

Impact of pandemics on medical education



ANNUAL GENERAL MEETING VALENCIA, SPAIN 12TH 14TH MA22

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ECTS MA Annual Meeting – Valencia 12th 14th May 22

Taily new impact of pandemics on INTER ICO medical education



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The **number** of internationally mobile students in higher education has grown dramatically from



⁶⁶However, this is just 2.6% of the total world student population.⁹⁹





More than **1.5 billion** students and youth across the planet are or have been affected by school and university **closures** due to the **COVID-19** pandemic.

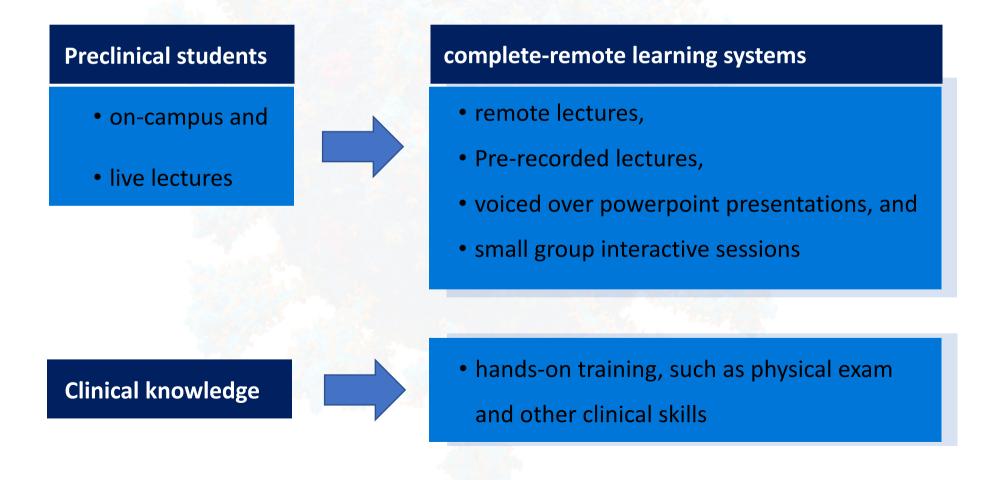
Never before have we witnessed educational disruption at this scale. Partnership is the only way forward. "

UNESCO Director-General Audrey Azoulay





More than **1.5 billion** students and youth across the planet are or have been affected by school and university **closures** due to the COVID-19 pandemic.





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- IAU Global Survey on the impact of COVID 19 on higher education around the <u>world</u> (International Association of Universities)
- 2. Student Exchanges in Times of Crisis Research report on the impact of COVID-19 on student exchange in Europe (ERASMUS Student Network)
- 3. Medical Student Life & Education Report 2020 (Medscape) <u>US</u> Medical students
- 4. National surveys

SURVEYS



IAU Global Survey Report

Giorgio Marinoni, Hilligje van't Land, Trine Jensen

The IAU Global Survey on the impact of COVID 19 on higher education around the world was available online from **25 March to 17 April 2020**. It received 576 replies from **424** universities and other Higher Education Institutions (based in 109 countries and two Special Administrative Regions of China (Hong Kong and Macao).

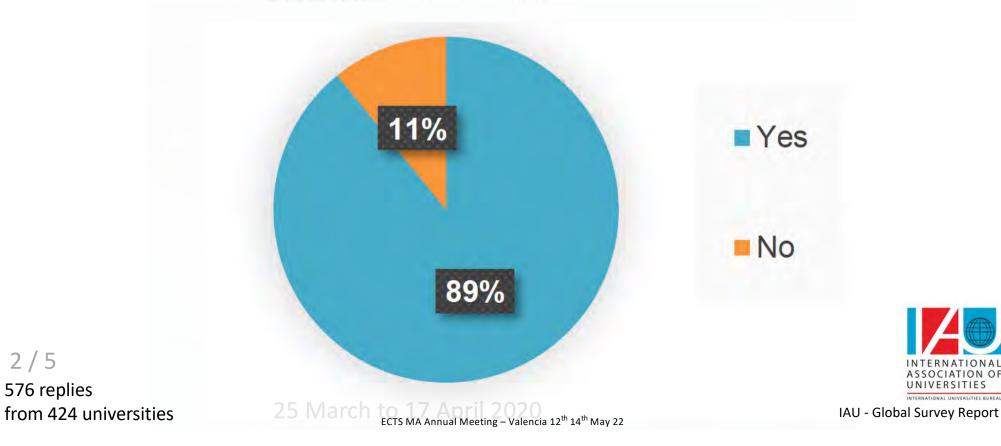
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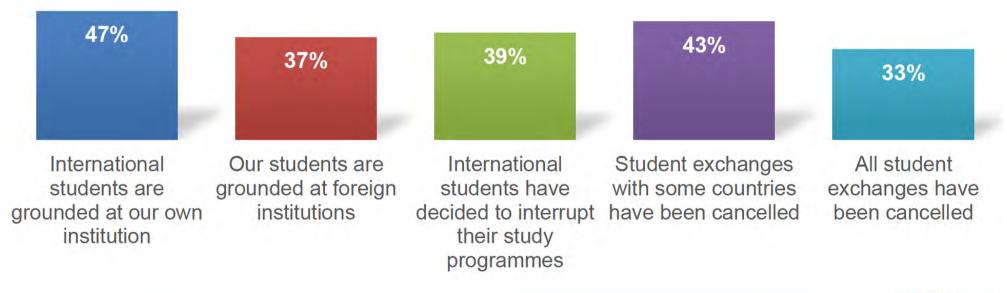
Has there been an impact of COVID-19 on international student mobility?

2/5





What is the impact of COVID-19 on international student mobility





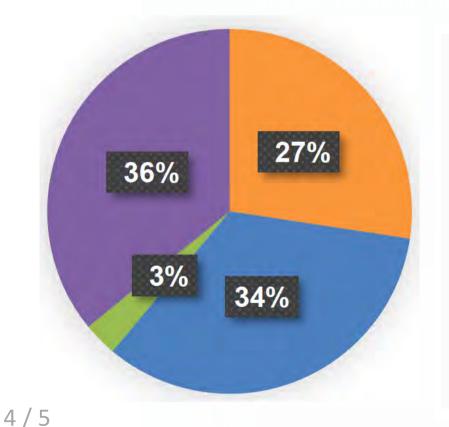
576 replies from 424 universities

3/5

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IAU - Global Survey Report

Are any contingency plans in place?



No

- Yes, put in place at our own institution
- Yes, put in place at our partner institutions abroad
- Yes, put in place at our institution and at our partner institutions abroad



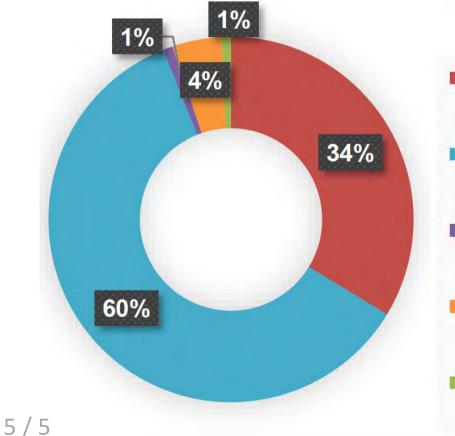
IAU - Global Survey Report

576 replies from 424 universities

25 March ECTS MA Annual Meeting – Valencia 12th 14th May 22



Has COVID-19 stimulated alternatives to physical student mobility?



No

- Yes, we increased virtual mobility and/or collaborative online learning
- In development
- Planning or considering their development
- Don't know



IAU - Global Survey Report

576 replies from 424 universities

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SURVEYS





Student Exchanges in Times of Crisis Research report on the impact of COVID-19 on student exchanges in Europe



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student exchanges in Europe affected by the COVID-19 crisis (202 For the first time since the beginning of the outbreak. **US President Trump** WHO Director-General Tedros Italy places all its 60 infections and deaths Adhanom Ghebreyesu says during million residents on bans all travel from 26 outside China surpass a press conference. European countries. lockdown. those within China. 13th March 11th March 8th March 16th March:

U.N. Secretary-General António Guterres calls for a global ceasefire to "help create corridors for life-saving aid, open windows for diplomacy and bring hope to places among the most vulnerable to COVID-19."

23rd March

Cases of COVID-19

surpass 400.000

globally.

24th March

asmus Student Netwo

Cases of COVID-19 surpass 300,000 globally. 22nd March

Cases of COVID-19 sur-

pass 600.000 globally.

28th March

Cases of COVID-19

surpass 200,000 globally. 19th March

Spain and Italy hit new records for the number of deaths in one day. Spain records 832 deaths and Italy records 889 deaths. 28th March

ESN survey closes. 30th March

ESN survey opens.

19th March

More than 1/3 of humanity

is under some form of

lockdown.

31st March

Cases of COVID-19 surpass 1 million globally. 2nd April

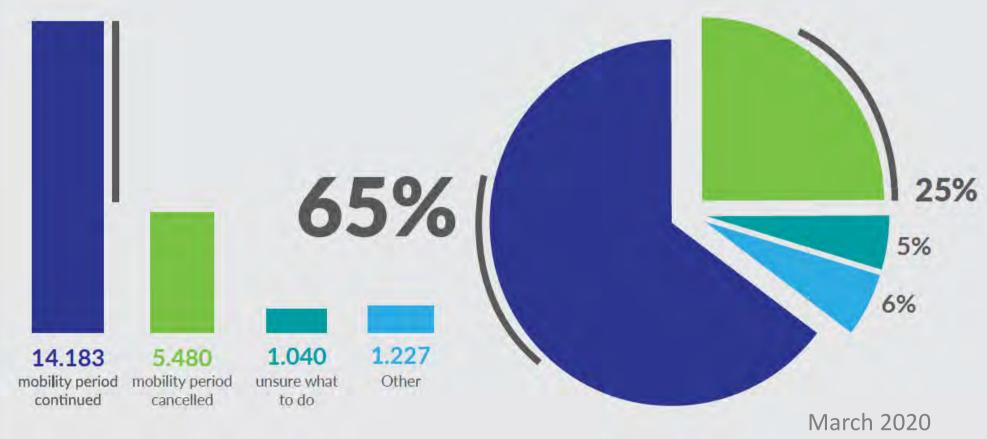
It gathered **21,930 responses** (125 nationalities)

from international students all over Europe



Effect on mobility

by themselves, by their sending university, by their hosting university or by someone else (national authorities, both universities...)

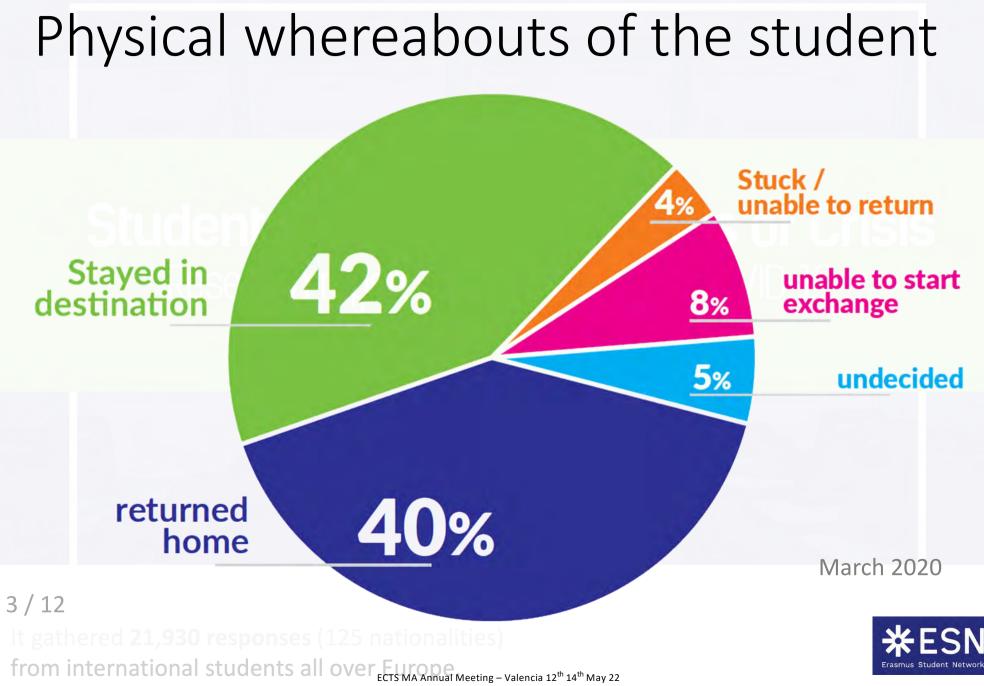


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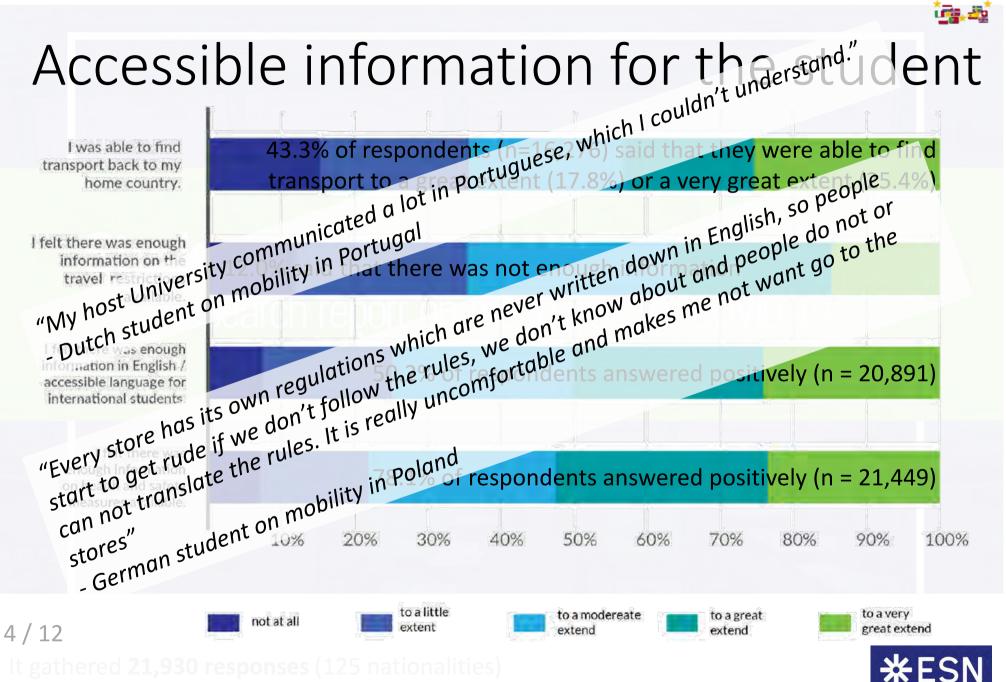
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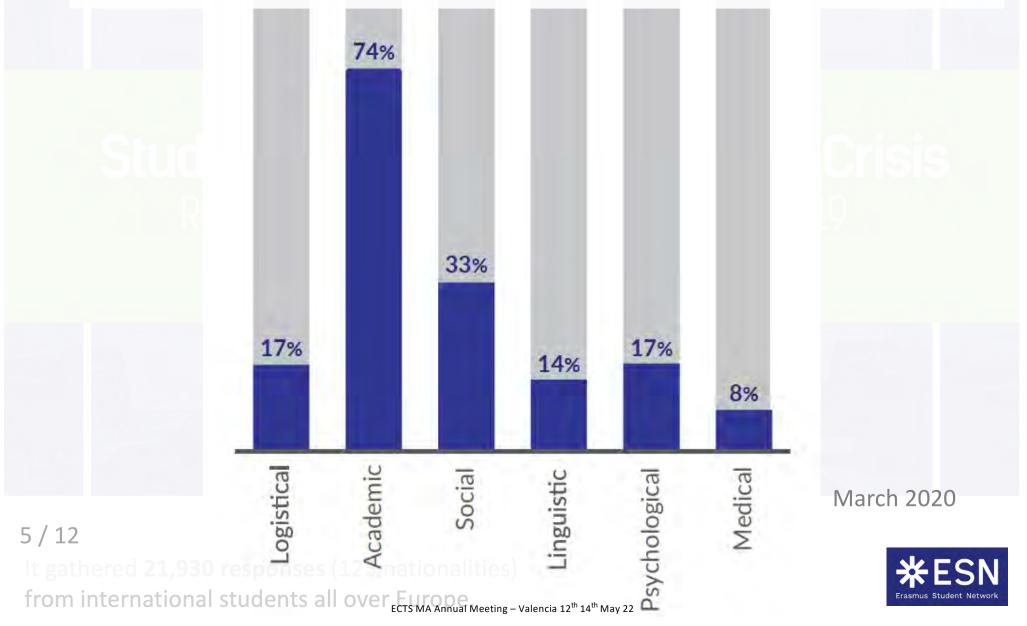




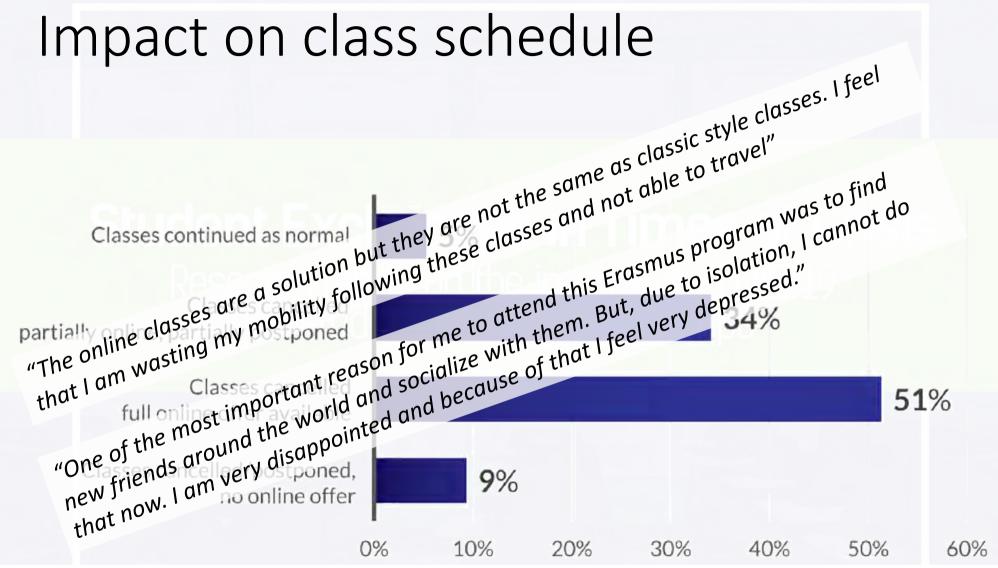
from international students all over Furope ECTS MA Annual Meeting – Valencia 12th 14th May 22



Overall support received by students







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It gathered **21,930 responses** (125 nationalities)

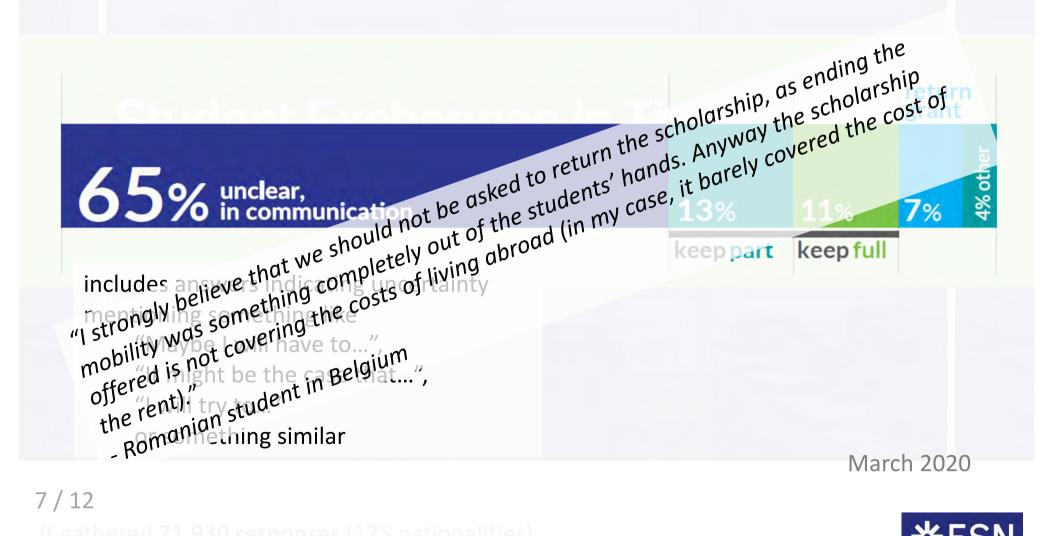
from international students all over Europe ECTS MA Annual Meeting - Valencia 12th 14th May 22







Financial impact for students with cancelled mobilities



from international students all over Europe ECTS MA Annual Meeting – Valencia 12th 14th May 22





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It gathered **21,930 responses** (125 nationalities) from international students all over Furope ECTS MA Annual Meeting – Valencia 12th 14th May 22





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SURVEYS



Impact of COVID-19 on Medical

Students



MEDICAL STUDENT LIFE & EDUCATION REPORT

Medical Student Life & Education Report 2020

n = 2,619 **US** medical students

2020

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Impact of COVID-19 on Medical Students

Methodology

Survey Method

Respondents were invited to participate in a 7- to 9-minute online survey.

Screening Requirements

Respondents were required to be US medical students.*

Sample Size

2619 US medical students completed the survey.

Data Collection Period July 14 to September 8, 2020

Sampling Error

The margin of error for the survey was +/- 1.92% at a 95% confidence level using a point estimate of 50%.

Honoraria

Medical students who completed the survey were entered into a sweepstakes for a chance to win a \$100 Amazon gift card.

*Includes students attending school in Netherlands Antilles, Grenada, Dominica, and the Caribbean.

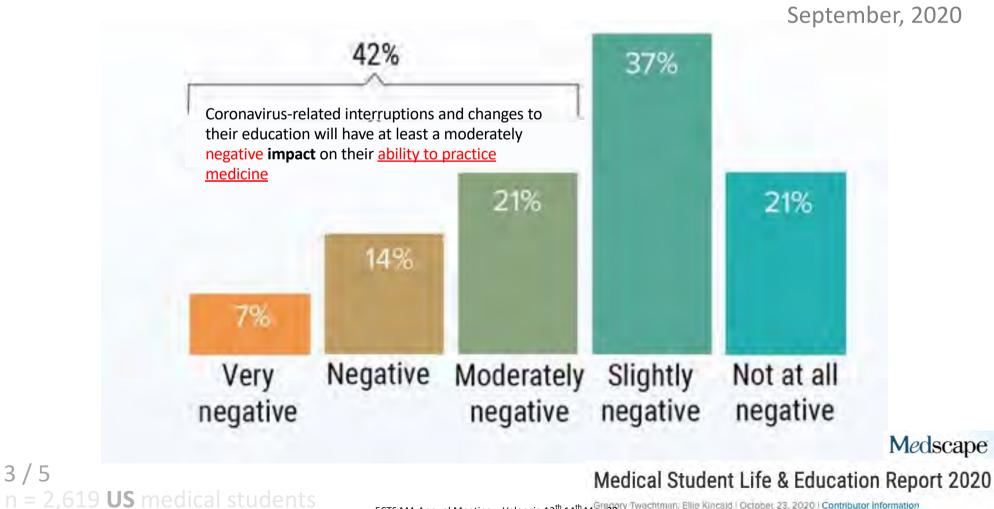
Medscape

2 / 5 n = 2,619 **US** medical students

Medical Student Life & Education Report 2020



Impact of COVID-19 on Medical **Students**



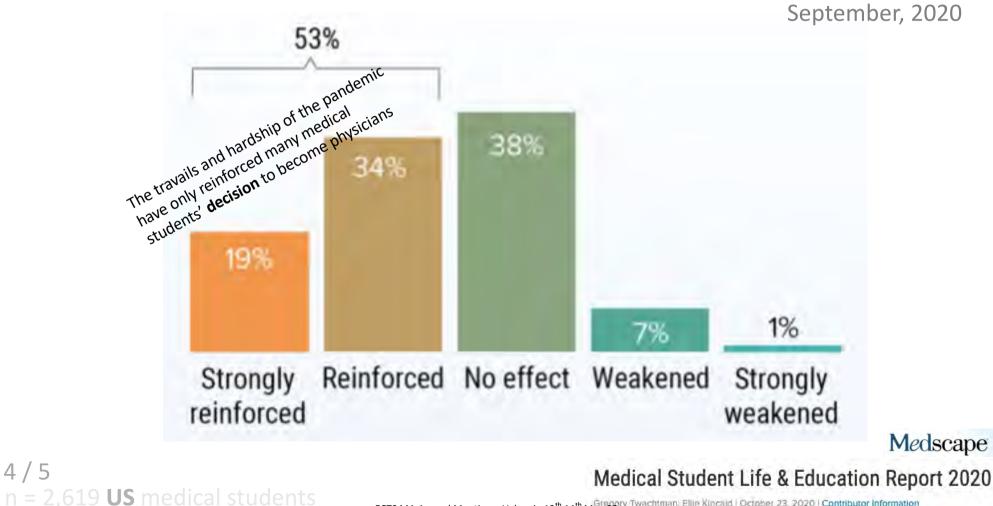
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COVID-19's Effect on Students' Choice to **Pursue** Medicine

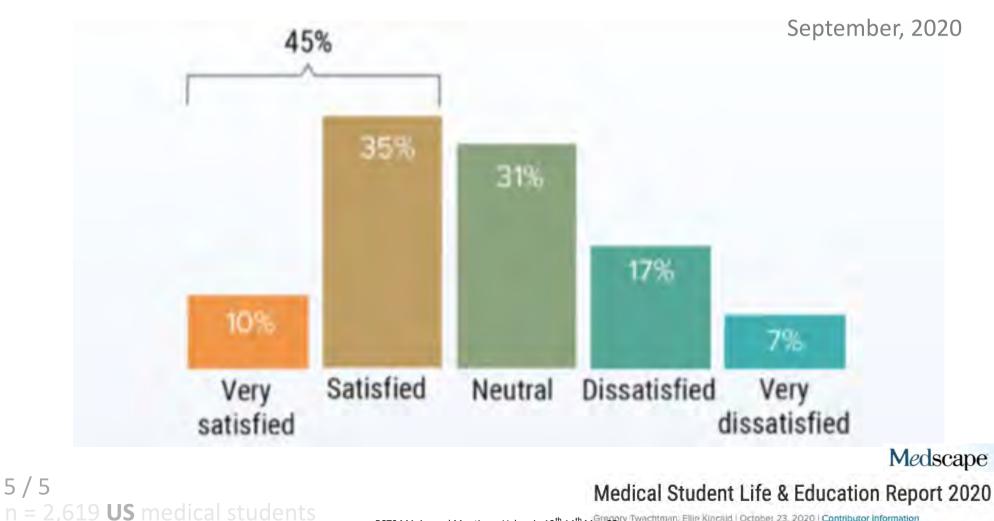
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Are you Satisfied With How Your Institution Is Handling COVID-19?



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SURVEYS





24% of universities reported that teaching had been <u>suspended</u> or <u>cancelled</u> with no alternative online platform provided

This compared with **3%** of universities in Europe being affected in this way

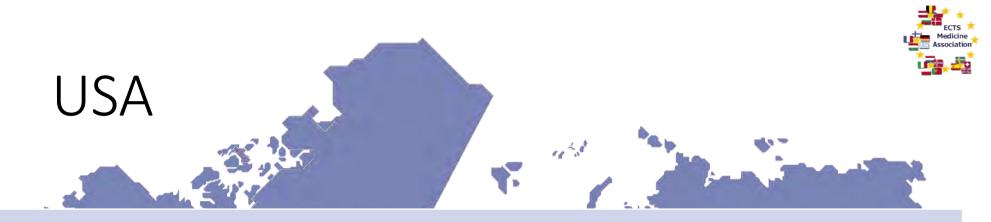
Only **29%** of African teaching faculties could quickly <u>adapt</u> to online teaching

compared to 85% of universities in Europe

evident <u>discrepancy</u> in the impact of COVID-19 on medical education in different income countries throughout the world







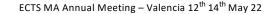
90% of medical schools in the USA **abruptly ceased** on-campus teaching and clinical placements and began online teaching in response to COVID-19

A survey performed on medical students from six universities demonstrated that **74.7%** of this population believed that COVID-19 **had significantly disrupted** their education

Students also felt they were able to **find meaningful learning experiences** during the pandemic (**72.1%**)

72.7% of participants in this study also felt that their medical **institutions** were **doing their best** to help students during this crisis





Harries et al., 2021

ΙΙςδ



Educational Impacts 74.7% My medical education has been significantly disrupted by the pandemic 72.1% I have been able to find meaningful learning opportunities in spite of the pandemic 72.7% I believe that my medical school is doing everything they can to help students adjust 61.4% The pandemic has limited my ability to prepare competencies or skills I will need to start residency 45.7% The pandemic has interfered with my ability to apply to residency COVID-19 has shaped or influenced how I imagine spending my career 0% 10% 90% 20% 30% 40% 50% 60% 70% 80% 100% Strongly Agree Somewhat Agree Somewhat Disagree Disagree Strongly Disagree Agree Neither Harries, 2021 Fig. 1 Perceived educational impacts of the COVID-19 pandemic on medical students



USA Willingness to Participate Clinically 83.4% I accept the risk that I maybe infected with COVID-19 if I return to the clinical setting in 2020 61.3% To the extent possible, medical students should continue with normal clinical rotations during this pandemic 63.5% Medical students should be allowed to volunteer in clinical setting during this pandemic, even if there is no healthcare worker shortage 19.5% In the event of a healthcare worker shortage, medical students should be required to help clinically 10% 20% 30% 40% 50% 60% 70% 80% 90% 0% 100% Strongly Agree Somewhat Agree Somewhat Disagree Disagree Strongly Disagree Agree Neither Fig. 2 Willingness to participate clinically during the COVID-19 pandemic

Harries, 2021



USA

Medical students have a moral, ethical or professional obligation to volunteer in the clinical setting during the COVID-19 pandemic The same obligation for medical students applies during the pandemic, even if there is inadequate personal protective equipment Physicians have a moral, ethical or professional	37.8% 10.9% 87.1%
obligation to provide care in the clinical setting during the COVID-19 pandemic The same obligation for physicians applies during this pandemic, even if there is inadequate personal protective equipment	34.0%
Strongly Agree Agree Somewhat Agree	0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%



Student respondents from across the US similarly recognized:

USA

- a significant **disruption** to their medical education
- shared a desire to continue with in-person rotations, and
- were willing to accept the risk of infection with COVID-19.

Harries, 2021



France I/II

85.5% of students agreed that online teaching was an **appropriate** teaching method during the pandemic

Approximately **70%** of <u>students</u> and **69%** of <u>teachers</u> felt that they have **not** received or provided training of an **equivalent level and quality** as expected

Approximately **15%** of students and **38.5%** of teachers felt that an **online** curriculum should **continue after** the pandemic





France II/II



15% of **teachers** did not do <u>any</u> of their usual teaching duties, **50%** maintained less than <u>half</u> of their classes, and **13%** gave <u>all</u> scheduled lessons

6% of students did <u>not</u> follow any lessons, 36% followed less than <u>half</u> of the course and 21% used <u>all</u> resources available

55% of medical students **regretted** not having **face-to-face teaching** and **70%** of teachers had this same regret







Students reported being afraid of losing a semester due to COVID-19

Students reported general **uncertainty** and **scarcity of information** as the greatest **stressors**, followed by worries regarding examinations, practical years and training terms abroad

71% wanted their teachers to be willing to enhance digital competencies and66.4% expected teachers to be lenient about examinations







90% of participants evaluated **virtual reality** training <u>positively</u>

77% thought virtual reality training was <u>realistic</u> for initial clinical assessment

94% thought virtual reality training was <u>realistic</u> for **diagnostic activity**

28% found online access <u>difficult</u> due to **technical issues**





Norway



Five most common answers when students were asked about digital education

Pros	Cons	
Increased opportunity to structure your own studies (67%)	Reduced possibility for socializing with fellow students (35%)	
Increased time efficiency (15%)	Less day-to-day structure (17%)	
Being able to decide time and place for study (9%)	Lessons deviating from the original timetable and/or being cancelled (14%)	
Being more comfortable asking questions during lessons (8%)	Insufficient technical abilities in educators (11%)	
Increased availability of lessons (2%)	A general feeling of distance to educator (10%)	

Medical students in our study did also report a **general satisfaction** with the quality of <u>theoretical</u> teaching provided

There was a major **dissatisfaction** with how clinical and <u>practical</u> teaching was replaced ²² 7 among medical students



Poland



online learning

Main advantages	Main disadvantages	
ability to stay at home (69%),	lack of interaction with patients (70%)	
continuous access to online materials (69%),		
learning at own pace (64%) and	technical problems with IT equipment (54%)	
comfortable surroundings (54%).		

No statistical difference between **face-to-face** and **online** learning in relation to increasing <u>knowledge</u>

E-learning is less effective than face-to-face learning in increasing **skills** and **social competencies**

73% of students found online learning enjoyable

Bączek et al., 2021

n=804



United Kingdom I/II

medical students from 39 medical schools showed that overall:

- students did not find online teaching enjoyable or engaging
- **76%** of participants reported that they did **not** feel online teaching was **effective** at replacing learning through direct patient contact





United Kingdom II/II

38.4% of participants had their final **OSCEs** cancelled (**43%** had already completed these exams before restrictions were imposed). **18.6%** had simulated patients or OSCE stations requiring patient contact cancelled

55.9% reported **no** change to **written examinations** while **26.8%** completed them online remotely. **9.8%** reported cancellations

Students' **confidence** for starting foundation training was significantly <u>affected</u> by the impact of COVID-19 on student assistantships only

59.3% of students either strongly agreed or agreed that they **felt unprepared** for starting their careers as doctors due to the impact of COVID-19 on their education

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n=444

Choi *et al.*, 2020



Comparison between traditional and virtual learning

lectures, small g laboratory sessions	AL LEARNING includes roup discussions, , in-hospital clinical nds on exposure	group discussions,	LEARNING includes vebcasting, virtual video-conferencing, and telemedicine
BENEFITS:	DRAWBACKS:	BENEFITS:	DRAWBACKS:
 Direct interaction with peers and faculties Hand on exposure to real patients Direct students assessment Time organization and setting boun- daries between home and schools Provide training for procedural skills 	 Lack of innova- tion Reliance on the presence of lectu- rers all the time to educate Lack of indepen- dence and reliance on spoon feeding approach of lear- ning Wasting a lot of time in commuting and moving between different classes Crowdedness which can be dan- gerous in crisis times such as pan- demics 	 Easy accessibility Safe and comfort environment Repeated access to the lecture in convenience Time flexibility Enhance the students independence and self learning capacities 	 Isolation and minimal interac- tions with peers Dependence on good internet access and poor technical skills of educators Lack of hands on exposure Lack of direct assessment Inability to acquire the none medical skills of a physician such as: leadership and teamwork

Althwanay, 2020



BURNOUT DURING THE PANDEMIC

91% of surveyed students reported stress due to the COVID-19 pandemic (1).

91%



31% and 24% of students screened positive for anxiety and depression, respectively (2). 40% of students think COVID-19 interruptions and changes to their education will have at least a moderately negative effect on their ability to practice medicine as they launch their careers (3).

40%

1) O'Byrne, 2021 2) Halperin, 2021 3) Twachtman, 2020

Final conclusions and recommendations



Survey on the impact of COVID-19 on learning mobility activities

- more than 107 000 participants in Erasmus+ mobility were affected by the Covid-19 situation
- close to 45 000 participants continued their activities with different arrangements (i.e. distance or online learning)
- for more than 23 500 participants the activity was temporarily suspended
- for more than 38 500 participants the activity was definitely cancelled

More than **80 000** of these participants came back home while **27 000** stayed abroad.

March 2020



Final conclusions and recommendations



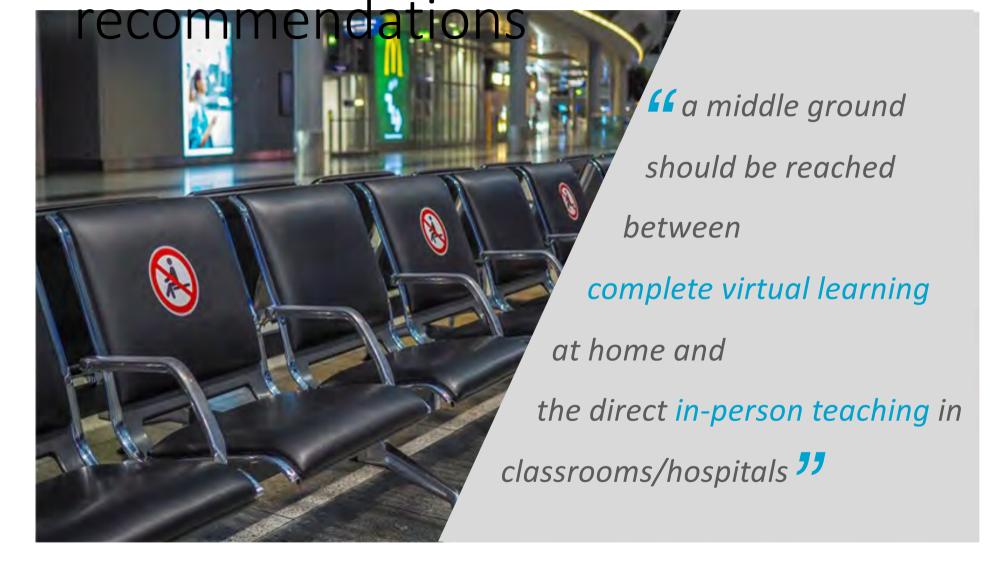
• The pandemic is not a revolution in medical education – it is an opportunity to learn how we can make education better !



PROFESSOR DAVID GORDON President of the World Federation for Medical Education



Final conclusions and





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