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Community Medicine

A CROSS-SECTIONAL STUDY ON ATTITUDE AND PERCEPTION OF MEDICAL UNDERGRADUATES TOWARDS THE FAMILY ADOPTION PROGRAM IN MEDICAL COLLEGE, RAJNANDGAON (C.G.)

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ABSTRACT **Background:** The Family Adoption Program (FAP) is a mandatory component of the Competency-Based Medical Education (CBME) curriculum under the National Medical Commission (NMC) in India. Its primary aim is to ensure enhanced healthcare services in rural areas and provide medical students with hands-on, community-based healthcare experience. **Aim & Objective:** To assess the attitude and perception of medical undergraduates (Phase I, II, and III) towards the Family Adoption Program. **Materials and Methods:** This was a descriptive cross-sectional and institutional-based study conducted at BRLSABVMMC, Rajnandgaon (C.G.), from July to October 2024. Convenience sampling was used. The final sample size was 150 students, with 50 students randomly selected from each of Phase I, II, and III. Data was collected using a validated semi-structured questionnaire distributed via Google Form. **Results:** The study was conducted among 150 students. Approximately 54% of participants were females and 46% were males. The majority of students (63%) adopted 3 families. More than 80% of students had sufficient knowledge about the program prior to the visit. The experience with the allotted families was described as supportive and co-operative. Confidence in data collection improved significantly from 57% to 87% in subsequent visits. About 59.3% of students thought their communication skills had improved after FAP visits. While there were mixed responses regarding utility, 83% believed that students would be benefitted from FAP, and 70% thought the community would be benefitted. **Conclusion:** Students reported a good impact on their communication skills with the community. The Family Adoption Program is considered a very opportunistic scheme to improve both the health of families and community-based education for medical undergraduates. With proper motivation and supervision, this program can create a significant difference in medical education.

KEYWORDS : Family Adoption Program (FAP), Attitude, Perception, Medical Undergraduates

INTRODUCTION

The Family Adoption Program (FAP) is a pivotal initiative introduced by the National Medical Commission (NMC) under the Competency-Based Medical Education (CBME) framework, aiming to integrate community-based learning into the medical curriculum in India [1]. Implemented from the 1st to the 3rd Professional year, FAP facilitates medical undergraduates' engagement with rural families, enhancing their understanding of social determinants of health and promoting empathy and communication skills [2]. This program is embedded within the Community Medicine curriculum, emphasizing preventive healthcare and fostering a holistic approach to patient care [3]. By adopting families, students are tasked with monitoring health parameters, providing health education, and addressing socio-cultural factors influencing health outcomes [1]. The overarching goal is to cultivate compassionate and competent healthcare professionals equipped to serve diverse communities effectively [2]. Studies have shown that early exposure to community-based programs improves students' confidence, data collection skills, and patient interaction [3]. FAP also allows students to experience real-world challenges in rural healthcare, which is critical for their professional development [1].

MATERIALS AND METHOD

Study Design, Setting, and Duration- This research adopted a Descriptive Cross-sectional study design. It was an Institutional based study conducted in the Department of Community Medicine at BRLSABVMMC, Rajnandgaon (C.G.). The study was carried out over a duration from July 2024 to October 2024.

Study Population and Sampling- The target study population consisted of Medical Undergraduates. The inclusion criteria were students of Phase I, II, and III who provided consent. Interns and Phase IV students were excluded. The study utilized a convenience sampling technique. Prior announcements were made to each batch, and a day was fixed for filling the proforma. Students available on that day were considered participants. To ensure an equal proportion of students from each phase, 50 students were randomly selected from each phase after data clearing. This resulted in a final sample size of 150 students. Students were exposed to areas namely Sundra, Gathula, and Rewadih respectively under FAP.

Study Tool and Data Analysis- The study tool was a semi-structured questionnaire prepared with the help of available research evidence and validated by a pilot study. The actual data collection was performed using a Google Form. Data was entered and analyzed with MS Excel, focusing on frequency, percentage, and related statistical tests.

RESULTS

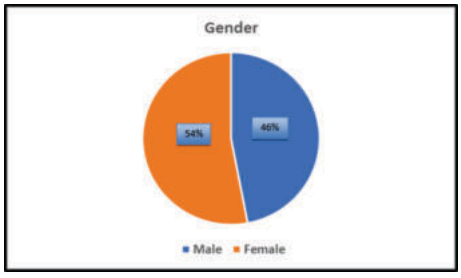


Fig.1 Gender Wise Distribution of the Study Participants

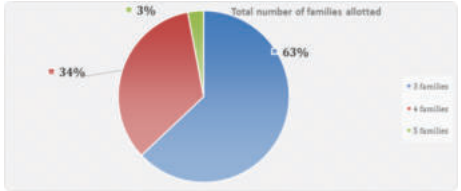
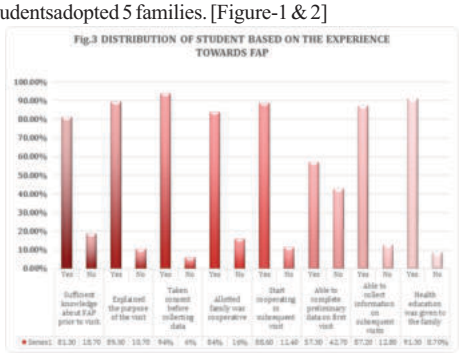
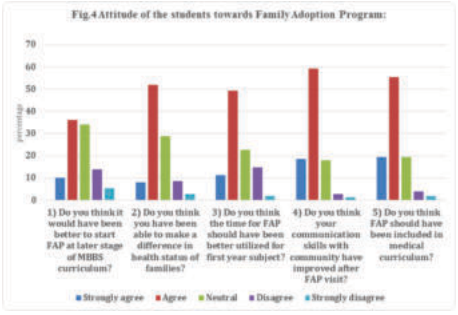


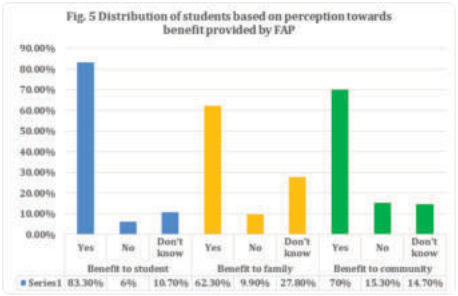
Fig.2 Distribution of Study Subjects According to Number of Families Allotted.

Participant Demographics and Allocation: The study was conducted among 150 students across Phase I, Phase II, and Phase III. The gender distribution showed that approximately 54% of participants were females and 46% were males. Regarding family allocation, about 63% of students adopted 3 families, 34%of students adopted 4 families, and 3%of studentsadopted 5 families. [Figure-1 & 2]



Experience and Knowledge Towards FAP: The experience of the students with the adopted families was largely supportive and co-operative. A high percentage of students (more than 80%) reported having sufficient knowledge about the program and its purpose prior to their visit. The students reported that the allotted family was cooperative in the first visit (84%) and subsequent visits (88%). Importantly, the students' confidence in data collection pertaining to family details increased significantly from 57% to 87% in the subsequent visits. Furthermore, 91% of students provided Health education to the allotted family during the program. [Figure-3]





Attitude and Perception Towards Utility: The attitude and perception towards the program's utility showed mixed responses:

- About 59.3% of students felt that their communication skills had improved after the FAP visit.
- Approximately 52% of them thought that they were able to make a difference in the health status of the family.
- More than half of the students thought that FAP should have been included in the medical curriculum.
- Utility concerns included:
  - o About 49.3% of them thought that the time allocated for FAP could be better utilized for first-year subjects.
  - o 36% of students agreed to start FAP at a later stage of MBBS.
- The perception of benefits was high:
  - o 83% of students believed that students would be benefitted from FAP.
  - o 70% of them thought that the community would be benefitted by FAP.
  - o 62% of students thought that the family would be benefitted from FAP. [Figure- 4 & 5]

DISCUSSION

The present cross-sectional study assessed the attitude and perception of medical undergraduates towards the Family Adoption Program (FAP) implemented under the Competency-Based Medical Education curriculum. The majority of participants demonstrated positive attitudes toward the program, with more than 80% reporting sufficient knowledge of its objectives and purpose prior to their visits. Furthermore, the high proportion of cooperative families (84% during the first visit and 88% during subsequent visits) indicates effective student-community engagement and program feasibility.

In the current study, 59.3% of students perceived improvement in their communication skills following participation in FAP, aligning with findings by Arora et al. (2023)[6], who observed that first-year students reported enhancement in interpersonal and community interaction skills through direct family contact. Similarly, Rashmi and Kumar (2024)[8] emphasized that the "community as a classroom" model fosters empathy, contextual understanding of health determinants, and holistic learning beyond textbooks.

About 52% of students in our study felt that they contributed meaningfully to improving their adopted families' health status. This reflects outcomes from Reshmi et al. (2024)[9], where the majority of students perceived FAP as an opportunity to bring tangible health benefits to the community, despite operational challenges. However, nearly half (49.3%) of the respondents opined that the time allocated to FAP could be better utilized for first-year academic subjects. Similar concerns were expressed in the qualitative analysis by Yalamanchili et al. (2023)[10],where students cited time constraints, travel burden, and academic pressure as barriers to full engagement with FAP.

Interestingly, while 83% of our participants believed that students benefit from FAP, fewer (62%) thought that the families themselves benefited, and 70% agreed that the wider community gains from such programs. This gradient in perception suggests that students recognize more immediate educational than social or health outcomes. As Chakraborty et al. (2023)[7] noted, the success of FAP depends on sustained institutional support, structured supervision, and integration of community feedback mechanisms to ensure reciprocal benefit for both learners and communities.

The mixed opinions about the optimal timing of FAP—36% preferring it to start in later years—indicate that early introduction may pose challenges due to limited clinical knowledge. This sentiment echoes findings from Reshmi et al. (2024) [9] and Arora et al. (2023) [6], who suggested that phased implementation and ongoing mentorship could enhance student preparedness and satisfaction. Despite these challenges, the overwhelmingly positive perception of communication skill development, empathy building, and community engagement underscores the pedagogical value of FAP within medical education. This study aligns with findings from other institutions, highlighting the positive impact of FAP on medical students' development [2]. For instance, a study from Assam reported that 90% of students found FAP beneficial for their personal and professional growth, with faculty engagement being a key facilitator [3]. Similarly, research from West Bengal identified challenges such as sustainability of adopted families and logistical issues, suggesting the need for structured planning and support [1].

The increase in students' confidence in data collection and the provision of health education underscores the program's effectiveness in enhancing practical skills [2]. However, concerns regarding the timing and allocation of time for FAP indicate a need for curriculum adjustments to balance academic demands with community engagement [3].

CONCLUSION

The Family Adoption Program offers a valuable experiential learning opportunity for medical undergraduates by integrating community-based healthcare exposure with professional skill development. The present study revealed that students generally view the program as beneficial in improving communication skills, empathy, and understanding of community health needs. However, concerns regarding time allocation and program structure highlight the need for better scheduling, mentorship, and periodic evaluation of outcomes.

With appropriate supervision, logistical support, and motivation, the Family Adoption Program has the potential to strengthen the social accountability of medical education and foster a more community-oriented healthcare approach among future physicians. Continued research and policy-level refinement are recommended to optimize the program's educational and public health impact.

The Family Adoption Program serves as a valuable component of medical education, offering students practical experience in community healthcare and fostering essential skills. While the program is generally well-received, addressing logistical challenges and optimizing its integration into the curriculum can further enhance its effectiveness and sustainability.

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