Reviewer’s report

Title: Student approaches for learning in medicine: What does it tell us about the informal curriculum?

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Reviewer: Patangi Rangachari

Reviewer’s report:

That an informal curriculum exists in medical schools is well known. What the authors sought to explore was the extent to which students used ancillary resources and learning strategies to prepare them for formal examinations. They surveyed students using a questionnaire and submitted response to a principal component analysis. They note that a large percentage felt overwhelmed by the work they needed to do to fulfill the formal curriculum. They resorted to a variety of learning strategies including past student notes, tutor guides etc. A large proportion of the students felt that these approaches helped them pass formal examinations and even prepared them to become good doctors.

The authors have done a considerable amount of work. Their approach seems reasonable and as far as I can judge the statistics seem appropriate, but this is something that needs a more careful assessment by a statistician. There are a number of issues that need clarification (see later)

Issues for clarification:

Background: Para 2, second sentence. The authors refer to their earlier study where students mentioned using a range of resources and study strategies. I read that paper but could not track that down. That paper was a bit confusing and lots of comments were made, so I may have missed it. Would the authors specify exactly what these were? The comment is repeated in another paragraph (6, sentence 1) where the authors attempt to build on the findings of that previous study. Please be more explicit.

Development of the Questionnaire. The authors mention the 11 domains of the questionnaire but in the information presented in subsequent Tables, only domains 3-11 are discussed in any detail. What were the questions related to domains 1 and 2?

The information presented in Tables 2 and 4 are perplexing.

*Table 2 lists Scales and items in several domains and the components. Table 3 gives the proportion of the participant’s responses on the individual items of the eight scales. There is some discordance in the information presented. For instance item 5 (related to Perception of the formal and informal curriculum) which appears in Table 2 is missing in Table 3. Also the order of the items appears different in the two tables. Check the order of items in the section dealing with the value f using self-organised study groups. Is there some particular reason? Please explain.
*The information presented in Table 4 is excessive for what can be gleaned from it. The authors give the proportions of responses in each of the 6 categories and then do a sub-analysis. This seems to be overkill. A mere glance at the information can easily detect patterns. For instance the information presented in item 1 shows simply that a significant proportion are in strong to moderate agreement. The authors obviously have the number of respondents in each category; why not just give the average score with SDs or confidence intervals? For instance what really does the term “overwhelming” mean? Given the looseness in the categories over-elaborate quantification gives an illusion of precision where none exists. Collapse the entire Table and make it easier for the reader.

*Similar comments apply to the information in Table 5. If 94.4 % used school resources, 5.6% did not! So why have an extra column? Also stretching out the data to partition the proportion of time spent is mere padding. Just give the average and confidence intervals. Better still eliminate the table and provide the information in the text.

One final point. At the outset, the authors cite Hafferty (ref 5). He distinguished between the informal and the hidden curriculum. The former was an “unscripted, predominantly ad hoc, and highly interpersonal form of teaching and learning” whereas the latter was a “set of influences that function at the level of organizational structure and culture”. Some have called this the “real” curriculum (see J. Palliative Med 10(3) 632, 2007). If one moves beyond a narrow focus on passing examinations and looks at what doctors really do, it is the values that determine success or failure of the profession. I can fully understand the author’s focus on the informal curriculum. It is much easier to get a handle on such issues. At the end of struggling through reams of information, many of us who have either been medical students or have taught them for any length of time, will look at all this and shrug our shoulders. There is really nothing new, surprising, unusual or unexpected in any of this. One wonders why so much effort was expended at this. The authors seem to concede as much when they say there study addressed the outcomes of one medical school and some of the learning activities may not be representative at others.

The manuscript can be considerably shortened, the discussion truncated and tightened.

NOTE: Items marked * are compulsory

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.