

EVALUATION OF STUDENT SEMINAR IN MEDICAL EDUCATION: STUDENTS' PERSPECTIVE

Jitendra R. Patel¹, Dharmik S. Patel¹, Rajesh Desai², Jasmin Parmar³, Ravi Thaker², Nikita D. Patel⁴

¹Gujarat Adani Institute of Medical Sciences, Bhuj, Gujarat, India, ²Pacific Medical College, Udaipur, Rajasthan, India, ³M P Shah Medical College, Jamnagar, Gujarat, India, ⁴Viable Dental Clinic, Bhuj, Gujarat, India.

ABSTRACT

Background: Teaching methods in India is dictated by the ancient teaching method. With modern times, teaching method should be improvised. Nowadays a deluge of techniques is encouraged to increase the interest of students in learning.

Aim and Objective: The purpose of the study was to examine the approach of 1st year medical students of one private medical college in Gujarat towards seminar presentation.

Method: Study was undertaken on 110 students of 1st year MBBS. A questionnaire was prepared regarding effectiveness of seminar in learning process and feedback was taken from all 110 students.

Result: More than 76% students responded positively to all questionnaire asked regarding seminar than teacher-centric method.

Conclusion: Students' attitude was very decisive for an active learning method like seminar and it should be promoted in routine practice.

Key Words: Seminar, Medical education, Teaching methods

INTRODUCTION

In medical education, break out of new medical colleges; devaluation of merit in admissions, particularly in private institutions; increasing capitation fees; admission of sub-optimal quality of students with poor motivation; gross shortage of patients in many institutions; a less than desirable evaluation system; — all contribute to this cloudy picture of teaching methods. The out-dated curriculum and insensitivity to modern concepts of teaching–learning contribute to this problem¹.

Teaching in India is still controlled by teacher centered classrooms³. Students passively receive information from the teacher and internalize it through memorization³. Concepts such as independent learning, flexibility in learning, critical thinking and problem solving are least recognized². Reports have shown that students' inactivity in traditional teacher-centred classes would make them bored and exhausted that consequently would decrease their concentration and learning and finally would result

in their absence from the classroom³. Nowadays a deluge of techniques is encouraged to increase the interest of students in learning.

Because of increasing competitive demands in the academic community, educators now strive to provide the most productive classroom experience for their students⁴. Facilitating small-group discussions within the larger class, giving short writing exercises, incorporating quizzes taking field trips, using debates, seminar presentation by the students and project based learning have been promoted nowadays⁵. The aim of active learning methods is to engage students in higher-order thinking tasks as analysis, synthesis, and evaluation.⁴

The purpose of the study was to examine the approach of 1st year medical students of Medical College in Gujarat towards seminar presentation. In medical education, preparation of individual presentations will give students confidence, help them to overcome their nervousness and motivate them to speak before other people without

Corresponding Author:

Dr. Jitendra Patel, Department of Physiology, Gujarat Adani Institute of Medical Sciences (GAIMS), GK General Campus, Bhuj-370001.
E-mail: r.d.patel.always@gmail.com

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hesitation⁴. This study was in the context of exploring “effective seminar” from a student's perspective which will help the medical professionals in managing this type of teaching technique more efficiently.

DESIGN AND METHOD

The study was carried out at the department of physiology in private medical college in Kutch district of Gujarat. Study was undertaken on 110 students of 1st year MBBS. A questionnaire was prepared regarding effectiveness of seminar in learning process and feedback was taken from all 110 students.

Total nine questions were included in the questionnaire. Nine questions were distributed in three different tables (*Table 1, 2, 3*). Then these tables were given to all 110 students and asked to feel the details after explaining

the procedure. The participants were informed what the investigation was about and were told that the responses would be anonymous and must be unbiased. Grading and Likert scale was used for taking feedback⁶.

Consent was obtained from all the students and propose of the study was explained. A Questionnaire was prepared with the help of many faculty members. It was assessed and summarised with the MS excel and IBM SPSS statistical software version 20.0. Permission and ethical clearance from Institutional research committee was taken.

RESULT

This was an observational study. We took the feedback from the students regarding seminar and summarised the feedback in tables. (*Table 1, 2, 3*)

Table 1: Response of students to various aspects of Seminar

Q	Feedback	(n=110)					Mean ± SD	
		Frequency /Percentage						
		Strongly agree	Agree	Neutral	Disagree	Strongly disagree		
		5	4	3	2	1		
1	Good academic activity	38/34.9	56/50.9	11/10	2/2.7	3/1.8	4.14 ± 0.84	
2	Time duration	42/38.2	34/30.9	14/12.7	13/11.8	7/6.4	3.83 ± 1.24	
3	Helpful in learning	36/32.7	30/27.9	27/24.5	9/8.2	8/7.3	3.70 ± 1.21	
4	Group activity	54/49.1	32/29.1	18/16.4	3/2.4	3/2.4	4.19 ± 0.99	
5	Personal development	71/64.5	29/26.4	8/7.3	1/0.9	1/0.9	4.53 ± 0.75	
Average		48.2/43.88	36.2/33.04	15.6/14.18	5.6/5.2	4.4/3.76	4.07 ± 1.00	
Result		SA + A		N	SD + D			
		84/76.92		15/14.18	11/8.9			

Table 2: Opinion of students to other aspects of Seminar

Q	Feedback	(n=110)						Mean ± SD	
		Frequency /Percentage							
		Inadequate	Poor	Fair	good	Very good	Excellent		
		0	1	2	3	4	5		
6	Topic	2/1.8	3/2.7	11/10	31/28.2	39/35.5	24/21.8	3.58 ± 1.12	
7	Pattern	7/6.4	4/3.6	7/6.4	37/33.6	36/32.7	19/17.3	3.35 ± 1.30	
8	Discussion	2/1.8	6/5.5	13/11.8	31/28.2	22/20	36/32.7	3.57 ± 1.30	
Average		3.66/3.33	4.33/3.93	10.33/9.4	33/30	32.33/29.4	26.33/29.93	3.50 ± 1.24	
Result		Inadequate + Poor + Fair			Good + Very good + Excellent				
		19/10.67			91/89.33				

Table 3: Concluded response of students:

Feedback	Yes Frequency /Percentage	No Frequency /Percentage
Q. 9 Would you suggest this activity to your colleague or Junior?	102/92.7	8/7.3

DISCUSSION

Several new methods of assessment have been developed and implemented over this time and they have focused on clinical skills, communication skills, procedural skills, and professionalism. Assessment creates excellence and it leads to the process of precise learning⁷.

In our study, maximum students believed that interactive and student centric education methods were more interesting and non-boring which also aids in good learning. More than 76% students were agreed out of total participants. Study showed that education methods must be modified and improved. Lecture, probably the oldest teaching method, is still the most common form of medical education. Although engaging, but this method encourages passivity with more of teacher talk and lack of interaction with students^{8,9}.

In the seminar, Students actively research a topic and prepare the PowerPoint presentation to teach the class. By this, a student learns his own topic even better. Apart from learning, the students acquire other skills like searching the internet-based materials and preparing presentations which can help them learn in an easier and better way. Problem-solving exercises, analysis of case reports, student presentations and students working cooperatively in groups are recommended active learning activities for teaching in medical colleges¹⁰. The majority of college students are active learners requiring learning experiences that engage their senses¹¹. The seminar method appeared to have a positive effect on the trainees' assessment of their learning¹².

Although, it is well-established that active learning provides significant practical and theoretical advantages over passive learning, teachers are often seen reluctant to employ these active learning strategies in routine teaching practice¹³. Proper selection of seminar topics, involvement of students in interaction and involvement of teachers can make the more definitive outcome.

Limitations of this study were relatively smaller size of subject, inclusion of single medical college and non-inclusion of other advance teaching methods. By including many medical colleges and advance methods, this study could be made more appealing.

CONCLUSION

Our study demonstrated that the majority of students consider seminar presentation as an active learning technique. Students' attitude was very decisive for an active learning method like seminar and it should be promoted in routine practice. Further studies on a larger scale are required to develop more understanding on this aspect.

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REFERENCES

1. Ananthakrishnan N. Medical education in India: Is it still possible to reverse the downhill trend?; Natl Med J India. 2010; 23(3):156-60.
2. Adib-Hajbaghery M, Aghajani M. Traditional Lectures, Socratic Method and Student Lectures: Which One do the Students Prefer?. Webmed Central Medical Education. 2011;2:WMC001746.
3. Schreiber EB, Fukuta J, Gordon F. Live lecture versus video podcast in undergraduate medical education: A randomised controlled trial. BMC Medical Education. 2010;10:68.
4. Aditya Jain, Ramta Bansal, KD Singh, Avnish Kumar. Attitude of medical and dental first year students towards teaching methods in a medical college of northern India. Journal of Clinical and Diagnostic Research; 2014; 8(12):XC05-XC08.
5. Bonwell C, Eison J. (1991). Active Learning: Creating Excitement in the Classroom AEHE-ERIC Higher Education Report No. 1. Washington DC: Jossey-Bass.
6. Likert, Rensis. "A Technique for the Measurement of Attitudes". Archives of Psychology. 1932; 140: 1-55.
7. S. Gopalakrishnan, P. Ganesh kumar. Community medicine teaching and evaluation: scope of betterment. Journal of Clinical and Diagnostic Research. 2015; 9(1):XE01-XE05.
8. Doucet MD, Purdy RA, Kaufman DM, Langille DB. Comparison of problem based learning and lecture format in

- continuing medical education on headache and management. *Med Educ.* 1998; 32:590-96.
- 9. Hrepic Z, Zollman DA, Rebello SN. Comparing students and experts' understanding of the content of a lecture. *J Sci Edu Tech.* 2007;16:213-24.
 - 10. Vella F. Medical education: Capitalizing on the lecture method. *FASEB J.* 1992;6:811-12.
 - 11. Twigg CA. The need for a national learning infrastructure. *Educom Rev.* 1994;29:4-6.
 - 12. Skeff KM, Stratos GA, Campbell M, Cooke M, Jones HW, III Evaluation of the seminar method to improve clinical teaching. *J Gen Intern Med.* 1986;1:315-22.
 - 13. Benek-Rivera J, Matthews VE. Active learning with jeopardy: Students ask the questions. *Journal of Management Education.* 2004;28:104-18.