

Satisfaction Level of Medical Students Regarding Academic Activities of a Public Sector Medical College: Gomal Medical College, Dera Ismail Khan

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of Medical
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Regarding
Academic
Activities

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ABSTRACT

Objective: To assess how much the medical students were satisfied with their course work teaching and assessment method and what measures they will suggest for the future to rectify the current situation. It is necessary to determine the quality of the currently applied academic system.

Study Design: Cross-Sectional Study

Place and Duration of Study: This study was conducted at the Gomal Medical College, Dera Ismail Khan (a public sector medical college) from February to July 2019.

Materials and Methods: A random sample of 375 medical students (2nd to final year) was chosen to provide a structured questionnaire. However, demographic as well as data regarding the objective of the study could be collected only for 357 medical students. SPSS version. 21 was used for the analysis of the data using descriptive statistics.

Results: There were more 53% (189) females in the studied sample. Most participants (67%) were satisfied with the teaching method and its standard in the college. Twenty-six percent of students expressed the difficulty of interaction among students. Satisfaction with assessment methods was 28%. Satisfaction with lectures using multimedia was up to 72%. There were 50% of students who were not satisfied with self-directed learning. Fifty-seven percent were pleased with the viva examination. There was a sense of academic workload among 29% of the students. Twenty six percent students also expressed the need for career counseling. Fifty-six percent of students were satisfied with pre-clinical teaching.

Conclusion: There was suggestion of improving the lectures and applied training. Moreover, the need for career counselling was pointed out by arranging professional understanding sessions.

Key Words: Students, Satisfaction, Dissatisfaction, Educational Activities

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INTRODUCTION

The conventional medical education system includes teachers as well as hospital-based training of medical students.¹

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In a developing country like Pakistan, the academic system is not very strong, and standards are not followed strictly. Due to limited assets, it allows a very nominal amount of financial plan to the educational sector. Despite such drawbacks, several steps have been taken to transform the medical curriculum. Particularly, consistent with international standards by private medical colleges. These changes generally involve the establishment of a superior system of education to impart information and skills using current methods of teaching, learning, assessment, and evaluation. A continuous monitoring system is imperative to determine the new system of medical education to produce better, competent, and competitive medical students.² To bring change is essential as student demographics, the role, and responsibilities of teachers, educational management, and leadership have changed. These all have essential aftermaths on the medical education system.³ Medical students will directly benefit from the changing system. Students are considered an integral part of the curricular assessment,

monitoring, evaluation, and feedback.^{4,5} For instance, Graduate Exit Questionnaire (GEQ) is a part of the routine educational process in the United States of America. The evaluation of medical graduates through GEQ is utilized for quality assurance and revision of the curriculum. The information collected through curriculum evaluation about the quality of the educational program is utilized to bring positive change and improvement in the program. Subsequently, monitoring of the system helps to determine the corrective measure and way forward.⁶ However, data about student satisfaction and their level is scarce concerning their academic activities. Unfortunately, this is associated with impaired learning. Predominantly, where resources are limited, and budget allocation to the health sector is below par. With this statement, the implication of our study would be significant to break the traditional cycle teaching and assessment in medical education. Therefore, it is crucial to determine the weaknesses of the medical education system of a public sector medical college. We surveyed to identify the level of satisfaction with the academic activities of medical students.

MATERIALS AND METHODS

A cross-sectional study was carried out at Gomal Medical College Dera Ismail Khan from February to July 2019. In this survey, the used questionnaires included a part in which social and demographical information such as gender, race, and age were noted, while the other portion was related to the educational system in the medical college. A 5-point Likert type scale (strongly agree, agree, undecided, disagree, strongly disagree) was used to determine the satisfaction level of medical students. In the end, the participants were asked only one open ended question in which they were invited to communicate their proposals, perspectives, and suggestions directly. The questionnaire was acquired from a study of Manzar B

and Manzar N.⁷ The motive of the survey was described to the participants. They gave written permission, and it was made sure that the data will remain confidential. We used SPSS version 21 for the analysis of the data; by using frequencies. For the assessment of different variables, Descriptive analysis was used.

RESULTS

According to the opinions of the participants about the module system, they mostly selected the option of strongly agreed and agreed for their satisfaction with the ongoing educating (15%, 52%, respectively).

A significant number of students (20%) strongly agreed and (49%) agreed that teachers should encourage interaction among students during teaching sessions. Regarding students-lecturers communication during the lectures, the majority strongly agreed (20%) and agreed (49%) for good association between students and teachers during classes. 31% of students strongly agreed, and 41% of students agreed that lectures should be delivered using multimedia and videos should also be used. In terms of laboratory facilities of the college, 15% of students strongly agreed, and 41% agreed on their appropriateness for learning. Most of the students strongly agreed (26%) and agreed (40%) that the learning process should be problem-based. Likewise, a high percentage of them strongly agreed (30%) and agreed (42%) regarding the importance of discussion in small groups for a greater understanding of the subject. Some medical students strongly agreed (17%), and 36% agreed that self-directed study improves their learning. A significantly huge number of students, 23% strongly agreed, and 40% agreed that there is an academic workload in their program.

For the betterment of academic activities, most of the participants about (20%) strongly agreed, and (46%) agreed with the crucial role of the digital library in luring more students to improve their learning activities.

Table No.1: Question with response

Sr.	Question/Issues	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
		N (%)	N (%)	N (%)	N (%)	N (%)
1	Satisfaction with teaching methods	53(15)	186(52)	22(6)	60(17)	36(10)
2	Interaction among students in sessions	71(20)	174(49)	20(6)	57(16)	35(10)
3	Assessment methods facilitate learning	57(16)	177(50)	24(7)	60(17)	39(11)
4	Lectures using multimedia	111(31)	148(41)	21(6)	41(11)	36(10)
5	Labs. appropriate for learning	55(15)	145(41)	24(7)	81(23)	52(15)
6	Emphasized on problem-based learning	94(26)	162(45)	23(6)	44(12)	34(10)
7	Small group discussions	107(30)	151(42)	20(6)	43(12)	36(10)
8	Self-directed learning is more helpful	60(17)	128(36)	26(7)	93(26)	50(14)
9	The viva system is effectiveness	61(17)	143(40)	36(10)	69(19)	48(13)
10	There is academic workload	81(23)	144(40)	30(8)	67(19)	35(10)
11	Digital library	72(20)	163(46)	29(8)	56(16)	37(10)
12	Career counseling	80(22)	156(44)	31(9)	56(16)	34(10)
13	Pre-clinical teaching	71(20)	130(36)	35(10)	77(22)	44(12)

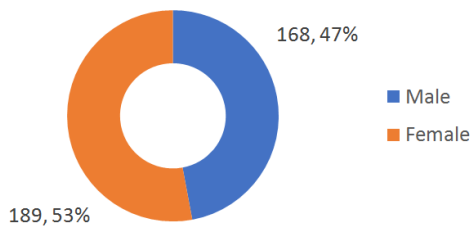


Figure No.1: Gender of wise demographic characteristics

The provision of help in professional guidance by the college was suggested by most of the students who strongly agreed (22%) and agreed (46%) on this point. Furthermore, (20%) strongly agreed and (36%) agreed upon the inadequate pre-clinical training (Table 1). In this study, 357 participants took part. The majority of the students, 53% were female (Figure 1).

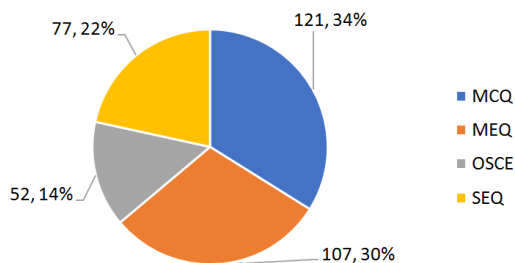


Figure No.2: Preferred assessment strategies

Regarding the mode of assessment preferred by students (Figure 2); they preferred mixed-method assessment rather than one method. The most preferred assessment preferred was MCQ (34%), MEQ (30%), SEQ (22%), and the lowest was OSCE (14%).

DISCUSSION

This survey was done to find out the main aspects that adversely influence module activities and contentedness among medical students. This study found that the majority of the students were in favor of problem-based learning, and it should be incorporated frequently during teaching sessions. Medical students also emphasized that small group discussion helped them to have better understanding of the subject matter. These findings were consistent with a study that participants viewed the problem based learning and small group discussion more helpful than traditional style of lecturing.⁸⁻¹⁰ Likewise, another study¹¹ found that students preferred the teaching activities methodology focusing the problem-based learning. They found it more stimulating and interesting. While, student studying from conventional methods of teaching, found learning activities very passive and boring. Some how similar results were reported in some studies,¹¹⁻¹³ they found that student's liked interactive style of teaching, and group discussions were more beneficial and students participated in those activities with more zeal than lecture-based teaching session among undergraduate students. Fewer medical students in this study pointed out that they liked the current methods of teaching. These findings are consistent with satisfaction

survey reported among international students' population. Those students may be more resistant to newer strategies of learning and having difficulty with coping with those strategies.^{14,15} Majority of student also expressed that lectures should not be more than one hour and many students considered 30-40 minutes enough time for the lecture. They felt, teaching beyond 30 minutes made them burdened with information and having difficulty in absorbing lecture. Longer lecture time has been cited as an important reason for skipping lectures among undergraduate students.¹⁶ A survey found that student felt that self-directed learning was more effective in the basic and clinical science as compared to lectures.^{17,18} Student of this study also preferred the multiple-choice question, extended matching questions, short essay questions, objective structured performance exam and objective structured clinical exam in their education system. These findings are consistent with Cilliers et al. study,¹⁹ which reported that student preferred assessment done multiple strategies than one or two methods of assessment. Students viewed the objective structured clinical exam and objective structured performance exam very appropriate for clinical and practical related skills as compared to old system of viva voce, which was more dependent on examiner knowledge and greater chance of bias. Few students opposed practical assessment in the controlled environment and preferred workplace-based assessment. Majority of students highlighted the need for career counselling, which will help them to guide and select the future filed of their study and practice. These findings are consistent with the Manzar B and Manzar N study,⁷ which found that students were generally dissatisfied with the university for not conducting the career counselling session with them. They strongly suggested the need for future guidance seminars to help them select way forward. Many students seemed to be confused and curious about their future fields of study and practice which they thought could be resolved with adequate counselling. Unfortunately, counselling and career guidance facilities are somehow rare among universities in developing world. In spite of medical students' confusion with their future field of study and practice, most were confident of their success in the current program while few were more skeptical. The final question was asked to seek suggestion for the improvement in the current situation. Three themes emerged from the open-ended question; academic improvement, need for better facilities, educational management issues; lectures and cocurricular activities. In relation to academics, many students suggested that classes should start 0900 to 1000 hours and not exceeding seven hours a day. They also suggested the need for more self-directed learning and problem-based learning sessions in their routine study. Students suggest that their teaching activities should be based on small group discussions and more videos to be included in the lecture-based sessions. These qualitative findings were consistent with the quantitative findings where students pointed out that lectures should be delivered using multimedia and videos. Medical students, preferred interactive way of teaching style and practical based sessions. In addition, student suggested a special

weekly session to discuss current medical issues. Similar need was reported by different studies worldwide.^{20,21} Pertinent to management, few students suggested to improve the attendance system by installation of electronic devices in the campus. Many suggested the need for more cocurricular activities outside their campus and among other institutes. Some students mentioned regular and more visits in order to do the community services activities.

CONCLUSION

Study from one institute limits its generalize ability. However, we believe that this study has highlighted important area for improvement for medical teachers and management to determine the future strategic plan to solve the medical student's problems and satisfaction with educational activities.

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Author's Contribution:

Concept & Design of Study: Muhammad Omer Malik
 Drafting: Manzoor Ahmad, Huma Rehman
 Data Analysis: Muhammad Umair, Sara Sajjad, Muhammad Salman
 Revisiting Critically: Muhammad Omer Malik, Manzoor Ahmad
 Final Approval of version: Muhammad Omer Malik

Conflict of Interest: The study has no conflict of interest to declare by any author.

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