstetrics & Gynaecology, ²Professor, Department of Community Medicine, Institute of Medical Sciences, Banaras Hindu University, Varanasi, UP, India

Corresponding author: Dr Uma Pandey, Associate Professor, Department of Obstetrics & Gynaecology, Institute of Medical Sciences, Banaras Hindu University, Varanasi, UP, India

Source of Support: Nil

Conflict of Interest: None

INTRODUCTION

Education in any field is a very powerful tool to make knowledgeable society, it more so applies in medical field where education and constant reinforcement is of utmost importance. Teaching learning methods are important determinants of quality of medical education in any teaching institution. How the teaching learning method in an institution is best assessed by its students. There has been more emphasis now a day to change from teacher centred teaching and learning to student centred teaching and learning.

Students have different needs and different learning capacity. The learning should also be directed towards different domains: cognitive, psychomotor and affective. Students are different as per their age, place, level of preparedness, socioeconomic status, medium of schooling and attitude towards leaning is concerned.² There are various ways and methods of teaching and learning eg lectures, case studies, problem based learning and various others. But the question remains, whether students like these methods, do they improve their learning? Lesson planning is a new concept but to be taken seriously in Medical education. We need more emphasis on this.³ Intention of this study was to have feedback from our Medical students regarding Medical teaching in the IMS and to incorporate the learning points and suggestion given by Medical students into our teaching, if possible.

Aims and objectives of the study were to find that - Are teachers friendly and cooperative?, To find out about skill training in the present institution, to find out whether power point or chalk board is more preferable and would they like to give feedback to the teachers regarding their teaching?

MATERIAL AND METHOD

The study was carried out on 98 students(61 final year medical students, 37 pre-final year medical students) of the Institutes of Medical Sciences (IMS), Banaras Hindu University, Varanasi in the month of May 2015.

Final and prefinal year medical students were included as they would have experienced different types of teaching and learning. It was also felt appropriate as these students would have passed professional exams and experienced marks and grades.

The reason regarding the questionnaire survey was explained to them beforehand. It was distributed to them after the class.

Students were told that whatever information they will give will be only used for research and evaluation of medical education in the Institutes of Medical Sciences, Banaras Hindu University. The information provided by them will be kept confidential. It will not affect students in any manner; therefore they should write freely and fearlessly. The questionnaire did not ask their name therefore the anonymity was maintained.

RESULTS

Questionnaires were returned from 98 students (61 final year medical students, 37 pre-final year medical students) of the Institutes of Medical Sciences, Banaras Hindu University, Varanasi.Data was collected on Microsoft Excel and statistical calculation was done in the department of Community Medicine, Institute of Medical Sciences, Banaras Hindu University. The data was presented in percentage, table and chart form.

All the students were in age group of 20-27 years. There were 23% per cent female students and 39% male students in the final year and 20% female and 18% male students in the prefinal year out of total 98 medical students (Figure 1). Students were asked whether teachers were friendly and approachable. 35% of students 'agreed' and 11% 'strongly agreed' to it. Students were asked 'how is the skill training on the wards? 47 % felt it to be good to very good (Figure 2). Students were asked to choose between chalk board and power point presentation. Students felt that chalk board gives time to understand, but power point is faster. 60% had preference for chalk &board, 11% for power point and 29% wanted both chalk board and power point to be used (Figure 3). Students were asked whetherthey have been asked to give feedback to their teachers, 39 % said yes. They were also asked whether they would like to give it more frequently, to which half (50%) of them replied yes as they felt feedback will improve education so should be in day today practice. Students were also asked whether they would like to follow steps of their teachers to which three students wrote that they would like to become medical professors. In our study 44% students felt that teaching in the IMS is interactive but they wanted Problem Based Learning and Integrated teaching to be more involved in Undergraduate medical education. 68% of the students felt that hands on training are very good in our institute (Figure 4).

16% of students knew that IMS has Mentors and 22% knew their exact role. Students were largely influenced by their teachers; they feel they are their role models. Three students candidly wrote that they would like to become like this professor (wrote name of a particular professor). 38% wanted to become medical teachers.

DISCUSSION

Research shows that in a didactic lecture (what we do nor-

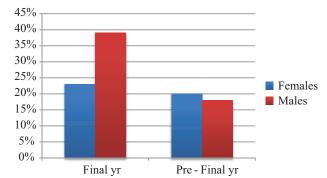


Figure-1: Percentage of students

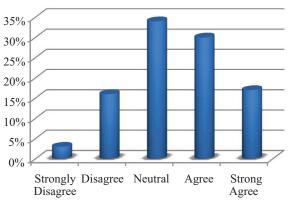


Figure-2: Skill training on the ward

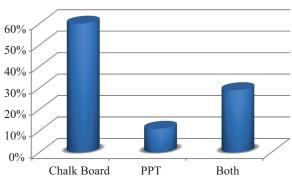


Figure-3: PPT or Chalk board

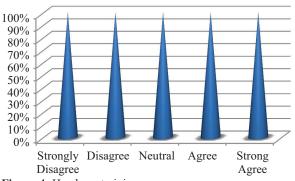


Figure-4: Hands on training

mally) only 50% of audience remains attentive after first 10 minutes and only 10% of them can retain 50% of the teaching content provided!⁴ It is therefore quite relevant that teaching and learning process is continuously evolving. The best way to do will be to involve all stakeholders in to it and

that includes students as they are the learners.

Medical teaching/education is little different from other subjects as it requires more support from their teachers. It needs both theory and practical teaching to a great extent. Therefore students' views and suggestions are essential.⁵

68% of the students felt that hands on trainings are very good in our institute. In our study 44% students felt that teaching in the IMS is interactive but they wanted Problem Based Learning and Integrated teaching to be more involved in Undergraduate medical education. This is similar to study other studies.6 16% of students knew that IMS has Mentors and 22% knew their exact role. Students were largely influenced by their teachers; they feel they are their role models. Three students candidly wrote that they would like to become like this professor (wrote name of a particular professor). 60% had preference for chalk & board, 11% for power point and 29% wanted both chalk board and power point to be used. This was also found in other studies done in the field of medical education.7

Feedback regarding medical education of medical studentsfrom many Madhya Pradesh Medical colleges was done in 1987 and results were nearly similar to our study.8

- Students felt there is lack of interdepartmental coordination. There are very few tutorials, seminars or discussions.
- Ill equipped lecture halls and overcrowding in the class rooms leads to monotony, boredom and mischief or ab-
- 3. Lack of stress on clinical approach. Clinical experience is delayed, so they are not able to clinically orient their knowledge acquired in the first year.
- There should be more frequent guest lectures and classes by visiting faculty to make students aware of the current medical standards in the country.

Suggestions

Students were also asked to give suggestions. They are as follows:

- They suggested thatteaching should be more interactive.
- They also suggested to do Problem based learning and integrated teaching in more departments.
- Essentials to be trained more: Emergency Medicine, Anaesthesia, Critical care and Obstetrics.
- Monthly tests to be held like Anatomy. More Objective and MCOs than long essay type questions. Picture based questions (like ECG, in dermatology).

Limitation of the study

It is a small sample study from a single institute; therefore it can give biased result. To overcome that multicentre studies with larger sample size should be done with same objectives and goals.

CONCLUSIONS

This study shows that students still prefer chalk board teach-

ing with occasional use of power point. They are also aware of innovative methods of teaching/learning/assessments (Problem Based Learning/Task based Learning/Objective Structured Clinical Examinations) and would like them to be used in the IMS, BHU more frequently. Feedback of teachers was felt to be most important by students and we should start it by open and closed method and make it a routine thing. Overall students felt to be satisfied with the teaching and training in the IMS, BHU but they would like new technologies and assessment methods to be used.

From this study we infer that students are interested in active learning and we have taken the suggestions on board and will be implementing them as soon as possible.

ACKNOWLEDGMENTS

The statistical help of Prof G P Singh, Department of Community Medicine, Institute of Medical Sciences, Banaras Hindu University, Varanasi is gratefully acknowledged.

Ethical approval

The study was approved by the institutional ethics committee

REFERENCES

- Nanda B, Manjunatha S. Indian medical students' perspectives of problem-based learning experiences in undergraduate curriculum: One size does not fit all. Jr Educ Eval Health Prof 2013;31:10-11.
- Gade S, Chari S, Dasgupta S. Perception of the medical students of a private medical college on their future career. Indian Jr of Applied Research, 2013;3:1-4.
- Patil U, Vaidya S, Jore S, Parekh M. Patwardhan study of students' feedback on present teaching and learning patterns. Int Jr of Recent Trends in Sci& Tech 2012;4:34-35.
- 4. Group dynamics. RTC manual 2013 pg 9.
- Khane RS, Joshi AA. A questionnaire based survey from first year MBBS students about teaching learning methods of physiology in private medical college. Indian Journal of Research Feb 2014;3: 223-225.
- Nahar P, Shah S, Vaidya S. Students assessment of 1st MBBS curriculum in relation to duration, teaching learning methodologies and evaluation techniques NJIRM 2012;3:128-133.
- Mohan L, Ravi Shanker P, Kamath A, Manish MS, Eesha BR. Students attitudes towards the use of audio visual aids during didactic lectures in pharmacology. Jr of Clinical and Diagnostic Research 2010; 4:3363-8.
- Bose S. Students' perspectives on Medical Education: a report. Bulletin of NTTC. 1998; 5:3-5.

FEEDBACK FORM

1.	Which year Medical student or Intern you are:	17.	Heard about Problem Based Learning
			Yes, please explain
2.	What is your age?		No
3	Female/Male, please encircle.	18.	Heard about Task based learning?
			Yes, please explain
4.	How do you find teaching in the IMS (Please score)		No
4.		19.	Heard about Integrated teaching?
	1 2 3 4 5		Yes, please explain
5.	Are the teachers friendly and approachable? (Please score)	20	No Heard about Objective structured clinical examination
	1 2 3 4 5	20.	20. Heard about Objective structured clinical examination (OSCE)?
6.	Do you actively involve yourself in class? (please score)		Yes, please explain
0.	1 2 3 4 5		No
7	Are the teachings interactive? (Please score)	21	Haveyou been ever asked to give feedback for your
7.	1 2 3 4 5	21.	teachers?
_			Yes, please explain
8.	How do you find skill training on the ward? (Please		No
	score) 1 2 3 4 5	22.	Would you like to give feedback for your teachers?
_			Yes, please explain
9.	Do you find enough hands on training on the ward?		No
	(Please score)	23	Do you know you have Mentors in the IMS?
	1 2 3 4 5		Yes, please explain
10	Do you like PowerPoint or Chalk and board teaching?		No
	(Please score)	24.	Do you know what Mentors are?
	Computer & Projector, explain:		Yes, please explain
	Chalk & Board, explain:		No
	, 1	25.	Would you like to become teacher one day?
11	Do you find lectures relevant? (Please score)		Yes, please explain
	1 2 3 4 5		No
12	. Are the course contents/syllabi good? (Please score)		Thank you for your valuable time and co-operation. Best
12.	1 2 3 4 5	20.	wishes for your future.
1.0			,
13.	Would like to change in IMS teaching and exam (please feel free to write in this space)		
	reel free to write in this space)		
14.	Have your bear called to do on ordit/outial armiting/		
	Have you ever been asked to do an audit/article writing/project?		
	Yes		
	No		
	Would you like to do a little project? Yes		
	No No		
16.	Have you heard about other ways of teaching and learning?		
	Yes, please explain		
	No		
	·		