

# Integrated teaching- Medical Student Perception: Boon or Bane???



## Education

**KEYWORDS :** Integrated Teaching, Vertical integration, Medical students

<b>Dr Shashikala P</b>	Coordinator, Medical Education Unit, S. S. Institute of Medical Sciences & Research Centre, Davangere.
<b>Dr Manjula A</b>	Member, Medical Education Unit, S. S. Institute of Medical Sciences & Research Centre, Davangere.
<b>Dr P Nagaraj</b>	Chairman, Medical Education Unit, S. S. Institute of Medical Sciences & Research Centre, Davangere

### ABSTRACT

*Background:* Medical Council of India desires the incorporation of integration in the medical curriculum in order to provide the students with holistic rather than compartmentalized learning. In this direction this new teaching methodology was introduced to final year students to inculcate the concept of integrated teaching.

*Material & Methods:* The integrated teaching was conducted for II MBBS and III MBBS students. Feedback was obtained in the form of a questionnaire. Views of III MBBS students at the very first introduction of new teaching methodology were analyzed based on their answers to the feedback questions.

*Results:* The topic selected for the integrated teaching was carcinoma of cervix and the faculties involved were one each from Department of community medicine, Pathology, Obstetrics and gynecology and Oncosurgery. 99% of students felt the topic chosen was apt for this method of teaching. 80% of students felt concepts were made clear. 82% felt, this new method of teaching is very useful in understanding the topic as a whole.

*Conclusion:* Integrated teaching as an innovative approach to impart knowledge saves time, energy and gives better insight into the subject. Students view motivated faculty to conduct integrated teaching frequently.

### Introduction:

Integration literally means to “make entire”, to integrate is to form a more complete or coordinated entity. The changing medical practice over the year’s demands that physicians be prepared to use multidisciplinary expertise for patient care and thus integrated teaching in medical school forms an important tool to impart meaningful knowledge which lasts for a long time and making the learning process enjoyable.<sup>1,2</sup>

Integration can be horizontal or vertical and the eleven levels of integration as proposed by Harden may not be possible for all medical schools to practice. Hence each medical school can decide the level depending on the feasibility and availability of resources.

Medical Council of India desires the incorporation of integration in the medical curriculum in order to provide the students with holistic rather than compartmentalized learning. Rajiv Gandhi University of Health Sciences curriculum proposes 40 hours of integrated teaching in the department of OBG.<sup>3</sup>

In this direction this new teaching methodology was introduced to final year students to inculcate the concept of integrated teaching

### Methodology:

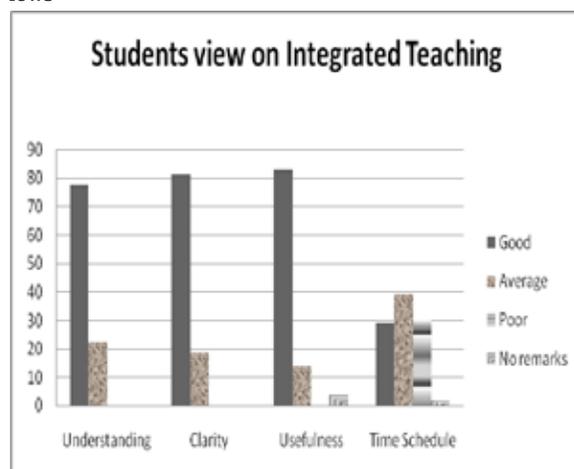
Class chosen for integrated teaching was II MBBS and III MBBS. Vertical integrated teaching module was followed. Four sessions for II MBBS and one session for III MBBS each lasting for two and half hours on important topic was conducted. Each topic was discussed with respect to epidemiology, etiology, pathogenesis, clinical features, treatment and prevention.

Feedback was obtained in the form of a questionnaire. Views of III MBBS students at the very first introduction of new teaching methodology were analyzed based on their answers to the feedback questions in order to improvise the new teaching technique.

### Results:

The topic selected for the integrated teaching was carcinoma of cervix and the faculties involved were one each from Department of Pathology, Community medicine, Obstetrics and gynecology and Oncosurgery.

**Fig 1: Students view on the integrated teaching were as follows**



99% of students felt the topic chosen was apt for this method of teaching and extensive information with multidisciplinary approach helped in understanding the subject better.

80% of students felt concepts were made clear and holistic approach helped to know various aspects of single disease.

82% felt this new method of teaching is very useful in understanding the topic as a whole instead of bits and pieces from various departments at varying and compartmentalizing the topic at various intervals.

78% of students felt the method definitely helped in understanding the subject better.

60% of students were of the opinion that the duration of the session was lengthy.

### Discussion:

Needs of students are changing and role of educators is being redefined at the same time.<sup>4,5</sup> Integration ensures continuity of learning, avoids duplication and redundancy. Change of speakers makes the session interesting. The module of vertical

integration brought in a multidisciplinary and holistic approach to carcinoma cervix. Students also suggested other topics for which integration would facilitate better understanding. Grey zones highlighted were related to the duration and time of the day for conducting the session. 70% of students felt duration of the teaching programme was prolonged and suggested a break in between and to conduct the programme in the morning hours. Suggestions to make the lecture more interesting and receptive were to include role play, interaction, short videos and tea break.

To conclude students accepted this new teaching technique as an innovative approach to impart knowledge, which saves time, energy and gives them better insight into the subject. Student views motivated faculty to conduct integrated teaching frequently. To evaluate the student's knowledge gain, it is better to have assessment in the form of pretest and posttest or multiple choice questions.

## REFERENCE

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