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Contributions of academic monitoring in epidemiology to the training of undergraduate students in the health field: an experience report

Contribuições da monitoria acadêmica em epidemiologia na formação dos graduandos da área da saúde: relato de experiência

Contribuciones de la tutoría académica en epidemiología a la formación de los estudiantes universitarios del área de la salud: informe de experiencia

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Abstract:
Objective: to describe the mentoring experience in Epidemiology and identify its challenges and potential. **Methods:** this is an experience report on mentoring in Epidemiology performed by two medical students at a Brazilian public university between June 2023 and March 2025. Mentoring activities were planned jointly by tutors and faculty and took place within the 12-hour weekly schedule, through in-person and remote activities. **Results:** 332 students were assisted during the four mentoring periods. The mentoring program, involving three different health courses, allowed for the exchange of knowledge beyond the boundaries of epidemiology. The positive aspects included the opportunity for tutors to develop teamwork, leadership, communication, and teaching skills and reinforce their knowledge of the course. The negative aspect was that students neglected to study the material throughout the semester and learned it only during review sessions. The challenge identified was the inconsistency in student performance during mentoring, which did not always reflect positively on evaluations. **Conclusion:** mentoring contributed to students' academic development by promoting interprofessional education and teamwork in the healthcare context, an essential skill compatible with the multidisciplinary reality of the public healthcare system.
Keywords: Teaching; Interprofessional education; Epidemiology; Health.

Resumo:
Objetivo: descrever a vivência de monitoria na disciplina "Epidemiologia" e identificar os desafios e potencialidades da experiência. **Método**: trata-se de um relato de experiência sobre a monitoria da disciplina "Epidemiologia" executada por dois discentes do curso de Medicina de uma universidade pública no intervalo entre junho de 2023 e março de 2025. As atividades da monitoria foram planejadas de forma conjunta entre monitores e docente, e aconteciam dentro da disponibilidade de 12 horas semanais, por meio de atividades presenciais e de forma remota. **Resultados**: foram atendidos 332 alunos nos quatro períodos de monitoria. O programa de monitoria envolvendo três diferentes cursos da Saúde permitiu a troca de saberes além das fronteiras da epidemiologia. Os pontos positivos consistiram na oportunidade de os monitores desenvolverem habilidades de trabalho em equipe, liderança, comunicação e ensino e reforçarem seus conhecimentos na disciplina, enquanto o aspecto negativo foi que os alunos deixavam de estudar a matéria ao longo do semestre para aprender o conteúdo apenas durante as revisões. O desafio identificado foi a inconsistência entre o desempenho dos alunos na monitoria, que nem sempre repercutiam positivamente nas avaliações. **Conclusão**: a monitoria contribuiu na formação acadêmica dos discentes ao promover a Educação Interprofissional e o exercício do trabalho em equipe no contexto sanitário, habilidade essencial e compatível com a realidade multiprofissional do sistema público de saúde.
Palavras-chave: Ensino; Educação interprofissional; Epidemiologia; Saúde.

Resumen:
Objetivo: describir la experiencia de tutoría en la asignatura «Epidemiología» e identificar los retos y potencialidades de la experiencia. **Método**: se trata de un relato de la experiencia de tutoría en la asignatura «Epidemiología» realizada por dos estudiantes del curso de Medicina de una universidad pública entre junio de 2023 y marzo de 2025. Las actividades de tutoría se planificaron conjuntamente entre los tutores y la profesora, y se llevaron a cabo dentro de la disponibilidad de 12 horas semanales, mediante actividades presenciales y a distancia. **Resultados**: se atendió a 332 estudiantes en los cuatro períodos de tutoría. El programa de tutoría, en el que participaron tres cursos diferentes de Salud, permitió el intercambio de conocimientos más allá de las fronteras de la epidemiología. Los aspectos positivos consistieron en la oportunidad de que los monitores desarrollaran habilidades de trabajo en equipo, liderazgo, comunicación y enseñanza, y reforzaran sus conocimientos en la disciplina, mientras que el aspecto negativo fue que los estudiantes dejaban de estudiar la materia a lo largo del semestre para aprender el contenido solo durante las revisiones. El desafío identificado fue la inconsistencia entre el rendimiento de los estudiantes en la tutoría, que no siempre se reflejaba positivamente en las evaluaciones. **Conclusión**: la tutoría contribuyó a la formación académica de los alumnos al promover la educación interprofesional y el ejercicio del trabajo en equipo en el contexto sanitario, una habilidad esencial y compatible con la realidad multiprofesional del sistema público de salud.
Palabras clave: Enseñanza; Educación interprofesional; Epidemiología; Salud.

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INTRODUCTION

Higher education institutions are guided by the three pillars: Teaching, Research, and Outreach. Beyond these pillars, they constantly seek to expand their initiatives to help students develop the skills required by the organization of healthcare work[1]. One of the strategies adopted in higher education is the sharing of knowledge between students and faculty, making them equally responsible for the learning process and enabling academic development as citizens and professionals[2].

In this sense, mentoring encourages the development of student (mentor or tutor) skills related to teaching activities and immerses them in teaching practices, contributing to the development of other students[3]. Therefore, it provides pedagogical support for students seeking to clarify doubts, improve their understanding of course content, or recover knowledge[4]. The Brazilian National Curricular Guidelines (2014) include mentoring as one of the activities to be performed by medical students to utilize the knowledge acquired and practice health education, constituting an indicator of course quality[5].

Established in the educational environment, mentoring has become an active contributor to teaching and is adopted by universities to improve the quality of education and expand student skills, including teamwork. Resolution No. 7/2016 of a university in the interior of the state of Minas Gerais[6], which regulates mentoring on its campuses, highlights this activity as a valuable pedagogical resource for acquiring knowledge, skills, and attitudes. When listing the competencies promoted by mentoring, the resolution highlights "the exchange of knowledge among students" and the pursuit of "improving the quality of teaching and interdisciplinarity."

In the health field, mentoring becomes relevant because it can help improve teaching and the learning of various subjects of health interest, such as epidemiology. This topic is a common discipline in the syllabuses of health programs and is fundamental to understanding the health-disease process. Furthermore, the discipline of Epidemiology represents one of the pillars of the Unified Health System (*Sistema Único de Saúde* - SUS), as established by Law 8.080/90, which established the SUS[7]. The SUS's scope of action includes the implementation of epidemiological surveillance actions, and one of the principles of this health system is the use of epidemiology to establish priorities and allocate resource.

Monitoring also constitutes Interprofessional Education (IPE) in healthcare education, as it allows interaction between tutors and students from multiple courses in this field. IPE can be defined as a strategy that creates common spaces for diverse students and/or professionals to exchange experiences and learn from each other, thus working collectively in healthcare[8].

Despite the importance of academic monitoring in student education, publications on the subject are scarce and outdated, with most articles predating 2020. This indicates the need for research on monitoring activities. This study aims to describe the experience of monitoring in the Epidemiology discipline and identify the challenges and potential of the experience.

METHODS

This work is a descriptive, experience-based study. Two medical students at the Universidade Federal do Triângulo Mineiro (UFTM) participated in the experience as Epidemiology tutors for three health programs during the three academic terms beginning in June 2023 and ending in March 2025.

Initially, the selection process was opened for academic monitoring in the Epidemiology course, which is part of the 5th semester of Biomedicine, the 4th semester of Medicine, and the 3rd semester of Occupational Therapy in the UFTM curriculum. The course totals 45, 60, and 30 class hours, respectively, and is taught by a female faculty member.

The selection process consisted of three stages: transcript analysis, a theoretical exam, and an interview. During the first, third, and fourth academic terms, both tutors served as volunteers, while during the second semester, one tutor served as a scholarship holder and the other as a volunteer.

After approval, the course's monitoring activities were jointly planned by tutors and faculty. They were formalized through the Monitoring Work Plan and occurred within the 12-hour weekly schedule, as mandated by Law No. 9394/96 (Law of Guidelines and Bases for National Education)[9] and Resolution No. 7/2016 of the UFTM University Council (Mentoring Regulations)[6].

The monitoring was conducted through in-person activities and remotely via Google Meet for students who could not attend in person. A group on the WhatsApp messaging app was created to facilitate communication with students and scheduling activities.

The experience presents everything from the motivations to the tutors' final perceptions gained from interactions with students during activities and assessment performance, which supported and allowed us to define the mentoring's contributions to academic development.

RESULTS

Throughout their academic careers, students sought activities that would complement their skills, which were not met by regular education. However, the diversity of extracurricular activities raised doubts about which option best suited their needs. A personal moment, a social

event, or a recommendation from a colleague could be the motivating factors for choosing and participating in a particular activity.

The two students began their university careers in August 2021, when the COVID-19 pandemic was still underway. Concurrent with this social environment, the academic environment brought them exposure to the molecular and morphophysiological bases of diseases, with statistical indicators of pathologies frequently appearing. The students encountered the Epidemiology course, which involved converting sentences into terms: "new cases" became "incidence," "active cases" evolved into "prevalence," "deaths from the virus in the population" became "mortality," "deaths of patients" acquired the meaning of "lethality," "research for vaccine development" was, in fact, "randomized clinical trials." The teaching method was not limited to simply naming events, but encompassed the full impact that epidemiology has on understanding the dynamics of diseases and their application to controlling these health problems.

Some classmates demonstrated difficulty learning epidemiological concepts, such as the difference between cohort and case-control studies and calculating measures of association. Therefore, the two students saw an opportunity to combine their ease with the subject matter to help classmates who required extra attention.

Another factor that encouraged the demand for mentoring in Epidemiology was the dynamic approach employed by the professor, which consisted of theoretical and practical activities ranging from completing the Individual Notification Form in class to understand how mandatory notification works, to visits to agencies within the epidemiological surveillance network, such as the Uberaba Zoonosis Control Center and the Testing and Counseling Center (*Centro de Testagem e Aconselhamento* - CTA). Because this is a course taught in the initial semesters of the medical program, the teaching method provided students with some of their first practical experience.

The knowledge that the daily life of the SUS involves interacting not only with patients but also with professionals from various fields led students to seek out an undergraduate activity that implemented IPE, with the goal of interacting with different courses, learning more about them, and sharing experiences. The Epidemiology Monitoring program offered to three different health programs embodied the IPE activity the students were looking for, motivating and engaging them to repeat the monitoring experience. Therefore, the expected outcomes of the monitoring program were to reinforce knowledge of great relevance to health education, develop teaching skills, and practice IPE in the healthcare context.

After selecting two students, an initial contact, facilitated by representatives from each class, took place via WhatsApp groups, introducing the tutors and welcoming them. Initially, the students didn't interact much, but gradually, with the provision of guidance on the coursework and discussion of the topics most frequently covered in the exams, they began to participate more and more in the virtual groups.

Given the difficulty and poor performance of students on the exams, the professor and tutors decided it was important to conduct in-person review sessions so students could review the material and ask questions in person. Therefore, a meeting was scheduled for an in-person meeting to review the content and resolve any doubts. Students responded immediately, which the tutors interpreted as a welcome gesture or, perhaps, a need to improve a grade. From then on, the monitoring program was combined with in-person and virtual monitoring, and online streaming of the physical meetings was also offered via Google Meet for those unable to attend on the scheduled date.

The first in-person meeting was clearly a bit awkward for both tutors and students. Questions arose about the tutors' majors and semesters, as they were students from different programs and unfamiliar with each other. However, as the discussion of the epidemiology content progressed, a strong connection and interaction developed between tutors and students, which was crucial for attendance and participation in monitoring activities and for the tutors' engagement. The tutors experienced a role similar to that of a teacher, while the students received guidance from tutors from other programs, creating a new and distrustful atmosphere for both sides.

Quantitatively, 332 students were assisted during the four monitoring periods, with the majority from the Medicine class, and the fewest from the Biomedicine program, as shown in Table 1. The number of students assisted was approximately proportional to the number of students enrolled in the course, with no significant differences in attendance between programs.

Table 1. Number of students that attended Epidemiology monitoring sessions. Uberaba, Brazil, 2023-2025.

Undergraduate course	School semester			
	01/2023	02/2023	01/2024	02/2024
Biomedicine	15	15	16	16
Medicine	40	37	45	34
Occupational Therapy	26	32	23	33
TOTAL	81	84	84	83

Qualitatively, the enthusiasm and type of interaction were inconsistent. Biomedicine received minimal interest, with a maximum of three students participating in in-person monitoring sessions, little group discussion, and limited individual sessions. However, in the last monitoring period, an average of 95% of the class participated in in-person activities. In the case of Medicine, students answered many questions individually via WhatsApp but waived in-person mentoring.

The Occupational Therapy class, on the other hand, was extremely receptive and participative in all activities, both virtually and in-person, even requesting course content reviews in advance. To resolve these differences, constant dialogue was held with the representatives of each class to suggest improvements that could be made to improve the fluidity of the mentoring and student performance.

The tutors then attempted to create a more informal communication channel with the students than that normally established in the classroom to overcome potential inhibitions students may have with the professor. At the same time, there was an open dialogue between the tutors and the teacher regarding the insights gained from this communication, discussing what could be implemented to improve learning. To complete the interaction, students were free to discuss any questions about the course with the teacher or tutor, leaving it up to the student to choose the one closest and most available to meet their needs. There was no hierarchy in this relationship.

The positive aspects stemmed from the opportunity for tutors to develop their teamwork, leadership, communication, and teaching skills and to reinforce their knowledge of the subject, which will be invaluable in their personal, academic, and professional lives. For students, the opportunity to experience different perspectives on the same content was positive, first from the teacher in the classroom and then from the students during monitoring

activities. Due to the hierarchical proximity between students and tutors, students seemed to have greater freedom to express their opinions, requests, and questions.

One negative aspect identified was the tutors' perception that students neglected to study the material throughout the semester and focused solely on learning it during the review sessions during the week of each exam. It was noted that some students viewed monitoring as a convenience, an opportunity to neglect their study during classes, as there would be an in-person meeting to review the entire material in a more concise format before the exam.

The major challenge identified during the monitoring period was the inconsistency between student performance during monitoring sessions and subsequent assessments. During monitoring, many students demonstrated understanding of the subject matter by correctly answering the questions presented in the discussions. However, it was observed that some of them did not perform satisfactorily on the assessment and needed to take the final exam to improve their final grades. This demonstrates that despite the reinforcement of review with the tutors, it was not enough for everyone to achieve the minimum required score when the test was administered.

DISCUSSION

In the context of professional training in health, epidemiology is one of the core subjects of undergraduate programs. This field of knowledge is important because it monitors demographic and social changes to characterize diseases even before their etiological agents are determined[10].

A resource that can unite students who find a particular subject easy with those who struggle is mentoring, in which the tutor alleviates the professor's workload by actively participating in the teaching-learning process. In this process, taking advantage of the student-to-student connection, the tutor understands the students' needs and replicates the professor's teaching methods with the necessary adaptations and according to their level of knowledge to maximize the student's benefit[11].

Motivation is essential for student engagement in the proposed activity and for verifying, at the end of the activity, that the monitoring's contributions to their academic development and professional performance met their expectations.

Monitoring also had to adapt to the pandemic, carrying out practical or remote activities according to availability and need. Practical activities in the health field bring students closer to the needs of the community, broadening their understanding of the health-disease process and the organization and functioning of the health system[12]. Although in-person activities play

an irreplaceable role, as they encourage greater interaction, concentration, and understanding of the content, the COVID-19 pandemic has showed the relevance of remote learning during periods of social restriction[13]. In this context, digital technologies, such as instant messaging, emerge as pedagogical tools that facilitate access to information, enhance the multimedia environment, and streamline communication[14].

A study[8] identified similar challenges in interdisciplinary experiences with students from different health programs, highlighting communication and respect as fundamental elements for improving integration in IPE activities. In this sense, the monitoring program involving three health programs fostered the exchange of knowledge beyond epidemiology, allowing students to better understand the specific responsibilities of each health professional. This experience contributes significantly to the students' training, especially in working on multidisciplinary teams, enabling interaction and discussion with other professionals while still in undergraduate studies[15]. The exchange of knowledge provided by IPE was essential to reduce alienation and generate empathy among those involved, preparing students for a future collaborative work environment[16].

Teamwork and interdisciplinarity skills are widely discussed within Interprofessional Education. IPE take splace when students from different professions learn about and from each other, fostering a collaborative environment and better results[17].

In the monitoing program, teamwork stands out as one of the most practiced skills and is even a criterion for selecting tutors. During the program, tutors guide students through the content, receive their requests, and discuss strategies with faculty to optimize activities. Thus, the tutor plays an essential role as a link between students and faculty, developing, in addition to teamwork, other essential skills for professional life, such as responsibility and flexibility[18].

For mentoring to be effective, its dynamics must not be unilateral. It goes beyond a simple system of searching for answers, involving a convivial environment conducive to interaction among students, free from classroom pressure and with flexible time, fostering learning[19].

A study analyzed the experiences of students and professionals from different healthcare fields in hospital and outpatient settings and identified a lack of interaction between these groups. The study highlighted that achieving interprofessionalism remains a challenge, but one that can be overcome with the use of IPE[20]. This integration difficulty is not limited to undergraduate studies but also manifests itself in the workplace. Monitoring, in this sense, contributes to academic development by allowing tutors and students to enhance their interprofessional relationship skills from university onward.

In the healthcare field, IPE seeks to break with the traditional biomedical model, characterized by individualized care and poor coordination between professionals. By encouraging dialogue between different patient care providers, IPE promotes more qualified care in the public healthcare system[21].

Monitoring is a complement to teaching, a resource that enhances learning, but does not replace lectures taught by the professor. This aspect is important because some students stop paying attention in regular classes and only seek clarification during monitoring sessions[22], as was noticed in this experience report.

CONCLUSION

The four-semester monitoring experience in three health programs allowed students to practice interprofessional education and teamwork in the healthcare context, an essential skill compatible with the multidisciplinary reality of the public healthcare system. Other contributions observed with IPE in the monitoring format included the development of an introduction to teaching, thus fostering communication and interpersonal skills, and the reinforcement of epidemiology concepts and topics, essential for the training of students who will work in the health-disease continuum of patients.

The experience also contributed to the understanding of IPE as a tool for integrating different areas of healthcare and its importance within the academic environment for developing and practicing student skills.

The study's limitations include the fact that it was limited to the reports of two students who served as tutors and covered only three health programs. Future work suggests addressing the opinions of the tutored students and expanding the healthcare areas included in IPE activities.

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