

Perception of faculties regarding the stress in medical education – a qualitative study.

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Abstract

Background- As compared to other professional courses students of medical course are more prone to get depressed and commit suicide. Stress in medical education is responsible for it. Aim- To understand the perception of faculties regarding the reasons of stress in medical education. Setting and Design- Qualitative study done by focused group discussion. Materials and Methods- four focused group discussions were performed. Each group discussion was attended by eight faculties. Open ended questions related to reasons for stress in medical education related to course and curriculum, environmental issue and students issue were asked and discussed. Results- We observed that long duration of medical course, comparison with other profession and language problem are the most important stress inducing factors related to course and curriculum. Regarding the environmental issues homesickness, financial mismanagement and cultural shock were important reasons for stress and burden of study, pre PG exams and lack of extracurricular activities were important stress inducing factors related to student's issue. Conclusion- faculties are well aware of students problems and stress can be reduced profoundly by addressing the problems raised by them in study.

INTRODUCTION

Medical education is stressful and very demanding. Large burden of information leaves a minimal opportunity to relax and recreate [1,2]. It constitutes various stressors which may cause impaired judgment, reduced concentration, loss of self-esteem, increased anxiety and depression [3]. Medical student's life is subjected to different types of stress factors like the pressure of academics with an obligation of success, uncertain future and difficulties envisaged for integration into the system. These students face social, emotional and physical and family problems which may affect their learning ability and academic performance [4]. The most common reasons highlighted were exams and academics, followed by relationship problems in the college or family and homesickness [5]. There have been very few studies done so far to assess the perceptions of stress among students, and still fewer are those done on medical student population and faculties [6]. As exam and academics are most important stressor, faculties of medical college can play very important role in the prevention of stress [5,7]. To play their part properly; first faculties should understand students stressors. There are very few studies done in India which mentioned about the faculties perception of stress in medical education. So we decided to conduct this study with

the aim to understand the various factors which according to the faculties are responsible for stress in medical education and how to create a stress free environment in medical colleges.

MATERIALS AND METHODS

The study population consisted of all faculties of Govt. Medical College, Surat. Focus Group Discussions (FGD) were held to explore perceptions of the faculties regarding the reasons and prevention of stress in students of Govt. Medical College, Surat. Sampling was representative of: ethnicity, gender, specialties and seniority. The four FGDs attended by 8 participants were conducted by a trained moderator. The data was recorded verbatim, collated and analyzed. Faculties were told to give their reasons for stress related to medical course and curriculum, environmental issues and students issues. Open ended questions were asked in between the discussions by moderator.

RESULTS

The results are based on cumulative analysis of all four focused group discussion comprising of 8 faculty members each.

MEDICAL COURSE AND CURRICULUM

Most important issue arises during the discussion was duration of medical course. Faculties believe that duration of course is lengthy (five and half year for undergraduate and three year for specialties). So in India a student takes eight and half year to become specialist doctors. Faculties believe that “medical course is too lengthy and difficult as compared to other similar profession courses like engineering and management”. Some of them said that “reward of completion of course is also low as compared to other courses”. Faculties expressed that “medical student should not compare themselves with other professional courses students as it can be the source of profound stress”. Few faculties said that “On very first day students should be told about the rigorous teaching schedule and toughness of course”.

Other issue was language problem. Most of the students of undergraduate medical course in Govt. Medical College, Surat are from non English background. Mother tongue of most of the students is either Gujarati or Hindi. Participants of the FGD were of the view that “it is very difficult for students to adapt themselves in class as for first few months they don’t know what there teachers are speaking”. Few participants suggested that “there should be orientation course of english language before starting the basic science classes”.

Other important issue was over expectation from themselves and parental pressure to perform better. Teachers believe that “each student who takes admission here is ranker of his or her school. But here competition is tough as whole class is of rankers and when student can not get good marks or rank then it becomes the source of stress”. Few participants were having the view that “parents should be counseled to not to have over expectation from there wards as now it will become difficult to score as well as they were scoring in schools”.

Lack of teacher student interaction was also considered as one of factor for stress. Participants were under the view that “teacher should also introspect themselves about there behavior with students”. Some said that “teacher should try to create a friendly environment in and outside the class”. Some participants raised there concerns regarding this. They said that “there is decline in discipline in medical students, they have no regards for most of there teachers and have over friendliness with few. Faculties should be blamed for this as quest to become popular teacher creates this

problem”. Most of the faculties believed that “there should be more get together between teachers and students on festivals etc, this will enhance communication between teacher and student”.

Lack of extracurricular activity and sports is considered as very important factor for stress. One of the faculty said that “I find student playing some game only during the sports week”. Some believe that “they should be encourage to participate in sports and extracurricular activities as these are the stress busters”

Other important issue is long syllabus and tough question papers in exam. One teacher said that “there is no written syllabus for undergraduate as well as post graduate course. There is no specific recommendation regarding the books to be studied. faculties are in habit of setting tough question papers.....even after a good study a student can not be certain that he will face familiar question in examination and that create profound stress.....syllabus and examination system is biggest culprit for suicide and depression in medical colleges”. Faculties were having the view that “there are 19 subjects in undergraduate medial course and it’s difficult to grasp all. Only common disease should be taught from these and only superficial and important information should be asked in exam”. One faculty said that “examination paper should be problem based not information based”. Another faculty said that “we appreciate and give good marks to student who answers questions related to some rare disease or syndrome but we ignore basic knowledge and skill requires practicing medical science in community. After getting out of medical school student can not practice independently”.

Figure 1

Box 1: Faculties perception of stress factors related to medical course and curriculum

1. Long duration of medical course
2. Student comparison with other professional courses.
3. Language problem
4. Unrealistic expectation
5. Parental pressure to perform well academically
6. Lack of teacher student interactions
7. Lack of co-curricular activity
8. Uncertainty about the course
9. Tough question papers
10. Information based examination system, lack of practical skill

ENVIRONMENTAL ISSUES

One of the important issues raised in discussion was change in environment. 150 students take admission in Govt. Medical College, Surat, in first year MBBS annually. Most of them are from outside of Surat. They stay in hostel, three student per room basis. As compared to home this is a huge change in environment and it became difficult to adjust in this type of change. Faculties who were participating in group discussion were under the view that “home sickness, no friends, less privacy, mess food etc are the factors which may trigger stress in newly admission undergraduates”. One faculty said that “students come here from different social and cultural background. Some time for a new student this change may bring the cultural shock”.

Other issue was finance. Usually students are poor in financial management. Participants said that “In schools finance lies with the parents. Student ask for the money and they get it from parents in medical college students are not only supposed to budgeting there money but also spent it wisely. A student of poor economical background can not spend as much as his or her counterpart. There is strong peer pressure for lavish life style which may create stress for them”. “For poor and needy students books should be provided at subsidized price” said one faculty.

Other important issue is environment in hostel and college. Ragging is one of the biggest culprits for stress. Faculties said that “in spite of legislations and various committees prepared by authorities still ragging is prevailing specially in hostel. The leniency of authority regarding the punishment

of student who caught doing ragging is responsible for this”. Other faculty said that “students and there parents should be made aware regarding the laws against ragging”. Another faculty said that senior students should also be counseled against ragging and healthy interaction should be permitted”.

Another issue was teaching environment. Faculties believe that “students are here to study and they know it very well but our lectures should be interesting enough to grasp there attention”. Another view was “just by uttering the things written in books we are creating the boring environment in class. We should try to be innovative by the help of audiovisual tools etc so that students feel like coming to class”. Another faculty said that “ we should incorporate integrative teaching method in our teaching.....faculty should also be assessed on the basis of there behavior with students and his problem solving capacity”. Another view was “there should be entertainment facility in college, regular debating club, movie clubs etc should be established and faculties should be the member of them”

Figure 2

Box 2: Faculties perception of stress factors related to environment in medical college

1. Change in environment as compared to home
2. Poor financial management of student
3. Cultural shock
4. Bad facilities in hostel and college
5. Ragging by senior
6. Less interesting lectures
7. Inadequate entertainment facilities

STUDENT'S ISSUES

Amongst the students issues one of the important issue was absenteeism in lectures. Most of the faculties agreed that this is the common tendency. Teachers believe that whatever they are teaching is given in the book so in spite of coming in class students prefer to remain at hostel. One faculty said that “the biggest reason for not coming in class is pre- PG examination. Students prepare for pre- PG examination by bunking the class lecture and clinical posting”. Another view

was “those students who fall short of attendance should not be allowed to appear in final examination”.

Another issue which was also raised during discussion of course and curriculum was extracurricular activities. Faculties believe that “in spite of get involved in meaningful extracurricular activity students prefer to sit in canteen and do gossiping”. Another faculty said that “students should be encouraged enriching his or her hobby and involved in extracurricular and sports”.

Another issue was discrimination of teachers on the basis of gender. Faculties expresses that “this is common thinking that teachers are more interested in teaching to opposite gender”.

Another issue was personal relationship and communication with opposite sex students. One of the faculty said that “everybody (students) want to have romantic relationship with member of opposite sex, if they found nothing to get involved with or can not attract anybody, it become the source of stress”

Another frustrating point of student emerged that is uncertain future. In medical college future is always uncertain. Uncertainty of getting pass in exam, uncertainty of getting the post graduate seat, uncertainty of getting job etc. this uncertainty is a important stress factor.

Figure 3

Box 3: faculties’ perception of stress factors related to students issue

1. Absenteeism in lectures and clinics
2. Busyness in preparation of pre- PG examination
3. Less involvement in extracurricular activity and sports
4. Discrimination on the basis of gender
5. Romantic relationship with opposite sex
6. Uncertainty in course, examination, results and future

DISCUSSION

High stress level is one of the problems associated with the medical colleges. This increased level of stress associate with decrease of psychological health which may impair students’ behavior, diminish learning, and, ultimately, affect patient care. Prevalence of stress in medical colleges is

different in different studies like it is 61.4% in Thai study [8], 41.9% in Malaysian [9], 31.2% in British study [10] and 73% in Indian study [11]. Amongst the reasons for stress in medical undergraduate academics is most important factors [11]. So faculties can play great role in decreasing the stress.

The stress related factors which arises in our qualitative study on faculties were also observed in qualitative and quantitative studies done on students. In a study done by Azariah & Reichenback in 2001[12] and Durkin et al. in 2003 [13], Physical activities, sports and socialization considered important factors for stress reduction. According to them sports, music and arts could be made a part of optional curriculum. Lee & Graham, 2001 observed that “‘Stress management’ and ‘Time management’ taught along with first and second year curricula may assist students in dealing with stress due to study loads” [1]. Different stress management techniques such as meditation, support groups, games etc., help in better adoption of coping skills, improved knowledge of stress and enhanced ability to resolve conflicts (Shapiro et al., 2000) [14].

An inappropriate behavior of faculties with students is considered as stress inducer in various studies. There are studies where relationships with faculties aroused strong feelings, with students describing stressful situations such as being humiliated in front of their peers (Radcliffe & Lester, 2003) [15]. Similar aspects of the teacher–student relationship have been reported as stressful, such as being expected to have medical knowledge which they had not been taught and incidents when they were shouted at or felt humiliated (Lempp & Seale, 2004) [16]. This highly negative aspect of stress in teaching through humiliation is a recurring theme. This issue was not come up in our study. Because this was the qualitative study on faculties so self criticism was not expected from them.

The limitation of our study is that we did only qualitative study thorough focused group discussion. A qualitative study followed by quantitative study could have been better alternative. Positive things about our study is- as far as our knowledge goes this is the first study done on faculties regarding there perception about the stress in medical education. Very few studies are done in Indian setting about the stress in medical education and this is one of them.

CONCLUSION

Our study shows that faculties are aware of problem medical student faced related to there curriculum and other aspects.

Because they themselves were students ones, they have sympathetic approach for students they are teaching. Various reasons were suggested them related to stress and by improving these factors stress can be decreased.

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