Review Article

Indian Journal of Anatomy
Volume 11 Number 4, October – December 2022
DOI: http://dx.doi.org/10.21088/ija.2320.0022.11422.6

A Students perception of E-learning

Viren Sharadkumar Sawant[1], Sharadkumar Pralhad Sawant[2], Shaheen Rizvi[3]

How to cite this article:
Viren Sharadkumar Sawant, Sharadkumar Pralhad Sawant, Shaheen Rizvi./A Students perception of E-learning./Indian J Anat. 2022;11(4):137-139.

Abstract

During Covid 19 Pandemic, the field of medical education was severely affected. Faculty members and students alike felt the need for E-learning. In E-learning students can learn at their own convenience from remote locations and the matter can be repeated a number of times as and when required. In developing countries like India a lot of efforts were required to ensure that the transition to E-learning would be smooth. A good quality internet service is costly, technical problems and students unfamiliar with E-learning systems are some of the problems faced. The present paper expresses a student's perception of E-learning as a result of COVID-19 pandemic and the challenges faced. It is crucial that medical instructors communicate knowledge on effectiveness of E-learning and remove inhibitions among the students. Although E-learning is an effective tool which has come into a full-fledged existence after the COVID-19 pandemic, there are many challenges yet to be overcome in medical education.

Keywords: Covid 19 Pandemic; Medical Education; Faculty Members; Students; E-learning; Internet Service; Developing Countries.

INTRODUCTION

The in the year 2020, the world witnessed a COVID-19 pandemic which globally affected all activities including trade, businesses, education alike. Social distancing became the new normal. The field of medical education comprises of face to face lectures and tutorials, patient exposure, laboratory experiments observing surgeries etc. and thus was severely affected. Faculty members and students alike felt the need for E-learning.[1]

In E-learning students can learn at their own convenience from remote locations and the matter can be repeated a number of times as and when required. This ensures a very satisfactory method of gaining knowledge especially when blended with didactic teaching learning. If the student is an active participant it can have a constructive effect on the mind.[2]

The present paper expresses a student's perception of E-learning as a result of COVID-19 pandemic and the challenges faced.

Being Indians studying in a Russian Medical University, we realized that University closure is a critical step to control the spread of the pandemic but we expected that the pandemic would end soon and regular classes would start. Soon it dawned on us that E-learning is the best solution to this never ending and unpredictable pandemic situation.

Author's Affiliation: [1]Student, Volgograd State Medical University, Volgograd, Oblast 400131, Russia, [2]Professor and Head, [3]Assistant Lecturer Department of Anatomy, K.J. Somaiya Medical College, Sion, Mumbai 400022, Maharshatra, India.

Corresponding Author: Sharadkumar Pralhad Sawant, Student, Depatment of Anatomy, Volgograd State Medical University, Volgograd, Oblast, Russia.

E-mail: virensawant46@gmail.com

Received on: 00.00.2022 **Accepted on:** 00.00.2022

DISCUSSION

As the pandemic progressed, medical institutions globally adapted to the pandemic and began using E-learning. This was easy in developed countries but in developing countries like India a lot of efforts were required to ensure that the transition to E-learning would be smooth.[3] Today E-learning has been found to be just as effective in improving knowledge as didactic teaching. It is also found to be associated with cost reduction compared to face to face learning.

E-learning has several advantages. Books are costly, or heavy to carry, research references can be accessed by E-learning at a lesser cost and time. Certain websites offer continuous medical education which can be of great help in later years. Learning occurs in a comfortable learning environment at a student's convenience with full control over the pace of learning. Updated material with latest evidence-based content is also available over the internet.[4]

None the less certain factors played a significant role against E-learning implementation. A good quality internet service is costly, and without a good quality connection it is tough to attend or download live lectures or files. There are few students who are unfamiliar with E-learning systems, have insufficient computer skills and have no idea how to tackle technical problems.[5] A number of our E-learning sessions had to be cancelled due to technical issues. Moreover there being no interaction with the teachers made learning all the more difficult. Thus an understanding of the students' requirements will help to improve E-learning successfully. Only if students are committed to E-learning and accept it without any reservations, it will be highly successful.[6]

Although use of Information and Communication Technology in educational settings has grown immensely in developing countries since the onset of the pandemic, it still lags behind. Not only technical issues like connectivity and cost are hindering factors but also sufficient number of trained staff is an important factor in hampering E-learning. Problems are more accentuated for students in rural areas. Rural areas also face electricity challenges. Studies from developing countries have shown that even though 88.5 % students had smartphones; only 32.1 % of subjects have laptops, hence it is only smart phones which are used to access the internet. Studies have also shown that internet services are only 40.5 % in rural areas of developing countries.[7] Hence it is mainly smartphone E-learning applications which can be used most effectually. E-learning software that is user-friendly and easy to function on a smartphone is needed in such settings. The main concern which arises here is that mobile devices are very slow especially in loading pages. They also need a large memory, which was deficient in phones owned by students. This was shown in studies carried out in a developing country like Africa.[8]

For students who are yet unfamiliar and thus against E-learning, it is crucial that medical instructors communicate knowledge on effectiveness of E-learning and remove inhibitions among the students. It should be in collaboration with the information technology staff to eliminate technical difficulties faced by the students. This will ensure increase students' engagement and better learning during online classes.

Studies are required to show how patient oriented studies, community based studies and other problem solving strategies can be accomplished with E-learning. Students are also apprehensive regarding online assessment and their evaluation. These can be effectively handled by faculty via good communication.

CONCLUSIONS

Although E-learning is an effective tool which has come into a full-fledged existence after the COVID-19 pandemic, there are many challenges yet to be overcome in medical education. These challenges should be analysed and evaluated and appropriate plans should be established to overcome them.

Authors' contributions: VSS drafted the manuscript, SPS performed the literature review & SR assisted with writing the paper.

Disclosure Statement: There is no financial support for this research work from the funding agency.

Conflict of interest: None declared

Ethical approval: Not required

Data and materials availability: The data and materials used and analyzed during the current study are available from the corresponding author on reasonable request.

ACKNOWLEDGEMENT

Authors are thankful to the Dean of Volgograd State Medical University for the support and encouragement. Authors also acknowledge the immense help received from the scholars whose

articles are cited and included in references of this manuscript.

REFERENCES

1. Rose S. Medical Student Education in the Time of COVID-19. JAMA. 2020;323(21):2131–2.
2. Kim S. The future of E-Learning in medical education: current trend and future opportunity. J Educ Eval Health Prof. 2006; 3:3.
3. Tokuc B, Varol G. Medical Education in Turkey in Time of COVID-19. Balkan Med J. 2020;37(4):180–1.
4. Ruiz JG, Candler C, Teasdale TA. Peer reviewing e-learning: opportunities, challenges, and solutions. Acad Med. 2007 May;82(5):503-7.
5. Belfi LM, Dean KE, Bartolotta RJ, Shih G, Min RJ. Medical student education in the time of COVID-19: a virtual solution to the introductory radiology elective. Clin Imaging. 2021;75:67–74.
6. Wasfy NF, Abouzeid E, Nasser AA, Ahmed SA, Youssry I, Hegazy NN, Shehata MHK, Kamal D, Atwa H. A guide for evaluation of online learning in medical education: a qualitative reflective analysis. BMC Med Educ. 2021 Jun 10;21(1):339.
7. Frehywot S, Vovides Y, Talib Z, Mikhail N, Ross H, Wohltjen H, et al. E-learning in medical education in resource constrained low- and middle-income countries. Hum Resour Health. 2013;11:4.
8. Frantz JM, Bezuidenhout J, Burch VC, Mthembu S, Rowe M, Tan C, et al. The impact of a faculty development programme for health professions educators in sub-Saharan Africa: an archival study. BMC Med Educ. 2015;15:28.
9. Gismalla, MA., Mohamed, M., Ibrahim, O. et al. Medical students' perception towards E-learning during COVID 19 pandemic in a high burden developing country. BMC Med Educ 21, 377 (2021). https://doi.org/10.1186/s12909-021-02811-8.