Is a medical humanities test needed in the National Medical Licensing Examination of Korea? Opinions of medical students and physician writers (secondary publication)

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Abstract

The purpose of this study was to examine the opinions of medical students and physician writers regarding the medical humanities as a subject and its inclusion in the medical school curriculum. Furthermore, we addressed whether an assessment test should be added to the National Medical Licensing Examination of Korea (KMLE). A total of 192 medical students at Inha University and 39 physician writers registered with the Korean Association of Physician Essayists and the Korean Association of Physician Poets participated in this study. They were asked to answer a series of questionnaires. Most medical students (59%) and all physician writers (100%) answered that the medical humanities should be included in the medical school curriculum to train good physicians. They thought that the KMLE did not currently include an assessment of the medical humanities (medical students 69%, physician writers 69%). Most physician writers (87%; Likert scale, 4.38 ± 0.78) felt that an assessment of the medical humanities should be included in the KMLE. Half of the medical students (51%; Likert scale, 2.51 ± 1.17) were against including it in the KMLE, which they would have to pass after several years of study. For the preferred field of assessment, medical ethics was the most commonly endorsed subject (medical students 59%, physician writers 39%). The most frequently preferred evaluation method was via an interview (medical students 45%, physician writers 33%). In terms of the assessment of the medical humanities and the addition of this subject to the KMLE, an interview-based evaluation should be developed.

Key Words: Curriculum; Humanities; Licensure; Medical ethics; Medical students

In South Korea, medical students have studied a wide variety of subjects in the humanities and social medicine. According to a study published a few years ago, the humanities and social medicine curriculum in Korean medical schools still consists of subjects that mainly deals with knowledge [1]. That study also reported that medical students did not have opportunities to express their self-image, except by demonstrating that they will be professional "medical doctors." This study examines the opinions of medical students and physician writers regarding the medical humanities as a subject and its inclusion in the medical school curriculum. Furthermore, we discuss whether an assessment test should be added to the National Medical Licensing Examination of Korea (KMLE).

Participants consisted of 192 medical students at Inha University and 39 physician writers registered with the Korean Association of Physician Essayists and the Korean Association of Physician Poets. They were asked to answer a set of questionnaires between November 2013 and January 2014. Three case studies were used with the questionnaires: the first presented a case of the illegal use of intravenous propofol [1]; the second, a physician’s behavior was associated with illegal acts to reduce the penalty of a rich offender [2]; the third discussed...
large-scale rebates associated with well-known pharmaceutical companies [3]. Students responded to 5-point Likert scale questions on each case concerning distrust, the need for a medical humanities curriculum, the present status of the assessment of the medical humanities in the KMLE, and the need for a medical humanities assessment in the KMLE. Students also responded to multiple choice questions on their preferred fields and methods of assessment. ANOVAs and multiple comparisons (Scheffé’s) were used to compare students and writers. IBM SPSS ver. 22.0 (IBM Co., Armonk, NY, USA) was used.

Most medical students (92%) and physician writers (95%) answered that they were concerned about people’s distrust of physicians (Fig. 1). There was no significant difference (P = 0.064) between the student group (mean ± SD, 4.27 ± 0.73) and the physician writers group (4.51 ± 0.79) (Table 1). There was also no significant difference between the students based on year of study (P = 0.25, ANOVA) (Table 2). Most medical students (99%) and all physician writers answered that the medical humanities should be included in the medical school curriculum. The average score for the medical student group (3.55 ± 1.08) was significantly lower (P < 0.001) than that of the physician writers group (4.74 ± 0.44) (Table 1). There was no significant difference between the student groups on this question (P = 0.60, ANOVA) (Table 2). Students and physician writers thought that the KMLE did not currently include an assessment of the medical humanities (medical students 69%, physician writers 60%).

Fig. 1. Preferred field of assessment in the medical humanities reported by medical students and medical writers in Korea in 2014.

Table 1. Comparison of the responses of students and physician writers to a questionnaire regarding cases relevant to the medical humanities, on a five-point (1–5) Likert scale, in Korea in 2014

<table>
<thead>
<tr>
<th>Variable</th>
<th>Total (n = 231) Mean ± SD</th>
<th>Students (n = 192) Mean ± SD</th>
<th>Physicians (n = 39) Mean ± SD</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concerned about the distrust of physicians</td>
<td>4.31 ± 0.74</td>
<td>4.27 ± 0.73</td>
<td>4.51 ± 0.79</td>
<td>0.64</td>
</tr>
<tr>
<td>Need for MH curriculum</td>
<td>3.75 ± 1.09</td>
<td>3.55 ± 1.08</td>
<td>4.74 ± 0.44</td>
<td>&lt; 0.01</td>
</tr>
<tr>
<td>MH assessment currently included in the KMLE</td>
<td>2.21 ± 1.05</td>
<td>2.16 ± 0.95</td>
<td>2.46 ± 1.41</td>
<td>0.98</td>
</tr>
<tr>
<td>Need for MH assessment</td>
<td>2.83 ± 1.31</td>
<td>2.51 ± 1.17</td>
<td>4.38 ± 0.78</td>
<td>&lt; 0.01</td>
</tr>
</tbody>
</table>

Values are presented as mean ± SD.
MH, medical humanities; KMLE, National Medical Licensing Examination of Korea.

Table 2. Comparison of medical students’ responses to a questionnaire regarding cases relevant to the medical humanities, by year of study, on a five-point (1–5) Likert scale, in Korea in 2014

<table>
<thead>
<tr>
<th>Item</th>
<th>Total (n = 192) Mean ± SD</th>
<th>Year 1 (n = 48) Mean ± SD</th>
<th>Year 2 (n = 51) Mean ± SD</th>
<th>Year 3 (n = 45) Mean ± SD</th>
<th>Year 4 (n = 48) Mean ± SD</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concern about the distrust of physicians</td>
<td>4.27 ± 0.73</td>
<td>4.35 ± 0.66</td>
<td>4.10 ± 0.85</td>
<td>4.29 ± 0.72</td>
<td>4.35 ± 0.63</td>
<td>0.25</td>
</tr>
<tr>
<td>Need for MH curriculum</td>
<td>3.55 ± 1.08</td>
<td>3.54 ± 1.05</td>
<td>3.29 ± 1.17</td>
<td>3.89 ± 0.98</td>
<td>3.50 ± 1.05</td>
<td>0.60</td>
</tr>
<tr>
<td>MH assessment currently included in the KMLE</td>
<td>2.16 ± 0.95</td>
<td>2.46 ± 0.94</td>
<td>2.29 ± 1.00</td>
<td>2.20 ± 0.89</td>
<td>1.67 ± 0.80</td>
<td>&lt; 0.01</td>
</tr>
<tr>
<td>Need for MH assessment</td>
<td>2.51 ± 1.17</td>
<td>2.90 ± 1.22</td>
<td>2.14 ± 0.98</td>
<td>2.69 ± 1.22</td>
<td>2.35 ± 1.14</td>
<td>0.06</td>
</tr>
</tbody>
</table>

Values are presented as mean ± SD. ANOVA and Scheffé’s test were done for comparison.
MH, medical humanities; KMLE, National Medical Licensing Examination of Korea.
69%, and there was no significant difference ($P = 0.098$) between the students ($2.16 \pm 0.96$) and physician writers ($2.46 \pm 1.41$) (Table 1). Year 4 students ($2.20 \pm 0.89$) yielded a significantly lower score ($P = 0.001$; ANOVA, Scheffé’s) than Year 1 students ($2.40 \pm 0.94$) (Table 2). Most physician writers (87%; Likert scale, $4.38 \pm 0.78$) answered that an assessment of the medical humanities should be included in the KMLE. Half of the medical students (51%; Likert scale, $2.51 \pm 1.17$) were against including the medical humanities in the KMLE, which they would have to pass after several years of study. On the Likert scale, the medical student group ($2.55 \pm 1.17$) scored significantly lower ($P < 0.001$) than the physician writers group did ($4.38 \pm 0.78$) regarding the inclusion of this topic in the KMLE (Table 1). Year 2 students ($2.14 \pm 0.98$) showed a significantly lower score ($P = 0.001$) than Year 1 students did ($2.00 \pm 1.22$) (Table 2). For the preferred field of assessment, medical ethics was the most commonly endorsed subject (medical students 59%, physician writers 39%) (Fig. 1). The most frequently preferred evaluation method was via interview (medical students 45%, physician writers 33%) (Fig. 2). In the physician writer group, the need for an assessment of the medical literature (n = 22, 26%) was more highly endorsed than medical philosophy (n = 21, 25%) and medical history (n = 8, 10%). In the student group, preference for the objective structured clinical examination (OSCE; 22%) was higher than for written examinations (14%) or essays (12%).

According to the above results, physician writers recognize a need for the humanities, whereas medical students are concerned about increasing the amount of material to learn for examinations. Half of the medical students (51%) disagreed and only 21% agreed with the inclusion of an assessment in the KMLE, which they would have to pass after several years of study. Although students acknowledge the necessity of including the humanities in the curriculum, they did not want to be tested on the topic in the KMLE. Further study is needed to evaluate opinions regarding the medical humanities using interviews. In terms of the assessment of the medical humanities and the addition of this subject to the KMLE, an interview-based evaluation should be developed.

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CONFLICT OF INTEREST

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

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SUPPLEMENTARY MATERIAL

Audio recording of the abstract.

REFERENCES

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