

Learning attitude, ethics, and communication: Perspectives from first year medical students - A cross-sectional study

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Abstract: *Objectives:* Medical education traditionally emphasized on cognitive and psychomotor domains, often overlooking the affective domain. However, the National Medical Commission (NMC) now stresses the importance of training in Attitude, Ethics, and Communication (AETCOM). This study aimed to evaluate first-year MBBS students' perspectives on the AETCOM teaching-learning experience. *Methods:* A cross-sectional study was conducted in the Department of Physiology, SKNMC & GH, Pune, Maharashtra, involving 150 first-year MBBS students from the 2019-20 batch. The AETCOM Module 1.2 was delivered over a month through exploratory sessions, hospital visits, self-directed learning (SDL), and discussion sessions. Feedback was collected from 109 students via a Likert scale-based questionnaire administered through Google Forms. *Results:* The feedback revealed that 73.9% of students rated the exploratory session as excellent. 75.9% strongly agreed that hospital visits improved their understanding of patient experiences. 99.1% felt sensitized to patients' rights and 98.1% gained insights from peers' experiences. 93.6% found movie clips very effective and all 100% felt that the faculty role plays were helpful. 98.2% felt the hospital visits were smoothly facilitated & 97.3% appreciated the SDL sessions. *Conclusion:* Students responded positively to the AETCOM module. The use of innovative teaching methods enhanced their understanding, with recommendations for continued guidance in reflective writing.

Keywords: AETCOM Module, Students' Perceptions, Feedback, Ethics.

Introduction

Attitude, Ethics & Communication (AETCOM) are the most important aspects of medical profession. The traditional MBBS Curriculum in India had major focus on the cognitive and psychomotor domain training but considering the need of time the National Medical Commission (NMC)/ former Medical Council of India (MCI), introduced AETCOM teaching as a mandatory part of teaching-learning-assessment program in the MBBS CBME [Competency Based Medical Education] Curriculum from the 2019 batch. As per the Graduate Medical Education (GMER) 2017 Regulations, role modelling and mentoring associated with classical approach to professional apprenticeship has long been a powerful tool, but this approach alone is no longer sufficient for the development of a medical professional. The domains of attitude and communications with the emphasis on ethics therefore need to be taught directly and explicitly throughout the undergraduate curriculum [1].

Hence, AETCOM module was introduced longitudinally throughout all phases of MBBS curriculum. The package of competencies is enunciated in 27 modules to be transacted in four professional years of study, spanning over different phases of teaching-Preclinical, Paraclinical, and Clinical phases.

Modules 1.2 [What does it mean to be a patient?] and 1.3 [Doctor-Patient relationship] are supposed to be taught by the Physiology department. It is important for budding doctors to understand and differentiate the impact of apathy towards patients in sickness from the impact of offering words of solace in an empathetic manner, which goes a long way in developing patient confidence and facilitating early recovery [2]. There has been significant increase in incidents of attacks on doctors by unsatisfied relatives of patients as reported in the last few years [3]. The most common reason for the same has been

attributed to poor 'doctor-patient communication and relationship' leading to lack of trust [4]. In clinical practice, empathy plays a magical role in improving patient satisfaction [5-6]. Empathy can be defined as "a cognitive attribute that involves an ability to understand the patient's inner experiences and capability to communicate this understanding [7].

Although the components of AETCOM were informally taught to the students from a long time during their clinical postings and during internship consciously or subconsciously, it was the sole responsibility of the students to perceive the informal lessons and were far from adequate to comprehend the skills [8]. Students joining first year MBBS are not used to 'self-directed learning' and 'Reflections as a learning tool' which is the major approach to deliver this module [4]. As per the NMC document, Attitude Ethics and communication (AETCOM) teaching learning methodology needs to be innovative, informal, and realistic [9]. The framework for teaching AETCOM Modules was given by the MCI Booklet but the actual teaching for the first CBME batch was a challenging task and AETCOM teaching needed to include variety of novel methods to make learning interesting.

With this background, we conducted a cross-sectional study to understand the perspectives of the first batch of CBME curriculum about the learning experience of AETCOM module 1.2 in Physiology.

Aims & Objectives: To understand first year medical students' perspectives on AETCOM teaching-learning experience for the module 1.2 in the Department of Physiology.

Material and Methods

The study was conducted as an observational/cross-sectional study in the Dept. of Physiology at Smt. Kashibai Navale Medical College & General Hospital, Pune, Maharashtra. The project was approved by the Institutional Ethics Committee (IEC). It was conducted for the first batch of students (2019-2020 batch) exposed to the newly introduced CBME Curriculum by the NMC.

Total 150 students attended all the teaching-learning sessions on AETCOM Module 1.2

(What does it mean to be a patient?) which was carried out as per the directions of the NMC over a period of one month in various sessions e.g. Exploratory session, hospital visit, self-directed learning on AETCOM Module 1.2 and lastly discussion & closure session. In the exploratory session, student's views about patients' sufferings / feelings as well as their own experiences as patients were explored. This was followed by display of relevant movie clips about patient's feelings / expectations from a doctor, where patients shared their experiences. Next, a PowerPoint presentation explaining Patient's rights & responsibilities was given to the students.

The exploratory session was made interesting by demonstration of two role plays by the Physiology faculty based on patient interactions; one of a Google patient (well educated) and the other representing a patient from a rural background. Feedback was collected from the students through a self-designed Likert scale-based questionnaire comprising of questions on various aspects of the AETCOM Program. It was administered as a google form and a total of 109 students responded voluntarily to the feedback. Analysis of the feedback questionnaire was conducted.

Results

Analysis of the feedback questionnaire revealed that 73.4% of students felt that the exploratory session was excellent and 26.6% felt that it was very good [Fig 1]. 75.9% students strongly agreed and 24.1% agreed that AETCOM sessions especially after the hospital visit helped them in overall understanding of 'what does it mean to be a patient?' [Fig 2].

Out of the 109 respondents about 99.1% students strongly agreed & agreed that exploratory session helped them in getting sensitized to the rights & responsibilities of the patients and they could also express their views and experiences about health, disease & suffering. 98.1% students felt that they could also gain insight into patients' perspectives from their fellow students' experiences as well as their views and expectations from a doctor. 93.6% felt that the movie clips shown

pertaining to the patients were very effective and all of them (69.7% strongly agreed & 30.3% agreed) expressed that the ‘role plays’ played by

the faculty helped them understand various categories of patients [Table 1].

Fig-1: Rate the overall exploratory session about AETCOM 1.2

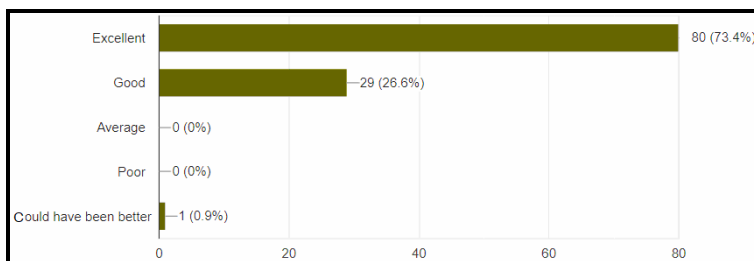
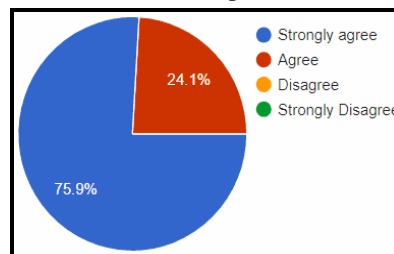


Fig-2: Overall, all these sessions about AETCOM module helped me understand the concept of "What does it mean to be a patient?"



Q. No.	ITEM [n=109]	Strongly agree (%)	Agree (%)	Disagree (%)	Strongly disagree (%)
1.	I got sensitized to the patient's rights and responsibilities.	57.8	41.3	0.9	0
2.	The exploratory session helped us express our views and experiences about health, disease & suffering.	44.4	54.6	1.0	0
3.	I got to know about some individual experiences about ill-health from my fellow students.	48.6	49.5	1.8	0
4.	The movie clips shown pertaining to patients' experiences were very effective.	53.2	40.4	6.4	0
5.	I got an insight into patients' views and expectations from the doctor.	56	43.1	0.9	0
6.	The role plays demonstrated various categories of patients a doctor may come across.	69.7	30.3	0	0
7.	I felt good to visit the hospital and meet & interact with actual patients.	86.2	13.8	0	0
8.	I felt that this was a very good chance to get an insight into patients' perspective.	75.2	24.8	0	0
9.	The faculty from dept of Physiology facilitated smooth conduction of hospital visit.	60.6	37.6	1.8	0
10.	In AETCOM Self Directed Learning session I got a chance to recollect & reflect upon the experiences of session 1 and 2.	36.7	60.6	3.7	0
11.	We were properly guided beforehand about how to conduct the discussion & closure session.	46.8	50.5	2.8	0
12.	Overall, all these sessions about AETCOM module helped me understand the concept of "What does it mean to be a patient?"	75.9	24.1	0	0

As shown in Table 1 all the students strongly agreed & agreed that they felt good to visit hospital and interact with the patients which gave them a good chance of understanding about patients’ perspective. 98.2% expressed that Physiology faculty facilitated smooth conduction of hospital visit. 97.3% of students strongly agreed & agreed that AETCOM SDL session

allowed them to recollect and reflect upon the overall AETCOM sessions and they were properly guided by the faculty also for the proper conduction of disclosure and closure session. Comments & suggestions of the students regarding all AETCOM sessions given through the open-ended questions are shown in Table 2.

Table-2: Suggestions & Comments to open ended question	
Q. Please write down comments & suggestions, if any, to improve AETCOM session.	
Sr. No	Suggestion/Comments
1.	It was an important learning experience
2.	Such sessions should be done more often especially hospital visits & role plays.
3.	We got to know about various situations doctors might have to face through role plays.
4.	AETCOM are much needed sessions as the gap between doctors and patients is increasing day by day.
5.	Role plays were extremely good.
6.	Closure session was made interesting because of students' participation.
7.	Felt privileged to be a part of such an excellent learning experience.
8.	Writing of reflections is a bit difficult part as we are not used to it.
9.	Debates can also be included in these sessions.

Discussion

In our study we observed that through AETCOM training, the students got an overall insight into “what does it mean to be a patient?”, the importance of demonstrating empathy during patient encounters, the doctor-patient relationship and the roles & responsibilities of a physician. Through the exploratory session, they could gain a better understanding of what it feels like to be a patient, or to be in the shoes of a patient, by introspecting on their own experiences or on the experiences shared by their peer group, whether as patients themselves or as relatives of a patient. That helped them to understand patients’ views and expectations as well.

Several studies, like the study done by Ahsin et al [10], Mueller [11], Roberts et al [12] and others, had emphasized that medical ethics and communication must be taught in the medical curriculum itself. This was the first of its kind formal teaching-learning experience for the first-year medical students in India. Also, hospital visits under AETCOM training helped them to undergo a first-hand experience with the patients. The new CBME curriculum allowed them to undergo newer training methods writing

reflections about their experiences and read & explore more into the topic through self-directed learning sessions. Students were very happy to be a part of this novel teaching-learning experience and expressed that this was the need of the time for better understanding of the doctor-patient relationship as well as bridging the gap between these two groups.

Similar findings were noted by Shilpa M. et al where they mention that the introduction of the AETCOM modules in the competence-based medical education curriculum with the intention of inculcating attitude, ethics, and communication skills, explicitly into the mainstream of education is a boon to develop professionalism in the young medical graduates [13]. In yet another study by Dixit R. et al, students have expressed that learning about AETCOM will help them in gaining patients confidence and for gaining self-confidence [14]. Our students expressed that writing reflections about their experiences in the logbooks was a bit challenging task as they were not used to it. Similar findings were noticed by Savitha D. et al where students expressed several constraints/limitations of reflective narratives and noted that it becomes a monotonous process [15]. So, we need to guide the students about writing reflective narratives in future.

The strength of our study is that it has considered the perceptions of the very first batch of students about this altogether different but important teaching-learning experience. The limitation is that it has been a cross-sectional observational study, and if conducted longitudinally in subsequent phases would be helpful to understand perceptions of medical students in higher grades as well. Additionally, an objective evaluation of the pedagogy and experiential learning in AETCOM in the future would be helpful in gathering data on the positive behavioural changes in budding doctors.

Conclusion

The AETCOM module has been positively received by first-year MBBS students, providing them with valuable insights into the importance of empathy, ethics, and

communication in patient care. The students appreciated the innovative and practical teaching methods, including hospital visits and role plays, which enhanced their understanding of patient perspectives. The study highlights the need for continued guidance in reflective writing and suggests that similar approaches be adopted in higher grades. This research emphasizes the importance of incorporating soft skills training in medical education to bridge the gap between

theoretical knowledge and practical application in patient care.

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