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Letters to the Editor

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LETTERS TO THE EDITOR

Finnish medical students' perceptions of Theatre in Education method in learning interpersonal communication competence

Dear Sir

Theatre has educational possibility in teaching medical students communication skills; simulated patients are commonly used in medical education for teaching and assessment (Cleland et al. 2009). However, Theatre in Education (TIE) has been little used in this field. Therefore, we incorporated the TIE method into a pilot course in speech communication in a middle-sized University, Finland, 2006.

TIE originated in Britain in the 1960s; it combines theatre techniques and education, utilizes the elements of traditional theatre, educational drama and simulation, and contains carefully structured patterns of activities around the selected topic (Jackson 1993). We wrote two plays about doctorpatient communication during the medical consultation based on real patient-cases. Each play included communication challenges and ended in a doctor-patient conflict. Trained amateur actors performed the plays for a student audience. Each play was reflected through pair discussions and drama conventions. The play was then repeated, and the students were able to stop the action whenever they felt the doctoractor could change her communication behaviour. The actors performed the students' solutions, and then the students were encouraged to assume the role of the doctor-actor, and test several possible solutions themselves. We call this modified forum theatre. At the end of the workshop we reflected the learning experience.

The study objectives were to explore Finnish second-year medical students' perceptions of the special characteristics of the TIE method and its suitability for learning interpersonal communication competence. The research data were gathered by a questionnaire (N=43) and focus group interview with eight medical students. Percentages were calculated and the open-ended questions and transcriptions of the focus group interview were analyzed using the qualitative content analysis. The codes created were cross-checked, resulting in 93% agreement. According to the respondents, TIE provided opportunities especially for observing live doctor-patient interaction and reflecting the problematic situation together with peers in the modified forum theatre stage. TIE enabled students to practice interviewing skills voluntarily by assuming the doctor's role. Most respondents (86%) considered TIE suitable or very suitable for learning interpersonal communication competence. These results encourage the communication instructors to apply TIE in medical students' communication skills training. The effectiveness of TIE will be further studied through students' subjectively experienced learning outcomes, and changes in their attitudes and knowledge.

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Teaching future health care professionals about the concept of essential medicines

Dear Sir

The role of health professionals is to identify and manage the problems besetting patients. Although the aim of the concept of essential medicines is to provide cost-effective cures for most of the public health relevant diseases, misconception of the concept by health professionals can be a major barrier to the successful implementation of the essential medicines concept (World Health Organization 2005). In order to increase the awareness of health professionals to the essential medicines concept, university curricula must give priority to the inclusion of the topic.

According to Chase (2006), health education has an important role in changing health care for the better. Indeed, changes to health professionals' behaviors are most effective at the initial stage of the health professionals' education through the implementation of measures that address the health disparities. Moreover, professional behavior is an important concept in practice and therefore should be included in health education.

In our efforts to ensure the implementation of the essential medicines concept in Malaysia through the future health care

practitioners, the awareness of Malaysian medical and pharmacy students in five public universities was investigated. Moreover, the medical and pharmacy undergraduate curriculum of these universities was also evaluated and it was found that the subject of the concept of essential medicines was included, but on a very superficial level.

Although university curricula were the source of knowledge for the majority of the students, respondents lacked awareness of the concept of essential medicines. The reasons behind the results could be attributable to the lack of a good curriculum, i.e., the scope and depth on the subject, lack of trained teachers, the teaching approaches utilized, or the limited time allotted to teach students about the concept. The quality of curriculum can be improved through the increase of staff awareness on the subject matter, the presentation of seminars for students, peer group activities, concept mapping and problem-based learning, and group activities and workshops.

The inclusion of the concept into the university curricula was only evident in 50% of the universities surveyed and awareness was not very satisfactory. As such, educational programs and strategies must be applied to improve the awareness of health students towards the essential medicines concept.

Research was conducted at Universiti Sains Malaysia, Universiti Kebangsaan Malaysia, Universiti Malaya, Universiti Islam Antarabangsa, and Universiti Teknologi Malaysia.

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Beyond the journal club: A decade of resident evidencebased medicine symposia at the University of Chicago

Table 1. The role of EBM presentations in subsequent researchand career trajectories.				
EBM topic Percent of total	Related to the third-year research project 9.8% (4 of 41)*	Related to the area of sub-specialization 47.6% (10 of 21)**	Publication 0 (0 of 46)	

*Data on the third-year research topics was missing for 5 residents.

**Among the 21 residents who pursued post-residency sub-specialty training.

and Gynecology, University of Chicago, has hosted an annual symposium dedicated to the application of evidence-based medicine that is moderated by an internationally renowned expert in the field, Dr. David Grimes. Beginning with a clinical question, residents are encouraged to critically analyze the literature in order to draw a conclusion and make clinical recommendations. Although many institutions employ journal clubs, morning reports and lectures in order to provoke the critical analysis, the University of Chicago may be unique in dedicating an annual resident conference to this practice. This letter describes our experience with EBM instruction. In particular, it evaluates whether EBM presentations were related to the individuals' subsequent research projects, future career paths or succeeding publications.

Since its inception, there have been 46 EBM presentations, of which 39% were focused on obstetrics, 23% on gynecology, and 41% on subspecialty topics. There was no general trend of subject matter over time. In the first years of the program, presentations commonly cited only one reference. Over time, the projects developed into increasingly comprehensive reviews, including systematic literature searches. Although the EBM presentation is followed in the next year by a primary research project presentation, only 10% of EBM projects were related topically to the third-year project. Furthermore, of the 21 residents who pursued sub-specialty training, only 10 chose EBM presentations that were related to their subsequent field (48%). None of the presentations resulted in a single publication (Table 1).

Resident training that includes an evidence-based curriculum is increasingly important. Our annual symposium may provide a model for other institutions. However, even though EBM projects can serve as a lifelong learning tool for future career and clinical practice, in our experience the projects have been underutilized as groundwork for future research projects and publications and may be more effective if integrated within a formal research curriculum.

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Dear Sir

As evidence-based medicine (EBM) has become an integral part of clinical medicine, so too has its inclusion in resident training programs. Since 1998, the Department of Obstetrics University of Maryland School of Medicine Baltimore MD, USA

Is mandatory training in research methodology associated with attitudes and knowledge about science in medicine?

Dear Sir

Using a combination of cohort study and controlled trial, we previously showed that a single mandatory science methodology course was an effective intervention to induce a short-term change in attitudes towards science (Vujaklija et al. 2010). To explore the possible long-term effects of research methodology teaching on the opinions about research among young medical professionals, we performed an 8-year survey study of a convenient sample (n=1165) of medical graduates in Croatia from 2000 to 2007, who sat for the national licensing examinations after a year of internship (Marinović et al. 2009). Respondents filled a questionnaire on their opinions and practice in research and the knowledge of research methodology. Regardless of their formal training in research methodology, more than 95% of interns considered that physicians working either in academic and non-academic health care settings should read medical scientific journals. More interns with mandatory research methodology training reported reading journal articles in English (83% versus 68%, $\chi^2 = 23.29$, p < 0.001) and had less favourable opinions on complementary and alternative medicine (90% versus 77%, $\chi^2 = 25.77$, p < 0.001). Regardless of their experience in research methodology training, 93% of all respondents had positive opinion on the need for doing research even in a small country such as Croatia, and 82% thought that medical students should be trained in writing scientific articles. Significantly, more interns without previous training thought that medical students should learn how to do medical research (84% versus 80% of interns with previous research methodology training, $\chi^2 = 5.63$, p = 0.023). Taken together with our previous studies, the survey of young physicians entering medical practice indicates that teaching research methodology early in the curriculum is associated with lasting positive opinion and the knowledge of research.

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Why the fuss about Generation Y?

Dear Sir

Generational influences on workforce patterns is the new 'buzz topic' across the health professions with blanket assumptions about how persons' approach their work preferences and career choices based on 'when' they were born. We should avoid a tendency toward seeing 'Generation Y' as the basis for our predicted workforce anomalies. Every generation brings with it a new set of values and ideals that permeate into their preferences for living, learning and working – also shaped by their social and physical environment.

The recent issue of *Medical Teacher* (Vol. 31) illustrates the re-emergence of personality testing and the current interest and debate on its potential use in medical education. Yet, medicine seems reluctant to accept the potential insight that personality traits provide about an individuals' performance and key attributes.

Likewise, we have a responsibility to be honest with our future workforce and provide maximum information on the professional and personal requisites of all disciplines so that students can make the most informed and appropriate career choices possible. We can supplement this information by providing students and counsellors with a framework of dominant trait profiles of each discipline to ensure a more complete understanding of their intended career. Disillusioned new doctors in the wrong career will ultimately result in further gaps in our workforce.

It is individual personality traits – with lashings of luck and circumstance – that channel individuals toward their niche in life. This should be reassuring for the medical community because by and large we do get the right students who are competent, content and a credit to the profession. However, there are other and perhaps better means to ensure we get it right for every student every time and at the very least provide a process that assists their decision on where their individual niche belongs within the profession. There is much we can learn about exploring the personality traits inherent in and attributed to the many medical disciplines. If Generation Y is really so different, then perhaps we should look closer at the traits that shape their behaviour to better understand how to help them become better doctors. The bottom line is that we need students studying to be doctors – because they want to be doctors. And even better who have the requisite traits that form the basis of conscientiousness, commitment and professionalism – whatever letter of the alphabet they are labelled.

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