SHORT REPORT

Medical Students' Perspective of Problem Based Learning (PBL) Curriculum at the University of Transkei.

Meel, BL

MBBS, MD, DHSM (Natal), DOH (Wits)

Faculty of Health Sciences
University of Transkei P/bag XI
UNITRA
Umtata 5100

South Africa.

Tel: 0027-47-502 2961

Cell No.0822007460

Fax: 0027-47-502 2235

E-mail: meel@getafix.utr.ac.za

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Abstract

The Faculty of Health Sciences at the University of Transkei has completed the first 5 years of its problem-based community oriented teaching curriculum. The use of SWOT analysis to evaluate current and future directions can lead to the successful evolution of any organization. The aim of this study was to obtain a students' appraisal of the PBL Curriculum at the University of Transkei's Faculty of Health Sciences. Fourth-year Medical students were divided into 4 groups and were asked to describe the strengths, weaknesses, opportunities and threats in the PBL. The data of each group was prioritised. A majority of the student groups indicated that in terms of quality, the strengths of the system were stronger than its weaknesses. They also pointed out that there were more opportunities than threats. It was concluded that the PBL curriculum empowers the students by increasing skills that are relevant to existing health problems in the community. It also gives them the opportunity to meet the outcomes of the program in due time.

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■ Introduction

The Faculty of Health Sciences at the University of Transkei is a leading institution in Southern Africa with regard to Problem Based Learning (PBL). For the past five years, the faculty has been producing community-oriented doctors in this resource-strapped region of the Eastern Cape. The purpose of a problem-based learning program is to produce efficient and caring community doctors and health professionals who:

- provide primary healthcare services, especially in under-served areas;
- provide preventive, promotional, and curative medical services;
- · maintain cost-effective and cost-

- efficient medical and health care services;
- can achieve self-sufficiency with regard to human power resources, and
- are self-directed, with integrated knowledge skills and the ability to think logically.

After five years, it was deemed necessary to evaluate the programme's strengths, weaknesses, opportunities and threats (SWOT) from a student point of view. The priorities and perspectives identified by the students and the analysis of these priorities and perspective by the teachers could have a significant impact on future planning of teaching methodology

based on the problem-based, community-oriented teaching programme of the University of Transkei's Faculty of Health Sciences. The study has highlighted the need to revise our objectives, redefine some of our success criteria and clearly stipulate performance indicators

Methodology -

Fourth-year medical students were briefed about SWOT analysis and asked to complete a questionnaire on the strengths, weaknesses, opportunities and threats in the University's problem-based, community-oriented teaching curriculum.

SWOT is an effective and simple planning technique that evaluates various aspects of the PBL teaching/learning process. It is an approach that is primarily intuitive and judgmental; not quantitative, and is the simplest and cheapest tool available for scrutinizing a system. SWOT analysis to evaluate current and future directions can lead to the successful evolution of any organization^{1,2} and is therefore a valuable tool to identify aspects of the curriculum that may have to be changed.

The students were divided into four groups and common points were compiled on flip charts. The results were discussed in the classroom from 2 to 4 pm. After the discussion with the students the results were displayed in tables.

Results •

As shown on Table I, the most common strengths reported by the students, were the implementation of teaching aimed at effective holistic care; the effective use of resources; and the exposure to community problems.

The weaknesses that were highlighted included the resistance of some staff to change from the traditional system

to the new system, the shortage of staff and the lack of motivation of some staff members. The study indicated that most staff members and students were overworked, and often frustrated.

The most common opportunities identified by the students, were their exposure to a wide spectrum of diseases. They stated that their proximity to a rural area made it easier to meet the practical requirements of community orientation.

Common threats highlighted by the students were the relative instability of the university and the effect of this instability on the medical school; the departure of staff, and recognition of degrees.

Discussion -

A majority of the student groups indicated that the strengths of the system outweighed its weaknesses and they identified more opportunities than threats. There was, of course, a long list of weaknesses due to the shortage of teaching and administrative staff.

The students had a good understanding of relevant community health issues, mainly because of their direct

participation in community health. They expressed fears with regard to the cost and length of the curriculum, especially in the light of the uncertainty about the future of the University and the Faculty. They have also pointed out that some staff members were not always well acquainted with the curriculum, while others seemed to be demotivated. Some students were also scared of the internal as well as external threats regarding the continuity of a curriculum that is subject to frequent changes.

Because the curriculum encourages a strong sense of autonomy, flexibility, and openness, the system seems to inspire the students with confidence. This is one of the positive outcomes of the new system. However, while the more resourceful students seem to benefit from the system, there are indications that those who are not as resourceful and organised, often tend to lag behind. Unlike more authorative systems, the new system may not detect student weaknesses early enough.

With students evaluating the system, there is also the danger that the evaluation may prioritise student needs, and by giving them a free hand, they may be too subjective in their

Table 1: Student's assessment of the common Strengths (S), Weaknesses (W), Opportunities (O), and Threats (T).

Strengths	Weaknesses	Opportunities	Threats
Effective use of resources	Lack of resources	Learning about culture	Lack of staff and resources
Competency, flexibility and autonomy	Lack of theory	- Exposure to wide spectrum of diseases	Expensive system
Holistic, community oriented care-giving teaching	Overworked students and staff	Opportunity to attend conferences	Uncertainty due to poor planning and staff leaving
Production of efficient health professionals	Resistance to change	Community orientation	Frequent and Irregular changes.
Emphasis on clinical teaching	Political issues		1285 SIGN 11511 1985

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appraisal. Therefore the SWOT technique should be regarded as a temporary measure only, and useful only for the identification of problems but not for solutions

A final weakness was the students' failure to recognise that while they were empowered by this approach, it weakened the staff. This clearly indicated the need for another approach to ensure a more balanced evaluation of the system.

Student recommendations from the study included the following:

- Workshop I for symbolizing: dissemination of information, SWOT analysis of PBL.
- Workshop 2 for understanding: to enhance the significance and comprehension of SWOT analysis in a first workshop from each department.
- c. Workshop 3 for creating and forming a task team: putting the subject into context and offering various ways of undertaking the formulation of protocols.

Our aim with the workshops is to turn the weaknesses into strengths

by minimizing weaknesses and increasing strengths.

Conclusion •

Since the introduction of the PBL method at UNITRA in 1992, there has been a drastic reduction of student dropouts. The PBL curriculum provides students from weak academic backgrounds with the opportunity to keep in step with the programme from year to year.

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