

Academic Adjustments

Every August our next class will enter their first year at the Medical Partnership. They come from good schools, are well prepared and very talented, and they have achieved success in all their prior academic pursuits. Yet just like each class before them, they will learn they must adjust to the academic and professional challenges of medical school. What makes the experiences of learning and studying in medical school so different from their prior experiences? Here are twelve factors to consider:

1. The volume of knowledge to be mastered in each week of school is enormous. For most students, the volume is much more than they learned in college, even in their toughest courses.
2. The complexity and intrinsic difficulty of the knowledge is also great, as the subjects pick up where their advanced courses left off. Most students are excited to learn this material, but it is still challenging.
3. They are expected to connect the knowledge across subjects into coherent explanations. Since human structures and functions are linked together, students are expected to learn them together. This integration across subjects is unfamiliar to most entering students.
4. They are expected to make their learning cumulative across weeks and courses. Understanding the biology of human health and disease and the foundations of doctoring requires the retention and integration of knowledge across time. For many students, this may be their first real experience with this expectation.
5. They are expected to apply what they learn to authentic clinical cases, both in our case-based small group learning and elsewhere. This requires not only learning the knowledge itself, the “what”, but also learning the “how” and “when” to apply what they've learned to patients' situations. Most students are excited to learn this, but it can still be challenging.
6. They are expected to engage in a wide variety of learning activities, ranging from the more familiar large group or laboratory session to the less familiar team-based learning, small group learning, and service learning activities. For many students, this may be their first experience with such a wide range of formats.
7. They are expected to engage in active and interactive learning nearly every day of every week. While this style of learning is more effective, it can also be more demanding of students' attention and their abilities to think and learn “on their feet”.
8. They are expected to work and learn in teams, such as in case-based small group learning, anatomy lab, and community health projects. Learning this way is also very effective, yet most students are relatively unfamiliar with this approach.
9. They undergo frequent assessments, including weekly quizzes, laboratory practical tests, module final examinations, and assessments of their clinical skills. For most students, these occur much more frequently than in their prior experience. As students mature and their motivations to learn move from mostly externally-focused, such as by grades, to become mostly internally-focused, such as the professional goal of excellence in caring for patients, they come to recognize these assessments help them gauge their learning progress toward their goals.

10. They may no longer be the “best student” in the class. For many students, this may be their first experience being in a whole class full of people just like them – talented, knowledgeable, hard-working high achievers. Yet as they collaborate with, rather than compete against, their peers, and as they mature, most students come to value their colleagues and develop appropriate confidence in their ability to contribute to the team.
11. They are expected to develop their identities as professionals. Most students are excited to put on the white coat, both literally and figuratively, but for most this is their first experience with this degree of professional responsibility and all of its implications.
12. As part of their professional responsibility, they are expected to seek help when they need it. Many students have had little prior need to ask for academic help, so they may feel anxious or ashamed in doing so. Also, they may be unfamiliar with a school that offers as much help to them as they have available at the Partnership.

In the face of these challenges, our experience here at the Partnership is that while every student must adjust, nearly all rise to the occasion and adapt successfully. There are many people to help, including their small group facilitators, their large group presenters, their faculty advisors, and their upper class mentors. In addition, the Student Affairs office checks with each student regularly to see how they are negotiating these adjustments. The Educational Enrichment office also meets with many students for counseling on topics such as study skills and test-taking strategies. Both offices collaborate to monitor students’ academic and professional progress and proactively reach out to students who may need help. The Student Affairs office can also facilitate referrals for additional outside help, if needed.

If you are struggling, please don't hesitate to seek help from the Office of Student & Multicultural Affairs or the Office of Educational Enrichment.

Here at the Medical Partnership, we take this partnership with students very seriously– we want every student to succeed in meeting the academic and professional challenges of medical school.