Library Progress International
Vol.44 No.3, Jul-Dec 2024: P.6011-6019

Print version ISSN 0970 1052
Online version ISSN 2320 317X

Original Article

Available online at www.bpasjournals.com

From Trust to Transformation: Empowering Graduates and Enhancing Skills through Trust-Based Education in Iraq (Building a Skilled Future)

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How to cite this article: Thamer Al Hilfi, (2024) From Trust to Transformation: Empowering Graduates and Enhancing Skills through Trust-Based Education in Iraq (Building a Skilled Future). *Library Progress International*, 44(3), 6011-6019.

Abstract

This paper explores the transformative potential of Trust-Based Education (TBE) in Iraqi health profession colleges, emphasizing its role in empowering graduates and enhancing their skills and practices. Unlike traditional Outcome-Based Education (OBE), which prioritizes measurable outcomes, TBE fosters a supportive and collaborative learning environment where mutual trust between students and educators is paramount. This relational approach mitigates student anxiety and burnout, particularly in high-pressure fields like healthcare, promoting resilience and well-being and focusing on critical competencies such as communication, ethical decision-making, and adaptability. TBE prepares students to meet academic standards and excel in clinical settings. Moreover, implementing self-assessment mechanisms within health profession colleges is crucial for ensuring the effective implementation of TBE. Through reflective practices, educators and students can evaluate their learning processes, identify areas for improvement, and adapt teaching methods accordingly. This continuous feedback loop not only enhances the learning experience but also reinforces a culture of accountability and growth, aligning educational practices with the core principles of TBE. The proper implementation of TBE is also closely linked to advancing Sustainable Development Goals (SDGs) 3 and 4 in Iraq. By fostering a well-educated healthcare workforce equipped with essential skills. TBE directly contributes to improved health outcomes (SDG 3) and promotes quality education (SDG 4). As health profession students learn to navigate complex healthcare challenges collaboratively, they are better prepared to contribute to sustainable health systems, ultimately driving the progress of these critical global objectives. Furthermore, integrating Interprofessional Education (IPE) and various learning theories enhances the efficacy of TBE, fostering teamwork and diverse perspectives essential for effective healthcare delivery. The paper advocates for a systematic shift from subject-based and outcome-based models to a holistic, trust-based framework that prioritizes competency development, mentorship, and student autonomy. By outlining key steps for implementing this model, including curriculum redesign and faculty training, the research underscores the potential of TBE to enrich the educational experience and improve healthcare outcomes in Iraq.

Introduction

Trust-Based Education is an educational model that emphasizes the development of mutual trust between students and educators, fostering a supportive learning environment where students are empowered to take ownership of their education. Unlike Outcome-Based Education (OBE), which focuses primarily on measurable learning outcomes and standardized assessments, trust-based education centers on the relational dynamics between students and instructors, encouraging collaboration, critical thinking, and self-directed learning. In this model, educators act as mentors, offering guidance and support, while trusting students to engage deeply with the material and develop their competencies[1,2]. The importance of trust-based education lies in its ability to reduce student anxiety and burnout, particularly in rigorous fields like health professions, by creating a nurturing and psychologically safe environment. In Iraq, where health profession students face significant academic pressure and external challenges, this model can help alleviate stress, promoting well-being and resilience. In comparison to OBE, trust-based education offers more flexibility, focusing on students' personal and professional growth rather than merely achieving preset outcomes. For future implementation in Iraqi health professions education,

this approach can enhance the learning experience by fostering critical thinking, ethical decision-making, and communication skills—key competencies in medical practice. Ultimately, trust-based education prepares students not only to meet academic benchmarks but to thrive in clinical settings, improving the overall quality of healthcare in Iraq. To support academic students facing stress and depression during final exams, particularly in health profession curricula, it's essential to transition from outcome-based education to more innovative, competency-based, and trust-based approaches. By focusing on developing core competencies through interactive and experiential learning, students can better manage stress, as this method builds confidence and reduces pressure. Trust-based education emphasizes supportive relationships between students and faculty, fostering a positive, stress-resilient environment. This holistic shift not only alleviates mental strain but also equips students with the skills they need to succeed in both exams and their future professional practice.[1,3,4,5]

The key difference between Trust-Based Education and Subject-Based Education lies in their focus and approach to learning. Trust-based education centers around the relationship between students and educators, with an emphasis on developing trust, autonomy, and responsibility. In this model, educators serve as mentors, guiding students through personalized, competency-based learning that allows for critical thinking, collaboration, and self-directed exploration. The focus is on building students' confidence and capabilities, encouraging them to apply knowledge in real-world contexts, particularly in fields like health professions where decision-making and interpersonal skills are crucial. Subject-based education, on the other hand, is traditionally focused on the content of specific subjects. The curriculum is organized around distinct academic disciplines, and learning is typically structured, with students expected to master predefined material in each subject area. The emphasis is more on acquiring knowledge and passing exams based on subject expertise rather than fostering broader skills like critical thinking or professional autonomy. The difference is that subject-based education prioritizes the mastery of content, whereas trust-based education focuses on building students' competencies and interpersonal skills through a supportive learning environment. In Iraqi health profession education, moving towards trust-based education could help students not only gain knowledge but also develop the critical competencies needed for successful practice in healthcare settings, such as communication, ethical reasoning, and adaptability, which subject-based approaches may not fully address.[3,4]

Interprofessional Education (IPE) and theories of learning play crucial roles in enhancing the outcomes of trust-based education, particularly in health professions. Interprofessional Education (IPE) involves collaborative learning experiences where students from different health disciplines (e.g., medicine, nursing, pharmacy, etc.) work together. IPE fosters teamwork, communication, and mutual respect, which aligns closely with the principles of trust-based education. By engaging in interprofessional learning, students build trust not only with their educators but also with their peers across various fields, creating a more cohesive, collaborative healthcare environment. This teamwork helps students to appreciate diverse perspectives, share responsibilities, and develop the competencies necessary for real-world healthcare settings. IPE reinforces trust-based education by encouraging shared learning experiences that cultivate trust, accountability, and cooperation in professional practice. Theories of Learning, such as constructivism, social learning theory, and self-directed learning, further support trust-based education outcomes. Constructivism suggests that learners build knowledge actively through experience and reflection, aligning with the trust-based approach where students take ownership of their learning journey. Social Learning Theory emphasizes the role of observation, modeling, and social interactions in learning. In trust-based education, this theory supports learning through collaboration, mentoring, and feedback, which deepens trust and enhances learning outcomes. Self-directed learning theory encourages students to set their own learning goals, explore resources, and assess their progress, all of which are essential to trust-based education as it empowers students to take responsibility for their education. In Iraqi health profession education, integrating IPE and these learning theories into trust-based education can significantly improve outcomes by fostering collaboration, enhancing critical thinking, and ensuring students are well-prepared for the complexities of healthcare. These approaches enable students to engage in meaningful, competency-based learning while building strong relationships with educators and peers, ultimately leading to better patient care and professional development[1,6,7.] In Iraq, designing and implementing a trust-based education model in colleges transitioning from subject-based and outcome-based education requires several key steps, including the following;

A need for a Cultural Shift in Educational Philosophy for Iraqi Health Profession learning

Move from the traditional lecturer-centered model to a mentorship approach. Educators must be trained to act as facilitators who guide, mentor, and foster autonomy rather than merely delivering content.

Focus on Competency and Growth through Shift from strictly measuring student achievement by test scores and subject mastery to evaluating competency development, critical thinking, and problem-solving. To ensure the curriculum emphasizes skills development, self-directed learning, collaboration, and real-world application, especially critical for health professions.

Design courses that incorporate interprofessional education (IPE), where students from different fields work together, fostering mutual trust and learning across disciplines. Moreover, move from standardized exams to more diverse forms of assessment, such as reflective journals, peer feedback, and competency-based evaluations that focus on individual progress rather than purely on outcomes.

Provide professional development for educators to understand the principles of trust-based education, including communication, emotional intelligence, and mentorship skills.

Implement ongoing coaching and support systems for educators to practice and refine the trust-based model. Allow students more control over their learning paths, encouraging them to take responsibility for setting learning goals, selecting resources, and evaluating their progress.

Design learning activities that encourage peer collaboration, fostering a community of trust where students support each other's learning.

Iraqi Institutions must commit to long-term change, including revising policies that govern student assessment, faculty evaluation, and the structure of courses.

Use constructive and formative feedback methods that focus on growth, resilience, and emotional well-being, rather than punitive measures tied to strict performance outcomes.[2,5,6,8,9]

Provide technology that supports self-paced, competency-based learning, such as online modules, simulation tools, and collaborative platforms.

Establish networks or mentorship programs that allow students to engage with peers, alumni, and professionals for support and guidance, building trust throughout the learning community.[1,10,11]

Establish feedback loops where students, faculty, and administrators can provide input on the effectiveness of the trust-based model.

Use qualitative and quantitative data to continuously refine the curriculum, teaching methods, and assessment approaches to better align with the trust-based philosophy. By addressing these requirements, Iraqi health profession colleges can transition from subject-based and outcome-based education to a more holistic, trust-based model. This transition will promote a deeper, competency-focused learning experience that fosters student well-being, professional development, and improved patient care outcomes.[1,2, 13,14]

Methods for Assessing Trust-Based Learning Curriculum

Formative Assessment

Self-Reflection and Journals: Encourage students to regularly reflect on their learning progress, experiences, and challenges. These reflections can help assess students' personal growth, critical thinking, and engagement with the curriculum. Peer Feedback and Collaborative Assessments: Use group projects or case studies where students provide constructive feedback to each other. This fosters a culture of mutual trust and collaboration, core components of a trust-based curriculum. Mentor Reviews and Feedback: Educators should act as mentors, providing ongoing, personalized feedback rather than solely relying on exams. Continuous feedback helps build trust and allows for a more tailored assessment of student progress.

Competency-Based Assessments

Objective Structured Clinical Examinations (OSCEs): For health professions, OSCEs can be adapted to assess not only clinical skills but also communication, teamwork, and decision-making—key competencies in trust-based learning. Simulations and Practical Scenarios: Use real-world simulations to assess how students apply knowledge in practice. These can test their ability to collaborate, problem-solve, and make ethical decisions in complex situations, reflecting the trust they've developed in their skills and peers. Portfolio Assessments: Have students create portfolios of their work, documenting their competencies, skills development, and reflective practices over time. Portfolios offer a holistic view of their progress.

Qualitative Feedback Mechanisms

Surveys and Interviews: Gather student and faculty feedback on how well the curriculum fosters trust, mentorship, and a supportive learning environment. Surveys or one-on-one interviews can provide insights into the relationships built through the learning process. Focus Groups: Conduct focus groups with students and faculty to discuss strengths and weaknesses in the curriculum. These sessions provide qualitative data on how well the

curriculum supports a trust-based learning environment.[10,11]

Peer and Group Assessments

Collaborative Learning Projects: Evaluate students not just individually, but on their ability to work in teams, collaborate across disciplines, and contribute to group efforts. This highlights interpersonal skills and trust-building. Peer Assessment: Allow students to assess each other's contributions in group projects or shared learning tasks. Peer feedback reflects trust in their ability to evaluate each other's efforts.

Emotional and Psychological Well-Being Assessments

Resilience and Well-being Scales: Use well-being questionnaires or resilience scales to assess how well the curriculum supports students' mental health and emotional resilience, which are key indicators of success in a trust-based environment. Stress and Burnout Indicators: Track stress levels, anxiety, and burnout through regular check-ins or surveys. A reduction in these metrics can indicate that the trust-based model is effectively supporting student well-being. [1,2,13,14]

Key Indicators for Assessing Trust-Based Learning Curriculum

Student Autonomy and Self-Directed Learning: The ability of students to set their own learning goals, seek out resources independently, and take ownership of their educational journey. Indicators: Increased self-directed learning initiatives, higher engagement in elective or exploratory projects, and student-initiated learning.

Growth in Interpersonal Skills and Collaboration: Improved communication, teamwork, and peer interaction, which reflect the relational aspect of trust-based education. Indicators: Positive peer feedback, successful group projects, and peer support in collaborative environments.

Competency Mastery: The curriculum should be measured by students' acquisition of essential competencies in their field, especially real-world application. Indicators: Successful completion of competency-based assessments like OSCEs, practical simulations, and clinical placements.[1,2,14]

Trust Between Students and Educators

Strong mentorship relationships and mutual respect between students and faculty, where feedback is constructive and non-punitive. Indicators: Student satisfaction with faculty interactions, positive feedback from mentorship evaluations, and reduced anxiety related to assessments.

Critical Thinking and Problem-Solving Abilities

Students' ability to analyze, synthesize, and apply knowledge in new or uncertain situations, is a key outcome of trust-based learning. Indicators: Performance in case studies, problem-based learning scenarios, and reflective assessments.

Emotional Well-being and Resilience

Students' mental and emotional health is a major focus of trust-based education, to reduce stress and promote well-being. Indicators: Lower levels of reported anxiety, stress, and burnout; higher levels of reported resilience and well-being; improvement in overall student satisfaction.

Long-term Professional Growth and Success

Graduates' readiness for professional practice and their ability to function in interdisciplinary teams and complex healthcare environments. Indicators: Successful integration into the workforce, positive feedback from employers on teamwork and decision-making skills, and continued professional development. By focusing on these methods and indicators, a curriculum designed around trust-based learning can be continuously evaluated and improved, ensuring that students not only achieve academic success but also grow into competent, confident, and emotionally resilient professionals.[1,2,12,14]

Challenges in Moving to Trust-Based Learning

Resistance to Change: Faculty Resistance: Instructors accustomed to traditional, subject-based teaching may resist shifting to a trust-based model, fearing the loss of control or questioning the value of giving students more autonomy.

Administrative Resistance: Institutions that have been built on subject-based education frameworks may be slow to adopt new models due to entrenched policies, systems, and standards.

Training and Faculty Development: Need for Faculty Training: Implementing trust-based education requires a significant shift in the teaching approach. Faculty members need training in mentorship, personalized feedback, and trust-building with students. Without proper training, educators may struggle to adapt.

Assessment and Evaluation

Trust-based learning focuses more on competencies, growth, and interpersonal development than on standardized knowledge tests. Designing reliable assessment tools that accurately capture these soft skills and growth can be challenging. Lack of Familiarity with Non-Traditional Assessments: Faculty may be unfamiliar with formative assessments, portfolio evaluations, or peer assessments that align with trust-based learning, making it difficult to shift away from traditional exams and grades.

Challenges and resistance can be overcome. Many students are used to passive learning and may initially struggle with self-directed learning and taking more responsibility for their education. Fear of Failure: Trust-based education encourages risk-taking and learning from mistakes, but students accustomed to high-stakes exams and rigid grading may find it difficult to adapt to an environment that values growth over performance.

Trust-based learning requires more time for personalized feedback, mentorship, and continuous assessment. This can place additional demands on faculty and require more institutional resources. Institutions may need to invest in new tools (e.g., learning platforms, peer mentoring programs, simulations) that support trust-based education.

To overcome resistance, involve faculty early in the design process. When teachers feel invested in the change and understand the benefits, they are more likely to embrace the new model.

Comprehensive faculty development is essential. This includes training in mentorship, trust-building, and innovative assessment methods.

Offering continuous support through workshops and peer mentoring for educators can ease the transition. Gradual Transition for Students: Introduce trust-based elements gradually to allow students to adjust. Encourage them to engage in self-directed learning projects, peer reviews, and reflective practices alongside traditional coursework until they gain confidence in the new system.

Trust-based education thrives on diverse assessment methods such as portfolios, peer evaluations, self-assessment, and mentor feedback. These methods focus on growth and competency rather than just content mastery.

While flexibility is important, students and faculty need clear guidelines on how competencies will be evaluated. Establish well-defined criteria for assessments that focus on both hard skills and interpersonal development.

Leadership plays a crucial role in supporting this shift. Institutions need to show commitment to trust-based education by providing resources, adjusting policies, and rewarding innovative teaching approaches.

Start by implementing pilot programs where trust-based learning can be tested in smaller cohorts or departments before expanding it institution-wide. This allows institutions to refine the approach based on real-time feedback.

Regularly gather feedback from students and faculty to assess how well the trust-based model is working. Use this feedback to make ongoing adjustments to the curriculum, assessments, and teaching strategies.

Trust-based learning promotes autonomy, critical thinking, and emotional resilience, preparing students for real-world challenges and professional success. For Faculty, by shifting from a content-delivery role to a mentorship role, staff will foster deeper connections with students and witness their personal and professional growth, leading to a more fulfilling teaching experience. For Institutions, A trust-based model enhances both student satisfaction and long-term learning outcomes, positioning our institutions as a leader in innovative, future-ready education.

By recognizing these challenges and drawing on successful implementations, Iraqi health Profession Colleges can design a strategy that effectively transitions from subject-based to trust-based education, benefiting all stakeholders in the process.[1,2,13,14]

Conclusions

Trust-based education fosters deeper engagement by focusing on the holistic development of students, emphasizing autonomy, collaboration, and competency rather than subject mastery alone. It nurtures not only academic knowledge but also critical thinking, emotional resilience, and interpersonal skills, which are essential for professional growth.

This model enables personalized learning, where educators function as mentors rather than mere content deliverers. By fostering a trusting relationship between students and educators, it builds a more supportive learning environment that encourages exploration, self-directed learning, and growth through constructive feedback.

Students who experience trust-based education tend to be more engaged, better equipped for real-world challenges, and experience less stress. This approach encourages students to take ownership of their education and prepares them for lifelong learning and professional practice.

Moving from subject-based and outcome-based education to trust-based learning presents challenges, including resistance to change, the need for extensive faculty training, and the development of new assessment strategies.

However, these challenges can be mitigated with proper planning, institutional support, and phased implementation.

Successfully implementing trust-based education requires a shift in educational philosophy, focusing on fostering autonomy, collaboration, and competency development. Though the transition from subject-based and outcome-based models presents challenges, a gradual and well-supported approach emphasizing faculty development, flexible assessments, and institutional commitment, can lead to more engaged, resilient, and professionally prepared students. By promoting a culture of trust, institutions can create a more fulfilling and empowering learning experience for both students and educators, leading to long-term success in professional practice and personal growth.

Students develop critical skills and confidence, becoming more resilient and well-prepared for their careers. Educators experience more meaningful interactions and mentorship roles, fostering long-term professional relationships. Institutions benefit from higher student satisfaction, improved educational outcomes, and a reputation for innovation in education.

Implementing trust-based education can significantly reduce student stress and depression, particularly during high-pressure periods like final unified evaluation exams, which are common in Iraqi colleges. This approach offers several psychological, educational, and social benefits that help students navigate the stress of exams while fostering a more supportive and empowering academic environment.

Reduction in Exam Pressure: Trust-based education shifts focus from high-stakes exams as the primary measure of success to continuous, formative assessments. This allows students to demonstrate their learning over time, reducing the pressure to perform perfectly on a single exam. As students take ownership of their learning and pace themselves, they gain confidence in their ability to succeed.

Allowing students to have a say in the learning process and assessment methods increases their sense of control, reducing feelings of helplessness and anxiety associated with final exams.

Trust-based education emphasizes the mastery of skills and competencies, rather than rote memorization of subject content. As students work toward building practical and critical thinking skills, they feel more prepared for exams, knowing they are assessed on their abilities rather than recalling isolated facts. This reduces the overwhelming burden of memorizing large amounts of content in a short time.

With a focus on learning and growth rather than a one-time performance, students perceive exams as opportunities for self-improvement rather than threatening high-stakes hurdles. This lessens the fear of failure, which is a major contributor to exam-related stress.

Students in a trust-based system receive regular feedback throughout their courses, helping them track their progress and make improvements before final exams. This continuous guidance and mentorship reduce uncertainty and build a stronger foundation of trust between students and educators, allowing students to feel more supported and less anxious.

Educators take on a mentor role, providing individualized support based on students' needs and learning styles. This fosters a nurturing environment where students feel comfortable discussing their challenges, including stress, and receive guidance to manage them effectively.

Trust-based education encourages collaborative learning environments where students work together, solve problems as teams, and support each other. This reduces feelings of isolation and increases emotional and academic support, which are crucial in managing stress during exams.

Team-based learning distributes responsibility across the group, making students feel less overwhelmed by the academic load. Group work can also reduce individual pressure, as students share the workload and benefit from each other's strengths.

Trust-based education incorporates emotional resilience and coping skills as part of the learning process. Students are better equipped to manage stress and anxiety by developing self-awareness and emotional intelligence throughout their education, not just during exam periods.

Trust-based education fosters a psychologically safe environment, where students are encouraged to take risks, make mistakes, and learn from them without the fear of being penalized. This reduces performance anxiety and promotes a growth mindset, which can significantly ease stress during exams.

Trust-based education reduces the emphasis on final, summative exams as the sole indicator of student success. With a stronger focus on formative assessments, continuous learning, and competency-based evaluations, students are less likely to feel overwhelmed by the pressure of a single, high-stakes exam.

Trust-based models assess the student, considering their professional skills, personal growth, and collaborative efforts, not just their exam performance. This alleviates the emotional burden tied to final exams and promotes a more balanced approach to student success.

SDG 4 emphasizes the importance of inclusive and equitable quality education, which is crucial for developing a skilled healthcare workforce. Implementing trust-based education can foster a more engaged and effective learning environment, leading to better-prepared health professionals who can address public health challenges. A well-educated workforce is vital for improving health outcomes (SDG 3), as health professionals with quality training are more likely to provide effective care, contribute to health promotion, and prevent disease.

Trust-based education focuses on creating an environment of mutual respect, collaboration, and open communication between educators and students. This approach encourages active participation and critical thinking, which are essential for medical and health-related training. By adopting the NBME approach, which emphasizes evidence-based assessment and continuous improvement in educational practices, health colleges can enhance the quality of education and align their curricula with international standards.

Implementing SDGs in Iraq requires addressing health disparities and ensuring access to quality healthcare. This can be achieved through education that emphasizes cultural competence, community engagement, and awareness of local health challenges, all of which can be integrated into a trust-based educational framework. Graduates who are well-versed in these areas will be better equipped to design and implement health interventions that are effective in their communities.

Trust-based education allows for the establishment of feedback mechanisms where students can voice their concerns and suggestions regarding the curriculum. This can lead to continuous improvements in the education system, ensuring it remains relevant to the needs of the health sector and aligned with the SDGs. Regular assessments, such as those provided by the NBME, can inform educators about the effectiveness of teaching methods and the preparedness of students to meet health challenges in Iraq.

Integrating trust-based education with SDG implementation can help align national health policies with educational outcomes. This alignment can facilitate a holistic approach to health promotion, disease prevention, and health system strengthening.

Improving the implementation of SDGs, particularly SDG 3 and SDG 4, through trust-based education in Iraqi health profession colleges can create a synergistic effect, fostering a well-trained healthcare workforce capable of addressing the country's health challenges while contributing to the global goals of sustainable development. Moreover, by integrating trust-based education in Iraqi colleges, students can experience a less stressful and more supportive educational journey. This model shifts the focus from high-stakes exams to continuous learning, feedback, and personal growth. It creates an environment where students feel empowered, supported by their peers, and confident in their ability to succeed, thus reducing stress and depression during final evaluations.

Through thoughtful implementation and the creation of supportive systems, Iraqi colleges can foster a win-win scenario where students excel academically while also developing the resilience and emotional intelligence necessary for both academic and professional success. There are limited direct publications specifically focusing on trust-based education in the EMR/MENA region.

However, some important insights from broader educational reform efforts in the region can inform the transition to trust-based education. For example, in MENA, educational reforms often emphasize fostering trust, community involvement, and improved service delivery.

Successful initiatives, such as those in local schools in Jordan and the West Bank, demonstrate that transparent, community-driven decision-making can significantly enhance educational outcomes, even in challenging contexts. This aligns with the core principles of trust-based education, which prioritizes collaboration, trust in the educator-student relationship, and a move away from purely outcome-based metrics.

To promote trust-based education in health professions, lessons from these successes suggest the importance of building institutional capacity, fostering motivation and engagement among educators and students, and involving local communities.

Implementing trust-based education in Iraq could benefit from these insights, as it could lead to enhanced student well-being, a more holistic learning environment, and reduced stress during high-stakes exams.

There is a significant linkage between improving the implementation of the Sustainable Development Goals (SDGs), particularly SDG 3 (Good Health and Well-Being) and SDG 4 (Quality Education), and the need for

implementing trust-based education in Iraqi health professional colleges using the National Board of Medical Examiners (NBME) approach.

Recommendations for Implementing Trust-Based Education in Iraqi Colleges, to:

Invest in comprehensive training programs for faculty to transition from traditional lecture-based teaching to mentorship. Focus on building skills in coaching, trust-building, and fostering student autonomy.

Encourage interdisciplinary collaboration and peer learning, where educators from different fields work together to support students in multifaceted problem-solving.

Develop curricula that emphasize core competencies and real-world applications, such as critical thinking, problem-solving, teamwork, and communication. Align these competencies with healthcare practice for health profession students.

Offer students opportunities to explore various subjects and projects, fostering ownership of their learning. Implement self-directed learning projects, case-based learning, and simulation-based training.

Use a mix of formative assessments and summative evaluations to assess both academic progress and soft skills. Emphasize ongoing, constructive feedback rather than focusing on high-stakes exams. Encourage a growth mindset where mistakes are seen as learning opportunities.

Give students the freedom to pursue independent projects, engage in peer learning, and contribute to course content. This builds their confidence and ability to think critically.

Develop online platforms, access to digital libraries, and tools that support personalized and independent learning, enabling students to learn at their own pace.

Encourage transparent communication between students and faculty.

Build a system where students feel safe to express their ideas, seek guidance, and provide feedback without fear of judgment or penalty.

Ensure that leadership supports the transition to trust-based education by revising policies, providing necessary resources, and demonstrating commitment to this new model of learning.

Create interprofessional learning opportunities where students from various disciplines collaborate to solve complex, real-world problems. These fosters trust between students and promote teamwork, a core aspect of trust-based learning.

Implement TBL as a core teaching method to encourage peer learning, where students rely on each other's expertise and build mutual trust through shared experiences.

Establish regular feedback mechanisms from both students and faculty to evaluate the effectiveness of trust-based education.

Adapt the curriculum based on real-time feedback and emerging educational trends. Track the long-term outcomes of trust-based education, including students' success in the workforce, personal development, and the improvement of critical thinking and emotional resilience.

Integrate strategies that focus on emotional well-being, such as peer support networks, mentorship programs, and stress-reduction workshops.

A nurturing environment is key to maintaining trust between students and educators.

Equip students with resilience and coping skills, preparing them for both academic and professional challenges.

Introduce pilot programs that incorporate trust-based principles alongside traditional final exams. For example, allow students to work on projects or simulations that are evaluated continuously, with final exams serving as just one component of their overall assessment.

Gradually, shift the emphasis from purely exam-based evaluations to include competency-based assessments, such as portfolios, presentations, and practical demonstrations of knowledge.

Provide training for faculty to transition from a traditional lecture-based role to that of a mentor and facilitator, focusing on emotional support, continuous feedback, and student engagement.

Encourage faculty-student partnerships in which educators work closely with students to identify sources of stress and collaboratively develop solutions to improve the learning and exam experience.

Incorporate stress management workshops and mental health counseling as part of the academic curriculum, especially during exam preparation periods.

Create support networks where students can openly discuss their challenges and develop coping strategies. Establish peer mentoring programs, where older students who have successfully navigated the trust-based system can provide guidance and emotional support to younger students.

Encourage team-based learning and peer evaluations to share the academic load and reduce the individual pressure associated with final exams.
Collaborative projects should count toward students' overall evaluations, reducing the weight of the final exam.
Implement group discussions and peer-review sessions as part of the exam preparation process, allowing students to support each other's learning while building trust and reducing feelings of isolation.
Use a mix of assessment tools, such as case-based learning, problem-solving exercises, and reflective portfolios, to allow students multiple avenues to demonstrate their competencies. This reduces the reliance on final exams as the only means of evaluating students' knowledge.
Allow students to reflect on their learning journey through self-assessments and portfolio presentations, providing them with opportunities to demonstrate personal growth in addition to academic achievement.

(Ethical clearance is unnecessary, the origin of the findings is self-collected, and There is no conflict of interest)

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