Teaching ethics during undergraduate teaching in Medical Schools in India

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Abstract

An Indian Medical Graduate should ideally acquire five core competencies, nevertheless, for decades emphasis has been given only to the clinician role, while other attributes have been ignored. There is an immense and indispensable need to ensure that medical students should be exposed to principles of ethics and ethical practices during their undergraduate training at medical school. Keeping in mind that the duration of the course is already very long, the strategy to introduce ethics as an individual subject will not be regarded as a student-friendly step. In conclusion, ethics has a crucial role in the undergraduate teaching and training, and it is the need of the hour to take strategic steps to give adequate importance to ethics within the curriculum without increasing the duration of the course.

Keywords: Medical Education, Ethics, Educational outcomes

Introduction

The Medical Council of India has identified five core competencies, which an Indian Medical Graduate should possess, namely clinician, communicator, leader and member of the health care team, life-long learner and professional (Medical Council of India, 2011). For many years, throughout the entire undergraduate period, emphasis has been given only to the clinician role, while other roles have been neglected (Thirumoorthy, 2017; AlMahmoud *et al.*, 2017).

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There is no doubt that one of the primary goals of medical training is to produce a doctor with good knowledge of the subjects. Nevertheless, to become a successful doctor, that too amidst the rising demands of the clinical practice, the budding doctors have to be competent in all the ascertained five roles (Medical Council of India, 2011; Thirumoorthy, 2017; AlMahmoud *et al.*, 2017).

Necessity of Ethics in Undergraduate Teaching

A key element of professional behavior is the ability and willingness of a doctor to work in agreement with the widely accepted moral norms and values (Ferreira-Padilla *et al.*, 2016). This calls for an immense and indispensable need to ensure that medical students should be exposed to principles of ethics and ethical practices during their undergraduate training at medical school (Thirumoorthy, 2017; AlMahmoud *et al.*, 2017). Acknowledging the need for medical and research ethics, in most of the undergraduate and graduate education and clinical training programs, teaching ethics to students has been regarded as an integral component (Medical Council of India, 2011; Thirumoorthy, 2017; Ferreira-Padilla *et al.*, 2016; de la Garza *et al.*, 2017).

Practical Challenges and Recommended Solutions

Furthermore, it is very important to understand that the duration of the undergraduate period in Indian set-up is 4.5 years, and if ethics is introduced as a separate subject, the duration of the course might increase further, which will make the life of medical students even more stressful (Medical Council of India, 2011). Thus, instead of introducing it as a separate subject, the ethics component can be integrated throughout the duration of the course (Table 1) and in day-to-day clinical practice as well (by means of observation of the teachers during their clinical postings) (Medical Council of India, 2011).

Table 1: Year-specific objectives, teaching-learning methods, and assessment tools for teaching ethics

	Year 1	**Year 2**	**Year 3**	**Year 4**
Objective	To develop empathy and respect towards peer, teachers, teaching materials	To learn about different types of informed consent	To obtain informed consent from standardized patients	To obtain informed consent from real patients
Teaching and Learning methods	Small group teaching, role plays, case scenarios, etc.	Lectures, handouts, videos, etc.	Handouts, standardized patients, problem-based learning, etc.	Case-based discussion, role modeling, etc.
Assessment tools	Multiple Choice Questions (MCQs), Objective Structured Practical Examination (OSPE), etc.	Multiple Choice Questions (MCQs), puzzles, crosswords, short notes, etc.	Objective Structured Clinical Examination (OSCE), etc.	Work-place based assessment (WPBA) tools (Mini-Clinical Examination, Direct Observation of Procedural Skills, Multi-source feedback, etc.)

However, educational outcomes have to be defined well in advance (Table 2). These outcomes essentially comprise of what behaviors should be promoted, what attitudes should be inculcated, what skills should be acquired, what knowledge should be learned, what students should experience over the period of training, which technology might support or enhance learning and how to ensure that learning can be sustained (Medical Council of India, 2011; Thirumoorthy, 2017; AlMahmoud *et al.*, 2017; Ferreira-Padilla *et al.*, 2016; de la Garza *et al.*, 2017). In-fact, the above proposed educational outcomes can be identified for any clinical competency (Table 2) (Thirumoorthy, 2017; AlMahmoud *et al.*, 2017; Ferreira-Padilla *et al.*, 2016; de la Garza *et al.*, 2017; Hally & Walsh, 2016; Shrivastava *et al.*, 2015). In addition, specific objectives, teaching-learning methods and appropriate assessment tools can be identified on a year-wise basis as depicted in Table 1 (AlMahmoud *et al.*, 2017; Ferreira-Padilla *et al.*, 2016; de la Garza *et al.*, 2017; Hally & Walsh, 2016; Shrivastava *et al.*, 2015).

Table 2: Able to understand the principles of ethics and apply them in clinical settings –
Educational Outcomes

Educational Outcomes	Early Outcomes (Start of undergraduate period)	Graduate Outcomes (At the end of undergraduate period)
Behavior	Empathy towards peers and teaching resources (like cadavers)	Empathy towards patients in clinical settings
Attitude	Being sensitive to ethical issues and cultural values	Demonstrates ethical practices and in developing trust with the patients
Skills	Obtaining informed consent, etc.	Breaking bad news, communicates with patients with compassion, etc.
Knowledge	Being aware of the existing guidelines	Abreast with recent updates on ethical practices in patient care
Experience	With standardized patients either in department or in community	With real patients in hospital settings while obtaining relevant history and clinical examination
Technology	Audio-visual (videos of case-scenarios, movies), lectures, etc.	Videos, role plays, recording of their interactions with patients and then showing them the same, and giving appropriate feedback, etc.
Sustainability	Sensitizing students about ethics at the time of • Foundation Course (when students enroll in under-graduation in a medical college) • White Coat Ceremony (after completion of first year, in the third semester – when students for the first time start dealing with real patients during their clinical postings)	It can be ensured by exposing students to ethics • Just before the start of their internship • Day-to-day clinical practice by observing their teachers (Role-modeling)

Conclusion

To conclude, as medical and research ethics remain an important aspect of the medical education and training, it is quite essential that specific objectives, educational outcomes, teaching-learning methods and assessment tools are defined for the same.

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