ORIGINAL ARTICLE Learning Professionalism in Medical College: Perspectives of Medical Students

Fareesa Waqar, Wajiha Shadab, Saadia Sultana, Shumaila Sharif

ABSTRACT

Objective: To assess the perception of medical students about teaching professionalism in medical colleges. **Study Design:** Descriptive cross sectional study.

Place and Duration of Study: The study was conducted in the Department of Obstetrics and Gynecology, Railway General Hospital, Rawalpindi, from 10th June, 2016 to 10th December, 2016.

Materials and Methods: A semi structured, amended and validated questionnaire was used to collect the data. The questionnaire was distributed among 55 final year male and female medical students. 27 (49.1%) participants were male and 28 (50.9%) were female students. The questionnaire comprised of 9 items to determine various aspects of students' perception about teaching medical professionalism in medical school.

Results: Fifty five students participated. Only 20% of the students' responses were positive about their preknowledge regarding the medical professionalism course. 30.9% students agreed for keeping professionalism course in medical schools. However, half of students' responses remained neutral. Majority of students (49.1%) disagreed with the effectiveness of lecturing to teach the professionalism. Majority of students (58.2%) approved the use of MCQs for the evaluation of professionalism course. The majority of males (82.1%) and females (70.2%) agreed with the effectiveness of course evaluation by MCQs.

Conclusion: A large majority of students were clear about the objectives of medical professionalism course and had opinion that the medical professionalism course should be taught with the use of technology rather than in the form of lectures and this course should be evaluated in the form of MCQs.

Key Words: Medical Professionalism, Questionnaire, Student Feedback.

Introduction

Medical professionalism, according to The Royal College of Physicians (RCP) can be defined as: 'A set of values, behaviors, and relationships that underpins the trust the public has in doctors', which includes 'integrity, compassion, altruism, continuous improvement, excellence and working in partnership with members of the wider healthcare team.¹ Various attributes of professionalism in medicine have been identified, including high ethical and moral standards, core humanistic values, rolemodeling, scrutiny of behavior, professional identity,

Department of Gynecology and Obstetrics Islamic International Medical College Pakistan Railway Hospital, Rawalpindi

Correspondence: Dr. Fareesa Waqar Professor & HOD, Gynecology and Obstetrics Islamic International Medical College Pakistan Railway Hospital, Rawalpindi E-mail: fareesa.waqar@riphah.edu.pk

Funding Source: NIL; Conflict of Interest: NIL Received: Aug 03, 2017; Revised: Jan 29, 2018 Accepted: Feb 06, 2018 a continuing commitment to excellence and scholarship, leniency and sacrifice.^{2,3}

Medical professionalism characterizes the roles and distinctiveness of medical students and physicians. The significance of medical professionalism has been highlighted as multiple reports of misconduct and ethics violation have been published in the science literature pertaining to the medical community. Worldwide medical professionalism has received increased attention by medical educationist. Today, every society with various cultural backgrounds expects that the medical students must be real professionals rather than merely acting professionally. Medical professionalism is one of the top priorities for the medical students, physicians and medical educators.

During training, medical students undergo both personal and professional development. Perceptions, in particular to required traits, are associated with the profession change, and impacted by encounters at their respective institutions. A recent study found that medical students thought that society requires them to be professional in all their dealings and negates the social aspect of their lives as an individual. Participants felt that they were always being viewed with high expectations of professionalism at all times from their choice in clothing to their activities.² In this modern digital age of social media and networking, medical personnel need to be ever more careful and be able to demonstrate professionalism in their online lives.^{4,5}

It has now become the current emphasis of medical educationists that professionalism must be taught explicitly during undergraduate medical studies. With recent emphasis of medical institutions in inculcating professionalism and certain behavioral attributes into medical students, it is of interest to see the change in the level of professionalism as students' progress in their medical training and more importantly how they perceive the professional environment around them. The current study aimed to assess the perception of medical students about teaching the course on professionalism in medical colleges.

Materials and Methods

This descriptive cross sectional study was conducted in the Department of Obstetrics and Gynecology, Railway General Hospital, Rawalpindi from 10th June, 2016 to 10th December, 2016.

By using random sampling technique, fifty five final year medical students were invited to respond to the questionnaire. After explaining the purpose of the study, informed consent of the participant students was obtained and their confidentiality was ensured.

A semi structured amended questionnaire was used to collect the data. Initially it was a 12 item questionnaire which was then converted to a 9 item questionnaire after validation and then used for this cross sectional survey. The Likert scale was employed throughout the questionnaire. In Likert scale 1 and 2 were considered as disagreed, third was considered neutral, 4 and 5 were considered as agreed. Amendments, finalization and validation of the questionnaire were done by involving senior faculty from medical education department, senior clinical faculty and students' representatives. The validity of questionnaire was ensured by getting the views of above mentioned faculty and students representatives on areas of importance that could be improved upon.

The data was entered into the Microsoft Excel software and analyzed by using SPSS version 21.0 statistical software. In descriptive analysis, means with standard deviation of the continuous variables were computed. Frequencies and percentages of the categorical variables such as gender and age were calculated. Mean values and standard deviation were analyzed for each individual question.

Results

Fifty five students participated in the study. The response rate was 100%. 27 participants were male students (49.1%) and 28 participants were female students (50.9%). Out of 55 students, 30.9% agreed and 20% of the students disagreed for keeping current professionalism course in medical education while about half of the students remained neutral regarding the topic. The results indicate that only 20% of the students' responses were positive when asked about their pre knowledge regarding the professionalism course, of which 50.4% were males and 60% were females.

As far as the lectures are concerned in order to perceive the professionalism course 29.1% of the total students "agreed" and 49.1% of students "disagreed". Out of the total agreed, 51% were males, whereas19.1% males disagreed. Of total agreed 44.1% were females while 20.5% females disagree. About the perspicuity of professionalism objectives total 45.5% of students agreed while 54.5% disagreed, out of total agreed, 20% were males and 80% were females.

Almost 80% students agreed about the usage of technology during the lectures among which, 58% were males and 42% were females. However 20 (36.4%) students agreed when asked about the interaction and support provided by the tutors and almost same number 23 (41.8%) of students were neutral of this question in which 44.4% were males and 29% were female. 83.6% students "disagreed" when queried about the inclusion of grades into final evaluation" and 10.9% replied as neutral. In addition, 78.2% students remained neutral or 10.9% students disagreed about "the professionalism course assists in learning of the other subjects".

Regarding the participant's' reply on multiple

options question, overall 58.2% students replied by selecting the option that the course should be evaluated by MCQs while 30.9% students reported that the professionalism course should not be evaluated by MCQs, Also it was concluded that the majority of males (82.1%) and females (70.2%) were in favor of course evaluation being based on the MCQs. However, 90% students did not agree for the course evaluation to be in the form of essays furthermore 72.8% did not want group presentations to be a method of course evaluation.

Table I: Perception of Medical Students aboutProfessionalism Course

Perception of Medical	Agree	Neutral	Disagree
Students	Agree	Neutral	Disagree
The medical			
professionalism course	17 (30.9%)	27 (49.1%)	11 (20%)
should be included in	17 (30.378)	27 (49.170)	11 (2078)
medical education.			
Professionalism course			
should be taught in the	16 (29.1%)	12 (21.8%)	27 (49.1%)
form of lectures.			
The objectives of			
professionalism course are	25 (45.5%)	0 (0%)	30 (54.5%)
clear to students.			
The use of technology is			
effective in teaching	44 (80%)	8 (14.5%)	3 (5.5%)
professionalism course.			
The interaction and			
support provided by tutor	20 (36.4%)	23 (41.8%)	12 (21.8%)
is effective in learning			
professionalism.			
The grades of			
professionalism course	3 (5.4%)	6 (10.9%)	46 (83.6%)
should be included in final			
evaluation.			
The professionalism			
course assists in learning	6 (10.9%)	43 (78.2%)	6 (10.9%)
other subjects.			
The professionalism			
course should be	32 (58.2)%	6 (10.9%)	17 (30.9%)
evaluated by MCQs.			

Discussion

Medical professionalism is generally depicted as attributes of expert brilliance, honesty and benevolence.^{6,7} This study planned to investigate the students' perception towards the professionalism course in medical schools. It was found that, only a few student responses were positive about their pre-knowledge regarding the medical professionalism course (20%) and approximately 30.9% medical students agreed for keeping the professionalism

course in medical school. Similar findings were presented in a study which demonstrated that the professionalism courses should be taught in colleges in order to cultivate more polished professional skills in medical students, which in turn permits concentrating on appropriate proficient conduct.⁸ Another study reported that medical schools in US are teaching professionalism as a separate course." When inquired about lectures as a method for teaching the professionalism course 29.1% of the students agreed and an overwhelming majority approximating to 49.1% of students disagreed. A Lancet review in 2001 stressed upon the necessity of teaching professionalism in the form of lectures to medical students and suggested that rigorous research would be required in this area.¹⁰ Regarding perceptions on the assessment system, most of the students reported that the professionalism course should be evaluated by MCQs. Previous studies have shown that there are no strategies on the most operative ways of supporting medical students to develop high standards of medical professionalism.¹¹

According to Hendelman et al.¹² most of medical institution had a professionalism curriculum in place for the pre clerkship phase but lack of formal program in the clerkship years. The present study identified a lack of knowledge or interest by the medical students in the current professional course. The most obvious reasons for the lack of interest in professionalism course was the assessment which students have not considered helpful and felt uncomfortable for having it on a weekly basis. Students agreed with use of technology during the lectures and showed a significant positive value. However, these attributes develop over time and are inculcated at all levels of medical training. The findings of this study demonstrate that 45.5% students agree that the objectives of the professionalism course were easy to understand throughout the course. An overwhelming majority of students (83.6%) disagree when asked about including their professionalism grade in their final assessment as this affected their overall performance in the course and shows that they are not ready to take it up full time. Feudtner et al.¹³ found that 62% of medical students believed that during the course of their clerkship, their ethical

principles have been eroded.

Medical schools place the foundation for fostering the medical professionalism to practice the issues among practicing clinicians.¹⁴ It is thus imperative that professionalism is incorporated into the undergraduate curriculum.^{15,16} Cruess et al.¹⁷ emphasized that a profession requires specialist knowledge and skills acquired through training and education and the professional is expected to use these attributes to serve the humanity.

Conclusion

The medical professionalism course needs to be included in medical education in order to make the students understand the goals and importance of the medical professionalism course in academic and clinical practice. A large majority of students were clear about the objectives of medical professionalism course and had opinion that the medical professionalism course should be taught with the use of technology rather than in the form of lectures and this course should be evaluated in the form of MCQs.

REFERENCES

- Simoni AD. Teaching medical professionalism: a lesson in perspective from Plato's ProtagorasBr J Gen Pract. 2017; 67:123.
- Finn G, Garner J, Sawdon M. 'You're judged all the time!' Students' views on professionalism: a multicentre study. Med Educ 2010; 44: 814-25.
- 3. Trimble M. The Profession of Medicine and its Rivals. The Ulster Medical Journal. 2016; 85:76-9.
- 4. Ross S, Lai K, Walton JM, Kirwan P, White JS. "I have the right to a private life": Medical students' views about professionalism in a digital world. Medical Teacher. 2013;

.....

35:826–31.

- Jawaid M, Khan MH, Bhutto SN. Social network utilization (Facebook) & amp; e-Professionalism among medical students. Pakistan Journal of Medical Sciences. 2015; 31: 209–13.
- 6. ABIM Foundation, ACP-ASIM Foundation, European Federation of Internal Medicine. Medical professionalism in the new millennium: a physician charter. Ann Intern Med 2002; 136: 243-6.
- 7. Kassirer JP. Managing care should we adopt a new ethic? N Engl J Med. 1998; 339: 397-8.
- 8. Steneck NH. Fostering professionalism and integrity in research. University of St. Thomas Law J. 2008; 5: 522-43.
- 9. Swick HM, Szenas P, Danoff D, Whitcomb ME. Teaching professionalism in undergraduate medical education. JAMA. 1999; 282: 830-2.
- 10. Stephenson A, Higgs R, Sugarman J. Teaching professional development in medical schools. Lancet. 2001; 35: 867-70.
- 11. Vimmi P. Developing medical professionalism in future doctors: a systematic review International Journal of Medical Education 2010; 1: 19-29.
- 12. Hendelman W, Byszewski A. A National Survey: Medical Professionalism in Canadian Undergraduate Programs 2007.
- 13. Feudtner C, Christakis DA, Christakis NA. Do clinical clerks suffer ethical erosion? Students' perceptions of their ethical environment and personal development. Acad Med 1994; 69: 670-9.
- 14. Papadakis MA, Loeser H, Healy K. Early detection and evaluation of professionalism deficiencies in medical students: one school's approach. Acad Med. 2001; 76: 1100-6.
- 15. Irvine D. The Doctor's Tale. Oxford: Radcliffe Medical Press, 2003.
- 16. Hilton SR, Slotnik HB. Proto-professionalism: how professionalization occurs across the continuum of medical education. Med Educ. 2005; 39: 58-65.
- 17. Cruess RL, Cruess SR. Steinert Y. Teaching medical professionalism. Cambridge: Cambridge University Press, London 2009.