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A TRADITIONAL EDUCATIONAL SYSTEM LOSES THE NEED OF STANDARD TEXTBOOKS

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ABSTRACT

Background: The current educational system of ours is teacher centered which makes students follow a teacher, hence eliminating the need for standard text. **Methodology:** 60 students of 1st and 2nd year MBBS sessions selected from Nishtar Medical University, Multan through convenience sampling. **Results:** 48 % of students believed current educational methods are not well enough. 61 % disagreed that current educational methods are student centered while 72% of the students disagreed that teachers stick to standard texts during their lectures. 69 % of the students believed that medical educationists stick to their Notes/handouts during their lectures while 77 % disagreed that the exams set by current medical educationists are based on standard texts. 81 % believed that they can pass the exams by going through the notes/handouts of the medical educationists alone while only 12 % disagreed to it.
Conclusion: Traditional teaching practices eliminate the need of standard texts in medical education
Key Words: medical education, standard texts, MCQs, SAQs, OSPE, OSCE, nonstandard education

INTRODUCTIN

As Vygotsky had said that during the process of evolution towards betterment, humans do observe, reflect and come up with conclusions that once implemented, in a learned way, ultimately result in the grooming of their existing existential state. Times do change and every era comes up with new challenges. The existing practices are evaluated, in every era by the learned, in the scenario of the ongoing challenges and pruned through a process of self- assessment that leaves behind the aspects no longer required and evolves new ones to counter the challenges of the new age[1].

Systems and societies that do follow the rule of continuous evaluation through a vigilant assessment and shrewd pruning and grooming ultimately become the torch bearers and the Custodians of knowledge of that age or era[2]. Those systems or societies who keep on clinging to the obsolete practices and maintain an ultra-orthodox point of view that keeps on pulling its connected society towards the past, ultimately do fade away from the fabric of time and space through a process of continuous erosion.

To critique on the practices of a system hence is of utmost importance to human existence because it not only points out the ailments, preventing the movement of a society towards next rung of evolution, it also paves way for the development of novel ideas that can make the progress of a society more easy in a more streamlined and advanced manner[3]Though apparently this system has adapted to the format that is being used internationally[4],

It falls rather very short of the standards that are upheld by worthy educational environments. The system, over the past two decades or so, has

gradually photocopied the curriculum and the evaluation methods being used in prestigious universities of the world and has implemented it as such, within its institutions, without even a desire of reviewing it and customizing it according to the existing realities of our society. The results are off course obvious. It may have the same evaluation tools, but in the hands of those who were never groomed or trained to use them, they have been twisted and retwisted to fit in the currently existing orthodox practices[5]. Multiple Choice Questions (MCQs) in any prestigious educational system, act as a tool that can check in depth knowledge of its pupils in a very short time and can assess the core knowledge as far as the theoretical facets are concerned. The people who do create or update the pool are the most brilliant minds of that system that are very well paid for the job too. They keep on updating their pool on regular basis as the realm of knowledge keeps on enhancing[6].

Though our educational system has adopted this pool, it remains very short of its actual purpose i.e. to shun the cramming practices of pupils and promote the evolution of core conceptual ideas. Since the people who are involved in this system are least paid, and usually are part of the old fashioned school of thought, they put least effort in evolving or modifying it. The result is that MCQs are non-standardized and have so many technical and knowledge flaws that they lose their efficacy as a test of someone's core knowledge[7]. A Medical school or university in our system has a preset pool of its own, usually copied from available sources and modified in a faulty way, which keeps on repeating itself now and then. The questions keep on slipping out from student and authority sources alike and within few years emerge as books on book shops. Students keep on cramming those instead of consulting standard textbooks, which ultimately brings educational process to the ground[8].

Same goes for Short Answer Questions (SAQs). The universities or schools alike have the same examiners, who have been making the papers for decades, and who keep on repeating their questions. These questions again are available as books. Students know that they can get through exam practicing it in last month of their session[9]. As a result they feel no need to come to classes or be part of educational system. The teachers and authorities alike, fully aware of the situation, have not shown any desire even after decades to at least start changing the pattern of SAQs so that it may bring the masses back towards conceptual learning[10].

The reason may once again be the lack of financial incentives to the examiners and the lack of evaluation at the university and government level. The purpose of SAQ i.e. to check the link creating capacity of a student at C2/C3 level[11] is once again reduced to C1 and hence has long since failed to deliver what it was meant to.

On Spot Practical.Clinical Examination (OSPE/OSCE) examination is no different story either. When it should be checking C3/C4 level[12] of a pupil it hardly, if ever, falls at C2 level. And majority of times it's based on simple recall of the student. The stations are the same more or less every year and answers to those are freely available. As far as the skill of the pupils is concerned, it's usually overlooked, either keeping in view the faulty apparatus available at hand or else due to awareness of the fact that the system hasn't trained these students according to the international standards. Result is once again a routine monotonous process without even showing slightest signs of life within it[13].

The purpose of this descriptive survey, hence was to evaluate and analyze the data associated with poor association of medical students with their text books and to present it to educationists so that they could be made aware of their shortcomings and could work to improve standard of our medical education collectively.

MATERIALANDMETHODS

It was cross sectional study that was carried out to see that does the current educational methods promote the use of standard texts or not and if not what are the reasons behind that and how could

they be rectified. Study was conducted at Physiology Department Of Nishtar Medical University, Multan

Durationofstudy: Study was carried out during the 2nd week of March, 2022.

Samplesize: 60 students from 1st & 2nd Year MBBS were selected for which sample size was calculated through following equation which was derived from WHO Geneva Software "Sample Size Determination In Health Sciences - 2.9".

$$n = Z^2_{1-\alpha/s} P (1-p)/d^2$$

The data was collected through convenience sampling. The questionnaire was placed in the lecture hall and the volunteers were called to collect and fill it anonymously. The questionnaire was collected in absence of a teacher to increase probability of the involvement of students from all the existent strata.

SYSTEMEVALUATIONSURVEYQUESTIONNAIRE

Question	Strongly Disagree	Somewhat Disagree	Ambivalent	Somewhat Agree	Strongly Agree
1. Current Knowledge Deliverance Methods Are Well Enough	1	2	3	4	5
2. Current Educational Techniques Are Student Centered	1	2	3	4	5
3. Medical Educationists Stick To Standard Texts During Lectures	1	2	3	4	5
4. Medical Educationists Stick To Their Notes/Handouts During Lectures	1	2	3	4	5
5. Medical Educationists Promote The Use Of Free Thought & Knowledge Linking During Their Lectures	1	2	3	4	5
6. Exams Set By Medical Educationists Are Based On Standard Texts	1	2	3	4	5
7. Exams Set By Medical Educationists Could Be Passed By Going Through Their Notes/Handouts	1	2	3	4	5
8. Exams Set By Medical Educationists Involve Open Ended Questions & Hence There Is Always A Need For Broader Knowledge Base To Pass Them	1	2	3	4	5
9. Answers Of Questions, That Frequently Turn Up In Exams, Are Easily Available In Non Standard Texts	1	2	3	4	5
10. Traditional Methods Of Education Are Favored By Students Rather Than Non Traditional Ones And They Don't Involve Use Of Standard Texts	1	2	3	4	5

RESULT

48 % of students believed current educational methods are not well enough however 46 % agreed to it. 4 % strongly disagreed while 2 % were ambivalent about the notion. 61 % disagreed that current educational methods are student centered while 35 % agreed that they are. 3 % strongly disagreed while 1 % of the public was ambivalent to it. 72% of the students disagreed that teachers stick to standard texts during their lectures while 21 % did agree to it. 6.5 % strongly disagreed while only 0.5% remained ambivalent. 69 % of the students believed that medical educationists stick to their Notes/handouts during their lectures while 7 % disagreed to it. 24 % remained ambivalent to it. 69 % disagreed with the notion that medical educationists promote the use of free thought and knowledge linking techniques while only 9 % agreed to it.

11 % strongly agreed while 1% remained ambivalent. 77 % disagreed that the exams set by current medical educationists are based on standard texts while only 11 % believed they are. 9 % strongly disagreed while 3 % were ambivalent to it. 81 % believed that they can pass the exams by going through the notes/handouts of the medical educationists alone while 12 % disagreed to it. 7 % strongly agreed while none of them was ambivalent to this question. 69 % of the public disagreed with the notion that the exams they sit for have open ended questions and they can't solve them without a broader knowledge base while only 11 % agreed to it. 11 % strongly disagreed while 9 % were ambivalent. 79 % of the public agreed that the solved questions booklets available in market are sufficient to make them get through the exam and hence they felt no need for standard texts while only 3 % disagreed to it. 17 % strongly disagreed while 1% stayed ambivalent. 52 % of the public strongly agreed that they favor traditional methods of teaching while 23 % strongly disagreed. 25 % were ambivalent to this notion.

DISCUSSION

Based on the descriptive statistics it could be said safely that when it comes to the educational system of the society, we do belong to; we have to accept that it is one which is stunted, in its growth, at a timeline that is several decades behind its contemporary ones. With ultraorthodoxy ruling the system, its mindset has kept shunning away the innovation and improvement in practices that are centuries old. It has kept clinging to obsolete customs due to lack of motivation and ambition within itself and lack of desire to get out of its grasp within its blind following, unable to wake up to the challenges of the new era, resulting in an underdeveloped, highly traditional and supremely conservative approach towards the challenges of the new world on educational front. The results are obvious, education in the name of education, for mere certificates, without any motive of using it as a tool for personal or social grooming and to run personal finances only[14].

Educational system which I do refer to is the one which is run through teachers and trainers who are self centered and self oriented with least desire to get out of their orbit and with least motivation to actually deliver the knowledge. Groomed by the orthodoxy, they have a mindset that stands on the sole idea that knowledge makes them superior to the public around them and if they will let it slip out of their grasp, the practice will not only reduce their superior stature, as more centers of knowledge will arise, but will perhaps threaten their very existence too. The result is obvious; knowledge is kept within a tightly controlled circle. Teachers, facilitators, guides or trainers let only a trickle flow away from their grasp sacrificing the enlightenment of minds over the altar of their personal ego and interests[15].

It is a system that favors a blind following, where a teacher's word is revered sacred, and where a question, an idea, an innovation, a wandering away from the set line, a slipping away into the unknown and a waking up to the wonders of knowledge is considered nothing but blasphemy. Teachers within

this system favor those pupils who, like "good kids", follow their instructions without even raising an eyebrow, who keep on ingesting the words of the books or teacher as such and who keep on divulging those words, exactly as ingested, over a sheet of paper or over the table of the examiner. Perhaps it does satisfy the ego of the system that it has created photocopies of its own self, and perhaps that will be the reason why individual intellectual awakening, grooming and growth has neither been a goal nor a sought after commodity, of this system, unfortunately[16].

With a notorious habit of clinging on to the rotten practices, it alienates and marginalizes those pupils who have a spark within them and who want to ignite others with their spark too. Such individuals are ridiculed, made fun of, considered stupid and pulled by their legs, down the ladder of progress, at every level. The resistant ones, as a result, die trying to make an impact and the less resistant ones perish or are made to perish without a trace. A fate over which, the system and its ruling class, triumphs with sickening delight[17].

Since, it is a very teacher oriented model, hence the need for evaluation is often not felt either. The purpose if is to create photocopies of the person in charge, who judges the quality at the end of training session himself or herself , the need for grand scale or external evaluation is minimal too. Assessments are usually of the product, matching them with the standard person, and system's evaluation is usually looked over. Without assessment or evaluation of the system, it has gone on unchecked for decades, carving pupils who enter within its realm the way it likes and the product of whose carries on its customs with the next generation of the raw material, exactly the same way, it was dealt with and on it goes. Both the ruling and the ruled minds are happy with the process, seemingly[18].

With such congestive mindset, it is highly difficult for anyone to start creating a change. The minds who have been groomed at home for not asking a question or raising a finger behave like drugged zombies within educational system too. Majority is happy if the instructor gives them a written guideline, asks them to learn, cram or follow as such and present it to the evaluator in charge. This has resulted in such a stunted and retarded intellectual status that it vehemently rejects a way that motivates them to come up with their own customized replies to open ended questions. Seeking, looking up, making connections and completing a jigsaw the way they like is something that was never promoted and hence the students can't be blamed for such behavior either.

CONCLUSION

1. Both teachers and students favor the traditional methods of teaching currently.
2. The lectures delivered by educationists are not student centered and they don't stick to standard texts.
3. Medical educationists neither promote free thought process nor do they work on enhancing the problem solving capacity of the students.
4. The exams set by medical educationists don't involve open ended questions and hence students don't feel the desire to broaden their knowledge.
5. The exam setters keep on repeating their questions which in the solved form are freely available in market further negating the desire within students to opt for enhancement of their knowledge and thought process.

RECOMMENDATIONS

1. Medical educationists should stick to standard texts during lecturing.
2. Medical educationists should work on building the capacity of students to solve problems. This could easily be done by making them go through open ended questions repeatedly the answers of whom or the clues to whom could only be found in standard texts.
3. Exams must involve open ended questions the answers of whom couldn't e found unless student has pushed himself/herself through repeated process of solving medical jigsaws.
4. Examiners should not repeat the questions that are already available in the solved form in market. Every paper should have a novel write up. This will not only shun the use of substandard books but it will also enhance the

pull on the students towards the use of standard ones.

5. Medical educationists must opt to non traditional ways to bring the students out of intellectual stagnation.
6. To establish sensitivity and specificity of the questionnaire, further surveys in other medical institutes utilizing the tool we evolved is recommended also.

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REFERENCES

1. Erbil DG. A review of flipped classroom and cooperative learning method within the context of Vygotsky theory. Frontiers in Psychology. 2020;11:1157.
2. Schuwirth LW, van der Vleuten CP. A history of assessment in medical education.Advances in Health Sciences Education. 2020;25(5):1045-56.
3. Schwendimann BA, Linn MC. Comparing two forms of concept map critique activities to facilitate knowledge integration processes in evolution education. Journal of Research in Science Teaching. 2016;53(1):70-94.
4. Sethi A, Javaid A. Accreditation System and Standards for Medical Education in Pakistan: It's time we raise the bar. Pakistan journal of medical sciences.2017;33(6):1299.
5. Wajid G, Sethi A, Khan RA, Aamir HS. World federation for medical education: appropriateness of basic medical education standards in Pakistan. Pakistan Journal of Medical Sciences. 2019 ;35(5):1185.
6. Jaap A, Dewar A, Duncan C, Fairhurst K, Hope D, Kluth D. Effect of remote online exam delivery on student experience and performance in applied knowledge tests. BMC Medical Education. 2021;21(1):1-7.
7. Ali SM, Masood HM, Malik A. Need for a single standardized licensing & residency-entrance level exam policy in the medical education system of Pakistan. Pakistan Journal of Medical Sciences. 2022 25;38(5).
8. Khan A, Ayub M, Shah Z. An audit of the medical students' perceptions regarding objective structured clinical examination. Education Research International. 2016 25;2016.
9. Islam A, Kader M, Shin SY. BSSSQS: A Blockchain Based Smart and Secured Scheme for Question Sharing in the Smart Education System. arXiv preprint arXiv:1812.03917. 2018 Dec 5.
10. Haider I, Khan A, Imam SM, Ajmal F, Khan M, Ayub M. Perceptions of final professional MBBS Students and Their examiners about objective structured clinical examination (OSCE): A Combined Examiner and Examinee Survey. Journal of Medical Sciences. 2016 1;24(4):206-11.
11. Christopoulos A, Pellas N, Kurczaba J, Macredie R. The effects of augmented reality-supported instruction in tertiary-level medical education. British Journal of Educational Technology. 2022;53(2):307-25.
12. Ramalingam V, Balakrishnan P, Wong LS, Pandian SK, Rajavannian C, Djearamane S. The Potential of Implementing Videotaped OSPE Assessment in Health Sciences. Psychology and Education. 2020;57(9):3580-4.
13. Iqbal T. Falling standard of undergraduate medical education in Pakistan. Pakistan Journal of Physiology. 2019 31;15(4):1-2.
14. Khan AW, Sethi A, Wajid G, Yasmeen R. Challenges towards quality assurance of Basic Medical Education in Pakistan. Pakistan journal of medical sciences. 2020 Jan;36(2):4.
15. Latif MZ, Wajid G. Reforming medical education in Pakistan through strengthening departments of medical education. Pakistan journal of medical sciences. 2018;34(6):1439.
16. Sheikh S, Fatima I, Malik K, Asif M, Bilal M. To Assess Evaluation System in Public Medical Institutions at Under-Graduate Level–The Students' Perspective. 2016, P J M H S, 10 (4), 1214-18.
17. Yasmin M, Naseem F, Masso IC. Teacher-directed learning to self-directed learning transition barriers in Pakistan. Studies in

Educational Evaluation. 2019 1;61:34-40.
18. Syed HB. Utilization of unconventional methodologies for teaching anatomy in medical colleges: challenging fixed mindsets. Journal of the College of Physicians and Surgeons Pakistan. 2018;28(2):171-3.
19. Shakoori TA, Mahboob U, Strivens J, Willis I. Impact of a Social Media Group Page on Undergraduate Medical Physiology Learning. Journal of the College of Physicians and Surgeons--Pakistan: JCPSP. 2017;27(7):409-13.