

VALUE EDUCATION AS PART OF MEDICAL CURRICULUM -A SURVEY AMONG MEDICAL COLLEGE TEACHERS.

P S Kudachi,

Associate Professor of Physiology, JN Medical College, Belgaum, Karnataka-590016.

Abstracts: Background: The present system of higher education does not serve the purpose of generating youth with healthy mentality and with values. All round development of personality is the purpose of education. **Objective:** The objective of the present study was to know the opinion of medical college teachers regarding incorporating value education in medical curriculum. **Method:** This survey was conducted using structured questionnaire and teachers were also asked to write additional suggestions and comments regarding the subject. One hundred teachers who were permanent employees of the private medical college participated in this study. **Result & Conclusion:** Majority of teachers (75%) felt that value based education should be a part of the medical curriculum. Among, total 16% had neutral response. Only 1% of the teachers disagreed to include value education in the existing medical curriculum. Further large scale survey may help in this regard to bring better change in the present medical educational system.

Key Words: Value Based Education, Professionalism and Ethics in Medical curriculum

Author for correspondence: PS Kudachi, Associate Professor of Physiology, JN Medical College, Belgaum, Karnataka-590016. Email- padmashrik@rediffmail.com

Introduction:

The Phrase 'Value Based Education' is widely used in current days in professional colleges. Many colleges have intended to begin the course on Value Education. According to ancient gurus Value Education in sanskrit meaning 'Vidya' that which illumines. Value education is education in values and education towards the inculcation of values. The present system of higher education does not serve the purpose of generating youth with healthy mentality & with values. All round development of personality is the purpose of education. There is a major role of a medical teacher to contribute and explain the importance adopting the values, ethics and professionalism among medical students.

There is a great need to equip present education being imparted to students with values of life in order to make them good human beings. Today, society is witnessing a loss of moral environment with feelings of hate and jealousies, moral decline in private and public life, increase of violence, greed and many more. Health care providers exhibiting cultural values, universal values, personal values and social values can enrich and build a healthy society.

Medical science is revolutionary area. The undergraduate medical students must master the

basic and clinical science foundations of medical practice. It may be even more important for the students to learn how to find and interpret medical information, form professional relationships with mentors and peers, and make a commitment to lifelong learning and professionalism. It is critical that students understand that the curricular program at any college of medicine is only the beginning of a life of study.¹ previous study mentions its concern about some recommended values are being ignored, and some are contradicted in the course of clinical medical education. Medical students are not learning the intended norms of the profession, probably because the teachers are not consistently teaching the recommended values of the profession.² Professionalism in medical education affects the experiences of individual medical students, and they influence our health care system as a whole.³ The objective of the study was to know the opinion of medical college teachers regarding incorporating value education in medical curriculum.

Material and Methods:

Study Design

A cross sectional study was conducted among medical college teachers. This survey was conducted using structured questionnaire and

teachers were also asked to write additional suggestions and comments regarding the subject. One hundred teachers who were permanent employees of a private medical college participated in the study.

Inclusion criteria

All randomly selected teachers who were permanent employees of the private medical college.

Exclusion criteria

Tutors, Junior Residents, Part-time teachers employed in the college for less than six months and those not directly concerned with teaching were excluded from the study.

Method

The present study was initiated after obtaining the institutional ethical clearance. A self structured questionnaire was given to 100 doctors. Respondents were given assurance of confidentiality. Data collected on professional characteristics such as designation & department was collected. Likert scale, a type of psychometric response scale was used to collect the data. When responding to a Likert questionnaire item, respondents specify their level of agreement to a statement.⁴

Generating the Items-

A set of potential scale items were created by understanding of the subject matter. The items were rated as; 1-to-5 strongly Agree- Strongly Disagree response scale. Total 15 statements regarding the subject matter were created. The questionnaire included the details of present education system rendered to the students & also opinion regarding inclusion of value education in the medical curriculum. Respondents graded it on five-point Likert Scale (1 =strongly disagree to 5 = strongly agree). In addition, doctors were asked to write their additional comments. Item responses were summed to create a score items. Some questions were counted as reverse points, meaning that if they were marked as one, it should be the opposite, five. On the basis of the scoring 5

groups were divided; strongly agree-64-75, Agree-52-63, Neutral-40-51, Disagree-28-39, Strongly disagree- 15-27.

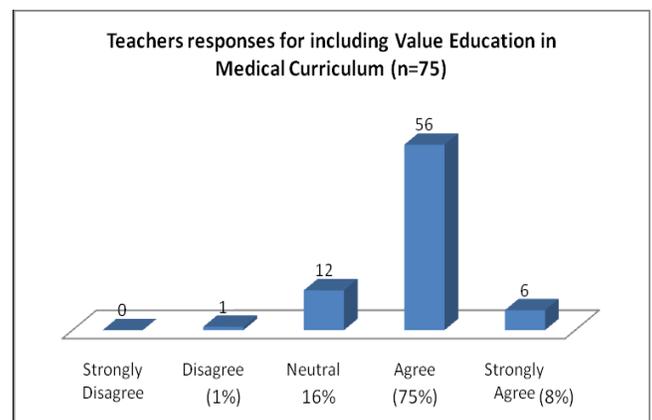
Analysis Plan

After adding the responses up for each survey response statistical analysis of the data was analysed by calculating the percentage of the teachers in 5 different groups divided on the basis of the same 5 grading scale.

Result:

Out of 100 teachers recruited, 75 (75% of recruited) completed the study. Teachers divided in different groups based on responses to questionnaire items (n=75). There were 56 (75%) medical teachers 'Agree' (Likert scale score of 52-63) to include Value based education in the medical curriculum. 12 teachers (16%) had neutral response (Likert scale score of 40-51). 6 teachers (8%) were in the 'Strongly Agree' group (Likert scale score of 64-75). Only 1 teacher (1%) Disagree (Likert scale score of 28-39). None of the teacher had the opinion of 'Strongly Disagree' (Likert scale score of 15-27). -Graph I.

Graph I: Teacher's opinion regarding value education to be a part of medical curriculum



Discussion:

In the present study majority of teachers showed interest towards implementing value based education in medical curriculum. Previous study

mentions the ultimate goal of medical ethics and medical education as a whole is to create good doctors. However there exist unresolved difficulties with regards to resources for delivery, academic expertise, curriculum integration and consolidation of learning. Assessment methods also remain controversial.⁵ Other study concludes that, most medical schools now include some component of professionalism in their curriculum, ranging from "white coat" ceremonies to didactic and small-group and case-based discussions. Further it suggests that community-based professionalism curriculum for preclinical and clinical year medical students can provide unique and relevant learning in a professionalism curriculum which can complement existing methods.⁶ In the other study the authors discuss that most of the critical determinants of physician identity operate not within the formal curriculum but in a more subtle, less officially recognized "hidden curriculum". Authors also suggest on how ethics curriculum might be more fruitfully structured to be a part of the medical training process.⁷

Conclusion:

In the present study majority of the teachers recommend for value education as a part of medical curriculum. Further large scale survey may help in this regard to bring better change in the present medical educational system.

Acknowledgment:

The author thanks the medical faculty for their willingness to participate in this research. Thanks also to the Brahmakumaris' Education Wing, local branch for the support.

References:

1. Wallach PM, Roscoe L, Bowden R. The profession of medicine: an integrated approach to basic principles. *Acad Med.* 2002 Nov; 77(11):1168-9.
2. Stern DT. Practicing What We Preach? An Analysis of the Curriculum of Values in Medical Education. *Am J Med.* 1998 Jun; 104(6):569-75.
3. Miriam Fishman, Alfred Garfall, Justin Michael Thomas. *Virtual Mentor. American Medical Association Journal of Ethics.* 2007April; 9(4): 259-261.
4. Likert R. *A technique for the measurement of attitudes.* New York: McGraw-Hill; 1932.
5. John Goldie. Review of ethics curricula in undergraduate medical education. *Medical Education* 2000; 34:108-119.
6. O'Toole TP, Kathuria N, Mishra M, Schukart D. Teaching professionalism within a community context: perspectives from a national demonstration project. *Acad Med.* 2005 Apr; 80(4):339-43.
7. Hafferty FW, Franks R. The hidden curriculum, ethics teaching, and the structure of medical education. *Acad Med.* 1994 Nov; 69(11):861–871.

Disclosure: No conflicts of interest, financial, or otherwise are declared by authors