Ensuring Smooth Implementation of Attitude, Ethics, and Communication Module in Medical Colleges: SWOT Analysis

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Abstract

A successful medical practitioner is not only measured by the knowledge about the subject, ability to apply the learned knowledge, and the skillset, but also by their ability to communicate, empathize, and offer tender care and support to the patients and their caregivers. To prepare the medical practitioner to effectively discharge their roles, it is a must that active interventions are being taken during the period of medical training. In a targeted attempt to strategically bridge the existing gaps, the regulatory body in India has recommended to all the medical colleges to introduce attitude, ethics, and communication (AETCOM) module in the undergraduate training period. However, it is always nice to understand the strengths, weaknesses, opportunities, and threats (SWOT) involved in the implementation of training modules so that the intended learning outcomes can be accomplished in the due course. In conclusion, the decision to systematically introduce and expose the students to AETCOM module is a historical one in the undergraduate training period. It is the need of the hour that every medical institution performs the Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis of their own setting and then devises a flexible plan to derive maximum benefit for the students.

Keywords: Attitude, competency, ethics, medical education

INTRODUCTION

A successful medical practitioner is not only measured by the knowledge about the subject, ability to apply the learned knowledge, and the skillset but also by their ability to communicate, empathize and offer tender care and support to the patients and their caregivers.[1] To prepare the medical practitioner to
effectively discharge their roles, it is a must that active interventions are being taken during the period of medical training. In fact, it is not something new that the domains of communication, attitude, and responsiveness have been considered a part of the hidden curriculum and have not been given due attention.[1,2]

Regardless of the state of development (i.e., developed nations or developing nations), it is of utmost importance that medical students across the world are exposed to teaching in the noncognitive and hidden aspects of curriculum to prepare them for their role of a successful clinician. This calls for the need that medical students in the undergraduate training period are exposed to the same in their teaching period. In other words, it is high time that specific measures are taken to train and assess students in the attitude and communication domain, and thereby are better prepared to respond to the challenges of medical practice.[1,2]

**Attitude, Ethics, and Communication Module**

In a targeted attempt to strategically bridge the existing gaps, the regulatory body in India has recommended to all the medical colleges to introduce attitude, ethics, and communication (AETCOM) module in the undergraduate training period.[2] The designed module has been designed in a progressive manner, wherein specific issues pertaining to the development of attitude, understanding of ethical dilemmas, and improvement in communication skills have been targeted across different professional years. The idea has been to start from simple topics in the first professional year and gradually increase in terms of complexity, and exposing the students to different aspects, as they reach the final professional year.[2,3]

To avert any issues with regard to the scheduling of sessions and to maintain uniformity across all the medical colleges, specific time of teaching has been allocated in each professional year. Further, specific teaching-learning methods for the coverage of each module and the potential assessment method have also been recommended. However, it is always nice to understand the strengths, weaknesses, opportunities, and threats (SWOT) involved in the implementation of training modules so that the intended learning outcomes can be accomplished in the due course.[2,3]

**Strengths**

The very fact that the module has been designed to improve the competence levels of undergraduate medical students with regard to their communication skills, demonstration of empathy, and resolution of ethical dilemmas, which is a burning need in the present era makes the module very essential.[3,4] The formulation of a well-drafted curriculum with the framework of competencies and defined outcomes specifically for AETCOM module makes it special and a useful training module. The AETCOM module training is expected to empower the students in their professional and personal growth and will play an important role in producing an Indian Medical Graduate, especially as it addresses one of the current needs. Another strength of the initiative is that it has been designed in a longitudinal manner, wherein students are exposed to all the desired competencies in a progressive manner, without putting undue pressure on one specific year.[2,3]

Moreover, considering that the majority of the faculty members have been trained in the AETCOM module as a part of the Revised Basic Course Workshop, it is easier to implement the same. Further, as there is a scope of flexibility, the institutions can adopt their own teaching-learning method or assessment strategies to implement within their own settings. In fact, the incorporation of formative and summative assessments ensures that students are also roped in and they take specific steps to learn the offered content, which is beyond the subject specialties.[5] The adoption of a hybrid problem-based learning model during the training of AETCOM module ensures that the students acquire the trait of being self-directed and lifelong learners. Moreover, the students also acquire leadership skills and learn the art of working as a member of the team, which is once again quite important in the field of medicine.

Further, as the regulatory body has recommended the implementation of AETCOM training, it becomes a must for administrators to support and that is a definite positive. In addition, the presence of a functional Medical Education Unit
and the Curriculum Committee that can offer advice/suggestions for the successful implementation is a significant promoting factor in the AETCOM training catering to the needs of undergraduate medical students.\(^3\) Moreover, the emergence of the coronavirus disease–2019 pandemic has remarkably strengthened the information technology sector and the technical team of all the medical colleges, and thus institutions are well-equipped for online learning resources that can be utilized for AETCOM training as well.

**Weaknesses**

The successful implementation of AETCOM modules in a teaching institution requires lots of planning and teamwork, and can fail to accomplish the intended outcomes if we are not well prepared.\(^2\) The first and foremost weakness is that as the leading departments in each professional year take the responsibility for the delivery of AETCOM module, it becomes a must that all the faculty members from each department are trained in AETCOM and are aware of how to run the module. At the same time, the issue of faculty reluctance to change or lack of commitment or failure to keep them motivated throughout or reservations (viz. we all were never taught these things, but students of today’s era are spoon-fed with everything and leaving no chance to learn anything on their own by observing their teachers in clinical practice) can prove to be a major hurdle.\(^2\)\(^-\)\(^4\)

Although specific time has been assigned to the training each year, the departments have to take extensive efforts to accommodate the AETCOM teaching hours and the scheduling of classes, as the regular teaching should not be interrupted. At the same time, students should also be sensitized about the need to get trained in AETCOM competencies, as lack of participation from their side will not deliver encouraging results in the long term. In addition, slow learners will find it difficult to become competent in AETCOM competencies and it might result in them becoming anxious and overwhelmed.\(^1\)\(^-\)\(^4\) Further, the issues of lack of support from the administrators and technical team, and lack of logistics support can also compromise the implementation. As assessment will be a crucial link in the learning process, the institutions should carefully select the appropriate assessment tools, so that specific competencies can be assessed in a meaningful way.

**Opportunities**

The designed AETCOM module is expected to play a defining role in developing attitude and professionalism among medical students. As the modules are case-based, there is a definite need to organize the content to ensure the delivery of a concrete learning experience.\(^2\) The training in AETCOM creates a unique opportunity for the students to get exposed to the sociocultural perspective, which in turn will advocate experiential learning. Further, the incorporation of reflective writing in these sessions will help these students become a reflective practitioner. Moreover, as it has been recommended to carry out follow-up sessions, wherein students come after reading (they become accountable for their own learning), and succeed in we instill the stones of being a self-directed and a lifelong learner.\(^2\)\(^-\)\(^3\)

At the same time, the implementation of AETCOM training for undergraduate medical students offers an opportunity for the Medical Education Unit to plan a series of 1-day workshop to train all the faculty members in AETCOM and improve their overall competence. From the students’ perspective, during the training, the teachers can identify the areas that require more attention among students and accordingly, improvise the training process. The training imparted will go a long way to produce a competent Indian Medical Graduate, who is professional, has better communication skills and even possesses improved ethical awareness. The imparting of training will indirectly require more number of meetings at the department level, at the level of each professional year, medical education units, and curriculum committee, which will indirectly significantly improve cohesion and teamwork among all the colleagues.

From the teaching-learning perspective, the AETCOM training will give a platform for the teachers to standardize assessment tools and
understand the feasibility of the same for a large number of undergraduate students.[5] In addition, innovative teaching-learning methods (such as problem-based learning or case-based learning) can be adopted and even extrapolated to other settings, and will definitely help the students in their knowledge and skill acquisition process. Further, as the training starts right from the first professional year, the pressure on teachers from the third professional year can be significantly minimized. From the faculty perspective, they will get more opportunities to carry out medical education-related research and even has better satisfaction levels.[2-4]

The training in AETCOM also provides an opportunity to employ information technology in teaching based on the present needs and thereby ensure active engagement of the medical students. The successful conduction of AETCOM training will pave the way for creating special certificate courses or workshops or training programs in the field in the future. In addition, funding opportunities can also be explored in the future for the organization of a national level program, involving external participants. In the long run, it gives an opportunity for the institution to come up with sustainable modules using the available resources.[1-3]

**Threats**

The emergence of the COVID-19 pandemic has become one of the biggest threats in the current time to ensure seamless implementation of AETCOM training. The institutions which are having faculty shortages can find it extremely challenging to effectively implement the AETCOM module training in medical students. The need to do extensive planning before the conduct of training sessions can prove to be an important hindrance among faculty members.[2-4] Further, the issues of time constraints, lack of financial support, absence of logistics, untrained faculty members, inability to complete the portions, lack of support from the top administrators, the opinion of the students that the sessions are lengthy and repetitive, etc., can prove to be significant threats in the overall implementation. Finally, the issue of sustainability is also worth considering and specific measures need to be taken to improve its long-term implementation.

**A Plan for Implementation**

In view of the findings obtained from the SWOT analysis of the AETCOM module, the process of planning and implementation has to be an ongoing one. The Medical Education Unit should be involved in the faculty development program for enhancing the competence levels of faculty members. The faculty members from each professional year should interact with each other and prepare a comprehensive schedule, including the inclusion of allotment of specific number of teaching hours in the timetable. The departments can organize a department-level meeting wherein all members give their inputs to plan how to cover a specific module, teaching-learning method, and plan of assessment. In addition, after the organization of the session, feedback can be obtained from the students about the session, the aspects which they liked the most, and what all things could have been organized better. Further, students can also be asked to record their reflections and maintain the same in their logbooks.

**Conclusions**

The decision to systematically introduce and expose the students to an AETCOM module is a historical landmark in undergraduate training development. It is the need of the hour that every medical institution performs the SWOT analysis of their own setting to enable devising a flexible plan to derive maximum benefit for their students.

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**References**


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