
Transforming Medical Education: A Comprehensive Case Study on the Impact and Insights From the Diploma in Medical Education Program

Ye Phyo Aung¹, Tun Tun Naing¹, Zaw Phyo¹, Myint Thein Naing¹, Pyi Hein Kyaw¹, Zin Min Htike¹,

Tayzar Hein¹, Law Ha Aung¹, Khin Aung Htun¹ & Tin Tun²

¹. Defence Services Medical Academy, Yangon, Myanmar

². Ministry of Health, Nay Pyi Taw, Myanmar

Correspondence: Ye Phyo Aung, Defence Services Medical Academy, No.94, D-1, Pyay Road, Mingaladon Township, Yangon, Myanmar, Tel: +95 92013375,

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Abstract

This case study examines the impact and effectiveness of the Diploma in Medical Education program conducted at the Defence Services Medical Academy in Myanmar. The program aims to enhance the teaching competencies of healthcare professionals by integrating theoretical knowledge with practical application. Participants from diverse medical backgrounds reported significant improvements in their understanding of educational psychology, curriculum design, and teaching strategies. Interactive methods such as group work, simulations, and role-playing were identified as key strengths, promoting active learning and collaboration. However, challenges were noted, including difficulties with self-directed learning, academic writing, and occasional over-reliance on lecture-based teaching. Participants also highlighted the need for clearer learning objectives and more structured support. Overall, the program was perceived as transformative, increasing participants' confidence and ability to apply educational principles in clinical teaching. Continuous refinement based on participant feedback is recommended to further enhance program effectiveness and learner engagement.

Keywords: Diploma in Medical Education, healthcare professionals, teaching strategies, curriculum design, educational psychology, active learning, professional development

1. Introduction

Medical education plays a pivotal role in shaping competent healthcare professionals who are not only well-versed in clinical knowledge but also equipped with the necessary teaching skills to train the next generation (Kaufman, 2018). The Diploma in Medical Education, conducted at the Defence Services Medical Academy (DSMA), is designed to fulfill this role by offering participants the opportunity to build on their teaching expertise through a blend of theoretical

knowledge and practical application. This case study provides an in-depth analysis of the program, drawing on participant experiences, and focuses on the effectiveness of the modules, the teaching strategies employed, and areas identified for further improvement.

2. Method

This study employed a qualitative case study design to explore the impact and effectiveness of the Diploma in Medical Education program at the Defence Services Medical Academy. Data were collected from participants representing diverse healthcare backgrounds, including clinical practitioners, nurses, and educators. Primary data sources included participant feedback, reflective comments, and experiences gathered throughout the program. The study focused on key components such as workshop content, teaching methods, participant engagement, and perceived learning outcomes.

The program structure, including modules on educational psychology, curriculum design, teaching strategies, and research, was analyzed in relation to participant responses. Thematic analysis was used to identify recurring patterns and insights, particularly regarding strengths, challenges, and areas for improvement. Direct quotations from participants were incorporated to support the findings and provide authentic perspectives. This approach enabled an in-depth understanding of how the program influenced teaching competencies and professional development.

3. Results and Discussion

The participants of this program came from various fields within the healthcare sector, including physiotherapy, nursing, clinical practice, and educational roles. Each participant brought a unique perspective to the course, contributing to a rich learning environment. However, these diverse backgrounds also meant that the starting point for each participant was different, and adjusting to the academic demands of the program posed initial challenges for some.

"Coming from a clinical background, I had never been exposed to such a structured teaching program before. The transition to an academic-focused environment was difficult at first, but the course provided the resources and support I needed to succeed." Participant 1.

For those with limited prior experience in educational theories, the program presented new and sometimes difficult concepts, such as assessment methodologies and curriculum design. Nevertheless, by the end of the course, many participants found that they had not only gained valuable insights into medical education but had also developed confidence in their ability to apply these principles in practice.

"The concepts of educational psychology and curriculum design were completely new to me, but they were delivered in a way that made them relevant and applicable to my teaching role." Participant 3

3.1. Workshop Content and Learning Objectives

The program was divided into several workshops, each focusing on key aspects of medical education. The curriculum was designed to be relevant to both clinical practice and teaching, with modules covering topics such as educational psychology, curriculum design, teaching and learning strategies, and medical education research (Brauer & Ferguson, 2015).

Participants noted that the workshops were directly applicable to their daily teaching roles, as real-world clinical scenarios were integrated into the learning process. This not only allowed participants to better understand the concepts but also provided them with practical tools they could use in their own classrooms.

"The integration of clinical scenarios into the educational modules made the content so much more relatable. It wasn't just theory; we were given tools we could use right away in our teaching practice." Participant 6

However, some participants found that the learning objectives, while generally clear, could have been more specific in certain areas. In particular, there was a desire for more detailed guidance on the levels of competence expected from participants upon completion of the modules.

"While the learning objectives provided a clear roadmap, there were moments when I felt unsure about the exact competency levels we were expected to achieve. More detail would have helped guide our focus." Participant 8

3.2. Teaching Methods and Instructor Performance

The Diploma in Medical Education utilized a variety of teaching methods designed to engage different learning styles. These included traditional lectures, interactive group discussions, role-playing, and simulation exercises. Many participants found that these interactive elements, particularly the group assignments and role-playing exercises, were the most engaging and effective.

"The group work really helped me see the material in a new light. It was one thing to learn about educational strategies, but it was another to apply them in a simulated setting with peers from different medical backgrounds." Participant 2

Despite the praise for the diverse teaching methods, participants also expressed concerns about the heavy reliance on lectures, particularly during some of the more complex modules. Several participants suggested incorporating more interactive learning opportunities, such as peer-to-peer teaching moments and hands-on activities, to ensure better engagement and understanding.

"Some sessions felt lecture-heavy, which limited our ability to engage with the material. I think more peer-to-peer teaching would have helped us retain the information better, especially during complex modules like Assessment and Evaluation." Participant 4

The instructors were consistently praised for their knowledge and teaching styles, with specific recognition given to facilitators like Course Co-Ordinator, who was lauded for her practical application of educational theories in a clinical context.

"Course Co-Ordinator, was more than just a lecturer; she was a mentor. She showed us how to apply educational theories with heart and dedication, which made a huge difference in how I approached both patient care and teaching." Participant 5

3.3. Participant Engagement and Group Dynamics

Collaboration and group work were central components of the program. Participants from various medical disciplines brought diverse perspectives to the workshops, and this diversity enriched group discussions. However, challenges in group dynamics arose, particularly when certain participants dominated conversations, limiting opportunities for quieter individuals to contribute. There was a consensus that rotating team members more frequently could have allowed for broader knowledge sharing and more inclusive participation.

"There were moments when some participants dominated the discussions, which made it hard for others to speak up. Rotating teams during group activities would have allowed us to learn from a wider range of perspectives." Participant Feedback from Group Assignment Participant 8

Despite these challenges, the collaborative spirit (De Jong et al., 2023) fostered during the workshops was one of the program's key strengths. Many participants highlighted the value of learning from colleagues with different medical and educational experiences, which broadened their own understanding of healthcare education.

"Working with colleagues from different medical fields was incredibly valuable. Their experiences helped me see things from a new angle, and it really expanded my understanding of healthcare education." Participant 3

3.4. Challenges and Areas for Improvement

While the program was generally well-received, several areas for improvement were identified. Many participants found the content, particularly in modules such as educational psychology and medical education research, difficult to grasp at first. The transition to self-study and the use of andragogy, a method of teaching adult learners, (Tymchuk et al., 2022), was also challenging for those unfamiliar with academic learning environments.

"At first, I struggled with the self-study aspect of the course. It was difficult to manage without more structured guidance, especially for topics like curriculum design and assessment." — Participant 9

To address these challenges, participants suggested offering additional resources and support for self-study components, as well as more guidance on academic writing. Writing assignments posed difficulties for participants who were not familiar with research-based or academic writing formats. Participants expressed the need for more examples and guidance during the early stages of the course.

"Writing assignments were one of the toughest parts of the course. More examples of academic writing, especially at the beginning, would have helped us get a clearer sense of what was expected." Participant 10

4. Conclusion

The Diploma in Medical Education provided participants with an enriching educational experience that combined theoretical knowledge with practical skills. The well-structured workshops, engaging teaching methods, and collaborative environment were praised by participants, who left the program feeling more confident in their ability to teach and mentor future healthcare professionals. However, there were several key areas identified for improvement, including the need for clearer learning objectives, more support for self-study components, and more interactive teaching methods to foster engagement and participation.

"This course was a transformative experience. It equipped me with the knowledge and skills I need to be a better educator, and I'm excited to apply these new strategies in my teaching practice." Participant 4

Finally, this case study highlights the importance of continuous feedback and improvement in medical education programs to better meet the needs of healthcare educators. By addressing the areas for improvement identified by participants, future iterations of the Diploma in Medical Education can provide an even more effective and engaging learning experience for healthcare professionals.

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