Addressing Students' Uncertainty During COVID-19 from the Social Accountability Standpoint, A Case Study of Menoufia Medical School

By Negwa Hegazy, MD, DHPE, Rania Azmy, MD., DHPE, and Naser Abdel-Bary El-Agizy MD

Summary

The global pandemic has proven to be challenging for students in more ways than one. With campuses closed nationwide, executive orders for lockdown, and calls for people to stay home -- "Stay Home, Stay Safe," many students found themselves under mental stress and uncertainty in ways they hadn't before. The uncertainty was derived by an indeterminate roadmap, the pandemic phobia, and the risk of being infected, financial stress, the stigma of the disease, and the possibility of being called for exams in such a situation.



The Importance

The WHO described social accountability in the field of medical education as the obligation of the medical schools to conduct their education, service, and research to address the priority health concerns of the society they serve (Boelen and Heck 1995). The implementation isn't an easy step taking in consideration the lack of a clear strategic plan to do it. This article is reflecting on the school functions on the student uncertainty issue from the social accountability standpoint.

Students' uncertainty is an extremely dynamic issue due to crucial two elucidations. First, today's students are tomorrow's physicians and walking our social accountability talk will be a good role model for them. On the other hand, the cognitive load theory found that students' poor emotional wellbeing may reduce educational attainment by increasing extraneous cognitive (William, 2020). That's why it's an important issue to achieve the desired outcomes from the remote emergency teaching. The context here is nearly six thousand undergraduate students distributed in rural, semi urban, and urban areas with the majority in rural areas, with deprived technological infrastructure in the rural areas and having some of these places under COVID-19 quarantine. The chief point is that education is being ruled centrally with the governmental bylaw and order in regard to the educational process.

Intervention and methods

An emergency meeting was conducted with a call-to-action. Meeting the needs of our students wasn't our only concern. We also developed ways to stay connected while working our way through this pandemic. Technology and social media apps were often considered a social disconnect but currently these communication devices and apps play a main role in connecting with our students.

In the early part of April 2020, an intersectoral collaborative approach was conducted through the vice dean, the quality assurance unit (QAU), and the medical education and human resources development center (MEHRDC). Few actions had been taken along that course of action that were transparent with the students and it was declared that uncertainty was the title of the era to offer them comfort and assure them that they aren't facing this issue alone.



A more structured response has been conducted by the institution through three parties:

- 1- The vice dean frequently showed up to the students to either assure them or explain the decision by the Higher Ministry of Education. Also, a monthly virtual meeting with the student's union was established with the aim of providing communication and an information exchange. Exemption of the online assignments was done for students who had difficulty accessing the internet as well as providing them with the full online materials on DVD.
- 2- The quality assurance unit activated the mentorship program with a mentor available for every 20 students through the creation of a what's app group containing all the mentees. All mentors had been grouped within one group to

- receive the instructions and offer availability for any problems. Mentors were trained to deal with the students and regular feedback and monitoring was done through a written report to the school council.
- 3- MEHRDC worked through the student support (welfare) committee executing a plan on the following levels: education level, mental wellbeing, and social wellbeing. On the education level; the MEHRDC helped the students through the final assignment evaluation in the first three years by conducting a webinar explanation for them and doing tutorial videos for conducting the assignments. In addition, they hosted a live meeting with one of the seniors to provide instruction on how to study during the lockdown for the final clinical years. On the mental wellbeing level; a recorded video on coping with stress was uploaded for the students' access with an open channel for questions and communication. Correspondence was conducted regularly to enable communication with the COVID-19 patients. Moreover, an electronic student clinic was announced for the students to make appointments and receive replies to their complaints and econsultations within 24 hours. On the social level; a campaign for resilience and how to gain the soft skills was conducted to equip students with the skills necessary for resilience. Contests were held with submissions from social media, and other posts and fun games were designed for remote participation.
- 4- As had been illustrated, that was an intersectoral collaborative approach aiming to reach most of our students and to provide a good service for them. On the institutional educational function level; it was proposed that they participate in two mandatory undergraduate interactive lectures on coping with stress the next year. While this doesn't meet our total satisfaction, it's a stepping stone.

Students demonstrated variable responses towards the services provided. One student said, "I'm fortunate to have some who hears me and respects my point of view," and another student said "I feel I'm still connected to my school despite the lockdown." On the other hand, one student shared, "I don't have a reliable internet stream to follow-up with." Similar challenges by a large number of the students where followed up on ensure that all students could benefit from the available services.

Lessons Learned

-The presence of influential individuals (vice dean) is a crucial for the presence of crisis resources management plan. The participation of a collaborative team can influence the smoothness of plan implementation. The shared attitudes and beliefs of students in the context of COVID-19 influenced the way students reacted to and participated in the programs.

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Author Bios

Nagwa Nashat Hegazy, MD., DHPE. is the assistant professor of family medicine and currently serves as the director of the medial education and human resources development center, Faculty of Medicine, Menoufia University.

Rania Azmy, MD., DHPE, is the assistant professor of biochemistry and serves as the director of the quality assurance unit, Faculty of Medicine, Menoufia University.

Naser Abdel-Bary El-Agizy MD, is the professor and former head of the clinical oncology department and currently serves as the vice dean for education and student affairs, Faculty of Medicine, Menoufia University.