Reversing Moral Regression in Medical Education with the *Konstanz Method of Dilemma-Discussion (KMDD)*®

Prof. Dr. Georg Lind
Department of Psychology
University of Konstanz, Germany

http://www.uni-konstanz.de/ag-moral/
In no field do we have more ethics teaching, books on (bio-)ethics, ethics committees etc. as in medicine and medical education.

Yet, in spite of this medical education seems to undermine the development of moral-democratic competence.
Good Education Fosters Moral Competence

Sources:
Colby, Kohlberg et al (1987). The measurement of moral judgment...
Rest (1986). Moral development...
Lind (2002). Ist Moral lehrbar?...
Note: The longitudinal findings by Rest and by Lind are supplemented by cross-sectional data.
Moral Regression In Medical Education

Longitudinal Study of German Medical Students, N = 592, 1977 -1983

Source: FORM-Project, Lind, 2000
Moral Regression in Medical Education

Czech Republic, N = 380, 1998

C-Score (MJT)

Year of Study

Source: Slovackova, 1999, personal communication
Moral Regression in Medical Education

In Poland

Source: Prof. Dr. Ewa Nowak, 2009, personal communication
N = 376
Moral Regression in Medical Education
In Croatia

Source:
Prof. Dr. Sunčana Kukolja Taradi, Medical School, University of Zagreb, 2009, N= 352
Moral Regression in Medical Education

Ineffective Methods of Ethical Education

- Reading moral stories
- Lectures about moral values and ethics ("direct methods")
- Values clarification exercises (Simon)
- Problem-based learning

Effect of Problem-based Ethics Teaching


F(1,49)=4.19; p<.0460; N = 50

(34.5, 28.8)
Negative Effects of Medical Education, intensive Pedagogy and Problem-based teaching: Brazil

C-scores of 1st and 6th year medical students;
N = 451

Moral Regression & Segmentation in Medical Education
Fostering Moral Competence in Medical Education

![Dilema worker graph](image1)

![Dilema doctor graph](image2)
Educative activities

In order to acquire the moral competencies related with ethical basis we have implemented across the curriculum, amongst other activities, the educative Moral Dilemmas using the methodology created by Dr. George Lind at the University of Konstanz.
Medical Students' Feedback

Presenting the moral dilemma

First vote

Arguments in small groups

Georg Lind Moral Dilemmas with Medical Students

Final vote

Appreciating opposing arguments

Reflection

Plenary discussion
The Relative Effect Size $r$ of the KMDD in Comparison to Other Methods and Other Fields

Medical students feedback about moral dilemmas

“ It’s one of the best learning activities for us”

“ It’s an activity that should be applied each semester”

“The time of discussion should be prolonged to let express the arguments of all the participants”

“The lecture at the end of the discussion about some ethical, legal and medical issues has a great value for us”

5th year medical students, 2004
Summary

r-Coefficients of “Effective” Methods (Lipsey & Wilson, 1993)

Workplace 0.3 0.2 0.14
Psychotherapy 0.32 0.32 0.11
Medicine 0.32 0.4
Medicine (low) 0.29
Blatt (DIT-Youth) 0.3
Blatt (DIT-Adult) 0.3
Blatt (MJT) 0.2
KMDD (MJT) 0.4

Dilemma Discussion

See next slide for the references ① to ④
References


