Short Communication Open Access

Using YouTube to Enhance Student Receptivity

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Short Communication

Creating a novel response to a common challenge

At the University of Toronto, medical students participate in a common curriculum for the first two pre-clinical years of training. Each course is delivered in a myriad of modalities, including large group sessions offsite community-engaged learning, small group learning including tutorials, case-based and problem-based clinical investigation, career exploration, and hands-on training in areas like anatomy and clinical skills. Medical students also tend to pursue varied and dynamic opportunities for additional learning, social and athletic activities, and intense volunteer roles. With a cohort of ~260 students annually, unique challenges arise for student learning: how can instructors help students to keep track of tasks and responsibilities while distilling the key points to ensure that they enter each session fully prepared?

One course that medical students at the University of Toronto participate in is Integrated Clinical Experience-Health in Community 1 (ICE-HC1), part of the common mandatory curriculum in first and second year. In first year, there are eleven scheduled sessions comprised of a mix of large group, tutorial and field experiences (offsite community-engaged learning). The bulk of teaching takes place in tutorial sessions of 6-8 students, each led by a family physician and allied health professional teaching team. The goal of the sessions is to have students think about these critical questions: What is community? Where is community? And, why are some people healthier than others? Although investigating these questions is vital to the development of a student physician, they are also quite complex and require time to explore. To foster efficient learning, a manual is created and distributed in August before classes begin with all readings and assignments, plus the structure and plan for each session, for students to review before each tutorial when asked, students responded that the manual was quite dense, and it could sometimes be difficult eliciting the main points of the ensuing tutorial. Although the tutorial component of ICE-HC1 has been well-rated in student feedback, there remained an inconsistency in how students prepared for the sessions. Students required a more concise and accessible medium for course information. Examination of the literature looking for successful education material circulation methods for distributed tutorial courses yielded no results.

What was tried?

Short 1-2 minute YouTube videos were created by student course representatives, which aimed to highlight the main points for the ensuing tutorial. The videos were then distributed to students approximately 1 week before the tutorial.

What lessons were learned?

These YouTube videos synthesized the information from the manual and gave students a solid base of knowledge before reading the manual themselves. The goal of the videos was not to replace the manual, but to supplement it in order to provide better orientation to the material. YouTube was chosen as the platform to deliver this content as it was free and easily accessible for the students. The videos were filmed by smartphone, and then a link was uploaded where students could access the videos. This provided additional benefit as the students could chose to view the video on their own time.

A further advantage of using YouTube is the ability to monitor how many views each video has accumulated. This allowed us to estimate the uptake of this novel video format by students. Of the 5 uploaded videos during 2019-2020 we have averaged 144 views per video (This does not account for a single viewer accessing the video multiple time). As the viewing of the video was optional for students, this indicates a significant engagement with the videos from the 260 students in the cohort. As students requested an easily accessible medium for obtaining course material, early feedback from students has indicated that this initiative has met their needs.