

Active Learning in Undergraduate Psychiatry Education: An Experiential Evaluation of Student-Led Teaching in MBBS Year 3

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Background

Undergraduate psychiatry teaching traditionally relies on passive, lecture-based methods. Active learning approaches, however, are increasingly encouraged to enhance engagement, understanding, and long-term retention.

Longitudinal placements in psychiatry provide a range of learning opportunities during Year 3 MBBS. The teaching sessions complement clinical placements to enhance learning for students with different learning styles.

Aims

To explore medical students' perceptions of structured, student-led active learning within a Year 3 psychiatry firm, and to assess whether pre-session preparation, student-led micro-teaching, and consultant-facilitated discussion were perceived to enhance participation, learning experience, long-term retention, and confidence compared with passive teaching alone.

Methods

Participants

9 third-year MBBS students
Year 3 psychiatry firm

Teaching Model

Flipped classroom
Small-group, all students presenting short topics

Active Learning Intervention

Pre-session preparation
Student-led micro-teaching
Consultant-facilitated discussion

Evaluation

Anonymous mixed-methods questionnaire:
Likert-scale items
Free-text reflections

Results

Despite higher perceived effort, active learning was consistently associated with increased:

- ✓ **Engagement**
- ✓ **Understanding**
- ✓ **Confidence**

Free Text Reflections

Teaching content improved comprehension:

"Organising and presenting notes myself helps make information clear and memorable."

Active learning fostered ownership of learning:

"Being able to take charge and understand the content."

Perceived Need for Complementary Teaching Approaches

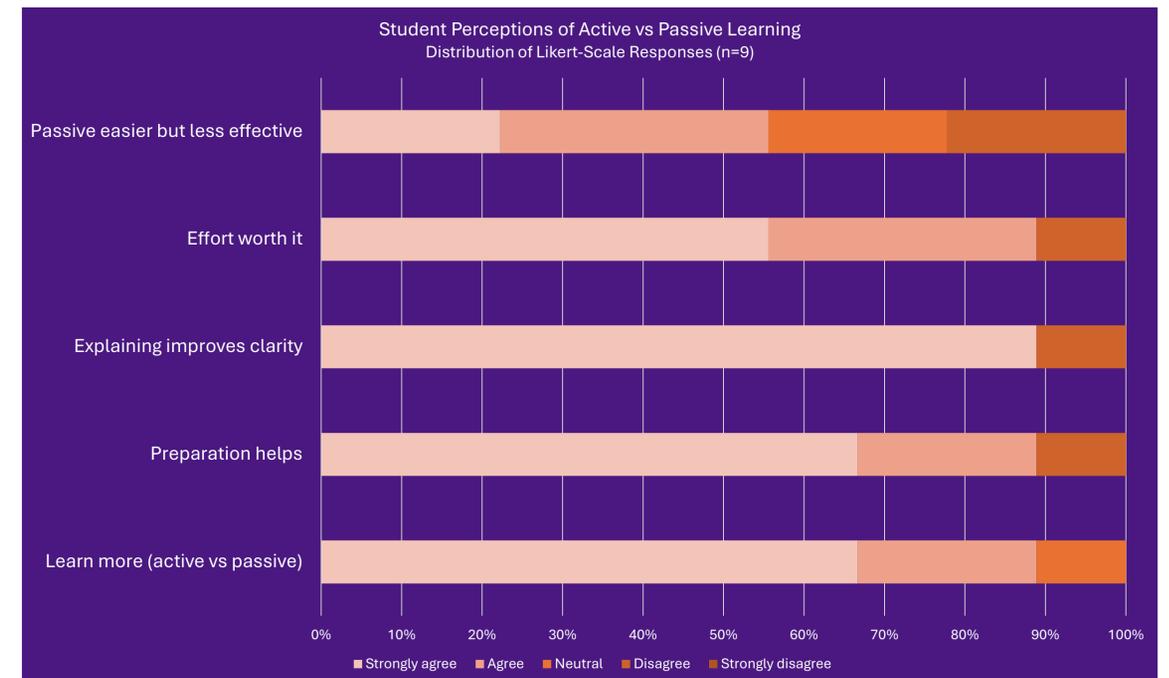
"Ideally mostly active with some supporting passive."

Effectiveness increased when sessions were supported by consultant facilitation:

"...I don't believe they should replace traditional methods entirely."

Some students questioned reliability or disengaged during peer presentations:

"Sometimes I zone out or doubt how true it is."



Discussion & Conclusion

Student-led active learning was perceived as beneficial for engagement and understanding, while consultant-guided discussion provided structure, ensured relevance of content, and supported consolidation of learning. Most students favoured a blended approach. Passive methods were seen as easier but less effective for attention and retention. This is a small sample size (n = 9) from a single teaching firm, meaning findings are exploratory and not generalisable. Findings show structured, consultant-supported student-led teaching is a good addition to undergraduate psychiatry. Future studies using larger cohorts and objective outcomes can add to the evidence base for undergraduate teaching methods.