Remedial Education in Medical Schools: Students' Perspective

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WHAT PROBLEM WAS ADDRESSED?

Remedial education is a multifaceted approach, tailoring remedial intervention plan to a student's specific needs. Evidence shows that six to fifteen percent of medical students experience academic difficulties and these percentages are increasing.^[1] Poor academic performance can result in student's dropping out of professional programs while still being responsible for the large debts incurred. Identifying students' specific needs regarding remedial approaches seems imperative as a first step to any possible intervention.

WHAT WAS TRIED?

Focus Group Discussions (FGD) to understand students' perceived need for remediation, causes of low performance and potential solutions was utilized. Two FGDs (9 participants each) with undergraduate medical students who had failed a summative examination of a school in India, were conducted by a skilled investigator (faculty) and two note keepers, in 2018 using a semi-structured guideline. Prior informed oral consent and confidentiality were ensured. The discussion lasted for ninety minutes and was not audio-taped. The notes were expanded within 24 hrs and emerging themes were analyzed qualitatively.

Nonacademic problems contributing to low performance included; medium of instruction being English, adjustment to life outside home, lack of selfconfidence, motivation and concentration, lack of mentor support, personal health, sleep problems, intake of healthy diet and spending too much time on cell phones and social media. One student said" I am from Gujarati medium school, it is difficult for me to understand and write in English'. Academic problems included; managing study time, inability to plan and retain what is studied, inability to pick out what is important and what to write in exams, difficulty in coping with large amount of content, need for guidance regarding text books and exam anxiety. One of the students said" I am not able to complete question paper in time and often fail in exam". The identified learning needs included; a revision class-, an extra revision exam, a practice on exam question writing skills, peer support

and need of mentor. A student opined" Revision classes, say three to four before the summative exam would help me"

WHAT LESSONS WERE LEARNED?

Qualitative method such as FGD appears to be a promising tool to improve teaching and training students. An optimal system of remediation should begin with incorporating students' perceptions and strategies to help students develop better approaches to academics. FGDs to obtain additional information on variables like; their attendance in class, whether they joined medical school by choice/ pressure, whether they realized the quantum of studies required before joining. Considering the fact they are top scorers in the qualifying exam, academic constraints should be minimum. Meanwhile, findings from the study were shared with the faculties and remedial approaches in form of mentoring to facilitate self-directed learning, revision classes and assessments for learning are planned to be implemented.

Foundation Course^[2] a one-month long program to orient medical learners to MBBS course and provide them with requisite knowledge, communication, technical and language skills is run under the recent competency-based curriculum reforms in the form of GMR 2019^[3] for undergraduate medical curriculum. This revised curriculum is implemented by all medical colleges under the ambit of Medical Council of India from August 2019. If this program is found to be successful, it might address many problems faced by students from diverse educational streams and backgrounds in terms of geography, culture, language, economy, social construct, medium of instruction and education boards to transition appropriately from school to professional course and is likely to address problems of low performance in students.

References:

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