

LETTER TO EDITOR

Peer and Self-Assessment: Catalysts for Student-Centered Learning and Professional Growth in Medical Education

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Dear editor,

The dynamic environment of medical education demands continuous evolution in teaching and assessment strategies to ensure the development of competent, reflective, and professional practitioners. In this context, peer and self-assessment have emerged as powerful catalysts for student-centered learning and professional growth. Peer assessment is increasingly recognized for its practicality and value in medical education.

Benefits

Students often report that engaging in peer evaluation enhances self-awareness, critical thinking, and overall learning (1). Formative peer assessment, in particular, has been shown to promote student engagement, reflection, and deeper learning (2). The reliability and validity of peer assessment have been supported in systematic reviews, especially when multiple raters and structured assessment tools are employed (3). Peer assessment not only contributes to critical appraisal skills but also supports the development of professional behaviors (3). Finally, the role of medical students as peer tutors offers reciprocal benefits, enhancing knowledge, communication skills, and confidence for both tutors and tutees (4). When carefully planned and supervised, peer tutoring serves as a valuable complement to traditional teaching methods (4).

Challenges

However, concerns about the accuracy and objectivity of such assessments highlight the necessity for structured training and clear guidelines to maximize their educational benefit (1). Challenges such as inconsistent application, lack of training, and fairness concerns persist in formative peer assessment (2). These issues underscore the importance of integrating peer assessment with faculty guidance and ongoing support (2). The challenge of accurate self-assessment remains, as lower-performing students often overestimate their abilities—a phenomenon known as the Dunning-Kruger effect (5). This highlights the need for robust feedback systems to help students develop realistic self-perceptions. The transition to medical school is a critical period for

developing informed self-assessment skills. Students initially struggle with self-assessment accuracy but improve with experience, mentorship, and structured feedback (6). While self-assessment is often promoted as central to effective education, its impact is maximized when combined with regular, structured feedback from educators (7).

Professionalism Links

Professionalism is another domain closely linked to peer and self-assessment. Lower peer and self-assessment scores have been associated with increased professionalism lapses, suggesting that these tools can help identify students at risk and guide targeted professionalism training (8). Peer evaluations of group work are also positively correlated with academic achievement, particularly in later years, promoting collaboration and accountability (9).

In conclusion, the integration of peer and self-assessment into medical education curricula offers significant opportunities to enhance student-centered learning, foster professional growth, and support the development of critical appraisal and reflective skills. For curriculum design, this underscores the need to embed structured peer and self-assessment activities alongside robust feedback mechanisms and faculty oversight. Faculty development programs should focus on training educators to effectively guide and support these assessments, ensuring fairness, reliability, and educational effectiveness (10). By doing so, medical education can better prepare learners to become competent, self-aware, and professional practitioners, aligning with the ongoing advancement of educational practices.

Ethical Considerations

Ethical issues including plagiarism, informed consent, misconduct, data fabrication and/or falsification, double publication and/or submission, redundancy, etc. have been completely observed by the authors.

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