



Research Article

Assessment of Quality of Educational Environment across Public and Private Medical Colleges based on Medical Students Perceptions

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Abstract: **Introduction:** Objective: To compare students' perceptions of the educational environment between public and private sector medical colleges. **Material & Method:** From December 2025 to March 2026, a cross-sectional study at two medical colleges of Punjab surveyed 424 MBBS students, equally split between public and private sectors and across first to fourth years. The 50-item DREEM questionnaire was administered under ethical approval with voluntary, confidential participation and supervised completion. Data were analyzed in SPSS v20 using Likert scoring with reverse coding for nine negative items. Mean scores were calculated for items, domains, and the total score. Scores ≥ 3.5 showed strengths, ≤ 2 flagged problems, and 2-3 indicated areas needing improvement. **Results:** Private Medical colleges obtained a slightly better overall mean score (113 ± 22) than public institutions (109 ± 25) among 424 respondents using the DREEM survey, indicating generally good attitudes in both. With the exception of Students' Academic Self-Perception, when public institutions outperformed private colleges (18 ± 5 vs. 16 ± 5), private medical colleges scored higher on the majority of subscales. In both categories, opinions of instruction, instructors, and environment were positive, with slightly higher ratings in private medical colleges. Both of the students' social self-perceptions were low, suggesting that they could do better. Poor memory confidence at private colleges and problems with stress support, boredom, and enjoyment outweighing stress in public medical colleges were among the main challenges. **Conclusion:** All areas of the educational environment in both public and private medical colleges have a great deal of room for development, but the low scores in the area of students' social self-perceptions require particular attention.

Keywords: Student perceptions, Dundee Ready Education Environment Measure, Public and Private Medical Colleges

INTRODUCTION

The Educational Environment is the overall atmosphere of an academic institution that either directly or indirectly influences students' learning experiences. The curriculum, instructional methodologies, quality of faculty interactions, institutional restrictions, availability of academic resources, and general learning environment are some of its interconnected components. All of these factors have an impact on students' learning and performance as well as how they perceive their education. While a bad learning environment may lead to stress, disengagement, and subpar academic performance, a positive one improves students' motivation, engagement, contentment, and academic

achievement [1]. Therefore, understanding and improving the educational environment is essential to ensuring high-quality education, particularly in challenging fields like medical education.

In educational research, structured assessment techniques are used to systematically measure how students perceive their learning environment. The Dundee Ready Education Environment Measure (DREEM) is among the most well-known tools. The 50 thoughtfully crafted items that make up the DREEM questionnaire evaluate several aspects of the learning environment, such as students' opinions of learning, instructors, academic self-perception, atmosphere, and social self-perception. Because each question is assessed,

researchers may provide a comprehensive quantitative assessment of students' perceptions of their learning environment. The instrument is especially appropriate for comparative research in medical education since it has undergone thorough validation and is regarded as dependable in a variety of institutional, cultural, and geographic contexts [2,3].

Since the DREEM questionnaire has previously been extensively used in Pakistani and foreign medical institutes, it was employed in this study without any alterations. The study, which involved one public and one private medical institution, was carried out at two medical universities. Assessing and contrasting student's opinions of their learning environments in these two contexts was the main goal. The study guarantees consistency and reliability in data collection by utilizing a standardized and proven tool like DREEM, enabling a significant comparison between the two groups [4].

Because both public and private medical colleges frequently differ in terms of facilities, instructional resources, class sizes, faculty availability, and learning opportunities, comparing them is very crucial. Students' academic experiences and satisfaction levels may be greatly impacted by these variations. The study attempts to determine the advantages and disadvantages of each institution's learning environment by examining student answers [5,6]. This entails identifying both areas that need development, such as student support systems, teaching quality, or institutional climate, and places where teaching techniques are beneficial [7].

In the end, the objective is to give administrators and designers of educational programs useful information. The findings may be utilized to create focused interventions and reforms meant to raise the standard of medical education. The study helps create an ideal learning environment that promotes successful learning, raises student happiness, and improves overall educational results for undergraduate medical students by identifying gaps and strengths in both public and private sector medical colleges.

Material & Methods

Between December 2025 and March 2026, cross-sectional research was carried out at two medical colleges of Punjab, one in the public sector and the other in the private sector. The study comprised 424 undergraduate medical students in total. To accommodate for any missing or incomplete data, an extra 10% was added to the sample size, which was

determined using an estimated 50% prevalence. The sample was split evenly between the two schools, with 212 individuals chosen from each college because each had an annual intake of 100 students. Students from the first, second, third, and fourth years of the MBBS program were further chosen at random and equally from each college; 53 students were chosen from each academic year.

The Dundee Ready Education Environment Measure (DREEM) questionnaire was used to gather data following ethical permission from the Ethical committee. Students were given a thorough description of the study's goals prior to data collection, and participation was entirely optional. To make sure that students understood the goal of the study, any questions or concerns were answered, with a focus on voluntary participation, confidentiality, and anonymity. To guarantee the highest response rate, a senior faculty member gave the questionnaire to the students at the conclusion of each lecture. Participants were told to do the questionnaire in 20 minutes and send it back right away. Students were instructed not to discuss their answers with one another while they were finishing in order reducing prejudice.

Using SPSS version 20, the gathered data was examined. The mean and standard deviation of each response were determined in order to apply descriptive statistics. In addition to the five domains, subscales, and total DREEM score, mean scores were calculated for individual items. The DREEM test has 50 items and a maximum score of 200, which stands for the perfect learning environment. A 5-point Likert scale, with 0 denoting "strongly disagree" and 4 denoting "strongly agree," is used to record responses. Nine of the questionnaire's items 4, 8, 9, 17, 25, 35, 39, 48, and 50 are negatively written, thus in order to assure appropriate interpretation, they are scored in reverse.

Interpretation of the results was based on mean item scores. Items with a mean score of 3.5 or above were considered strong positive aspects of the educational environment, indicating areas of strength. Items with a mean score of 2 or below were identified as problematic areas requiring immediate attention and improvement. Scores falling between 2 and 3 were interpreted as aspects that were neither clearly positive nor negative but represented potential areas for improvement and enhancement. This scoring system allowed the researchers to systematically evaluate students' perceptions and identify specific strengths and weaknesses in the educational environment of both medical colleges.

Results

Using the DREEM inventory, 424 student answers were gathered. Half of the 424 students were from public medical colleges, while the other half were from private medical colleges. For both private and public medical colleges, the total mean score with standard deviation was 113 ± 22 SD and 109 ± 25 SD, respectively, indicating more positive than negative results. The aggregate score of private colleges was somewhat higher than that of public colleges. With the exception of

Student's Academic Self-Perception, where public colleges scored 18 ± 5 and private colleges scored 16 ± 5 , private sector medical colleges performed higher on all DREEM subscales.

While identifying particular strengths and weaknesses within the learning environment, variations were seen in answers to individual items. The mean subscale score on the Student's Perceptions of Learning (SPL) was 27 ± 8 in the public sector medical college and 29 ± 6 in the private sector medical college, indicating a more favorable perception in both medical institutions. Both private and public medical colleges are making progress, as evidenced by the mean DREEM item-score on students' perceptions of course instructors being 25 ± 5 and 23 ± 7 , respectively. In private medical colleges, the mean subscale score on students' academic self-perceptions was 16 ± 5 , indicating many negative aspects that should be taken into consideration. In public medical colleges, on the other hand, the score was 18 ± 5 , indicating that students are feeling more positive. The mean DREEM item score on students' perceptions of the atmosphere was 27 ± 7 in private medical colleges and 26 ± 8 in public medical colleges, indicating a more optimistic outlook. The average DREEM item-score on students' social self-perceptions was 16 ± 5 in private medical colleges and 15 ± 4 in public medical colleges, which is not too awful. In DREEM subscale "Students' Academic Self-Perception", item no 27 "I am able to memories all I need" was scored less than 2 in private sector medical colleges which indicates problem area. While In DREEM sub-scale "Students' Perceptions of Atmosphere" item no 42 "The enjoyment outweighs the stress of the course" was scored less than 2 in public sector medical colleges and in DREEM subscale "Students' Social Self Perceptions" item no 3 "There is a good support system for students who get stressed" and item no 14 "I am rarely bored on this course" was scored less than 2 in public sector medical colleges which indicates problem areas and public sector medical college should take this into considerate.

Table 1: Guideline to interpret the DREEM scores

Score	Interpretations
0-50	Very Poor
51-100	Plenty of Problems
101-150	More positive than negative
151-200	Excellent
Subscales Interpretation	
Student's Perception of Learning	12-0 Very Poor
	24-13 Teaching is viewed negatively
	36-25 A more positive perception
	48-37 Teaching highly thought
Students' Perception of Course teachers	11-0 Abysmal
	22-12 In need of some retraining
	33-23 Moving in the right direction
	44-34 Model course teachers
Students' Academic Self Perceptions	8-0 Feelings of total failure
	16-9 Many negative aspects
	24-17 Feeling more on the positive side
	32-25 Confident
Students' Perception of Atmosphere	12-0 A terrible environment
	24-13 There are many issues which need changing
	36-25 A more positive attitude
	48-37 A good feeling overall
Students' Social Self Perceptions	7-0 Miserable
	14-8 Not a nice place
	21-15 Not too bad
	28-22 Very good socially

Table 2: Overall Mean Scores with Standard Deviation on Subscale

DREEM Subscale	Private Medical College		Public Medical College	
	Mean	SD	Mean	SD
Students Perception of Learning	29	6	27	8
Students Perception of Course teachers	25	5	23	7
Students' Academic Self-Perception	16	5	18	5

Students' Perceptions of Atmosphere	27	7	26	8
Students' Social Self Perceptions	16	5	15	4
Overall Mean & Standard Deviation Score	113	22	109	25

Table 3: Year-wise Mean Scores with Standard Deviation on Subscale

DREEM Subscale	Private College				Public College			
	Prof 1	Prof 2	Prof 3	Prof 4	Prof 1	Prof 2	Prof 3	Prof 4
	Mean	Mean	Mean	Mean	Mean	Mean	Mean	Mean
Students Perception of Learning	29.2	30.0	27.9	29.8	26.7	26.5	28.7	25.6
Students Perception of Course teachers	24.9	25.1	24.7	25.3	23.5	23.1	24.2	22.5
Students' Academic Self-Perception	15.5	16.2	17.3	14.7	20.5	21.0	19.1	21.1
Students' Perceptions of Atmosphere	27.0	27.6	25.6	27.8	26.3	26.0	28.0	24.9
Students' Social Self Perceptions	16.0	16.5	15.4	16.6	14.2	14.4	15.7	14.2

DISCUSSION

A top-notch educational setting in a medical school can help its students acquire the skills required for their chosen field [8,9]. DREEM is a useful technique that may be used in both undergraduate and graduate settings to assess an institution's learning environment objectively. As evidenced by the study conducted in India, it may also be utilized cross-sectionally to evaluate the educational environments of two institutions serving similar programs and student levels [10,11]. In our study the overall score mean was 113 ± 28 SD for private medical college and 109 ± 33 SD for public sector medical college, which means more positive than negative but was far from excellent [12]. A corresponding study undertaken in six medical colleges across Pakistan also found that their Overall mean score 105.0 ± 25.8 was more positive than negative [13]. The results are also favorably comparable to another study undertaken in public sector medical colleges of Punjab where a mean score of 115 was reported [14]. There is no clear cutoff of recommended DREEM score for an institution in literature but clearly higher is better and should be strived for. The DREEM score from the medical institutes relates favorably to the published studies from medical colleges of Pakistan. DREEM mean scores from our neighboring countries have been reported as 99.6 from Iran and 107.4 from Sri Lanka [15-17]. While the institutes with student centered programs from countries like United Kingdom have re-ported good perception of educational environment with scores of 139.

According to reports, the DREEM mean scores from our neighboring countries are 107.4 from Sri Lanka and 99.6 from Iran [15-17]. With scores of 139 [18], institutions with student-centered programs from nations like the UK have reported positive perceptions of the educational environment. Research indicates that in order for

students to effectively regulate their cognitive load, the burden of their studies must be adequately handled. To keep the students interested and involved during classes, a variety of teaching techniques may be used [19,20]. The stress associated with medical education may also be reduced by participating in extracurricular activities throughout the academic session. Improvements to these problems will improve medical institute learning environments.

CONCLUSION

All areas of the educational environment in both public and private medical colleges have a great deal of room for development, but the low scores in the area of students' social self-perceptions require particular attention.

Conflict of Interest: None

REFERENCES

1. Chellaiyan VG, Bhushan K, Maruthupandian J, Gupta S, Liaquathali F, Jenniferbritto J. Perception of the educational environment and its impact on the academic performance of medical school students: a cross-sectional study. *Maedica*. 2023 Mar;18(1):80.
2. Rehman R, Ghias K, Fatima SS, Hussain M, Alam F. Students' perception of educational environment at Aga Khan University Medical College, Karachi, Pakistan. *Pakistan journal of medical sciences*. 2016 May;32(3):720.
3. Chhatrivala MN, Patel DS, Shah HN, Madhu KH. Evaluating the Educational Environment in a Private Medical College Through Students' Eyes: Insights from the DREEM Scale. *SOUTH EASTERN EUROPEAN JOURNAL OF PUBLIC HEALTH*. 2024:876-80.

4. Nadeem A, Iqbal N, Yousaf A, Bin Daud MA, Younis A. STUDENTS' PERCEPTION OF EDUCATIONAL ENVIRONMENT AT ARMY MEDICAL COLLEGE, RAWALPINDI: ASSESSMENT BY DREEM (DUNDEE-READY EDUCATION ENVIRONMENT MEASURE). *Pakistan Armed Forces Medical Journal*. 2014 Jun 30;64(2).
5. Al Fryan LH, Shomo MI, Bani IA. Assessment of the 'students' perceptions of education using Dundee Ready Environment Educational Measure (DREEM) inventory at princess nourah bint Abdulrahman University, Saudi Arabia. *BMC medical education*. 2024 Aug 26;24(1):928.
6. Arzuman H, Al-Mahmood AK, Islam S, Afrin SF, Khan SA, Schofield SJ. Students perception of learning environment: A Base Line Study for identifying areas of concern at a Private Medical College, Bangladesh. *Bangladesh Journal of Medical Science*. 2016 Aug 10;15(2):234-42.
7. Akinpelu AO, Oyewole OO, Odunaiya N, Odole AC, Olley JP. Clinical students' perception of educational environment in a Nigerian university: a mixed method study. *BMC Medical Education*. 2024 Jul 4;24(1):725.
8. Lai NM, Nalliah S, Jutti RC, Hla YY, Lim VK. The educational environment and selfperceived clinical competence of senior medical students in a Malaysian medical school. *Education for Health*. 2009 Aug 1;22(2):148.
9. Anwar MS, Anwar I, Ghafoor T. Medical students' perceptions of educational environment in remote and urban area medical colleges. *Adv Health Prof Educ*. 2015;1(1):18-23.
10. Hongkan W, Arora R, Muenpa R, Chamnan P. Perception of educational environment among medical students in Thailand. *International journal of medical education*. 2018 Jan 26;9:18.
11. Khursheed I, Baig L. Students' perceptions of educational environment of a private medical school in Pakistan. *J Pak Med Assoc*. 2014 Nov 1;64(11):1244-9.
12. Mohsena M, Debsarma S, Haque M. Determining the quality of educational climate in a private medical college in Bangladesh via the 'dundee ready education environment measure' instrument. *Journal of Young Pharmacists*. 2016 Jul 1;8(3):266.
13. Stratulat SI, Candel OS, Tăbîrță A, Checheriță LE, Costan VV. The perception of the educational environment in multinational students from a dental medicine faculty in Romania. *European Journal of Dental Education*. 2020 May;24(2):193-8.
14. Maayah MF, Al-Jarrah MD, Yabroudi M, Abdel-aziem AA, Gaowgzeh RA, Neamatallah Z, Alfawaz SS. Students' perceptions of the educational environment of the applied medical sciences programs. *Adv Mech*. 2021;9(3):1154-69.
15. Aghamolaei T, Fazel I. Medical students' perceptions of the educational environment at an Iranian Medical Sciences University. *BMC medical education*. 2010 Nov 29;10(1):87.
16. Bakhshialiabad H, Bakhshi G, Hashemi Z, Bakhshi A, Abazari F. Improving students' learning environment by DREEM: an educational experiment in an Iranian medical sciences university (2011–2016). *BMC medical education*. 2019 Oct 29;19(1):397.
17. Lokuhetty MD, Warnakulasuriya SP, Perera RI, De Silva HT, Wijesinghe HD. Students' perception of the educational environment in a Medical Faculty with an innovative curriculum in Sri Lanka. *South-East Asian Journal of Medical Education*. 2010 Jun 30;4(1).
18. Dunne F, McAleer S, Roff S. Assessment of the undergraduate medical education environment in a large UK medical school. *Health Education Journal*. 2006 Jun;65(2):149-58.
19. Chan CY, Sum MY, Tan GM, Tor PC, Sim K. Adoption and correlates of the Dundee Ready Educational Environment Measure (DREEM) in the evaluation of undergraduate learning environments—a systematic review. *Medical teacher*. 2018 Dec 2;40(12):1240-7.
20. Shah C, Trivedi RS, Diwan J, Dixit R, Anand AK. Common stressors and coping of stress by medical students. *J Clin Diagn Res*. 2009 Aug;3(4):1621-6.