Status of Learning Communication Skills in Undergraduate Medical Education According to Intern's View. ASMM Alam¹,F Haque², JA Ansary³, MS Amin⁴, HK Talukder⁵

This cross sectional descriptive study was carried out during July 2010 to June 2011 in four medical college of Dhaka city. Two

Abstract

government and two private medical colleges were selected according to the convenience of the researcher. One semi structured questionnaire was used to collect the information from the Intern doctors. It contained 26 questions from the variables of communication skills. The researcher himself collected the data. 218 Intern doctors returned the filled in questionnaires on the same day. Allocation of score for response of each item was based on 5 point Likert scale. The study revealed that most of the interns were not taught communication skills in their clinical classes in a structured way. But during internship period they felt that those should have been taught in a structured way. They recommended that it should be a part of course curriculum so that every student gets equal opportunity to learn these skills. Key words: Learning, communication skill, intern

Introduction The communication that takes place between doctor and

patient provides the foundation for diagnosis and

treatment, whatever the branch of clinical medicine¹. Increasing number of medical schools have included brief training course in communication skills. While there is evidence that such a course does improve student's skill². It has become increasingly clear that how doctor communicates with the patients affect the accuracy of diagnosis, compliance, satisfaction and response to investigation and treatment³. Generally studies have clearly established that students given specialized skills training shows significantly improved interpersonal skill over traditionally trained

communicate warmth and understanding to patients and detecting and responding are more able for appropriately to patient's verbal and non verbal cues^{4,5,6} . So it has been observed that communication skill development is very much important in medical education5. To produce graduates with a range of 1. Dr. Abu Saleh Mohammed Monirul Alam, Assistant Profesor (Ortho), OSD, CME, Dhaka. 2. Dr. Farhana Haque, Senior Medical Officer, Institute

counterparts. Trained doctors are more able to

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One questionnaire was structured with a space for

comment of respondents was used to collect the information from the Intern doctors. It contained 26

questions from the variables of communication skills.

The researcher himself collected the data. With prior

score for response of each item was based on 5 point

showed that communication skills training can produce good and competent communicators⁷. In a study it was observed that student's in the trained group showed greatly increased skills in interviewing and building interpersonal relationship as a result of their communication skill training. The students were significantly better at eliciting full, relevant data from patients, they were diagnostically more efficient, but they took no longer time than their control group counterparts to elicit the information⁸. In our under graduate curriculum there are four weeks' period of communication learning skill in community medicine⁹. In informal way there is scope for learning communication skill in clinical classes by 'history taking', by observing seniors' communication with the patient, taking consent, interpretation of result of investigation or breaking bad news to relatives of the patient by the senior doctors. Methodology: This was a cross sectional descriptive study carried out during July 2010 to June 2011. Voluntary respondents of 218 Intern doctors of selected four medical colleges constituted the sample. Two government and two private

communication skills and attributes Liverpool University introduced communication skill learning

course throughout five years. The result of the course

medical colleges were selected as per the convenience

of the researcher. The researcher collected information from the interns as per the following criteria: " At least ten intern doctors from any of the clinical subjects (medicine, surgery, gynecology, and sub specialties) of each medical college. ' At least 5 teachers from any of the clinical subjects of each medical college. Research Instrument

examination, in the clinical class.

(4.1%)

opinions regarding of

permission of the authority, Intern doctors returned the filled in questionnaires on the same day. Alocation of

Status of Learning Communication Skills...

Different events of Communication skill teaching learning in undergraduate medical Different levels of opinion disagre (SD) (D)

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Table 3: Distribution of respondents as per their

convince the patient, to do investigation, describe

teaching learning how to

218

(100%

Likert scale. Data processing and analysis Data were checked and edited after collection, processed and analyzed by using SPSS software package. Data were presented in the form of tables to compare the findings. Results Allocation of score for response of each item was based on 5 point Likert scale. Total respondents were 218 intern doctors. The answer of the intern doctors

obtained from the structured questionnaires are shown

Table 1: Distribution of respondents as per their

Frequency

(A)

(49.1%)

agre (SA)

(42.2%)

(100%)

Dhaka National Medical College 53 24.3 Dhaka Medical College 63 28.9 Sir Salimullah Medical College 71 32.6 Holy Family Red Crescent Medical College 31 14.2 218 100.0

Table 2: Distribution of respondents as per their opinions regarding of teaching learning how to greet

the patient, Rapport building of the patient, taking

(4.1%)

informed consent of patient before performing physical Different events of Communication skill teaching learning in undergraduate medical (D) education

"Teacher taught
student's in clinical clas
how to greet the patient
before history taking". (1.8%)(2.8%)

institutions

in the tables.

Name of the Institute

"Teachers taught student's about rapport building (gaining faith) of the patient, before dealing with them". (2.3%) (8.3%) (8.3%) (50.9%) (30.3%) (14.7%)

"Rapport building (gaining faith) of the patient, before dealing with them should be taught in the clinical class."	(.5 %)	(6.0%)	8 (3.7 %)	79 (36.2 %)	(53.7 %)	(14.7%
"Teachers taught student's how to take informed consent of patient before performing physical examination".	1 (0.5%)	4 (1.8%)	7 (3.2%)	98 (45%)	108 (49.5%)	218 (100%)
"Teachers should taught students how to take informed consent before perform physical examination"	0 (0%)	8 (3.7 %)	18 (8.3%)	65 (29.8 %)	127 (58.3%)	218 (14.7%

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in the clinical class.

events

learning

"Teachers taught student's how to break the bad news to the patient and the

Teachers should taught

how to break the bad news

class, how they will handle a difficult situation".
"Teachers taught studen how they will convince and refer the patient to

patient, in the clinical class.

to the patient and their guardian about the

skill

medical

Strongly

(4.6%)

(1.3%)

Different

teaching undergraduate education

Communication

guardian about the disease."

nature of the disease and informing the treatment plan,

Table 5: Distribution of respondents as per their

opinions regarding of teaching learning how to Break

Undecideo

(U)

38

(17.4%)

26

(11.9%)

(13.3%)

(14.4%)

(A)

63

(33 %)

(45%)

agree (SA)

49

103

(49.1%)

53

(24.3%)

Total

218

218

218

(14.7%)

218

Disagree

(D)

42

(19.3%)

14

education "Teachers taught student's how to 104 218 25 63 (2.3%)(9.6%)(11.5%)(47.7%)(28.9%)(100%)explain patient and their guardian about the nature of the disease"

(6.9 %)

"Teachers should taught 's how to explain patient and their guardian about the nature of the disease". %)

(10.6%)

(34.4%)

nature of the disease.						
"Teachers taught	7	37	15	110	49	218
student's how to	(3.2%)	(17%)	(6.9%)	(50.5%)	(22.5%)	(100%)
onvince to do the ecessary investigations	. /		·	. ,	, ,	, ,
to patient and their						
guardian".						
"Teachers should	4	27	25	77	85	218
taught the student the way to convince patient	(1.8 %)	(12.4%)	(11.5 %)	(35.3 %)	(39 %)	(100%)
and guardian to do the						
necessary						
investigations".						
"Teachers taught student's how to	10	35	34	91	48	218
Explain patient and	(4.6%)	(16.1%)	(15.6%)	(41.7%)	(22 %)	(100%)
their guardian about the						
treatment plan".						
"Teachers should	11	21	24	73	89	218
taught student's how to Explain about the	(5.0%)	(9.6 %)	(11.0%)	(33.5 %)	(40.8%)	(100%)
treatment plan to						
patient and their						
guardian".						
Table 4 : Dis						
opinions regainmotivate the p						
for painful pro				ing ab	out the	e me
style and diet,	in the	clinica	al class.			
,						
Different events of	of		Different lev	els of opinio	n	
Communication ski						
	in Strongl		e Undecided(U) Agree (A	 Strongly agree 	Total
undergraduate medic education	(SD)	(D)			(SA)	
"Teachers taught	10	36	33	74	65	218
student's how to	(4.6%	(16.5%	(15.1%)	(33.9%	(29.8%	
motivate the undecided	(4.070	(10.570	(13.170)	(33.970	(29.070	(100%
notiont and quardian to						

student's how to motivate the confused patient and guardian to receive treatment". Teachers taught (44.0%) (6.0%) (17.9 %) (18.3%) (13.8%) (100% convince the patient and

(0.9 %)

(11.0%)

(43.6%)

218

(100%)

(39.9 %)

(4.6%)

patient and guardian to receive proper

Teachers should taugh

treatment'

ght student's how to vince the patient their guardian for a nful procedure". eachers taught dent's how to inselling the patient utilife style and Diet er hospital leaving". eachers should taught dent's how to inselling the patient their guardian about ient's life style and er after hospital ving". Vol. 02, No. 02, July 200 government and two non government medical two interests and the patient their guardian should taught their guardian should taught their guardian should taught their guardian show to inselling the patient their guardian show the show to inselling the patient their guardian show the show to inselling the patient their guardian show to inselling the patient properties of the patient their guardian show to inselling the patient properties and the patient procedure. Vol. 02, No. 02, July 200 government and two non government medical styles.	// TD 1 1 11						
voince the patient of their gradient of a full procedure". 1		14	12	27	64	101	218
their guardian for a mful procedure". eachers taught (3.2%) (7.8%) (13.3%) (51.8%) (23.9 %) (100 mseling the patient but life style and Diet er hospital leaving". (2.3%) (7.3 %) (9.6%) (37.2 %) (43.6%) (100 mseling the patient life style and at after hospital wing".		(6.4 %)	(5.5%)	(12.4 %)	(29.4 %)	(46.3 %)	(100%)
Inful procedure". Cachers taught 7 17 29 113 52 213				, ,			
17 29 113 52 213							
dent's how to museling the patient but life style and Diet er hospital leaving". 16	"Teachers taught	7	17	29	113	52	218
useling the patient turn life style and Diet er hospital leaving". eachers should taught dent's how to unseling the patient their guardina about ient's life style and er after hospital ving". Vol. 02, No. 02, July 200 government and two non government med	student's how to	(2.20/)	(7.90/)	(12.20/)	(51.90/)	(22.0.9/)	(1000/)
vol. 02, No. 02, July	counseling the patient	(3.270)	(7.070)	(13.376)	(31.070)	(23.9 70)	(10070)
Vol. 02, No. 02, July 2 O government and two non government med							
dent's how to massling the patient their guardian about tent's life style and at after hospital ving" Vol. 02, No. 02, July 2 or government and two non government med		-	1.6	21	01	0.5	210
usseling the patient of their guardian about ient's life style and et after hospital ving" Vol. 02, No. 02, July 2 or government and two non government mediates and their government							
Vol. 02, No. 02, July 2 or government and two non government med		(2.3%)	(7.3 %)	(9.6%)	(37.2 %)	(43.6%)	(100%)
Vol. 02, No. 02, July 2 o government and two non government med	and their guardian about						
Vol. 02, No. 02, July 20 government and two non government med	patient's life style and						
Vol. 02, No. 02, July 2	Diet after hospital						
Vol. 02, No. 02, July 200 government and two non government med	leaving"						
o government and two non government med							
o government and two non government med							
o government and two non government med							
o government and two non government med							
				Vol. 02	2, No.	02, Jı	ıly 20
	vo. governme	nt an	d two				

colleges of Dhaka city. Selected

information etc.)¹².

communication skills were used in this study. Aspergen

et al used similar seven main variables in their study to assess the need of communication skills teaching¹¹.

Hargie et al used different types (Demonstration of

empathy, negotiation skills, nonverbal communication,

reluctant/angry patient, explaining, giving, receiving

World over communication skills are one of the vital

skills required in medical practice and considered as a

core competency of undergraduate and post graduate

medical education programs in developed countries¹⁴.

sex education, etc.) of variables with

similarity(Breaking bad news, Dealing

disease". "Teachers taught student how a difficult situation can be managed." 42 (17.9%) (34.4%) (23.9 %) (4.6%) (19.3%)(14.7%)107 students nicely in clinical

(3.4%)

32

(14.7%)

another hospital for better management." chers should taught 11 21 68 105 218 "Teachers should taught how the student will convince and refer the patient and their guardian to another hospital for (9.5 %) (6 %) (31.2%)(48.2%) (14.7%)

the bad news, handle the difficult situation and refer the

In the questionnaire for the interns a space was kept for comment. Only 32 of them gave opinions. The most common opinion was that communication skills should be taught in clinical class methodically and must be assessed in examination. One comment was "Teachers taught us" communication skill (CS) in the way of gossiping or sometimes when any occurrence happened. So some of us could it learn and others missed it. It should be taught in a structured way so that all students can learn. Another interesting comment was "Few teachers taught us but we were not told about it's importance or future application in practical life. So teaching not retain in our memory for a long time. Another common comment was that this study is very good if communication skills teaching is included in the curriculum. This will definitely help in reducing doctor patient chaotic relation in our country. A comment was "You are doing a very good study. If authority includes this in the MBBS curriculum it will help doctors to build good relationship with the patient". In another comment some respondents thanked the researcher for taking their opinions and a few of them thanked him for

In the question whether the interns were taught in the

undergraduate classes 'how to motivate the undecided

and hesitated patient to receive treatment', (36.2%)

answered that they were not taught this in the clinical

class but most of them (83.5%) answered that it should

A good number (42.2%) of interns denied that they

were taught how to convince patient and their guardian

for accepting a painful procedure as a treatment. But

three fourth (75.7%) of them answered that they should

be taught it in their student life. But there is now structured way of learning this in internship. Some

teachers taught and other don't. So it must be taught in structured way in internship. Most of the interns

answered (75.7%) that they were taught how to counsel

the patient about diet and life style after discharge from

hospital and 80.8% of them thought that it must be

More than half (57.8%) of the interns admitted that they

were taught how to break bad news to the patient. But

vast majority of them (80.1%) thought that they should

be taught it in their clinical class. Similar findings were

observed by Faiz et al ¹⁰. They have shown that in case

of breaking bad news by trainee, difference between pre

and post test was highly significant. This finding

More than half (58.3%) of the interns agreed that they

were taught how a difficult situation can be managed but 82.1% students thought that they should learnt this

in student life in a structured way. Other gave opinion

that it should be learnt in intern period because in this

period trainee doctors get enough time to learn this from surroundings and practical field. So their learning will

be long lasting and they can discuss this with different

taught. Some of them gave opinion that it can be learnt

during internship. Students will learn it better in

internship as they fill in the form of referral; moreover

they will observe the Registrar /Asst. Registrar how they

convince the patient and their guardian to refer the

In the questionnaire a space was kept for comment of interns. Only 32 of them gave opinions. Most common

opinion was that communication skills should be taught

in clinical class methodically and must be assessed in

indicates that the trainees lacked in this area of skill.

Status of learning communication skills...

of them told that they were not taught.

be taught.

taught.

choosing these burning issues." This study was carried out among the Intern doctors of In our undergraduate curriculum communication skills are mainly taught in an unstructured way. After discussion of the opinions and views of the interns

about the current status of communication learning and teaching it was clear to us. Whatever the students are taught, it was mainly through history taking in clinical classes in hospital ward. In the question "how to build rapport with the patient" 89.9% answered that they should be taught about this whereas 81.2% answered that the teachers taught them. So there was disparity between expectation and happening. Aspergen et al discussed in their published article that rapport building clearly need to be taught and trained in medical school and post graduate courses¹¹.

A remarkable portion (21.6%) of interns somehow

disagreed or undecided that whether they should be

taught about how to explain the nature of the disease to

patient and their guardians. But all interns agreed that it

must be taught in a structured way either in internship

or clinical settings. Many of them gave opinions that

their learning must be assessed by OSCE or other

through an assessment procedure which will help to

retain their knowledge for a long time. This view is

similar with the findings of others, who claimed that

short training course and assessment within clinical

clerkship showed a long term effect².

In the question whether the interns were taught in the undergraduate classes 'how to convince the patient to do necessary investigations', most of them (72.7%) agreed that they were taught. About 11.5% were not sure that whether they need to learn it. Regarding learning "how to explain patient about treatment plan" majority of respondents (63.7%) answered that they were taught. But one third (36.3%)

Conclusion: This descriptive cross-sectional study was carried out on a sample of Intern doctors and Clinical teachers of four medical colleges. Data were collected from 218 interns

using a self administered semi-structured

questionnaire. Reviewing the findings of the study, it

can be concluded that communication skills must be

known by doctors. Most of the interns gave answers that

they were not taught majority of the communication

skills mentioned in this study in their MBBS course.

But in internship period they felt that those should be

taught in a structured way. Most of the interns and teachers agreed that it must be included in the

curriculum so that all students would have chance to

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M, Horder J. Factors influencing the CCS of fist year clinical

learn these skills.

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skills¹³.

training significantly improved the communication

Another common comment was that this study is very

good for this time. If communication skills teaching is

included in the curriculum this will definitely help in

From above findings of this study it was observed that

most of the variables regarding communication skills

were taught in an unstructured way. But according to

interns view it should be taught more and in a structured

way. This finding has a similarity with the study of Cantwell & Ramirez¹⁵. They have shown in their study

that 67% junior house officers felt that they learnt

adequate communication skills about medicine.

reducing doctor patient chaotic relation in our country.

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of communication skill training on student's diagnostic

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levels of teachers. Regarding learning "how they will convince and refer the patient to another hospital for better management" majority of the interns (79.3%) answered that they were

patient to other centre.

examination. Evans et al in his study confirmed that medical students given specialized consulting skills Bangladesh Journal of Dental Research & Education

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