

Medical education affects patient outcomes: Implementing the gallery walk active learning method along with the BOPPPS model

Dear Editor,

The ever-increasing technological and scientific progress in recent decades has turned the education of medical students into a complex and challenging process. Recent decades have seen efforts to improve traditional teaching methods. Using the active learning technique is one of these efforts that makes students fully participate in the teaching and learning process. The evidence that active learning techniques are more effective than conventional methods is increasing.^[1] According to previous studies, team-based learning (TBL) is an educational strategy that has gained attention in the education of healthcare professionals. This method turns the passive teacher-centered learning process into active student-centered learning. It causes participation and interaction in the class and increases students' critical thinking, teamwork, and communication skills.^[2]

Gallery walk (GW) is one of the TBL techniques that connects learners to the educational topic in interesting and interactive ways. In GW, students are divided into small groups, and while discussing and solving group assignments, they design a poster with their answers and install it on the classroom wall. Then, the peer evaluation process starts. In peer evaluation, each team evaluates the poster of the other team. In GW, the educator is a facilitator, and the students have the main role in the teaching and learning process. Despite the satisfactory results of studies conducted on GW, which were mostly in schools and for students, there is very little evidence of using this method in medical education.^[1]

On the other hand, the BOPPPS model is a student-centered education model based on a constructivism and communication approach, with an emphasis on student interaction and collaborative feedback. It includes bridge-in, learning objectives, pre-assessment, cooperative learning, post-assessment, and summary. Recently, this model has been used in medical education and has a satisfactory educational effect. BOPPPS-based education can stimulate students' interest and enthusiasm and improve their thinking ability and academic performance and learning initiative. As an open educational design model, this model can be combined with various educational methods. Based on constructivist learning theory, the BOPPPS teaching

strategy creates a complete framework and process to achieve educational goals.^[3]

Despite the promising results of GW, there is still a lack of evidence about this method in medical education. On the other hand, due to the flexibility of the participatory learning phase of the BOPPPS model, various active learning methods such as GW can be implemented. Although this model has been shown to positively affect the educational process, there is no evidence of the effectiveness of mixing these two techniques in medical education. This may deter many faculty members from adopting these methods in their classrooms. Due to the importance of effective learning, implementing the active learning approaches is suggested. According to previous studies and the effect of the GW method as well as the BOPPPS technique in medical education, it is recommended to implement the GW technique along with the BOPPPS model in medical education.

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Conflicts of interest

There are no conflicts of interest.

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