

# “Assessments: Students’ Perspectives and Faculty’s Dilemmas”: An ethical consideration

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## Dear Editor,

Assessments are of great importance and an integral part of the teaching-learning process. In other words, they serve as a measure of the achievement of the intended objective. In this regard, they aim to inform students of areas where more effort needs to be made to enhance their performance. As a result, they contribute to deeper learning.<sup>1</sup> Assessment results and analysis assist educators in further planning and implementing curriculum developments.<sup>2</sup> A summative assessment also facilitates the selection of ‘suggestively’ suitable candidates for promotion and employment, etc., if applicable.<sup>3</sup> Furthermore, assessments also help students indirectly by promoting self-discipline, time management, stress management, and an understanding of their strengths and weaknesses.

There are, however, some negative aspects associated with assessments for students. Students are more likely to feel stressed and anxious during assessments.<sup>4</sup> Typically, assessments are scheduled for the entire class and are time-bound. There may be some students who are not prepared to take exams at that time. Or there may be other factors may contribute to the students’ poor performance. In either case, students may feel ashamed of their poor assessment results. It may be embarrassing for them to accept it when their peers’ scores are higher than theirs. It may be difficult for them to explain it to their parents or guardians, who may view their ward’s exam performance as a measure of righteousness. Frequent assessments multiply students’ problems. Their learning rhythm is disrupted, and the emphasis is shifted to assessment.<sup>5</sup> It also creates a vicious cycle of inadequate preparation for exams and poor performance on the exam. Some

students indeed think fewer assessments will result in better performance. Some students who cannot cope with stress<sup>6</sup> may either resort to delinquent behaviors, such as alcohol consumption, smoking, and anti-social behaviors, to seemingly overcome their humiliation while some of them may develop psychosomatic ailments, low self-esteem, depression, sleep disturbances, gastric peptic ulcer disease, etc. Students may even commit suicide in severe cases.<sup>7</sup>

In addition to students, assessments test the faculty as well. The faculty always strives to make assessments valid, objective, and unbiased. However, certain aspects of assessments are always difficult to address. There are challenges involved in planning, implementing, and interpreting assessment results at various levels for faculty and administrators.

Each class or batch consists of a diverse group of students from varying backgrounds, circumstances, preferences, and abilities.<sup>8</sup> Some of them learn fast. Some of them are slow to learn. Some of them may be good at writing or oral communication. It may not be comfortable for some to deal with either of them; though they may still have the required skill and knowledge. However, they have to be judged with the commonly accepted tools of assessments – meeting the same benchmarks following the same timeline. Therefore, some students may be unable to meet these expectations.<sup>4</sup> As a system, we fail to provide justice to such students.

Likewise, in the diverse group of students that comes together in a batch, there may be students from regions where the local language is different from that of the region where the institute is located. The local language of the place, where the institute is, may be completely

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unfamiliar to them. Such students face a lot of difficulty in their interactions with patients. In such situations, either the student has to spare extra time in learning the language or be left out! This inability has serious repercussions in assessments involving patients. The university may or may not permit interpreters during summative assessments. Similarly, they may struggle with the medium of teaching-learning influencing the local regional language. Consequently, these students may not be able to catch up with studies so well, may lose interest, and perform poorly on assessments. Therefore, apart from facilitating regional language extra classes, there is not much the institute may be able to help these students with.

Next, sometimes there are those 'untimely' mishaps happening at the time of assessments. A student may become ill, have an accident, have a personal or family issues, or encounter any other unavoidable situation at the time of assessment. Therefore, their performance may be less than satisfactory or they may miss the assessment entirely. This is an extremely unfavorable situation when it comes to summative exams. Assessments are governed by time regulations.

Another dilemma that faculty and administration confront is allowing students to 'study' patients. Patients have a right to be treated by doctors of high competence, to be well taken care of, and to feel comfortable during their treatment. However, in medical colleges, they are expected to participate in the training of students.<sup>9</sup> And during assessments, they have to put up with repeated examinations and inquiries by many students in a day. While utmost care is taken to keep patients comfortable and ensure their well-being, sometimes, it does compromise patient care. Yet, the norm is maintained because the clinical subject assessment has to be on real patients for the students to exhibit their competence of 'Shows How'.

Next, as highlighted before, assessments are meant to facilitate learning. It is unfortunate, however, that those who fall short of meeting the benchmarks are disappointed and feel humiliated. Occasionally, it may lead to them becoming so demotivated that they have no choice but to give up. It becomes an unavoidable side effect of assessments.<sup>10</sup>

Performance in exams is not an indicator of the true potential of the student as a practicing professional.

Despite having performed poorly in exams, they may have performed exceptionally well in practice. All of us are aware of this fact. However, the performance on exams is indeed an indication of learning. Thus, it does not leave the teacher examiner with much choice but to accept the assessment performance at its face validity.

Another challenge is the clouded judgment and personal bias of the teacher examiner while trying their best to be as completely objective and impartial in assessments. Teachers are humans. They have personal likes and

dislikes and encounter different personal situations. They may be favorably biased towards some students and unfavorably towards others. They may not always have the same clarity in thought and action. And this does affect the assessment process and its result.<sup>11,12</sup>

Assessment results affect both faculty and administration. In today's number game scenario, in which quantity is valued over quality, faculty and management are held responsible and accountable when poor results are achieved. There is no doubt that the faculty is responsible for ensuring that good quality education is provided in a timely manner, but blaming them solely for a poor performance by students is unfair. However, it does happen! Therefore, faculty members devise novel ways to influence the results of assessments: sharing a list of important questions with students before exams, stressing exam-related content in classes, etc.<sup>13</sup> And justice for the intended curriculum delivery is denied.<sup>5</sup>

As well, a very unpleasant situation arises when students are found to be cheating on exams by using unfair methods. An extremely strict punishment may lead to the student resorting to extreme measures such as suicide as a result of humiliation. Once again, the administration is held accountable for the student's suicide. If faculty ignore unfair practices, this is unacceptable, and if they take action, then they and the students may find themselves in an even worse situation. In the same way, a disappointing result may lead to students losing confidence in their life.<sup>10</sup> Once again, the faculty is held accountable.<sup>14</sup> What should faculty members do? In the case of exams, should they provide substandard questions, be lenient in evaluations, or manipulate and balance the result? Ideally, the answer would be no.

It is imperative that assessments are open and inclusive. Likewise, there may be many more situations in different settings across the world where stakeholders at various levels may find themselves in tight spots on assessments even while upholding the four guiding principles of bioethics: beneficence, non-maleficence, respect for autonomy, equality, and justice to tide through the duel of assessments.<sup>15,16</sup> Major reforms in the medical education system and assessment patterns to make them more open<sup>17</sup> and inclusive<sup>8,18</sup> may help address them. Assessments could be choice-based, both in the mode of assessment as well as its schedule. Let the students take an assessment when they are prepared for it, of course within an acceptable but larger frame of time. The performance in assessments need not be disclosed to all peers, but remain discrete between the student and the faculty. Academic integrity should be stressed along with medical professionalism. Let students and faculty have more autonomy and flexibility. Faculty could make themselves more available and approachable for students. It would be helpful if students' mentors were involved in assessments to improve students' acceptance of assessments and reduce stress associated with them.

Education involves teamwork. It should be inclusive, with space for all stakeholders. As a dynamic process, it will continue to evolve. And so should assessments, in tandem. .

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