AWARENESS OF FIRST YEAR MBBS STUDENTS ON MBBS DEGREE AND THEIR IDEAS: AN UNEXPECTED REALITY

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ABSTRACT

Introduction: MBBS is a dream to cherish for all students. It is a course which is respected globally. Medical course is perceived as stressful by many of the undergraduates all over the world. They join the course at an early age without awareness of the details of curriculum, the approaches to be followed for theoretical understanding and acquiring practical skills and developing right attitude to be a good humane doctor.

Aims and objectives: To know the awareness of MBBS students about their knowledge of it as a profession and their attitude to know the surrounding atmosphere and approach of students while pursuing the course.

Material and methods: This is a retrospective, observational study started after taking the approval of Institutional Ethical Committee of Government Medical College, KADAPA. The material for the study consisted of volunteersfrom first year MBBS students of Government Medical College, WHO gave an informed consent to express their ideas for the Questionnaire.

Results: Students gave their answers to the questionnaire voluntarily and the answers are noted in a table. Most of the people had no awareness of the MBBS degree till they entered the course and feel MBBS is tough and expressed thatthey want good surroundings and circumstances to study the course.

Discussion: Most of the students did not complete their teenage when they have taken the decision to join MBBS course. They had decided even during their schooling, inspired by school teachers and medical college faculty. They are interested in games and felt the subjects are tough and still want to study. Their concentration in classes is 75-100% and they want to read daily but are getting disturbed by various problems. They even have a dream to do super specialty and a small group want to participate in research.

Conclusion: The present study facilitates faculty in understanding the interests of students, circumstances for under performance in examination and their problems. This provides for designing a teaching method to explain the subject in an understandable way and for developing newer teaching and learning techniques.

KEY WORDS: Interests of Students, Under Performance, Teaching Method, Learning Techniques.

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INTRODUCTION

MBBS is a dream to cherish for both students

and their parents. It is a course which is globally respected. An attempt to know the prior

knowledge of students about the degree which they are pursuing in first year of MBBS facilitates in understanding the present generation MBBS students and for planning the curricular reforms and for mentoring the student to make them competent doctors. The content and structure of the basic sciences has remained largely unchanged. The main topics are Anatomy, Physiology, Biochemistry. Improving and adapting education of medical students to the health needs of the population is a continuous process. Students believe that encouraging 'Personal hobbies like music and sports' byinstitution could substantially help in managing the stress.In Indian scenario, higher stress in females could be because of their sensitive nature and the way of reacting to stressful situations[1]. In Government Medical College, Kadapamentoring system is established to have a better idea about students. The impact and effectiveness of these intervention programs in reducing stress levels of medical students are recommendations for future research.

Joining a medical college is not stress free and it is actually a stressful situation to many of the undergraduate medical students. Experiencing stress to some extent is good as it teaches the handling techniques. If the student is fully aware of the profession which he or she is joining well in advance during their formative years and if they are made aware during the early stages of their joining the medical college, it will improve their performance during the study period and while practicing the profession after graduation.

Aims and objectives: To know the awareness of MBBS students about the medical curriculum and their attitude towards the medical profession and the influence of surrounding atmosphere while pursuing the course.

MATERIALS AND METHODS

This is a retrospective, observational study started after taking the approval by Institutional Ethical Committee of Government Medical College[RIMS], Kadapa, Andhra Pradesh. The material for the study consisted of ideas of volunteered first year MBBS students of Government Medical College after taking an informed consent to get answers for the Questionnaire with 25 questions. Interaction

with the participants for obtaining their responses to the questionnaire was done by a pre-designed semistructure and pre-test was not conducted as students can influence other students.

Source of study: First year MBBS studens of 2017-18 batch in Government Medical College, Kadapa, Andhra Pradesh are the students of study. Students who had attended to the class on a particular day were given the questionnaire. At the end of a teaching session, the participants were explained the purpose and method of this research project. An informed consent was obtained from them to join this research project. The participation in this study was voluntary. Those who did not attend that day were not included. They wereinformed that confidentiality was guaranteed and data would be strictly kept confidential.

The participants of the study were 109 students (48% males: 52% females) with the male to female ratio of 1:1.08. Sampling of students was done in class room irrespective of gender, age and preadmission background. Data entry and analysis were done using the percentage, Statistical Package for Social Sciences (SPSS) and chi-square test. A p-value of < 0.05 was considered as significant.

RESULTS

The participated group was 109 out of 150 students (72.6%). Among the 109 participants 52 are boys [48%] and 57 are girls [52 %].

Results were presented as percentage of number of study subjects with correct responses and divided into groups like total, only male and only female. When there were any comparisons, chi-square test was used.

DISCUSSION

The students are given freedom to give their own answers. An attainable and satisfactory rate of response is around 75% forinterviews and 65% for self-administered questionnaire [2]. But in some other studies 70% were considered as 'relatively higher score' [3].

The total number of students participated in the study were 109 of which 57 are girls and 52 are boys of 2017-18 batch students studying first year MBBS in Government Medical College, Kadapa, Andhra Pradesh.

Table 1: Showing percentage of responses for the Table 2: Total no. of students to the questions -females, questions.

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Question	Females n=52	Males n=48	Total=109
When did you decide to join MBBS? a. Schooling	47 [82%]	37 [71%]	84 [77%]
PRESENCE OF doctors in the family-yes	19 [33%]	19 [37%]	38 [34%]
Joined medical school because of interest to serve people	50 [88%]	38[73%]	88[81%]
Got seat in wished medical college	13 [23%]	14[27%]	27[25%]
knew how many subjects are there in MBBS before joining	23[40%]	22[42%]	45[41%]
satisfied about your entry into MBBS college	46[80%]	39[75%]	85[78%]
like the college which you are studying now	55[96%]	48[92%]	103[94%]
After MBBS-MD/MS	22[39%]	25[48%]	47[43%]
RESEARCH	08[14%]	03[05%]	11[10%]
Liked college and hostel premises	50[88%]	48[92%]	98[90%]
Subjects in MBBS curriculum are vast	49[86%]	43[87%]	92[84%]
Feel that one year is enough for studying 3 or 4 subjects for each year	26[45%]	33[63%]	59[54%]
Distracting cause – Miss personal enjoyment	45[79%]	18[35%]	63[58%]
Friends and seniors disturbance-	04[7%]	24[35%]	28[26%]
Extracurricular activities are satisfied during MBBS course-yes	23[40%]	29[58%]	52[48%]
Teaching with all &audio visual aids	48[84%]	25[48]	87[80%]
Uniform is necessary	46[80%]	33[63%]	79[72%]
Biometric attendance useful	50[88%]	41[79%]	91[83%]
Right way to study is daily going through subjects	56[98%]	50[96%]	106[97%]
Listening classes with only 75-100%	38[67%]	25[48%]	63[58%]
100%	17[30%]	13[25%]	30[28%]
Starting PG preparation	7.7		
Majority answered by2 nd year –followed by3 rd year – final year- internship	39[68%]	40[77%]	79[72%]
Most influencing persons –all	36[63%]	31[60%]	67[61%]

Table 3:Students responses for different methods of teaching.

	FEMALES	MALES	TOTAL
Chalk & talk	1	1	2
Only power point	0	6	6
Chalk and talk, power point, practical knowledge	8	18	26
All of the above with a-v aids	48	25	73
Blank	0	2	2
Total	57	52	109

The expected values if rows and columns are independent.

	FEMALES	MALES	TOTAL
Chalk & talk	1.046	0.954	2
Only power point	3.138	2.862	6
a,b,practical knowledge	13.596	12.404	26
All of the above with a-v aids	38.174	34.826	73
Blank	1.046	0.954	2
Total	57	52	109

The chi square value with 4 degrees of freedom :18.9 & p-value : 0.0007 which is less than 0.05 and so significant.

Majority of students responded that they want chalk and talk, power point, practical knowledge along with audiovisual aids.

QUESTION	FEMALES n=57	MALES n=52
Mean age of student	18.56	18.59
No. Of attempts to enter into medical college	2>1>3	2>1>3
	school-47	school-37
Decision to join MBBS	college- 03	college- 10
	not particular-07	not particular-05
	YES-19	YES-19
Doctors in family	NO-38	NO-33
Joining MBBS because of interest to serve people	50	38
Got college as they wish	Yes-13	Yes-14
	No-44	No-38
Didn't know the subjects	Yes-23	Yes-22
bluit t know the subjects	No-34	No-30
	Yes-46	Yes-39
Satisfaction about entry into college	No-11	No-12
		BI=01
	Yes-55	Yes-48
Likes college after entering	No-02	No-03
		BI=01
Studies after MBBS-MD/MS/	22	25
Research	8	3
superspecialty	20	16
Others	7	8
	Yes-50	Yes-48
Likes college and hostel premises	No-06	No-03
	BI=01	BI=01
Manage and the second s	Yes-49	Yes-43
MBBS curriculum is vast	No-08	No-09
One week is an early to study 3 and subjects	Yes-26	Yes-33
One year is enough to study 3 or 4 subjects	No-31	No-19
	Yes-23	Yes-29
Extracurricular activities are satisfied	No-34	No-23
		BI=01
	Yes-46	Yes-33
Uniform is necessary	No-10	No-19
	BI=01	
	Yes-50	Yes-41
Biometry used is correct for attendance	No-04	No-09
	BI=03	BI=02
	2 nd year -39	2 nd year-40
Starting pg preparation	3 rd year -14	3 rd year -11
	Final yr -02	Final yr -01
	Internship-02	Internship-0
Most influencing persons		
School teachers-	7	2
Medical college faculty-	11	15
Doctors u know-	3	4
All above-	36	31

Table 4:Students' level of concentration in classes.

	100% concentration	75-100%	Cant able to concentrate	Total
Females	17	38	2	57
Males	13	25	14	52
	30	63	16	109

The expected values if rows and columns are independent:

	100% concentration	75-100%	Cant able to concentrate	Total
Females	15.68	32.945	8.367	57
Males	14.312	30.055	7.633	52
	30	63	16	109

The chi square value with 4 degrees of freedom: 18.9 &p-value: 0.0007 which is less than 0.05 and so significant.

Majority of students had 75% -100% concentration in class room. Among 63, most of the students were females.

Table 5: Reasons quoted by students for their distraction from studies.

Distracting cause for students	Females	Males	TOTAL
Missing Personal enjoyment	45	18	63
Friend's &seniors'disturbance	4	24	28
Total	49	42	91

The expected values if rows and columns are independent:

	Females	Males	TOTAL
Personal enjoyment	33.923	29.077	63
Friend's & seniors' disturbance	15.077	12.923	28
Total	49	42	91

The chi square value with 1 degrees of freedom: 25.4694& p-value:0.000000000 which is less than 0.05 and so significant.

The questionnaire was given at the time of internals and so the attendance was less. The present study response 72% which is satisfactory.

By choice, 87 (79.1%) students opted for medical education as their first choice and for the rest, it was an alternative. The age of students ranged between 17 and 21 years in a study by Gade S [1] in Indiawith a mean of 18.5 years. The average age of total students in our study in Andhra Pradesh in India is 18.5 years which shows that students did not even complete their teenage and not matured enough when compared to students in other countries like Germany where age was 21.4 yrs[4].

Influence to join MBBS:When asked about their timing of decision to enter medical college, 77% decided in schooling itself. Out of 109 students, most of them do not have any doctors in the family. Only 34% had doctors in their family and remaining are from non-medical background.81% students joined because of their interest in medicine to serve people and remaining just because it's a status symbol [9%] and mathematics was difficult [5%] and parents' force [4%] and 2 did not comment. According to Chatterjee, the major reason for opting MBBS were to serve society (55.2%), for money (42.9%) and a total of 36.9% students opted MBBS as per their parent's will[5]. A study in Australia revealed that only 52% of newly admitted students had interest in medicine while others joined due to reasons like interest in biology(19%), parental pressure (13%) and high marks or no idea of career (12%)[6].Greater-part(67%,) of respondents decided to join medical school with their own choice but rest (33%) joined due to parenteral pressure[7]. The students have good patience in our locality in trying more than 2 years to pursuetheir goal. But most of them got seats in 2ndattempt.

College entry: Only 25% students got seat in this college as they wished and others had a different opinion. But still 78% of students are satisfied to get at least seat in this college and after coming here, 94% likes the college now. It shows that even the students had different ideas of their studies, they were happy to get seat and after that they got acclimatized to the environment, situations and continuing the course. And only 90% are happy with the college and hostel premises.

Even in first year, 43% students have a clear idea about doing MD/MS and only 10% have interest in research activities, 33% aim to super specialty and 14% to foreign studies. Medical schools have reformed curricula to trainstudents in research. Gaps in research training are due to inadequate approaches, shortage of research staff, lack of funds and scarce infrastructure for research training. Reports from the examiners inSudan indicate that the majority of students had inadequate knowledge of research indicatingin sufficient exposure to research training[8]. Most students are not aware of why research is crucialto health care [9]. Negative attitudes toward researchserve as an obstacle to learning associated with poorperformance in research [10]. Attitude to, knowledge of and barriers toward research are three key factors that have an impact on research success [11]. India is a developing country, financial rewards could be one important factor in choosing a career. This could be the reason why most of the students have chosen specialties which have a proven record of financial gains [12].

During the course: The most distracting cause for 79% female students is that they are missing personal enjoyment and remaining 7% is friends and seniors' disturbance and remaining 14% mentioned family problems and ill health. The most distracting cause for 46% males

was friends and seniors' disturbance and 35% boys that they are missing personal enjoyment and remaining 19% mentioned family problems and ill health. The statistically significant difference was observed between males and females regarding their cause of distraction from studies being friends' and seniors'.48% of total students feel that extracurricular activities are not satisfactory in the college and their interests are in sports, games, cultural activities like dance and music. Studies conducted in Mangalore[13] and Nepal[14] found lack of time for recreation in the institution as an important source of stress. Vastness of academic curriculum, fear of failure or poor performance in examination, and lack of recreation were important determinants of stress. The major significant psychosocial stressors were loneliness and family problem [15].

80% students want their teaching to be with chalk and talk, power point, practical knowledge and with audio visual aids. The difference was statistically significant. It is welcoming that most of the students want an uniform - 80% of girls,63% of boys and so totally 74% of all students – want no difference in their clothing and want uniform.83% feel that biometric attendance is useful. The right way to study is daily going through subjects - 106 in 109 i.e, 97%. One girl responded to study a month before exams. 2 boys feel that they can pass anyway. None felt that a overnight study will help them pass. But only 28% are listening with 100% concentration inclassroomsand 58% with 75-100% concentration.72% of students want to start PG preparation from 2nd year only.

The most influencing persons in their day-to-day life in their studies for 61% students were their school teachers, medical college faculty and doctors they know. The toughest subject was anatomy for 50%, physiology for 18%, general surgery for 15%. 10% students did not give their opinion. The basic requirements that students need are cleanliness, improving more facilities and equipment and study hours implementation. Only 41% knew the subjects in the curriculum and remaining have no idea of the course when they joined college. The fascinating subjects for students are cardiology, neurosurgery, DVL, General surgery, General medicine,

oncology and radiology. The paraclinical and pre-clinical subjects are opted least.

Most of the students in the present study in GMC, Kadapawant to start PG preparation by 2nd year –followed by3rd year – final year- internship and feel that first and final years are really stressful. This thought may be due to the University curriculumand rules that they can't go for higher years if failed here. A study from MCOMS, Nepal has also reportedhigher level of psychological morbidity in first year students ascompared to second year (28.4% against 16.3%) among basic science students[16]. Final MBBS students were significantly more stressed than the first and the 2ndyears students. Similarly Satheesh et al.[17] found final year students were more at stress than other years. The school where the students pursued their education, medium of education had no influence on stress. In a study conducted by Shah et al.[18] medium of education, being a hosteller or day scholar, marital status had no significant association with stress level. In the study of Anuradha, vastness of academic curriculum, fear of failure or poor performance in the examination, and lack of recreation were found to be determinants for stress[15].

Fisher *et al.* also found that female students had increased levels of depression, anxiety, and phobias compared with their male counterparts[14]. However in a study among first year medical students Guthrie *et al.* did not find any significant difference of psychological morbidity between men and women[19].

The study of Chatterjeeshowed that mental distress was associated with the students who got admission in the MBBS course appearing more than one attempt in the entrance examination[5]. In our study, most of the students got their seats in second attempt. First, medical educators could carry out curriculum reforms that introduce problem-based learning (PBL), integrated courses and early exposure to clinical training. The approach of integrated courses could decrease the repetitive content of the curriculum and give student's comprehensive understanding of medical courses[5].

Limitations: This a cross-sectional study conducted only among one batch students in one medical college and lacks generalization of

results. Since the information was obtained from a self-administered questionnaire, information bias cannot be ruled out. The nature of research is challenging to know about ideas of students during their entire study period. So this study is to be taken among many students. To encourage more students to pursue a career in research is a future task and it implies about the knowledge of all different fields of medicine and career options to all students. University curriculum should review the methodology of research education and training to students in all possible ways to educate a doctor in all ways to become a good doctor.

CONCLUSION

The evaluation and examination system of present MBBS course do not reflect their exact passion of about being a doctor. The present study can establish a way for faculty to understand students and their interests and circumstances for not performing so that the faculty may get some idea about the problems of students and make a way to explain the subject in understandable way and also find a way to develop new teaching techniques. To this perfect method of training, their teenage, their school atmosphere, inspirations by school teachers and medical college faculty are playing a role. Even though the subjects are tough and still want to study but most of them are concentrating only 75-100% in classes with a wish to read daily but are getting disturbed by various problems. They dream about superspecialty but not research. They are not provided more time and facilities in the campus for recreation and sports to make it less stressful to the students. Counseling cells can be established for both students and parents. It is important to emphasize that in addition to educating in a professional medical course, it is also important to take into account the quality of life of the students during the years of medical training. Teaching stress management and self-care skills to medical students is essential.

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