Study on the Issues and Countermeasures of Cultivating Students' Subjective Initiative in Clinical Practice Teaching of Obstetrics and Gynecology

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Keywords: Clinical Practice Teaching of Obstetrics and Gynecology; Students' Subjective Initiative; Teaching Methods; Evaluation System; Teaching Staff

Abstract: With the rapid development of medical education, clinical practice teaching of obstetrics and gynecology, as an essential part of students' practical ability cultivation, has a direct impact on students' future career development. However, there is a lack of subjective initiative among students in current clinical practice teaching of obstetrics and gynecology, mainly manifesting in low student participation and weak clinical operation ability. This study first analyzes the causes of the problems in cultivating students' subjective initiative and proposes several optimization countermeasures for these issues, including innovative teaching methods, improved evaluation systems, establishment of incentive mechanisms, and strengthening the construction of teaching staff. These countermeasures aim to enhance students' interest and enthusiasm in learning, improve the quality of clinical practice teaching, and thereby cultivate students' subjective initiative.

1. Introduction

With the continuous progress and development of medical education, clinical practice teaching of obstetrics and gynecology, as a crucial practical link in medical education, directly affects the professional quality and practical ability of future medical talents. In the process of clinical practice teaching of obstetrics and gynecology, students not only need to master solid medical theoretical knowledge but also need to possess a high degree of subjective initiative and clinical practice ability to cope with complex and changing clinical environments and challenges. This study aims to deeply explore the issues of cultivating students' subjective initiative in clinical practice teaching of obstetrics and gynecology, analyze the key factors affecting students' subjective initiative, and propose corresponding optimization countermeasures. It hopes to provide theoretical support and practical guidance for the improvement of clinical practice teaching of obstetrics and gynecology, and contribute to cultivating more excellent medical talents.
2. The Relationship between the Characteristics of Obstetrics and Gynecology Clinical Practice and the Cultivation of Students' Subjective Initiative

2.1 The Specificity of Obstetrics and Gynecology Clinical Practice

One of the most salient features of obstetrics and gynecology clinical practice is the diversity of diseases. From common gynecological inflammations, menstrual disorders, to complex pregnancy complications and gynecological tumors, there are numerous diseases, each with its unique clinical manifestations and treatment methods. This requires interns to possess comprehensive medical knowledge and keen observation skills to cope with various complex clinical situations. The high risk of clinical operations in obstetrics and gynecology is also a manifestation of its specificity. Since obstetrics and gynecology operations usually involve the female reproductive system, the uniqueness of these parts increases the difficulty of operations and the risks. Therefore, interns must maintain a high degree of vigilance and rigor during the internship to ensure the safety and accuracy of operations. Obstetrics and gynecology clinical practice also faces special challenges in patient communication. As gynecological diseases often involve personal privacy and sensitive topics, patients often hold high expectations and trust in doctors. Therefore, interns must pay attention to communication and interaction with patients during the internship, establishing a good doctor-patient relationship to provide more caring and effective medical services.

2.2 The Importance of Students' Subjective Initiative in Internship

In obstetrics and gynecology clinical practice, students' subjective initiative plays an indispensable role in enhancing their clinical abilities and cultivating medical literacy. Subjective initiative prompts students to participate more actively in the internship process. They are no longer passive recipients but active explorers and practitioners, actively seeking learning and practical opportunities to continuously accumulate clinical experience and improve clinical skills. Subjective initiative helps students develop independent thinking and problem-solving abilities. When facing complex clinical situations, they no longer rely on teachers' guidance and help, but can independently think, analyze problems, and find solutions. This ability is crucial for future medical work. Subjective initiative also fosters students' humanistic care and medical ethics. During the internship, students will pay more attention to patients' needs and feelings, providing medical services with a more sincere and caring attitude. This cultivation of humanistic care and medical ethics will make them become more excellent medical workers.

2.3 The Current Challenges of Obstetrics and Gynecology Clinical Practice Teaching

With the rapid updating of medical knowledge and continuous development of medical technology, the teaching content of obstetrics and gynecology clinical practice is also constantly increasing and deepening. Due to the limitation of internship time and clinical resources, it is difficult to ensure that interns can fully master all knowledge and skills. This requires paying more attention to pertinence and effectiveness in the teaching process to help students better grasp core knowledge and skills. The specificity of obstetrics and gynecology clinical practice requires interns to possess a high sense of responsibility and professional ethics. However, in actual internships, some interns may lack responsibility and have a negative attitude. This requires strengthening supervision and guidance of interns, as well as strengthening medical ethics education to cultivate their sense of responsibility and professional ethics. The teaching methods and evaluation system of obstetrics and gynecology clinical practice also need to be further improved and innovated. Traditional teaching methods often focus too much on theoretical knowledge.
transmission, ignoring the cultivation of students' practical abilities and innovative spirits. More interactive and heuristic teaching methods need to be introduced to stimulate students' interest and enthusiasm for learning. At the same time, a more comprehensive and objective evaluation system needs to be established to comprehensively reflect the comprehensive quality and ability level of interns.

3. Issues in Cultivating Students' Subjective Initiative in Obstetrics and Gynecology Clinical Practice

3.1 Insufficient Cultivation of Students' Subjective Initiative

Traditional clinical teaching models tend to focus on one-way knowledge transmission, neglecting students' subjectivity and creativity. Under this model, students often passively receive knowledge, lacking the motivation for active exploration and practice. They are accustomed to following established procedures and operations, lacking independent thinking and problem-solving abilities. The specificity of clinical practice also poses challenges to students' subjective initiative. Obstetrics and gynecology, as a highly specialized discipline, involves numerous complex medical skills and ethical issues in practical operations. Students need to face patients with different conditions and formulate corresponding treatment plans based on their specific situations. Due to the intense pace and heavy workload of clinical practice, students often do not have enough time and energy to think deeply and explore, leading to the ineffective exertion of their subjective initiative. The environment of clinical practice also has an impact on students' subjective initiative. In medical institutions such as hospitals, students often occupy a position of passively receiving guidance and need to abide by strict rules, regulations, and operational procedures, lacking opportunities for independent decision-making. This environment limits students' subjective initiative to a certain extent, making it difficult for them to exert their creativity and imagination in practice [3].

3.2 Single Teaching Methods, Lack of Innovation

The singularity of teaching methods in obstetrics and gynecology clinical internships has become an important factor restricting the cultivation of students' subjective initiative. Traditional clinical internships often rely on teachers' lectures and demonstrations, while students grasp clinical skills through observation and imitation. However, this single teaching method ignores the individual differences and learning needs of students, making it difficult to stimulate their interest and initiative in learning. Traditional teaching methods focus too much on knowledge transmission, while ignoring the cultivation of students' innovative thinking and problem-solving abilities, which also inhibits the development of students' subjective initiative to a certain extent. The lack of innovative teaching methods is also reflected in the limitations of teaching resources and tools. In the digital era, with the rapid development of information technology, new teaching resources and tools are constantly emerging, providing more possibilities for clinical internships. However, these new teaching resources and tools have not been widely used in obstetrics and gynecology clinical internships, still remaining in traditional forms such as textbooks, PPTs, and demonstration operations. This not only limits the richness and diversity of teaching content, but also affects the cultivation of students' subjective initiative [4]. Therefore, in order to fully stimulate students' subjective initiative, it is necessary to innovate and reform the teaching methods of obstetrics and gynecology clinical internships, providing students with richer and more vivid learning experiences, and helping them better understand and master clinical knowledge and skills.
3.3 Imperfect Evaluation System, Lack of Incentive Mechanisms

Currently, many clinical practice evaluation systems still focus on traditional knowledge assessment, emphasizing students' memory and recitation of theoretical knowledge, while neglecting the evaluation of students' practical abilities and innovative thinking. This evaluation system leads students to focus only on passing exams and neglecting the actual mastery and application of clinical skills, thus inhibiting their subjective initiative. The evaluation system lacks direct consideration of students' subjective initiative, such as their enthusiasm for actively participating in clinical practice, independent thinking, and problem-solving abilities. This makes it difficult for students to obtain positive feedback and recognition of their subjective initiative from the evaluation system, further affecting their motivation to continue to exert their subjective initiative. The lack of incentive mechanisms is also an important factor restricting the cultivation of students' subjective initiative. In clinical practice, students often face heavy clinical tasks and strict requirements, lacking sufficient motivation to actively explore and learn. If the evaluation system can incorporate incentive mechanisms, such as setting up rewards for outstanding interns, linking internship performance with further education and employment, it will effectively stimulate students' enthusiasm and subjective initiative, encouraging them to more actively participate in clinical practice [5]. The imperfection of the evaluation system and the lack of incentive mechanisms are important issues facing the cultivation of students' subjective initiative in obstetrics and gynecology clinical practice. To fully stimulate students' subjective initiative, it is necessary to improve and perfect the evaluation system and introduce effective incentive mechanisms to better promote students' comprehensive development in clinical practice.

3.4 Insufficient Teacher Resources, Varying Teaching Quality

With the rapid development of medical education and the increasing demand for clinical internships, the teaching resources for obstetrics and gynecology clinical internships appear relatively scarce. Senior obstetrics and gynecology doctors often have heavy clinical workload, making it difficult for them to devote sufficient time and energy to clinical internship teaching. While young doctors are full of enthusiasm, they lack clinical experience and teaching ability, making it difficult for them to independently undertake the teaching tasks of clinical internships. The insufficient teaching staff directly leads to uneven teaching quality. Some clinical internship teachers, due to a lack of teaching experience and mastery of teaching methods, fail to effectively stimulate students' interest and initiative in learning, making students in a passive receptive state during clinical internships. Meanwhile, there are significant differences in teaching levels among different teachers. Some teachers can provide students with rich clinical experience and in-depth guidance, while others may not be able to meet students' learning needs or even mislead them. The insufficient teaching staff also limits the full utilization of teaching resources. In obstetrics and gynecology clinical internships, besides teachers' guidance, various clinical teaching equipment and simulation training systems are also needed to assist teaching. Due to the lack of teaching staff, these teaching resources often cannot be fully utilized, thus affecting the teaching quality and the cultivation of students' subjective initiative [6].

4. Strategies for Optimizing the Cultivation of Students' Subjective Initiative in Gynecological and Obstetrical Clinical Practice

4.1 Enhancing the Cultivation of Students' Subjective Initiative

Strengthen the cultivation of students' self-driven consciousness. In the early stage of clinical
practice, provide dedicated introductory courses to help students clarify their internship goals and recognize the importance of clinical practice in applying medical knowledge and enhancing professional skills. Teachers should encourage students to formulate personalized internship plans and clarify their learning priorities and directions during the internship, thus stimulating their internal learning motivation. Teachers should implement problem-oriented teaching methods. Teachers should guide students to discover, analyze, and solve problems from clinical practice. For example, teachers can combine typical cases to propose related clinical problems, allowing students to consult literature, conduct group discussions, and finally provide comments and summaries. This method not only cultivates students' clinical thinking ability but also enhances their initiative and sense of participation. Teachers should strengthen practical teaching in clinical internships. As gynecological and obstetrical clinical internships require students to master a large number of clinical operation skills, practical teaching is crucial. Teachers can organize students to conduct simulated operation training, such as simulated childbirth and gynecological examinations, enabling students to learn and master clinical skills through practice. Teachers can also arrange students to participate in clinical work, such as assisting doctors in surgery and participating in ward rounds, so that students can experience the tension and bustle of clinical work firsthand, thus deepening their understanding and comprehension of clinical work. To stimulate students' subjective initiative, an outstanding intern reward system can be established to commend and reward outstanding students during the internship. Linking internship performance to further education and employment can also motivate students to take the internship more seriously.

4.2 Innovating Teaching Methods to Improve Teaching Effectiveness

Teachers should introduce interactive teaching methods, such as the flipped classroom model, where students autonomously learn through watching teaching videos and consulting literature before class. During class, students engage in in-depth discussions and problem-solving through group discussions and case analysis. This teaching method not only stimulates students' interest in learning but also cultivates their independent thinking and team collaboration abilities. Case-based teaching allows students to learn and master clinical knowledge through analyzing and solving problems. Teachers can select representative gynecological and obstetrical cases, organize students to conduct case analysis, propose treatment plans and nursing measures from the patient's perspective, and guide them to consider possible risks and complications. Teachers should utilize modern information technology tools, such as virtual reality (VR) and augmented reality (AR) techniques, for simulation teaching. These technologies provide students with a highly simulated clinical internship environment, allowing them to practice clinical skills in a safe and risk-free environment. In addition to traditional exam evaluations, multiple evaluation methods such as self-evaluation, peer evaluation, and teacher evaluation can be adopted to comprehensively assess students' learning outcomes and ability levels. This evaluation system encourages students to focus more on their learning process and ability improvement, stimulating their learning motivation and subjective initiative.

4.3 Perfecting the Evaluation System and Establishing an Incentive Mechanism

Educators should construct a comprehensive and multi-faceted evaluation system to accurately assess students' performance in clinical internships and emphasize the assessment of their subjective initiative. This evaluation system should cover students' clinical skills, problem-solving abilities, team collaboration abilities, professional qualities, and other aspects to comprehensively reflect students' comprehensive qualities. During the process of perfecting the evaluation system, students' self-evaluation and peer evaluation should be emphasized. Student self-evaluation prompts them to
reflect on their learning process, identify their shortcomings, and actively seek improvement. Peer evaluation provides a different perspective, helping students discover their strengths and weaknesses and encouraging them to learn from each other and make progress together. As an essential part of the evaluation system, teacher evaluation should focus more on assessing students' subjective initiative, paying attention to their thinking processes, innovative abilities, and practical exploration spirit. Various measures can be taken to establish an incentive mechanism to stimulate students' enthusiasm and subjective initiative. An outstanding intern reward system can be established to commend and reward outstanding students during the internship, inspiring their sense of honor and drive. Rewards can include honor certificates, scholarships, internship opportunities, etc., with specific forms adjusted flexibly based on actual conditions. Linking internship performance to further education and employment can make students fully recognize the importance of clinical internships, thus taking the internship tasks more seriously. Excellent internship experiences can be used as important references for job recommendations. Regularly organizing clinical internship experience exchange meetings, skill competitions, and other activities can provide students with a platform to showcase their talents while enhancing their self-confidence and sense of belonging. These activities allow students to exchange learning insights and share skills and techniques in a relaxed and pleasant atmosphere, further stimulating their enthusiasm for learning.

4.4 Enhancing Teacher Team Construction and Improving Teaching Quality

Addressing the issue of cultivating students' subjective initiative in clinical obstetrics and gynecology internships, strengthening teacher team construction and improving teaching quality are indispensable countermeasures. It is imperative to attach importance to the selection and cultivation of clinical obstetrics and gynecology internship teachers, selecting physicians with rich clinical experience, profound medical theoretical knowledge, and excellent teaching abilities as internship instructors to ensure they can provide high-quality clinical internship teaching. Meanwhile, a regular teacher training mechanism should be established to continuously update teachers' clinical knowledge and teaching methods, enabling them to keep up with the forefront of medical education. Implementing a teaching evaluation and feedback mechanism can enhance teachers' teaching quality and students' learning experience. Through regular evaluations of the internship teaching process, collecting feedback from students and teachers, and promptly identifying and improving issues, it can not only ensure the smooth achievement of teaching objectives but also enhance teachers' professional literacy and teaching skills. In the process of teacher team construction, attention should also be paid to the construction of teacher incentive mechanisms. By establishing teaching awards, title promotions, and other incentive measures, teachers' work enthusiasm and innovative spirit can be stimulated. At the same time, providing teachers with a good working environment and development platform, encouraging them to carry out teaching reforms and scientific research innovations, can further enhance teaching quality. Strengthening communication and interaction between teachers and students is also crucial to improving teaching quality. Teachers should actively pay attention to students' learning dynamics, timely understand students' learning needs and confusions, and provide timely guidance and help. Teachers should encourage students to actively participate in teaching activities, express their opinions and views, and engage in in-depth exchanges and discussions with teachers. This interactive teaching method can stimulate students' interest in learning and subjective initiative, improving teaching effectiveness.

5. Conclusion

The optimization strategies proposed in this study provide specific guidance for the improvement
of clinical obstetrics and gynecology internship teaching. These measures can effectively enhance students' interest and enthusiasm in learning, strengthen their practical abilities and clinical skills, which not only helps to improve the teaching quality of clinical obstetrics and gynecology internships but also contributes to cultivating students' professional literacy and comprehensive abilities, laying a solid foundation for their future career development. As one of the important disciplines in the medical field, the quality of clinical obstetrics and gynecology internship teaching is directly related to the quality of medical talent cultivation. Therefore, the optimization strategies proposed in this study can also provide reference and inspiration for internship teaching in other medical majors, contributing to cultivating more outstanding medical talents.

References