

A Response to “Influence of Personality Traits and Learning Styles on Undergraduate Medical Students’ Academic Achievement” – A Medical Student Perspective [Letter]

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Dear editor

We read with great interest the article by Abouzeid et al,¹ discussing the influence of personality traits and learning styles on academic achievement. As sixth year medical students, we have undertaken teaching modules ourselves, and recognize the importance of tailoring revision to learning styles in order to maximize academic success.

The association between learning styles, personality traits and academic success has been well explored, and we commend the authors on their attempts to further characterize this relation in this important field. However, there are further points that merit consideration in this analysis.

The study methodology analyzed how learning styles and personality affect academic attainment over one examination alone. As senior medical students, our personal experience suggests that learning styles are likely to be adapted to the type of examination. This has been well documented in the literature, with one key example being the Objective Structured Clinical Examination (OSCE), where students are likely to employ group-based revision, perhaps leading to a tendency for more students to adopt a kinesthetic approach.² Accordingly, the authors could have further discussed the demands of the examination, and it would be interesting to see if students employed study methods aligned to their learning style. A subgroup analysis of the study style and revision resources used amongst different learning style groups in the lead up to the examination would be useful to further characterize this.

Furthermore, it is difficult to establish true academic success on the basis of one examination. It has been well recognized that GPA, which relies on an average of scores, is a more accurate assessment of achievement.³ While the utility of senior medical students has been briefly acknowledged by Abouzeid et al,¹ we also suggest using GPA as a measure of academic success. This would enable the authors to further fulfill their aim of improving the learning experience at medical school, by diversifying the applicability of results and exploring how students alter their learning style as they gain more clinical exposure in the later years.

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The authors are hesitant to discuss confounders, which may have affected academic achievement. Since study skills and study motivation have been found by Credé et al⁴ to have a strong relationship with academic achievement, these aspects are of significant impact and warrant consideration. Study habits and academic achievement has also recently been investigated by Bin Abdulrahman et al,⁵ who found time management, diminishing distractions and goal setting to be amongst the most popular and effective study approaches. In keeping with this, further aspects for consideration include social factors, perhaps most importantly availability and type of revision resources.

Ultimately, whilst the authors offer an interesting insight into the 1st year cohort at their faculty, the scope for application to the wider field of medical education is limited as it stands. However, the topic remains thought-provoking and of interest to both students and teachers. Future studies enrolling more senior students, allowing consideration for varying examination methods and considering study habits would be of great intrigue.

Disclosure

The authors report no conflicts of interest in this communication.

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