



**Mini Med School: Why you should try a virtual, medical student-led program**  
**Mini école de médecine : pourquoi vous devriez tenter les séminaires virtuels, animés par des étudiants**

Nicole H Cameron, Julia De Pieri, Drew H Smith and Jane Gair

Volume 14, Number 3, 2023

URI: <https://id.erudit.org/iderudit/1106013ar>  
DOI: <https://doi.org/10.36834/cmej.75443>

[See table of contents](#)

Publisher(s)

Canadian Medical Education Journal

ISSN

1923-1202 (digital)

[Explore this journal](#)

Cite this article

Cameron, N., De Pieri, J., Smith, D. & Gair, J. (2023). Mini Med School: Why you should try a virtual, medical student-led program. *Canadian Medical Education Journal / Revue canadienne de l'éducation médicale*, 14(3), 125–126.  
<https://doi.org/10.36834/cmej.75443>

Article abstract

Implication Statement

Mini Med School (MMS) programs led by medical students provide a unique opportunity for community members to access free and accurate health information while engaging with the education of medical students. Virtually delivered MMS programs reduce barriers to access. 90.3% of participants in a recent MMS enjoyed medical students delivering the seminars. 63.6% of participants preferred virtual MMS seminars, with 31.8% preferring a combination of virtual and in-person delivery. Student-led, virtually delivered MMS programs are an engaging way to support both medical student and community education while strengthening community ties with local medical schools.



## Mini Med School: why you should try a virtual, medical student-led program

### Mini école de médecine : pourquoi vous devriez tenter les séminaires virtuels, animés par des étudiants

Nicole H Cameron,<sup>1,3</sup> Julia De Pieri,<sup>2,3</sup> Drew H Smith,<sup>1,3</sup> Jane Gair<sup>1,3</sup>

<sup>1</sup>Island Medical Program, University of Victoria, British Columbia, Canada; <sup>2</sup>Vancouver Fraser Medical Program, University of British Columbia, British Columbia, Canada; <sup>3</sup>Faculty of Medicine, University of British Columbia, British Columbia, Canada

Correspondence to: Jane Gair, PhD, Teaching Professor, Division of Medical Sciences, University of Victoria; email: [jgair@uvic.ca](mailto:jgair@uvic.ca)

Published ahead of issue: Jan 5, 2023; published Jun 27, 2023. CMEJ 2023, 14(3) Available at <https://doi.org/10.36834/cmej.75443>

© 2023 Cameron, De Pieri, Smith, Gair; licensee Synergies Partners. This is an Open Journal Systems article distributed under the terms of the Creative Commons Attribution License. (<https://creativecommons.org/licenses/by-nc-nd/4.0>) which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is cited.

### Implication Statement

Mini Med School (MMS) programs led by medical students provide a unique opportunity for community members to access free and accurate health information while engaging with the education of medical students. Virtually delivered MMS programs reduce barriers to access. 90.3% of participants in a recent MMS enjoyed medical students delivering the seminars. 63.6% of participants preferred virtual MMS seminars, with 31.8% preferring a combination of virtual and in-person delivery. Student-led, virtually delivered MMS programs are an engaging way to support both medical student and community education while strengthening community ties with local medical schools.

### Énoncé des implications de la recherche

Les séminaires de la mini-école de médecine (MÉM) présentés par des étudiants en médecine offrent une occasion unique aux membres de la communauté de profiter d'informations gratuites et précises en matière de santé tout en contribuant à la formation des étudiants. L'offre de séminaires MÉM en mode virtuel rend ces activités plus accessibles. Une grande majorité des participants (90,3 %) à une MÉM tenue récemment ont aimé le fait que des séminaires soient animés par des étudiants, 63,6 % d'entre eux ont préféré les séminaires MÉM virtuels et 31,8 % se sont dits favorables à une combinaison de séminaires virtuels et en personne. Les séminaires présentés virtuellement par des étudiants dans le cadre de la MÉM constituent un moyen intéressant de promouvoir aussi bien l'éducation des étudiants que celle de la communauté, tout en renforçant les liens entre cette dernière et les facultés de médecine locales.

### Introduction

Mini Med School (MMS) programs consist of seminars that aim to educate participants about their own health while enhancing community engagement.<sup>1</sup> Typically, these seminars are delivered in-person by university faculty; however, a virtual and medical student-led MMS program was not observed in the literature. Student-led MMS programs allow participants to engage with medical education, their communities, and allow students to strengthen their communication skills.<sup>2</sup> Virtual MMS programs have the potential to reach isolated or marginalized populations and reduce barriers to accessing

accurate health information.<sup>3</sup> We evaluated participant enjoyment of a medical student-led, virtual MMS program delivered to isolated seniors in our community. REB was waived for this project.

### Innovation

Our MMS program incorporates two innovations: medical student presenters and virtual seminars. Although medical student presenters are not new, they are uncommon, as most MMS programs in the literature were led by faculty. The students developed their own presentations, which included the following topics: laboratory testing, diabetes, medications and supplements, drug interactions, stress,

and diets. The students also communicated with attendees and evaluated the program by surveying the attendees' opinions on the student-led and virtual aspects of the MMS.

A virtual delivery of MMS was necessary during the pandemic. Given the limited literature on virtual MMS programs, our evaluation of this initiative can provide valuable information for schools interested in adopting similar programs. Virtual seminars provide access to participants who normally would be unable to attend and allows students from different geographic locations to help deliver the program. Based on significant turnout and minimal technology support required by attendees, technology did not appear to be a barrier to participation.

## Evaluation

Our program evaluation involved a survey to all attendees asking about their enjoyment of the student-led and virtual aspects of the MMS. 85 participants registered to attend at least one talk and 22 participants responded to our survey. There were nine talks in total, with an average of 25-35 attendees per talk.

When asked whether future MMS programs should be virtual, in-person or a combination, 63.6% preferred the virtual MMS, 31.8% preferred a combination, and 4.5% preferred in-person (Table 1). 90.3% agreed or strongly

Table 1. Participant enjoyment of a student-led and virtual mini med school program (n = 22)

	1 - Strongly Disagree	2 -Disagree	3 - Neither agree nor disagree	4 -Agree	5 - Strongly Agree
I enjoyed having students deliver the seminars	1 (5%)	0 (0%)	1 (5%)	6 (27%)	14 (64%)
I would enjoy hearing from practicing clinicians as well as students in the MMS	1 (5%)	1 (5%)	2 (10%)	8 (36%)	10 (45%)
I enjoyed being part of the training of medical students	0 (0%)	1 (5%)	1 (5%)	6 (27%)	14 (64%)
	Virtual	Combination	In-person		
Would you prefer future MMS to be virtual, in-person or a combination of the two?	14 (64%)	7 (32%)	1 (5%)		
	Yes	No			
Would you recommend our program to your friends?	20 (91%)	2 (9%)			

**Conflicts of Interest:** The authors declare that there is no conflict of interest associated with this publication and that no funding was received that could have influenced the outcome of this study.

**Funding:** No funding was received for this project.

agreed that they “enjoyed having students deliver the seminars.” 81.9% agreed or strongly agreed that they “would enjoy hearing from practicing clinicians as well as students.” 90.9% agreed or strongly agreed that they “enjoyed being part of the training of medical students.” 90.9% of participants would recommend the program to their friends.

There was no cost to deliver the MMS. The seminars were recorded and posted online, allowing participants to reference the talks afterwards.

## Next steps

We chose a group of seniors in our community who were isolated by the COVID-19 pandemic for our MMS and propose that future virtual MMS programs could reach any community of interest, particularly marginalized and isolated individuals. A combination of in-person and virtual delivery could be considered post-pandemic.

Based on the positive feedback we received concerning student involvement and the benefits of student involvement, including strengthened communication skills and community connection,<sup>2</sup> we suggest students deliver the seminars, and to consider adding a practicing physician presenter as most respondents indicated they would enjoy this option.

## References

1. Shatenko S, Harder S, Gair J. Why you should Mini-Med School: Mini-Med School as an intervention to increase health literacy. *Can Med Ed J.* 2020 Oct 10;11(6): e72-e78. <https://doi.org/10.36834/cmej.67817>
2. Hess J, Whelan JS. Making health literacy real: adult literacy and medical students teach each other. *J Med Libr Assoc.* 2009;97(3):221-224. <https://doi.org/10.3163/1536-5050.97.3.012>
3. Maurice S, Mytting K, Gentles JQ, et al. The Healthcare Travelling Roadshow: a qualitative study of a rural community engagement initiative in Canada. *Rural and remote health.* 2019;19:5238-5238. <https://doi.org/10.22605/RRH5238>