

Assessment of Educational Environment of Newly Established Medical College by UG Medical Students: A Mixed Method Study

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Abstract

Introduction: Educational environment always play a crucial role in the development of students as well as faculty of any institution. In India, there is a continuous increase in the number of medical colleges and the number of MBBS seats, but the quality of education with quantity is questionable. To answer this question, the present study was planned to know the educational environment in a new Medical Institution that ejected its alumni in 2018.

Aim: To analyze the educational environment of a newly established Medical College in eastern Uttar Pradesh.

Materials and Methods: The present study was a descriptive cross-sectional which took six months to complete. This study used the Dundee Ready Education Environment Measure (DREEM) questionnaire, open-ended questions and focus group discussions (FGDs). The study was conducted on MBBS students in Government Medical College, Azamgarh, UP.

Results: The batch-wise Global DREEM scores were 169.08 (alumni), 156.23 (interns), 168.76 (2015), 164.16 (2016), 176.23 (2017), 176.94 (2018). This demonstrates that the educational environment is satisfactory in all domains and comes under the 3rd category of the educational environment index. The FGDs showed a positive response in all batches but with high variability in scores, which indicates lack of standardization in medical education. The open-ended questions' responses revealed many merits and demerits about five domains.

Conclusion: The variability of DREEM score, FGDs and open ended questions denotes the lack of standardization in the medical education system and the scores of the education environment index (all domains) must move from category III (satisfactory) to category IV (excellence).

Keywords: Medical education, Educational environment index, Medical Students, Eastern UP.

INTRODUCTION

In medical education, there is an unceasing process running to fulfill the needs of the community for good health & advancement. These milestones include the establishment of new medical institution as AIIMS, State medical colleges, the conversion of district hospitals into medical colleges and the opening of private institutions to achieve doctor: population ratio recommended by WHO^[1] but for producing competent doctors, only number of MBBS seats and buildings are not enough. As Medical studies are stressful, the educational

environment needs to be positive and conducive for learning of students and the responsible factors are role of teacher, academic content, assessment, learner's characteristics, administrative issues etc.^[2] The institution must have good educational environment which include teaching-learning

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process, academic assessment, and atmosphere with socialism. Even the perception of the educational environment is different between high achievers and low achievers among medical students.^[3] To improve the policies related to medical education, the study has been planned on direct stakeholders who are medical students. Dundee takes the feedback ready education environment measure (DREEM) which is well-validated all over the globe and includes 50 closed-ended questions.^[4] The feedback is also taken by many other expressive ways like open-ended questions and focused group discussions which has given elaborative responses and genuine suggestions to improve the medical education system.

OBJECTIVE

To analyse the educational environment index of newly established medical college in Eastern Uttar Pradesh.

MATERIAL AND METHODS

A descriptive cross-sectional study was conducted in Government Medical College, Azamgarh, Uttar Pradesh, India from 21st December 2019 to 21st June 2020. 315 MBBS students participated in the study (Table 1). Ethical approval was obtained from the institutional ethical committee numbered as 1665/GMCA/IEC/2019 dated 19th December 2019. The study was conducted by mixed method. The study included participants who have given consent for filling DREEM questionnaire, open-ended questions & FGDs. Those who hadn't given consent were excluded from study.

Study Tools

Dundee ready education environment measure questionnaire, open-ended questionnaire and FGDs. The DREEM questionnaire was distributed separately in each batch and allotted 50 to 60 minutes. The questionnaire was distributed by supporting staffs under the author's observation and no dropout was noticed.

The DREEM questionnaire was scored from strongly disagree, disagree, uncertain, agree and strongly agree as grade 1-5, respectively. The total DREEM score is 250 which

Table 1: Distribution of participant's gender wise and academic year wise

Batch / Academic year	Participants contacted	Consented and Responded Participants		Total N(%)
		Male N (%)	Female N (%)	
Alumni	25	11 (84.62)	2 (15.38)	13 (100)
Interns	25	7 (41.18)	10 (58.82)	17 (100)
2015	100	57 (62.64)	34 (37.36)	91 (100)
2016	100	23 (51.11)	22 (48.89)	45 (100)
2017	100	70 (73.68)	25 (26.32)	95 (100)
2018	100	39 (72.22)	15 (27.78)	54 (100)
Mean age ± SD	450	23.26 ± 2.45	23.29 ± 2.46	315

are distributed domain-wise. There were nine^[9] negative statements. These questions were 4, 8, 9, 17, 25, 35, 39, 48 and 50, which were scored reversely. Higher score, is more positive educational environment.^[4] 50 closed ended questions that measure five domains of education environment and their scores are given below (Table 2). The global DREEM score was taken as 250 which were classified on the basis of modified Educational Environment Index (Table 3).

Data Collection

DREEM questionnaire was administered to all participants after giving orientation. All participants filled and signed the participation information sheet and participant informed consent form. The open ended questions have been solved by students under observation. This process is followed by focused group discussion (FGD). Twenty one FGDs were conducted and in each FGD, fifteen participants were there. Each FGD was completed in around one hour. Two types of data were generated as quantitative (DREEM questionnaire basis) and qualitative (Open ended questions & FGD basis).

Statistical Analysis

The data entry was done in MS Excel then the data sheet was exported to SPSS trial version 16.0 After cleaning the data for any errors, relevant statistical methods such as measures of central tendency, cross-tabulations between the study variables. The whole analysis procedure was carried out by SPSS trial version 16.0. The DREEM domains were analyzed using ANOVA among various MBBS batches and individual item analysis was done by descriptive statistics. Data from the Qualitative method of data collection focus group discussion (FGDs) was transcribed and translated by note-taker notes.

RESULTS

The educational environment index is modified according to DREEM scores used in present study but categorized as per scores of other validated studies. This tool was validated by pilot survey. The DREEM analysis of all domains for all professional years was in 3rd category of educational environment index; SPL as more positive perception, SPT as moving in right direction, SASP as feeling more on positive side, SPA as more positive attitude, SSSP as not too bad,

Table 2: Domain wise scores of DREEM

No.	Domains	No. of Items	Scores
1	Students' perception of Learning (SPL)	12	60
2	Students' perception of Teaching (SPT)	11	55
3	Students' academic selfperception (SASP)	8	40
4	Students perception of atmosphere (SPA)	12	60
5	Students' self social perception(SSSP)	7	35

students' educational environment as positive than negative (Table 3). Students' perception of learning was at the same level in the 2013 (alumni) batch and 2018 batch whereas the middle batches' scores show continued growth. All domains of the DREEM score show significant variation among various batches from the 2013 to 2018 batch except students' perception of learning (SPL). The perception of teaching was in continuous growth from initial batches to 2018 batch. The academic perception was coming down from initial batch till 2016 batch and then again it grew. Students' perception of atmosphere was assessed negatively by 2014 batch and then gradually it went well in other batches whereas students' social self perception was good in initial and latest batches but middle year batches were not satisfied. All domains of DREEM score showed significant variation among various batches from the 2013 to 2018 batch of this newly established college except SPL. Absolutely the variation in scores of deferent professional years denotes the strength and weakness of faculty attitude, infrastructure, timetable, examination

pattern etc. (Table 4). For analysis of open ended questions, the statements given by students are professional year wise and those statements have been picked up which is given by maximum students in percentage (Table 5 a-c).

FGD Analysis

The responses have been kept here exactly said by students without any editing which are as follows.

- **Teaching-learning:** Personalized experience sharing enhances moral enrichment and ethics in topic.
- **Classes:** must be friendly with serious, small topic should cover in less time.
- **Assessment:** what is taught must be asked in exam.
- **Discrimination:** Cast, gender and interdepartmental clashes are main lacunae in institutions.
- **Faculty encouragement:** Target-based salary increment and award system.
- **Time Table:** Weather friendly, quizzes competitive sessions, inter-professional examination, twice attendance

Table 3: Modified Educational environment index for analysis of Results

<i>Educational environment Index</i>			
Student Perception of Learning (SPL) 0-60		Student perception of atmosphere (SPA) 0-60	
0-15	Very poor	0-15	Terrible environment
16-30	Teaching is viewed negatively	16-30	Many issues which needs change
31-45	More positive perception	31-45	More positive attitude
46-60	Teaching highly thought of	46-60	Good feeling overall
Student Perception Of Teacher (SPT) 0-55		Student social self-Perception (SSSP) 0-35	
0-14	Terrible	0-9	Miserable
15-28	Need of retraining	10-18	Not a nice place
29-42	Moving in right direction	19-27	Not too bad
43-55	Model teachers	28-35	Very good socially
Student Academic Self Perception (SASP) 0-40		Students perceptions of Educational Environment (EE) 0-250	
0-10	Feeling of total failure	0.00-62.50	Very poor
11-20	Many negative aspects	62.51-125.00	Plenty of problems
21-30	Feeling more on positive side	125.01-187.50	Positive than Negative
31-40	Confident	187.51-250.00	Excellent

Table 4: DREEM Score Analysis domain wise

Batch	Batch13	Batch14	Batch15	Batch16	Batch17	Batch18	Total	p-value
No. of students	13	17	91	45	95	54	315	
DOMAIN	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	Mean ± SD	
SPL(60)	41.77 ± 50.09	37.00 ± 5.42	39.57 ± 6.31	39.51 ± 6.21	40.54 ± 7.73	41.89 ± 5.48	40.20 ± 6.60	0.079
SPT(55)	35.15 ± 7.16	33.47 ± 5.64	38.33 ± 5.50	36.04 ± 5.74	38.49 ± 6.86	39.76 ± 4.48	37.91 ± 6.08	0.001
SASP (40)	27.69 ± 4.80	26.23 ± 3.99	26.96 ± 4.79	25.79 ± 5.65	28.74 ± 4.82	27.15 ± 4.23	27.35 ± 4.88	0.013
SPA(60)	40.46 ± 6.42	37.82 ± 5.68	40.63 ± 6.35	40.76 ± 6.29	43.75 ± 6.74	43.87 ± 5.98	42.07 ± 5.56	0.001
SSSP(35)	24.00 ± 4.16	21.59 ± 4.12	22.96 ± 3.85	22.11 ± 3.38	24.72 ± 3.45	24.28 ± 3.43	23.56 ± 3.75	0.001
Global score (250)	169.08 ± 23.20	156.23 ± 19.64	168.76 ± 22.44	164.16 ± 22.44	176.23 ± 24.92	176.94 ± 18.85	171.09 ± 22.82	0.001

Table 5: Analysis of open ended questions-answer
Table 5: a

Alumni (N=13)			Interns (N=17)				
Domains	Response	%	Domains	Response	%		
Level of learning	Not so good, level should improve.	23.07	Level of learning	Much low and never met my expectation, Professors took only 2 or 3 classes	11.11		
	No support from faculty, self study was working.	7.69		Teachers not skilled in communication, teaching methods & clinical orientation.	38.88		
	Level of learning is good.	23.07		Mostly self oriented	16.66		
	Initial days were difficult but improved now.	7.69		Learning can be improved by quiz, integration and education fests	5.55		
	Learning is satisfactory. Required Bilingual teaching.	7.69		Learning is satisfactory	22.22		
	Learning good but teaching poor.	7.69		1 st year and 2 nd year not planned but 3 rd year onwards, things were better	5.55		
	Learning just to pass, confused with my opinion and teachers reaction.	7.69		Teachers and teaching methodologies	Very unsatisfied	31.25	
	Poor in practical and clinical knowledge due to fewer faculties. No PHC/CHC visit.	15.38			Teaching is okay but teachers should stick to schedule	12.5	
	Teachers and teaching methodologies	Average methods as they are also new in teaching profession			7.69	Some are good and some are bad. (mix opinion)	31.25
		Chalk and talk is only good.			15.38	Satisfied with teachers and their methods. Chalk and talk is best.	25.00
Academic level	Teachers good in knowledge, methods of explanation is poor.	30.76	Academic level	Scoring 2/10, can't apply what I learnt. Exams are tough but passing easily : A demerit	5.88		
	Fully satisfied in comparison of other college.	23.07		Don't find myself where I wanted. Workshops, quizzes, clinical learning required	41.17		
	Methodology is obsolete, no clinical and practical information.	23.07		Unable to assess myself.	17.64		
	Lagging in clinical aspects, Must be provision of evening teaching.	38.46		Go for post graduation to get efficient.	5.88		
	Good academically.	53.84		Good	29.41		
Social status	Had to put extra efforts from our side to improve academically.	7.69	Social status	Teachers-student relation very good. Happy with faculty.	5.88		
	Previously faculty was not friendly but better now.	15.38		Below standard. Fear of fail in exam and asking questions in class. No counsellor	29.41		
	Good with friends and faculty.	61.53		With some faculty its good, not with all. Friends are good.	58.82		
Experience of working place	Interaction with most of the teachers was amicable.	23.07	Experience of working place	Teachers discriminate with students	5.88		
	Can't apply the knowledge at working place on patients	7.69		Feel good, not much load of work, emergency didn't give me to learn. Over all good.	36.84		
	Feel good.	76.92		Okay. Some dept. gives unproductive and irrelevant work. (clerical work)	15.78		
	Not satisfactory, govt. support is very bad.	15.38		Not satisfactory, no clinical exposure, govt. support is very bad.	26.31		
					Boring place, no canteen, very unsafe working place, local GUNDA.	10.52	
		Dishearted Confused Doctor & Happily Depressed Doctor	10.52				

Table 5: b

2015 (N=91)			2016 (N=45)		
Domains	Response	%	Domains	Response	%
Level of learning	Not developed because no one is interested in teaching and learning.	15.73	Level of learning	Not developed because no one is interested in teaching and learning.	8.88
	mostly satisfied with learning	39.32		Mostly satisfied	46.66
	Good but we have to study more by our self without any guidance.	16.85		Good but have to study more by our self without any guidance.	13.33
	Not good compared to old college	12.35		Not good compare with old college.	4.44
	Satisfactory , need to follow schedule, no teaching by Non PG JRs	8.98		Feel better than other new college's students.	2.22
	Just for passing and mugging up the contents.	1.12		Poor in practical and clinical knowledge due to fewer faculties.	24.44
Teachers and teaching methodologies	Poor in practical and clinical knowledge due to fewer faculties.	5.61	Teachers and teaching methodologies	Average methods as they are also new in teaching profession	1.65
	Average methods as they are also new in teaching profession	16.25		Chalk and talk and ppt both are good, clinical & bed side teaching required	23.25
	Chalk and talk and ppt both are good, clinical & bed side teaching is required	27.5		Not satisfied, old methods, no interaction, no attention.	16.27
	Not satisfied with teachers and teaching methods. Old methods, no interaction.	17.5	Academic level	Fully satisfied in comparison of other college.	55.81
	Fully satisfied in comparison of other college but some time resources make hindrance in teaching.	35.00		Confident to pass the exam but lag in quality what a doctor should have.	30.76
	Good teachers but not giving practical knowledge and expect us to become perfect.	3.75		Average level, Had to put extra efforts from our side from private coaching	10.25
Academic level	I can work at village level and can improve the status.	7.59	Social status	Very low. Inter proff test and seminar should be more.	10.25
	Assess myself as only in words for patients, I can't treat a patient.	26.58		Very good level, because we achieve things in scarcity.	48.71
	Average level, Had to put extra efforts from our side to improve academically.	45.56		Good with friends and faculty.	69.56
	Ideal epitome of bored final year MBBS student and frustrated.	3.79		Interaction with most of the teachers is okay but with friends its good.	26.08
	Very good level, because we achieve things in scarcity.	16.45		Interaction is not good with friends and faculty.	4.34
Social status	In our college, a phrase is followed «COME UNKNOWN & GO UNKNOWN»	3.48	Experience of working place	Don't feel any enthusiasm, boring place to work.	20.00
	Good with friends and faculty.	66.27		Feel good.	67.50
	Interaction with most of the teachers is amicable but with friends its good.	22.09		Still not involved in that.	10.00
	Interaction is not good with friends and faculty.	8.13		Great, creating a low confidence lab rats.	2.50
Experience of working place	Can't apply the knowledge at working place on patients	10.58	Experience of working place	Great, creating a low confidence lab rats.	2.50
	Feel good.	69.41			
	Not satisfactory, external environment is unsafe ,govt. support is very bad.	9.41			
	Okay, but it could have more supportive from faculty side, gender biased treatment is seen many time.	10.58			

Table 5: c

2017 (N=95)			2018 (N=54)		
Domains	Response	%	Domains	Response	%
Level of learning	Not developed because no one is interested in teaching and learning.	6.84	Level of learning	Very low, No practical knowledge, teacher and students should come together to stop bunk.	5.66
	Good but have to study more by our self without any guidance.	23.28		Very good at theory but practical, clinical aspects, field trips, dissection, first aid awareness is missing.	43.39
	Not good compare with old college.	2.73		Equal at theory and practical basis, I appreciate faculty to give model making, seminars etc.	30.18
	Better than other new college's students.	41.09		Not good compare to other medical college in terms of practical and labs.	7.54
	Poor in practical and clinical knowledge due to fewer faculties. No PHC/CHC visit.	26.02		Not satisfied, didn't learn practical and clinical knowledge and don't get clarification for doubts and students come just for attendance.	13.20
Teachers and teaching methodologies	Teachers don't try to make subject interesting and force to mug the subject.	1.49	Teachers and teaching methodologies	Method is impressive but shortage of faculty and practicals/demonstration is waste of time.	22.22
	Average, chalk and talk and ppt with video are good and clinical oriented teaching, bed side teaching is required and even schedule follow is also issue.	20.89		Average, chalk and talk and ppt with video are good and clinical oriented teaching is required and even schedule follow and only attendance forcing is also issue.	20.37
	Not satisfied, old methods, no interaction, no attention.	26.86		Not satisfied. Old methods, no interaction, no attention.	9.25
	Fully satisfied in comparison of other college but some time resources make hindrance in teaching.	50.74		Fully satisfied in comparison of other college but some time resources make hindrance in teaching.	33.33
Academic level	Feel confident to pass the exam but lag in quality what a doctor (clinical knowledge) should have.	13.33	Academic level	Very good but some are just come for fulfilling their duties and attendance.	14.81
	Average level, We had to put extra efforts from our side as private coaching & internet.	56.66		Feel confident to pass the exam with theory knowledge but lag in quality what a doctor (clinical+practical knowledge) should have.	26.00
	Very low.	13.33		Average level, We had to put extra efforts from our side .	34.00
	Very good level, because we achieve things in scarcity.	16.66		Very low.	16.00
Social status	Good with friends and faculty.	61.97	Social status	Very good level	24.00
	Interaction with most of the teachers is okay but with friends its good.	25.35		Good with friends and faculty	65.85
	Interaction is not good with friends and faculty.	8.45		Interaction with most of the teachers is okay but with friends its good.	21.95
	Only few teachers to whom began communicate not all.	4.22		Faculty is very helping as we can go to their places or make a call at any time for any problem.	4.87
	Don't feel any enthusiasm, boring place to work.	11.47		Only few teachers to whom we can communicate not all.	7.31
Experience of working place	Feel good.	65.57	Experience of working place	My working place is academic block and library, I don't any liveliness, boring place to work.	7.69
	Still not involved in that.	16.39		Feel good.	53.84
	Its good but would be more better if there is canteen.	6.55		I am still not involved in that.	38.46
				As these students have not been in OPD so the answers are not very relevant	

Table 6: Comparative chart of global dreem score in various medical colleges

S.N.	College's Name	Total = 250 Mean \pm SD
1.	Mona M Soliman <i>et al.</i> King Saud University Medical College, Saudi Arabia ^[5] Year 2017	171.32 \pm 14.13
2.	N Asha Rani <i>et al.</i> Adichunchanagiri institute of Medical Science.BG Nagara, Javaranahalli, Karnataka ^[6] Year 2018	159.25 \pm 12.20
3.	Sukanta tripathi <i>et al.</i> Army College of Medical Sciences, New Delhi ^[7] Year 2013	157.28 \pm 11.96
4.	Monika Gupta <i>et al.</i> , Govt. Medical College & Hospital, Chandigarh ^[8] Year 2018	148.00 \pm 10.03
5.	Sandeep Sachdeva <i>et al.</i> , North DMC Medical College and Hindu Rao Hospital, NewDelhi ^[9] Year 2018	162.43 \pm 08.05
6.	Sandeep Bavedkar <i>et al.</i> , TNMC, Mumbai ^[10] Year 2019	149.00 \pm 08.18
7.	H.S. Kiran <i>et al.</i> , J.S.S.Medical College, Mysore, Karnataka ^[11] Year 2013	150.00 \pm 12.50
8.	Reem Abraham <i>et al.</i> , Melaka Manipal Medical College,Manipal ^[12] Year 2008	150.00 \pm 10.63
9.	Varun Kohli <i>et al.</i> , University College of Medical Sciences, NewDelhi. ^[13] Year 2013	126.62 \pm 11.66
10.	Satish Damke <i>et al.</i> ,JNMC,Wardha, Maharashtra. ^[14] Year 2016	153.72 \pm 18.28
11.	Govt. Medical College, Azmagrah,UP.(Present study) Year 2020	171.09 \pm 22.82

display monthly, more hours for the library: fruitful results.

- Need of reformation in hostel mess & good cafeteria in new state Govt. Colleges.

Negative Statements

- We will struggle socially and “disuse atrophy case” as our calibre is not getting used in a productive way. Around 80% students were uncertain about future and 20% students agreed that they will obtain post-graduation.
- Dishearten, confused & happily depressed doctor.
- No healthy environment for sports and entertainment.
- Campus is far away from district headquarter & no vehicle facility.

Positive Statements

- Good atmosphere and infrastructure. Theory is very good, can't deny.
- Motivated and friendly teachers.
- If faculty and students come together there will be definitely reduce in mass bunk.

DISCUSSION

The present study was conducted to examine the new institutions in terms of problems and solutions. As the data have been collected by many ways like DREEM questionnaire, open ended questions and focused group discussion that's why the study got the real picture of teaching-learning sessions, academic assessments of students, and student's feedback about their social level in Govt. Medical College, Azamgarh, U.P. The comparison of this study on the basis of DREEM score reveals similar results with other institutions as the score comes in 3rd category of educational environment index (DREEM Score=125.1–187.5) for all domain but highly variable^[5-14] (Table 6) which is questionable and should come at same level then only the reformation of medical education will be fulfilled in India? The variation of DREEM score shows highly significant results and gives an alarm to evaluate the status of existing medical institution and then opening new medical colleges. The most unsatisfied batch was 2014 batch

(interns). New batches and 2013 batch (alumni) were same in all domain, which might be because of the psychological aspects of students in these professional years as alumni is already passed out so they might be thinking that it's over so why to give negative feedback as general human tendency and 2018 batch was more positive as it has long journey to walk and even they have not seen the institution in from many other corners. Absolutely the variation in scores of deferent professional years denotes the strength and weaknesses of faculty attitude, infrastructure, timetable, examination pattern etc. This comparative data says that medical institution always has basic level at any stage of its journey but there are always chances to improve on various corners.

The study took place from all the horizons of students' thought and their opinion about problems and possible solutions quantitatively (DREEM Questionnaires) and qualitatively (Open ended questions & FGD) that is why this study might help all stakeholders of medical education as administrators and academicians.

CONCLUSION

DREEM score shows positive response in all batches of this institution and with other colleges but with high variability in scores, which denotes lack of standardization in medical education system at present. All batches of institution falls under the education environment index category IIIrd (satisfactory), should move to category IVth (excellence). Learning was good in initial and latest batches. Teaching improved from initial to latest batches whereas academic assessment was down and again risen up. The atmosphere and social aspects are good in recent batches. Expressive open ended answers and FGDs pointed out merits and demerits of the institution.

LIMITATION

The present study was conducted on very small data, the future studies must be done on large scale of data for better presentation.

RECOMMENDATION

It was observed that all medical colleges comes under IIIrd category of the educational environment index which is satisfactory so future research must be done on the reliability and validation of the educational environment index more specifically.

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