

BRIEF REPORT

Perceptions of dental undergraduates in India of a clinical induction program

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Abstract

This study aimed to investigate undergraduate students' perceptions of the clinical induction program for dental undergraduates conducted at the DMIMS Deemed University, Sawangi-Meghe, India. Seventy-four third-year dental students who entered the clinical phase of the dental program in 2012 and attended all sessions of the clinical induction program were enrolled in this study. The students' perceptions of the clinical induction program were assessed through a Likert-scale questionnaire, focus group discussions, and individual interviews. Seventy-two students (97.3%) responded positively about the program, evaluating it as successful and making a few suggestions. Fifty-four students (73.0%) stated that the clinical tours and visits to the departments were the best feature of the program. Nine students (12.2%) suggested that the program should include interaction with their immediate seniors and that interactive activities should be included in the program. The induction program may help students become acclimated during the first few days of being introduced into the clinical phase of their education. It is crucial to ensure that students do not develop a negative attitude towards their educational program by facilitating their smooth transition to the clinical phase.

Key Words: *Culture; Dental students; India; Focus groups; Program development*

This study explores the transition from the preclinical phase to the clinical phase in health education, and in particular, the clinical induction program that is generally provided when students first enter the clinical phase. The clinical induction program for dental undergraduates in the Bachelor of Dental Surgery (BDS) program of the DMIMS Deemed University, Sawangi-Meghe, India was planned for two days at the beginning of the third year, which is the first year of the clinical phase. The present study aimed to evaluate this induction program. Specifically, it explored students' perceptions of the clinical induction program and compared students' perceptions of the program format and the significance of the program.

Third-year BDS students who regularly attended all sessions

of the induction program were included, while those who were not present for all sessions of the induction program were excluded. A questionnaire including closed-ended response questions (items 1-14) and open-ended response questions (items 15-22) was administered, and focus group discussions (FGDs) and individual interviews were conducted. At the end of the program, the students were given the questionnaire, and 74 students answered it. The reliability and the internal consistency of the test items were measured by Cronbach's alpha. The Likert-scale questionnaire had two subdivisions. Items 1-7 dealt with students' perceptions regarding the program format (i.e., structure and mechanics), while items 8-14 assessed students' perceptions of the significance of the program (Table 1). Two months later, individual interviews and FGDs were conducted. Of the 74 students who filled out the questionnaire, 37 volunteered for a FGD, while 21 students consented to be interviewed individually. The FGDs were administered over a period of one month in five groups, at scheduled times and in a predetermined venue.

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Table 1. Responses to the Likert-scale items on the questionnaire, consisting of questions relating to the program format (items 1-7) and program significance (items 8-14), by 74 dental undergraduate students at the beginning of the third year at the DMIMS Deemed University, Sawangi-Meghe, India in 2012

Item	Item	Strongly agree (%)	Agree (%)	Neutral (%)	Disagree (%)	Strongly disagree (%)
1	Were you aware of the clinical orientation program?	--	3 (4.1)	2 (2.7)	69 (93.2)	--
2	The social climate was positive for learning.	42 (56.8)	30 (40.5)	2 (2.7)	0	0
3	The format of the program and issues covered were adequate.	22 (29.7)	52 (70.2)	0	0	0
4	The teaching in the clinical program was well focused.	48 (64.9)	26 (35.1)	0	0	0
5	The faculty was knowledgeable.	55 (74.3)	19 (25.7)	0	0	0
6	The time and attention given to each subject were adequate.	25 (33.8)	42 (56.8)	7 (9.5)	0	0
7	The duration of the program was adequate.	42 (56.8)	31 (41.9)	1 (1.4)	0	0
8	The program acquainted you with the clinical departments and postings of the dental faculty.	74 (100)	0	0	0	0
9	The program acquainted you with the clinical departments and postings of the medical faculty.	74 (100)	0	0	0	0
10	Do you feel the program was useful?	40 (54.1)	34 (45.9)	0	0	0
11	Are you confident enough to communicate with and treat the patients?	21 (28.4)	47 (63.5)	6 (8.1)	0	0
12	The program met its objectives.	49 (66.2)	25 (33.8)	0	0	0
13	The program was successful in orienting you for the clinical phase.	24 (32.4)	48 (64.8)	2 (2.7)	0	0
14	Rate and evaluate the program in terms of whether it was beneficial.	12 (16.2)	52 (70.3)	10 (13.5)	0	0

One session was conducted for each group of students, and the sessions lasted for 40-90 minutes depending on student participation. The FGDs were conducted following normal procedures and using a discussion guide. The semi-structured individual interviews were conducted using an interview guide and following normal procedures.

Quantitative data were analysed in terms of numerical responses to Likert-scale items, while qualitative data were obtained through open-ended questionnaire, FGDs, and interviews. The quantitative data were subjected to descriptive analysis. The number of responses to each item was calculated as a percentage. The qualitative data were subjected to thematic and descriptive analysis. The initial coding identified a number of basic themes, which were finally condensed into global themes that informed the conclusions of this study. In addition, gender-based differences in the responses of students were analysed with the chi-squared test, and differences in students' perceptions of the program format versus the significance of the program were assessed by the Student's t-test. The statistical analysis was performed using SPSS version 20 (IBM Corp., Armonk, NY, USA).

The university ethics committee approved this prospective

study (IRB No. 2012-13/796), which was carried out on 74 undergraduate students in the third year of the BSD program of the DMIMS Deemed University, Sawangi-Meghe, India in 2012. Students were voluntarily recruited into the study, and informed consent was obtained from all study participants.

Overall, the responses to the open-ended questionnaire were very positive and indicated agreement that the clinical induction program was beneficial (Table 1). Most responses to all of the items in the Likert-scale questionnaire were in the categories of agree and strongly agree. For items 8 and 9, which were related to becoming acquainted with the dental and medical faculty in the clinical departments, the responses were in the category of strongly agree. Of the students, 97.2% agreed that a similar clinical induction program should be conducted for each group of students entering the clinical phase.

When student responses were compared between the sections of the questionnaire dealing with the program format and the significance of the program, it was found that the responses to the items reflecting the significance of the program were more positive than those to questions dealing with the format of the program ($P = 0.000$). No significant differences were found according to gender for any of the items in the

questionnaire.

The open-ended part of the questionnaire assessed students' perceptions about the scope and relevance of the programme, students' experiences, their satisfaction levels, the best feature of the program, and any comments or suggestions for improving the next program. A majority of the students indicated that the program was very relevant in terms of the scope of the content, which was described as comprehensive, and they were satisfied with their experiences, which they described as very stimulating. The responses to the question asking them to identify the best feature of the program were as follows: department/ward rounds or visits to clinical departments (73.7%); brief introduction to all departments/clinical postings in a lecture (16.2%); interaction with staff members (8.6%); and the food provided for breakfast and lunch (1.2%). Three major responses were provided to the item asking for other comments or suggestions: first, it was suggested that all outpatient procedures carried out in each clinical department should be briefly discussed; second, it was pointed out that some sections involving lectures were monotonous; and third, it was suggested that some interactive activities should be interspersed among the lectures.

In the interviews and FGDs, the students stated that they felt well oriented when entering the clinical phase after attending the induction program and that they were confident enough to deal with patients. They stated that the department and ward rounds made them aware of where things were located, allowed them to be introduced to the staff, and made them more familiar with the clinical surroundings. The students stated that the induction program significantly assuaged their anxiety about entering the clinical phase, which would be of great help to them throughout the year. They found some sections involving a sequence of lectures to be monotonous, and hence suggested that some interactive activities be included in the program. They also suggested that the induction program should also include sessions involving interaction with their immediate seniors in order to get a sense of the challenges they faced. The FGDs also revealed that students found the introduction to the basic operating functions of the computer to be very helpful. The students also were very appreciative of the fact that their language skills were assessed and that they were enrolled for language classes based on

those assessments.

In the present study, the overall responses regarding the organization and conduct of the program were very encouraging; students volunteered their opinions freely in the interviews and group discussions in more depth than in the written questionnaires. The findings of this study are comparable to students' perceptions about the transition to the clinical phase overall [1]; although students experienced stress, they felt well prepared for the clerkships.

In conclusion, the present study used two techniques to assess students' perceptions of the clinical induction program: a questionnaire at the end of the induction program (i.e., at the entry into the clinical phase) and FGDs and interviews conducted two months after the induction to assess longer-term perceptions of the benefits and impacts of the program. Induction program for university students have received an increasing amount of attention over the past decade. With the increased number of withdrawals and the pressure to retain students, it is necessary to evaluate current systems of presenting information to new undergraduate students, including induction programs. Certain issues identified by the present study will help improve future induction programs.

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CONFLICT OF INTEREST

No potential conflict of interest relevant to this article was reported.

SUPPLEMENTARY MATERIAL

Audio recording of abstract

REFERENCES

1. Godefrooij M, Diemers A, Scherpbier A. Students' perceptions about the transition to the clinical phase of a medical curriculum with preclinical patient contacts; a focus group study. *BMC Med Educ.* 2010;10:25-28. <http://dx.doi.org/10.1186/1472-6920-10-28>