

Intern's Perception Regarding Learning Educational Environment At Rural Health Training Centre

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Abstracts: Background and Objectives: Internship is ideal period to train the medical graduates and apply their knowledge for benefit of society. It is mandatory for interns to undergo three months training in rural area where they have to learn some basic skills as given by Medical Council of India. It is important to assess the learning environment in rural health centres for effective learning. Methodology: Interns posted in year 2014-2015 were given the structured questionnaire to rate learning environment in terms of physical, intellectual and emotional plane. Results: Interns were not satisfied with physical environment. The emotional support and supervision was appreciated by interns but it did not sensitize them to work in rural area. They also had good hand on experience but the orientation programme was poorly conducted. Conclusion: The learning environment was very poor specially in terms of infrastructure [Khapre M P NJIRM 2015; 6(5):90-93]

Key Words: Intern, Rural Health, Physical, Emotional.

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Introduction: Internship is an ideal period to pick up and refine the clinical/ communication skills under the "real field situation". Objective of internship is to train the medical graduates in application of the learned theoretical aspects in hospital and community settings.

Today, India has the highest number of medical colleges in the world¹. Till date the official MCI Website indicates, 355 medical colleges, creating a total of 44050 seats². An exploding number of medical colleges leading to staff deficiencies and merit devaluation are some of the problems plaguing the medical education in India³. But the efficiency of hospitals seems to be failing to keep pace with the increasing flow of the interns in terms of the proper management and creation of teaching-learning environment. Teachers don't have time to clear the doubt of interns and they often take into wrong practice. Many students do not take internship period seriously but would rather study for their pre-PG examination. This mad race has decreased their interest in internship training especially in rural postings.

Learning Environment and psycho-social interactions can make a difference in how the students learn and achieve their goals. Good learning environment provides the feeling of security and pleasure, support their natural curiosity and desire to learn, through exploration and discovery using their senses⁴. But the rural training centres have constraint of resources that affects the learning process with long working

hours, lack of resources, Lack of essential medicine, isolation from family and friends. Interns demands the excuse for rural posting for various reasons like PG preparation, safety issue, too far, no basic facilities etc. Medical officer (MO) in the rural setting is also not much aware of the importance of rural posting offer them relaxation. Many also indulge in malpractices like demanding the money for completion of rural internship.

Considering these aspects, the current study was conducted among interns of a Medical College, To assess the learning educational environment in rural health training centre's.

Material and Methods: After taking the permission from institutional ethical committee the above study was undertaken.

Place of study: Rural Health training centre attached to medical college in central part of India.

Study participants: Medical Interns posted in RHTC in year Jan 2013- Jan 2015

Sampling design: enumerative

Study design: Institutional based Observational cross-sectional study

Data Collection methods: Structured questionnaire

Instrument development: The instrument was developed after taking consensus from all faculty regarding the factors that may affect the learning ability of interns at RHTC. Then all the factors were grouped appropriately by researchers and tool was developed accordingly.

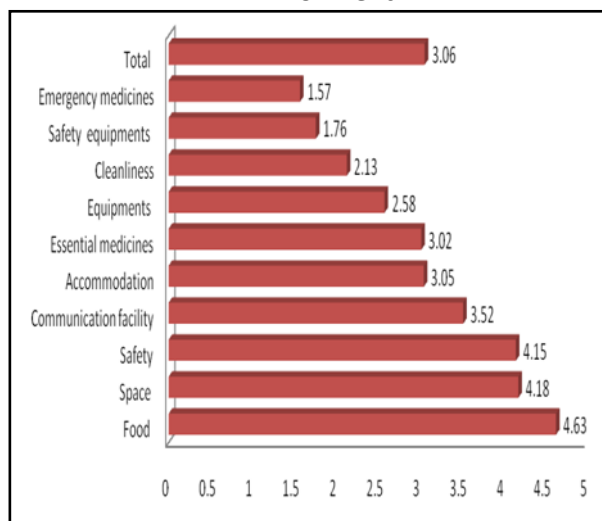
For assessing the environment the perception /opinion of interns structured questionnaire was prepared containing 10 questions related to physical environment intellectual tone , 5 related to emotional (eg feedback, supported) and 5 related to intellectual activities (eg learning with patients, planned education). All the questions are in likert scale rated from 1to 5 as strongly agree , agree, uncertain, disagree, strongly disagree. Lower the score more is the satisfaction of interns towards environment. The score three or more than three was considered as unsatisfactory.

Data was analyzed quantitatively by MS Excel.

Results:

Total 95 interns participated in the study of which 49 (51.58%) were females. Following were the findings of study

Figure 1: Intern Perception On Physical Environment



It was found that in terms of physical environment interns were not satisfied with the availability of essential medicine, accommodations, communications, safety in hospital , proper space and food quality. They were highly satisfied with emergency medicine and safety equipments like gloves, mask available in hospital.

Though the working with collaboration with other interns, supervision and feedback of Medical officer and confidence was rated good , posting doesn't sensitize the intern to work in rural area further.

Figure 2: Intern Perception On Emotional Environment

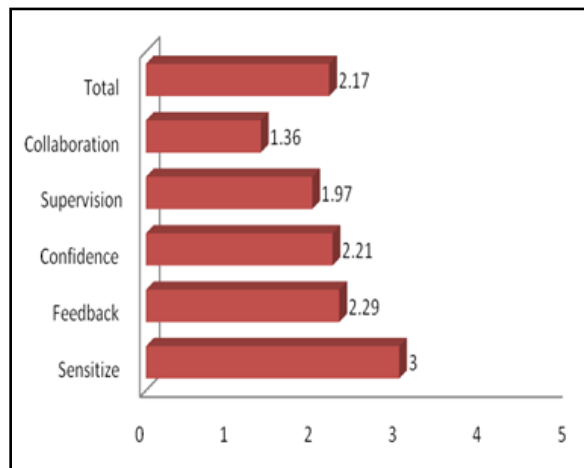
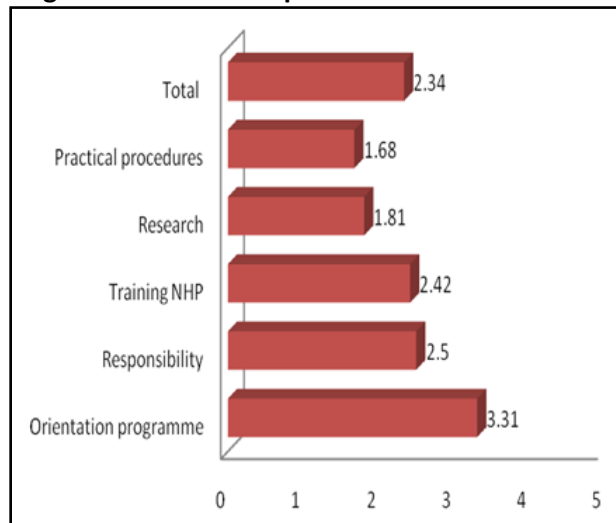


Figure 3: Intern Perception On Intellectual Level



On intellectual level , interns were satisfied with the hand on experience to clinical skills , research, working of National Health Programme and responsibility given as a intern they express the orientation programme to be lacking in practical aspect and not interesting

Discussion: MCI has prescribed the three months of training for interns under Department of community medicine where they are posted in primary and rural health centre. For medical education to serve the community, it would have to best to be socially oriented towards primary healthcare. RHTC of a private medical college can play an important role in delivery of NRHM services and implementation of national health programme ^{5,6}.

As per study findings the students were not satisfied with the physical environment of the hospital. The accommodation facility was not upto the mark. Safety was a big issue with students mostly girls as no guards was available most of time at night. Interns too complained that the essential medicines were out of stock due to which they had to give alternative one or patient has to do out of pocket expenditure. As this RH is attached to private hospital the inventory control is not proper and it runs on Push mechanism. Interns also feel communication is big hurdle both mobile network and road connectivity and availability of transport. They feels isolated due to this problem. Food too is not provided and they had to take it from outside which is unhygienic. This all makes the place difficult to live and learning is far away. MCI minimum requirements i.e Separate residential arrangements for boys, girls and interns with mess facilities is only things considered by medical colleges⁷.

The interns were satisfied with clinical supervision and feedback provided by medical officers. They work there in the team , and hand on experience on some common procedures like suturing , immunizations boost their confidence. On other hand this training had not sensitize them to work in rural area further. This may be due to non seriousness of interns towards the rural posting and burden of pre PG preparation.

Interns have the appropriate level of responsibility , hand on experience on common procedures and NHP. They are given the research project during the posting that help them to do community need assessment and vital statistics of community. The students saw and managed variety of patient in RHTC than hospital setting. This support the evidence by Johnson & Blinkhorn,⁸ where student saw more patients per day in the rural clinic than at the dental school clinics.

The orientation programme in present study was found to be very theoretical. No new topic was taught apart from hey learned during the four and half years. The orientation of future working place, ethics is totally lacking.

Thus the rural internship if well structured and done sincerely on part of interns and faculty would be effective in learning and career development of interns. It will help to make the primary care physician and medicine oriented to the rural health need.

Conclusion: The rural internship programme fails to motivate the interns to work in rural area in future. The poor physical infrastructure of rural centre is the main hurdle for avoiding the rural postings. There is need of availability of essential medicines, transport facilities ,hygienic mess and safety guards in the premises of centres.. Day to day Workplace based evaluation to be done coupled up with small community based projects highlighting practical aspects of work.

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