Questionnaire based counselling: A tool to identify stress precipitating factors and thereby upgrading the performance of a new medical Entrant in department of anatomy

Vanita Gupta¹, Shalini Sobti², Meeta Gupta³, Satish Parihar⁴, Vikrant Singh⁵

¹Department of Anatomy, Acharya Shri Chander College of Medical Sciences and Hospital, Jammu, ²Department of Community Medicine, Acharya Shri Chander College of Medical Sciences and Hospital, Jammu, ³Department of Obstetrics and Gynecology, Acharya Shri Chander College of Medical Sciences and Hospital, Jammu, ⁴Department of Surgery, Government Medical College Jammu, ⁵Department of Surgical Gastroenterology, Government Medical College Jammu, J&K, India

Abstract

Background and Aims: Vast first MBBS course has been posing great problems for a fresh entrant in medical college. A student is merely 18-19 years when he gains entry to a medical college in India. Multiple problems pile up for him at the very onset of his academic year in Department of Anatomy. The present study aimed to identify various stress factors and further assess the effect of counselling/mentorship programme on solving such issues. Materials and Methods: A pre-validated, predesigned questionnaire was administered to hundred first year medical students. They were individually counselled with various faculty persons. Based on the questionnaire given, the results were analysed. Results: 45% of the students were sure that their language problem was solved after the session. 48% students accepted that they did have some adjustment problems, which were solved then. 30% expressed that some of their personal problems were also solved. 54% were now able to manage their time judiciously. 64% opined that counselling helped to plan their studies well. 52% students admitted that counselling improved their performance in theory. 46% expressed that counselling also helped to improve their performance in practicals. 65% told us that their skills both in theory and practical had improved after the session. 39% consented that counselling relieved them of anxiety. 67% recognised that their knowledge in the subject of anatomy had increased. 75% were of the view that similar sessions should be conducted more frequently. 40% preferred to express their views in their regional language. 85% students advised us to carry forward these sessions to the next batches. Conclusion: Our study highlights the need for counselling to solve multifaceted adjustment problems.

Keywords: Academic training, adjustments, counselling, students

Introduction

Medical education, being a highly competitive field is known to be quite stressful for the students.¹ A first year medical student has to undergo rigorous training. There is a sudden transition from intermediate to MBBS, where there is a huge difference in syllabus. The students have to face adjustment difficulties like food issues, financial issues, culture issues, language and weather issues, relationship issues, concentration problems etc., Vast syllabus, peer competition for academic performance, continuous evaluations and long duration of training are precipitating factors for stress leading to depression.

Received: 10-05-2020
Accepted: 03-07-2020
Revised: 14-06-2020
Published: 30-10-2020

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: WKLHRPMedknow_reprints@wolterskluwer.com

How to cite this article: Gupta V, Sobti S, Gupta M, Parihar S, Singh V. Questionnaire based counselling: A tool to identify stress precipitating factors and thereby upgrading the performance of a new medical Entrant in department of anatomy. J Family Med Prim Care 2020;9:5267-70.
in medical students.[9] A high level of stress affects the student’s physical and mental health as well as decreases their academic performance.[3-5] Stress in students may also be due to lack of proper guidance.[9] Many modern innovative techniques are being introduced in teaching and learning methods. Few have mentioned about Counselling of students. This has a dramatic positive impact on academic and professional performance of first year M.B.B.S. students. Counselling programmes have shown to decrease stress levels effectively, promoting positive coping skills, which in turn improves their academic performances.[7] A structured orientation programme emphasising the requirements of each phase of the MBBS curriculum, along with counselling and teaching self-care skills are approaches, which are highly successful in reducing stress.[9] Structured time outs during the course along with genial faculty, mentoring sessions, psychological and pedagogical support are some recommendations to ward off stressors.[9] Very few studies have laid stress on individual counselling of the fresh medical entrants. We made an attempt to talk to these students on an individual basis after a couple of months of their joining. We identified their problems and tried to solve them by virtue of one-to-one discussions. Our study would help in guiding the educators to take necessary steps in incorporating these newer techniques for the benefit of the learners.

Methods

A total of 100 M.B.B.S. students enrolled in the first year of MBBS session at Acharya Shri Chander College of Medical Sciences and Hospital, underwent face to face individual interviews (counselling) with skilled faculty members of Department of Anatomy during the middle of their first year M.B.B.S. The methodology and purpose of study was well explained to all the participants and informed consent was obtained. The protocol of the study was approved by Institutional Ethics Committee 22-07-2020. They were given questionnaires and 15-20 minutes were given to enter their feedback responses. The discussions were based on the feedback responses to the questions. The questionnaire was based on 4 point Likert scale – Very much useful, to a large extent, to some extent, not useful at all. It consisted of various domains of counselling such as academic, social and personal counselling.

Results

The Study was conducted about a couple of months after the students entered the medical college. Answers to the various questions were analysed as shown in Table 1. Most of the students applauded the attempt. 45% of the students agreed that their language problem was solved through the session. In 25% of the students, the language problem could be solved only to some extent. It was not much an issue for these students because they had all passed their 12th grade in English medium. 48% of the students accepted that they had some adjustment problems like home sickness, food problems, weather problems etc., and that counselling helped them to solve such issues also. 30% expressed that their personal problems were solved. 3% of the students were a bit hesitant to discuss their personal problems and did not find the session useful at all. 54% were now able to manage their time usefully. They were now intelligent enough to attribute sufficient time to individual subjects. 64% of the students opined that counselling helped to plan their studies well. 52% of the students admitted that counselling improved their performance in theory while they were appearing for their weekly tests. 46% expressed that counselling also helped to improve their practical understanding of the subject. 65% of the students told us that their overall skills both in theory and as well as practical had improved a lot after the session. 39% of the students had some or the other form of anxiety disturbing them after they joined college and they accepted that counselling did relieve them. 67% of the students realised that their knowledge in the subject of anatomy had increased after the session, as they modified their methods of studying the subject. 75% of

| Questions                                                                 | Very much useful | To a large extent | To some extent | Not useful at all |
|---------------------------------------------------------------------------|------------------|-------------------|----------------|------------------|
| Did counselling solve your initial Language problem?                      | 45               | 30                | 25             | 00               |
| Did counselling help to solve your Adjustment problems?                   | 48               | 29                | 33             | 00               |
| Did counselling solve your Personal problems?                             | 30               | 40                | 27             | 03               |
| Did counselling help in time Management?                                  | 54               | 37                | 09             | 00               |
| Did counselling help in your study Planning?                              | 64               | 31                | 05             | 00               |
| Did counselling improve your Theory performance?                          | 52               | 25                | 33             | 00               |
| Did counselling improve your Practical performance?                       | 46               | 29                | 25             | 00               |
| Did counselling improve your presentation skills in theory and Practicals? | 65               | 35                | 00             | 00               |
| Did counselling help to relieve your Anxiety and depression?              | 39               | 40                | 21             | 00               |
| Did counselling improve your understanding and knowledge related to the anatomy subject? | 67               | 32                | 01             | 00               |
| Did counselling help to increase your confidence level?                   | 70               | 30                | 00             | 00               |
| Should we increase the sessions?                                         | 75               | 25                | 00             | 00               |
| Should we use regional languages                                           | 40               | 30                | 30             | 00               |
| Should it be continued for next batch                                     | 85               | 12                | 13             | 00               |
the students were of the view that similar sessions should be conducted more frequently. 40% expressed their views that sessions be also conducted in their regional language since we had students coming from different cultural backgrounds. 85% of the students motivated us to carry forward these sessions for the next batches. The students were confident and happy after talking to their teachers. A moral boost was seen in the form of higher scores in the weekly tests that followed the study.

Discussion

A medical school has often being recognised as a stressful environment. In recent years, the concern about stress during the tenure of undergraduate medical training has increased. Academic as well as social, emotional and physical problems may hamper the learning ability and performance of a first year medical student. In our study an attempt has made to analyse similar problems faced by the new medical entrants and find out an appropriate solution to their problems. We also came to understand about the language difficulties, time management problems, subject related issues, matters related to planning of their studies. In a cross-sectional survey conducted by Saiful Islam et al. among first year students found the prevalence rates of moderate to extremely severe levels of depression and anxiety were 69.5% and 61%, respectively, with no significant gender differences.[10] Ambar Salman et al. in their study illustrated presence of high prevalence rates of anxiety & depression. The rates were 31.2% & 22.6% for borderline & morbid anxiety, respectively. While the corresponding rates for depression were 20.4% & 7.5%, respectively.[11] Gade S et al., found that an emotional support system in place, like the mentoring programme in this study, was a major stress relieving factor.[12] We are also of the opinion that Counselling can help the students overcome their worries. It can also help them enhance their knowledge both theoretically and practically about the subject. Natalie White Gaughf et al.[13] reported that 59% of the faculty and 54% of the students agreed the importance of academic counselling in an institution. But they found that there was little knowledge among the students regarding the counselling procedure. So only 35% of the students accessed counselling services. During our study, prehand, brief information was provided to the staff as well as the students in the department. Thus our faculty was well oriented with the exercise and every member participated enthusiastically in the session. 100% student’s participation was confirmed. The students were fully satisfied with the efforts of the staff. In another study conducted by Sayer M et al., the different causes of academic failure in undergraduate medical students are mentioned such as financial, domestic and emotional problems (often non-academic). They also reported that with faculty support, students can overcome these problems and succeed in academics. They also designed a remedial programme for students who face academic difficulties.[14] After our study, we also came to understand that language problem, time management, incomplete understanding of the subject both practical as well as theoretical were some of the grey areas to be pondered upon. The vast syllabus, voluminous textbooks, pattern and frequency of examinations was leading to stress among the students. Anne Marie Delaney in their study concluded that there is a significant impact of counselling on students’ performance with satisfactory interaction in students and faculties.[15] In the current study we also arrived at a conclusion that such mentorship programmes can help the students to get better oriented to our subject and we could be successful in alleviating the fear among them. According to Umbach et al., faculty members play the most important role in student learning because faculty behaviours and attitudes affect students’ profoundly.[16] After conducting the present study we can also rationalise their statement. In another study conducted by Rose et al., they opined that Mentors are role models, guides for personal and professional development of their students. Mentors can also play a major role to augment the academic knowledge of their students which is required to master the vast curriculum content. In many cases, mentors also provide emotional support and encouragement.[17] While conducting the exercise we also substantiate their viewpoint. We would also like to stress here, that counselling sessions at an early stage of the student’s curriculum can also inculcate professional and ethical values among our students. This may not be mentioned in any of the texts. The students would be learning a better overall art of medicine after frequent such sessions. Renuka Devi et al. also explored the relationship and the effect of counselling on the academic performance of college students. They concluded that constructive support by faculties through individual counselling have a positive influence on the academic performance of students and the number of counselling sessions correlated positively with the academic performance.[18] Ours was a very preliminary exercise and now after analysing the results we are also of the opinion that even such short term counselling programme has brought about a beneficial change in perceiving student related problems and if they be solved at the earliest would be very satisfactory and rewarding.

Conclusion

Bachelor of Medicine and Bachelor of Surgery (MBBS) being the toughest course, stress in medical students is not uncommon and is process orientated. The counselling session adopted by us was an eye opener for the faculty to know the root cause, of the students not performing well in the first terminal examination. The individual counselling has a positive effect/impact on the academic performance of first year M.B.B.S. students. Even a short counselling session had brought a beneficial change in the overall performance of these students. Such sessions, though brief, can certainly bring about a substantial improvement in the student’s academic performance and further hone their practical abilities and skills. According to feedback from the students, the number of sessions should be increased to help them further polish their skill and knowledge. Many efforts need to be taken on by the Medical Education Technology in order to improve the knowledge and professional skills of medical students. Student counselling and informal mentorship is the need of the hour. Also, stress management workshops, soft skills development techniques at the entry of medical career would have a positive
influence on the performance and they shall have a better understanding of the course.

Summary
Counselling sessions should be the part of MBBS curriculum for the new medical entrant so that he can cope up with the new challenges which he has to face while joining a professional course.

Key Message
Time to time counselling sessions to identify stress inducing factors could certainly help the medical entrants to adapt much better to the new environment of medical schools and adjust accordingly to enhance their academic performance.

Financial support and sponsorship
Nil.

Conflicts of interest
There are no conflicts of interest.

References
1. World Health Organization. The health of young people: A challenge and a promise. Geneva: WHO. [Internet] 1994. [Cited 2016 April]. Available from: http://apps.who.int/iris/handle/10665/37353.
2. Ovhal AG, Ansari MM, Zarger R. Counselling: A supportive tool to enhance the academic performance of first year M.B.B.S. students. Indian J Clin Anat Physiol 2018;5:9‑12.
3. Ji H, Zhang L. Research on college students' stresses and coping strategies. Asian Soc Sci 2011;7:30‑4.
4. Kumar SS, Archana R, Mukkanad JK. Controlled vestibular stimulation: A physiological method of stress relief. J Clin Diagn Res 2014;8:BM01‑02.
5. Ghoshal D, Sinha S, Sinha A, Bhattacharya P. Immunosuppressive effect of vestibule-cerebellar lesions in rats. Neurosci Lett 1998;257:89‑92.
6. Olson M, Snead N, LaVia M, Virella G, Bonadonna R, Michel Y. Stress induced immunesuppression and therapeutic touch. Altern Ther Health Med 1997;3:68‑74.
7. Ganghadharan P. Academic stress and coping strategies among undergraduate healthcare professional students in India: A quasi experimental study. Int J Curr Res 2014;6:9264‑8.
8. Redwook SK, Pollack MH. Student led stress management programme for first year medical students. Teach Learn Med 2007;19:42‑6.
9. Ball SE, Bax A. Self-care in medical education: Effectiveness of health-habits interventions for first year medical students. Acad Med 2002;77:911‑7.
10. Islam S, Akter R, Sikder T, Griffiths, MD. Prevalence and factors associated with depression and anxiety among first-year university students in Bangladesh: A cross-sectional study. Int J Ment Health Addiction 2020. doi: 10.1007/s11469‑020‑00242‑y.
11. Salman A, Hanif F, Riaz M. Prevalence of anxiety and depression among medical students. Indo Am J Pharm Sci 2020;7:946‑52.
12. Gade S, Chari S, Gupta M. Perceived stress among medical students: To identify its sources and coping strategies. Archives Med Health Sci 2014;2:80‑6.
13. Devi MRR, Devaki PR, Madhavan M, Saikumar  P. Effect of counselling on the academic performance of college students. J Clin Diagn Res 2013;7:1086‑8.