

Title: What makes behavioral science stuff interesting and appreciative?

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Context and Setting: Although the role of behavioral sciences in producing culture sensitive, humane doctor who has a good understanding of patient demands and changing nature of population health is well recognized by health and medical education authorities in Sri Lanka, the majority of medical undergraduates in the country do not appreciate the relevance and usefulness of learning human behavior probably due to demands in clinical teaching and learning. An innovative teaching and learning approach that take into consideration the workload and expectations of medical undergraduates in a southern university in Sri Lanka was introduced to tackle this issue.

Why the idea was necessary: A significant number of Sri Lankan medical graduates qualified from foreign universities are seeking jobs in public and private hospitals in the country. These foreign graduates are exposed to various educational activities that enhanced their knowledge and skills in behavioral sciences. Medical graduates with good understanding of social and behavioral health issues, communication skills and leadership qualities will be able to secure a well-paid job in the future job market. Therefore it is imperative that medical graduates produced by local universities have necessary knowledge, skills and correct attitudes of human behavior and its relationship with health to compete with other graduates for the jobs in the future.

What was done: Community-based learning activity called Community Attachment Program (CAP) has been a part of Community Medicine course in the university that runs for two years from the beginning of the 3rd year of study. A batch of students (N= 114) who are in the middle of the CAP were given 4 interactive discussion sessions, one hour each, for them to reflect what they have learned about human behavior and what competencies and attitudes that the students should develop in the field of behavioral sciences to serve the people in the community effectively. The content of the 4 sessions included what are the prevalent health problems in the community, the role of human behavior in the development of such problems, communication and leadership qualities a basic medical doctor should have to deal effectively with such health problems and effective use of available resources in the community to control such unhealthy behaviors in people. Group discussions, video clip, two lectures of 30 minutes each and questions and answers were the main methods used in the 4 sessions. Students' attitudes and perspectives of the sessions were assessed at the end of the 4 sessions. Peer evaluation of the sessions was done by two academic staff members.

Evaluation of the results and impact: The majority of the students (about 90%) reported that they consider Behavioral Science as a vital component in medical education. About 70% indicated that the content and the material used were appropriate and motivating. Peer evaluators were highly satisfied with how the materials and experience of students were used to make this

activity highly effective in learning behavioral sciences and making students appreciative of what they have learned. Thus, the success of this educational activity is due to two reasons. One reason is that students had been exposed to a real community over a considerable period of time before the activity so that they have real experience of how people behave and socio-economic and environmental factors that shapes their healthy behavior. The second reason is the use of different techniques for this student-centered activity. Student feedback encouraged the academics and a comprehensive course in behavioral sciences is going to be developed.