IFMSA Policy Document
Meaningful Youth Engagement in Medical Education

Proposed by Team of Officials
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Policy Commission
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Policy Statement

Introduction

In the face of globalisation, educational systems need to adapt to a rapidly evolving world. This can not occur without the collaborative effort of all stakeholders, especially students. While there is no single agreed upon definition of "meaningful student engagement (MSE), here it is defined as the inclusion of students as equal partners in all scopes of medical education, including governance, school management, curriculum and assessment design, program delivery, and interaction with local and academic communities. This requires a shift in the perception from students being passive receivers of education, to active contributors towards the betterment of the curriculum and educational experience as a whole.

IFMSA position

The International Federation of Medical Students’ Associations (IFMSA) calls for students to be acknowledged as key stakeholders and equal partners in their education. We affirm the need to engage students meaningfully in every facet of the education system- planning, delivery, assessment, quality assurance, accreditation, and institutional governance; for the purpose of strengthening their commitment to education- community, and democracy. IFMSA believes that students, as the consumers of education, are well placed to guide decision-making processes of all aspects of medical education. Finally, IFMSA reiterates the importance of student inclusive practices and environments, which are essential for meaningful student engagement.

Call to Action

1. IFMSA calls for Governments, including relevant ministries, legislative bodies, and policymakers, to:
   • Acknowledge students as key stakeholders and equal partners in education systems;
   • Ensure representation of students on advisory and governing bodies in the sector of higher education and the full continuum of medical education;
   • Establish mechanisms that shift from tokenism to meaningful student engagement in education-related decision-making;
   • Ensure the integration of student perspectives in decisions or policies that directly or indirectly impact the education systems and medical education.

2. IFMSA calls for Universities and Faculty boards to:
   • Acknowledge students as partners with a key role in the development and success of the education process;
   • Enforce policies that ensure the representation of students on faculty education boards and their meaningful engagement in institutional governance and decision-making processes;
   • Develop mechanisms that integrate student feedback and perspectives into decision-making;
   • Create and maintain a respectful and sustainable environment of continuous formal and informal dialogue between students and administration to ensure a culture of openness and trust;
   • Promote a supportive culture in which students are encouraged to provide both reinforcing and critical feedback without repercussion;
   • Ensure that meaningful engagement of students in school management is incorporated in the school’s mission/vision and strategic planning;
   • Create internal mechanisms to evaluate and continuously improve student engagement;
   • Ensure the capacity building and adequate training of staff and students on communication and strategy for student engagement through continuous professional development programs.
3. IFMSA calls for **Non-governmental Organisations involved with Medical Education** to:
   - Ensure the representation and meaningful engagement of students in advisory, planning and governing sectors, and processes;
   - Produce guidelines/frameworks for governments and schools to support meaningful student engagement;
   - Generate research and share best practices on possibilities and barriers to achieving meaningful student engagement; and
   - Mobilise resources, financial or technical to support the development of initiatives that encourage meaningful student engagement in education and build capacity on this premise.

4. IFMSA calls for **Accreditation and quality assurance bodies, and medical councils** to:
   - Ensure the representation of students on all levels within the accreditation agencies, councils and quality assurance bodies;
   - Actively engage students in all levels of accreditation and quality assurance processes;
   - Create a systematic approach for quality improvement based on reflection, analysis, and integration of students’ feedback; and
   - Ensure the presence of quality assurance standards that measure the level of student engagement.

5. IFMSA calls for **Student organisations and Students** to:
   - Recognise the crucial role they play as partners in their education, as well as the importance of Meaningful Student Engagement in Medical Education;
   - Advocate for meaningful student engagement in institutional governance, educational program shaping and delivery;
   - Arrange peer-to-peer initiatives that educate students on educational principles, to empower them to provide meaningful feedback;
   - Create networks that encourage a culture of connection, collaboration and partnership with peers and faculty;
   - Actively engage in opportunities to, directly and indirectly, provide feedback on educational programs;
   - Ensure student representatives embody all student voices and are accountable for reporting outcomes of student engagement;
   - Participate in medical education research, interest groups and projects that aim to scientifically reflect students’ opinions on education.
Position Paper

Background information:

Students are key stakeholders in the development, implementation and evaluation of their educational systems. In the context of medical education, meaningful student involvement is the process of integrating students in every facet of school governance and operations for the purpose of strengthening their commitment to education, community and democracy (1). This concept evolves from a growing awareness among students and educators that young people can and should play a crucial role in the success of school improvement. On the other hand, meaningful student engagement (MSE) is concerned with the interaction between the time, effort and other relevant resources invested by both students and their institutions intended to optimize the student experience and enhance the learning outcomes and development of students (2).

Involvement and engagement are quite similar terms and are often used synonymously. However, involvement differs from engagement in that the former can refer to one-way communication processes, while ‘engagement’ ensures that all parties are communicating in an effort to achieve a common goal (3). Involvement is a positive step towards meaningful student engagement. It acts as a driver for engagement in all of its dimensions. Developing the involvement of students into collaborative partnerships with their institutions forms a sense of connection to their school and provides a solid foundation for meaningful student engagement (4).

Traditionally, student engagement referred to the representation of students in institutional committees and their active participation in educational activities (5, 6), as well as in extracurricular programs, such as schools’ clubs or associations. However, the present era of medical education goes beyond the traditional forms of student engagement. The term includes student participation in institutional governance and decision making, curriculum development, provision of the educational program as well as involvement with the academic and local communities.

In summary, student engagement is not merely the creation of an environment that fosters academic excellence as has been the status quo. It is not adequate to create a tailored “academic curriculum” without considering the “experienced curriculum” by students (7). Rather, it is the creation of an ecosystem where students, staff and institutions interact, communicate and develop continuously to produce an enriching and engaging educational experience, that reflects meaningful student engagement (4).

Discussion:

Levels and current data

The Ladder of Student Involvement in education has been adapted from the work of Roger Hart, a United Nations expert on community planning involvement for children (8). Schools can evaluate their level of meaningful student involvement by mapping situations and activities that involve students on the ladder’s rungs. The higher the rung on the ladder, the greater the importance of involving the student. The purpose of this guide is to help faculties reach higher levels – that is, increase the amount and improve the quality of the student engagement. The levels on this ladder do not represent a process of development that happens through finite increments. Student involvement can go directly to the sixth from the second level. The ladder is intended to reflect prospects for growth and not forecasts (9).

The levels of participation include (8 being the highest):

1. **Manipulation**: Students are obliged to go to schools. Once they attend their schools, students passively receive education, grades and other acknowledgements according to their academic performance and manners, but they are not oriented about the education process or outcomes.

2. **Decoration**: Students are used to decorate the school’s actions throughout their education process. This applies when schools direct students to perform an activity they aim for themselves, but students participation is mandatory because it is related to their school life.
3. **Tokenism**: This arises as schools involve students just to document that, without having any genuine desire to meaningfully engage them. In such a situation, students are not informed, cannot give input and they don’t have sufficient opportunities to learn from such experiences.

4. **Information**: This is the first actual level allowing meaningful involvement of students to happen at schools. Students are dealt with as sources of information, by playing the informants role.

5. **Consultation**: It happens when students become considered as experts who can inform schools significantly, as schools can treat students as consultants. However, even when students are consulted, teachers may or may not act based on the students’ guidance.

6. **Student/teacher equality**: Students at this point are equalized to teachers while they are taking part in a specific school activity. No specific recognition of the developmental differences is reported between grade levels or students and their teachers.

7. **Student-led action**: At this level, completely student-driven activities take place, while teachers are not inflecting authority on students. Instead, teachers are present invisibly or passively to support students.

8. **Student/teacher equity**: With the highest level of involvement, students become completely equitable with teachers in school activities, where the impact and effort of each party get recognition, and everyone gets ownership of the outcomes.

Many medical schools are establishing learning communities to foster cohesion among students and to strengthen relationships between students and faculty members. In a study conducted to evaluate students’ engagements as leaders in the learning community, motives that emerged as reasons for getting involved included: endorsing the need for the MSE; excitement with the start-up; wanting to give back; commitment to institutional excellence; and collaboration with talented peers and faculty. Ideas for drawing medical students into new endeavors included: creating defined roles; offering a breadth of opportunities; empowering students with responsibility; and making them feel valued (10). Many institutions involve students as stakeholders in curriculum development during large-scale curricular transformation via participation in administrative committees, focus groups and task forces (11).

**Benefits and harms of MSE in medical education**

Student engagement in governance of education can provide significant benefit to both the educational body and individual students. Evidence has demonstrated that feedback and cooperative decision making can enhance the quality of the program in its academic and educational rigour (4). Efficient engagement processes with a positive, supportive culture allows for real-time feedback on both content and delivery, which leads to improvements in learning outcomes, an efficient curriculum, and fosters excellence in education and experience (4). As increasing research is done on MSE, it is becoming a part of quality assurance criteria because of the numerous benefits that come along with institutions engaging the student population and giving them a voice (12). The redefinition and evolution of the relationship between students and institutions from mere representation to active participation in decision making has led to a change in students’ understanding of their role and their contributions to the development of the institution. When students are seen as partners in decision making and learning there is a particular special emphasis on student and quality of learning development. In an environment where student’s interest is the driving force behind every decision, students are bound to succeed.

In addition to benefiting the program, MSE has benefits for the individual students. Research has demonstrated that when students are meaningfully engaged, they feel more fulfilled in their role as learners, more connected in their educational experiences, and personally satisfied with the outcomes they have achieved (13, 14). Moreover, all forms of faculty-student interaction have a positive impact on both cognitive and affective student development and increased student satisfaction. Having a more substantial role within the institution challenges the idea that students are passive consumers through removing tokenistic representation. Therefore, schools that encourage students to amplify their opinions and perspectives tend to have higher rates of student satisfaction and compliance (15). These students are comfortable with an institution’s resolve because they understand the
motives behind the decisions having had a representative on their behalf (16). Hence, there are less chances of student-staff, and student-institution tension and conflict. Lastly, the attempt to address the dichotomy between educational systems and health systems created a recent push to shift our understandings about the way medical students’ engagement can ‘add value’ not only to their medical education, but also to healthcare systems as a whole. Therefore, exploring the medical education engagement avenues becomes essential as it provides a double benefit of educational development and improvement of healthcare systems.

Meaningful student engagement has a positive influence on the progressive development and delivery of all aspects of the educational experience that includes but is not limited to admissions, curriculum development, teaching, learning opportunities, and assessments (17). Students have a say in what they are taught and how they are taught, as such they are more likely to participate and learn in an environment where their feedback and different learning styles have been considered and are implemented into the day to day classroom interactions. Other outcomes of a mutually beneficial student-teacher relationship are: improved academic performance, increased interest in graduate studies and greater commitment to the institution (18).

On the other hand, failure to implement structures for the empowerment of the students’ voice can hinder the institution in achieving its mission. Without opportunity for student feedback and input, any plans or policies implemented will achieve poor uptake and result in student-related issues. This will lead to a lack of effectiveness which causes stress and frustration for students. Not being aware of the true opinions and feelings of students can cause misinformed decisions and misuse of human, material, financial and physical resources. There will also be difficulties in the planning and implementation of educational priorities that reflect the interests of stakeholders (16).

**Barriers to meaningful student involvement**

Many barriers and challenges arise in the implementation of meaningful student engagement in medical schools. These challenges can be understood in several facets - barriers faced by students, barriers faced by staff and barriers in the institutional environment.

**Barriers faced by Students**

A significant barrier to student engagement in medical education is the lack of incentives and perceived benefits from their involvement (19). In the absence of an official framework for meaningful student engagement in the institution, some students may even be unaware of the opportunities for involvement. Furthermore, a barrier found in some countries, especially some Asian countries, is the cultural norm to respect teachers, which may therefore further discourage communication in curriculum feedback and improvement. For students who have attempted to engage, some may be discouraged that their efforts do not produce a visible impact (20, 21) and others may find it difficult to collect representative opinions to feedback to staff via a student representatives system (21).

**Barriers faced by Staff**

Since decision-making in most universities is generally conducted by academic staff (22), it is understandable for concerns to arise over the involvement of students in this stringent procedure. Firstly, staff may hold the belief that students are not capable of commenting on best teaching practices, as they lack experience and knowledge of the subject as well as pedagogical expertise. Concerns may also arise over certain areas of education that pose conflicts of interest to the student, such as assessment (19). In the initial stage of student engagement practices, some may also find it difficult to find a balance between inclusion and selection, i.e. to choose which students to include in their discussions to ensure a fair representation (23).

**Barriers in the Institutional Environment**

Being an emerging concept, meaningful student engagement in medical education is often hindered by existing institutional structures, practices, and culture, as well as the traditional expectations about the student and teacher roles (19). Moreover, there is a common perception of students being a passive consumer in their education, instead of an active
contributor in their educational experience (24). This potentiates the lack of incentive of staff to include students in the conversation of medical education development. Furthermore, existing policies and processes may not regard students as active stakeholders or allow for active contribution of students to governance and educational delivery (25).

**Areas in which students can be meaningfully involved**

Engaging students meaningfully can be varied in order to adapt to the context in which it exists, allowing for a holistic approach to the student-institution relationship (26). The goal of MSE is to create a more comprehensive understanding of student motives and thus an appropriate measure of success based on these motives and expectations (13).

There are multiple mechanisms which can serve as an example of creating an ecosystem which fosters engagement in all its dimensions. These include; learning communities, quality improvement processes, employing different learning models, using technology and creating peer-to-peer coaching opportunities. However, to ensure this engagement is meaningful, it is important to consider the context-sensitive nature of student engagement. Student learning methods, opportunities for self-directed learning, personal development, resilience and communication skills impact how they are involved in the education system they are expected to perform in (7).

**Learning Communities**

The role of teachers is changing from mere providers to that of facilitators. In this sense teaching students how to learn is becoming an important facet of engagement, which gives students autonomy over their own learning (27). Learning communities create an environment which focuses on positive engagement whereby students are actively learning with and from each other (28). Moreover, these communities act to aid in the personal development of students by positively impacting their communication and interpersonal skills and creating fruitful relationships with staff and students (13).

**Quality Improvement Process**

Implementing a comprehensive quality improvement process is an efficient method of fostering student engagement. This process is commonly found in educational institutions and ensures that a focus on students is maintained as well as continuous evidence-based and incremental improvements are introduced in response to their needs (29). It is not sufficient to assume that a quality control process at the end of the academic year is a reflection of the students’ engagement throughout the year. Continuous audit and response must be applied too. Creating a clear quality improvement process where students are engaged as co-directors ensures students are empowered with real responsibility in the development of their academic journey and provides them with personal value and a positive sense of self (30).

**Learning Models**

Learning models can be applied to foster meaningful student engagement. These include “Flipping the classroom” by offering a system whereby educational resources are provided in advance of a teaching session. The teaching session is then framed as a time to engage in questions, apply learned information and assess the information provided. Assistance is provided based on the students’ level of engagement. Models which promote active learning cognitively empower students by giving them an environment of mutual discussion, practical activities and learning through experience. Creating space for students to become behaviourally and emotionally engaged can include community service-learning, which involves students undertaking projects that provide benefit to the wider community. This can advance the objectives of the curriculum and provide personal development opportunities with student reflection (31).

Students who perceive this engagement as a threat to their academic performance could benefit from the organised summer schools, which offer chances to pursue extra academic engagement outside of term-time. This is helpful for students who expect to excel in their education as well as students who may need extra support. This extra time offers students an opportunity to experiment with different learning styles and find one that maximises their engagement (13).
Technology
Technology is helpful in both creating a culture of meaningful student engagement and facilitating feedback processes. This can be implemented in the form of both collecting analytics from virtual learning environments and through the use of digital tools for student feedback and self-reflection. Additionally, technology can be used to give a clear illustration of the extent of social, behavioural, cognitive and emotional engagement undertaken by students. Data from sources including library usage, attendance and submissions can be used to identify a positive association between level of engagement and successful progression through education. This information may also be used to identify students in need of more support to facilitate their meaningful engagement (26).

Peer-To-Peer Coaching
Peer-to-peer coaching and mentoring programs are beneficial in fostering the engagement of students. Senior students impart knowledge relating to learning methods and coach others in the development of realistic but challenging expectations for their academic experience. Induction programs are effective in engaging students by creating a culture of collaboration and cooperation. They also introduce students to higher-level education with an explicit outline of what’s expected from them. A culture of mentorship is created to benefit students who may need support. As well as the many benefits offered to student recipients of peer-to-peer mentoring, there are a multitude of positive results of such a program to the peer mentors. These include valuable experience, fulfillment of performing an altruistic act and increased communication & interpersonal skills (13). This social engagement can assist students in reaching their goals and fulfilling their expectations of their educational experience. More self-confidence occurs in those who are actively engaged in their education, which creates more resilience when faced with challenging academic tasks. Overall Meaningful student engagement fosters the personal development of students as they build their own identity through the education experience.

Evaluation of student engagement
Traditionally, student engagement in medical education has been quantified by numerous means including comparison of different teaching models, review of student assessment results, and student satisfaction levels (4). This quality control in medical education is common and takes the form of standardisation assessments and feedback forms (27). Satisfaction presents an inadequate measure of engagement as it may also reflect the quality of education a student has received rather than purely a measurement of their engagement with education (4). These indicators tend to evaluate the learners against their acquisition of knowledge rather than the student engagement process (27).

However, a more appropriate evaluation of engagement may include the consideration of the level of change which can be achieved by student engagement. By this method, there are three degrees of engagement including consultation, partnership and leadership. These differ in the level of involvement as well as the impact students have on the object they are engaging with as a result of the engagement (32).

Tips to support meaningful student engagement
Coined in 2012, the “ASPIRE initiative” (Association for Medical Education in Europe 2013) was launched in order to recognise excellence in student engagement, among other areas within medical education. The following were identified as tips to support Meaningful Student Engagement accompanied with best practices:

1. Advocating for and contributing to an institutional engagement culture:
Creating an institutional culture that will empower students’ voices and their activities leads to greater mutual respect and a collaborative approach: students gain awareness of faculty
members workload, enthusiasm, and expertise, while faculty members realise that students are acting as advocates for better educational experiences and outcomes (33).

2. **Communication and Feedback:**
   One potential goal of students’ advocacy is establishing a communication framework that explains the relationship between students and faculty. In examples from ASPIRE award-winning universities, this is achieved by placing student representatives at different levels of the organization. At the lowest level, all students can report problems and suggestions to year representatives who have regular meetings with course coordinators and other student representatives. At mid-level, there are committees for policy and education matters with both student and faculty members that have equal decision-making rights. At the highest governance level, one student may dedicate a year full-time to student representation. This student is part of the management team to make sure that the student perspective is taken into account in management decisions. All students that are involved on any level meet formally on a regular basis to ensure communication and collaboration between students and an organized student voice for working with faculty and management (34).

   In addition to a formal framework, an effective strategy is needed to optimise communication between students with peers and faculty. This strategy should result in closed feedback loops, the importance of that is when students feel that their voices do matter, they will more likely respond to evaluation forms or provide faculty with constructive feedback for further improvement (34).

3. **Student engagement in governance and decision-making:**
   Formal student engagement should go beyond basic accreditation requirements where students are consulted on decisions which have already been made. Instead, a participatory approach should be used during the development of the university’s vision, mission, policies, and values, and students should be invited to contribute to the development of the strategic direction of the university (35). Examples from ASPIRE award-winning universities include student representation with full voting rights on strategy-setting management boards, on policy-making, and operational curriculum committees. Through such platforms, students are involved actively in decisions pertaining to teaching, learning, assessment, faculty appointments, or fiscal planning. Strong, explicit, and genuine support of academic leadership is a driving force for enhancing this area of student engagement (34).

4. **Students’ involvement in curriculum development:**
   Active participation in educational activities has a positive effect on academic performance. Being involved in curriculum development helps students to appreciate the (theoretical) background and structure of their curriculum. This stimulates active learning, provides insight in organisational structures, contributes to the development of a broad set of personal and professional skills such as teamwork, leadership, and critical thinking, and leads to network expansion (35).

5. **Peer Education, Peer Support and Peer Mentorship:**
   As teaching is an important skill for future healthcare professionals, students should participate in peer teaching activities (36). Peer teaching has beneficial outcomes for both the learner and the student–teachers. A closer distance between students–teachers and peers offers students a safe place to learn and ask questions (37).

   **Peer education** can be implemented either extracurricularly or as a core curricular component where student-teachers are trained and instructed on teaching methodologies and practices. Examples from the ASPIRE-winning universities encompass tutoring problem-based learning groups, teaching of and providing feedback on history taking and physical examination skills, acting as senior student-consultants for junior students in case-based clinical reasoning courses, and including an (elective) student-teaching rotation in the final year of the
curriculum (34). For Peer support and mentorship, on the other hand, senior students may act as personal, professional, and academic mentors for junior students within a formal mentor program, and receive training and academic credit associated with portfolio assessment (38). In addition, providing mentorship opportunities for students to engage with patient-centered education enhances their social accountability and promotes their community-oriented engagement in their education (39). Other Examples from ASPIRE award-winning universities of activities where students could be engaged effectively include: introduction to local facilities, utilities, IT platforms and the curriculum, guidance on how to get organised in the new learning environment, advice on how to prepare for lessons and assessments, serving as peer mentors in the first weeks at the institution and -perhaps- new city, and introducing first years to facilities, sports clubs, community activities, and local social and nightlife. All of this leads to an initial experience that will deeply influence the future commitment of new students to their school and the student community. Another powerful tool to sustain students' peer-to-peer efforts on engagement is the creation of handover reports and archiving of important documents and decisions. This can be achieved for instance by setting up a good handover system, training programs for new students, and meetings with all actively involved students, so they can learn from and discuss with each other. (34).

6. Engagement in Research and Research Education:
Research opportunities should be provided on both curricular and extracurricular levels. An important educational aim is that students learn to understand and apply research evidence in their future professional life. Rather than just teaching the techniques or processes, it is about engaging in communities of practice and becoming a contributing member. In one example from an ASPIRE award-winning university, students organise their own research (European-Student's-Conference 2017), thus promoting engagement across medical schools and countries. Faculty members should attend these conferences and support students' presentations at external conferences by facilitating their leave or providing financial assistance. Successful integration into the academic research community facilitates students becoming productive members of the research community and staying engaged in future research activities (34).

References:


