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The Current Situation of Developing Self-Study Skills in Social Sciences and Humanities Subjects Among Military Medical Students at Le Huu Trac University of Medicine and Pharmacy During the Learning Process

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Abstract— *Self-study skills play an important role in improving the effectiveness of learning social sciences and humanities subjects among military medical students, contributing to the formation of political steadfastness, moral qualities and the capacity to apply knowledge to practical work. Based on a survey of the current situation of self-study skill development among students at Le Huu Trac University of Medicine and Pharmacy, the study focuses on evaluating the main manifestations of self-study skills, including: the ability to identify learning objectives and content, select self-study methods, the level of self-discipline and initiative in learning and the ability to apply knowledge of social sciences and humanities subjects to practical learning and training. The research results show that students have initially formed some basic self-study skills; however, the level of development remains uneven, with particular limitations in the skills of applying knowledge to practice and self-assessing learning outcomes. On that basis, the article proposes several orientations aimed at contributing to improving the effectiveness of developing self-study skills for military medical students in the teaching process of social sciences and humanities subjects.*

Keywords— *Self-study skills; social sciences and humanities; military medical students; Le Huu Trac University of Medicine and Pharmacy.*

I. Introduction

In the training program at Le Huu Trac University of Medicine and Pharmacy, social sciences and humanities subjects play an important role in forming the scientific worldview, moral qualities and social cognitive capacity of students. However, due to the characteristics of student enrollment mainly from the natural sciences stream, many students still face difficulties in accessing and applying knowledge of these subjects.

Practice shows that effective learning of social sciences and humanities subjects requires students to have appropriate self-study skills, including the ability to identify objectives, select content and learning methods. Meanwhile, the self-study skills of a part of students are still limited, and their level of initiative and ability to self-assess learning outcomes remain low. Therefore, studying the current situation of developing self-study skills in social sciences and humanities subjects among students at Le Huu Trac University of Medicine and Pharmacy is necessary, in order to contribute to improving teaching effectiveness in the context of higher education reform.

II. Research Subjects and Methods

2.1. Research subjects

The research subjects of the study are the current situation of self-study skills in social sciences and humanities subjects during the learning process of military medical students at Le Huu Trac University of Medicine and Pharmacy.

2.2. Research methods

The study uses the following methods: document analysis, practical research, in-depth interviews, analysis and synthesis, and statistical data processing to clarify the current situation of self-study skills among military medical students.

III. Results and Discussion

2.1. The Current Situation of Self-Study Skills in Social Sciences and Humanities Subjects Among Students At Le Huu Trac University of Medicine and Pharmacy

The survey results show that the self-study skills in social sciences and humanities subjects of medical students vary across academic years. The level of implementation of basic self-study skills is summarized and presented in detail in Table 1.

The data in Table 1 show that the learning outcomes of medical students differ to a certain extent among academic years and between the two groups of subjects.

Specifically, for second-year students, the average score in medical specialized subjects reached 7.3 points, accounting for 51.1%, while the average score in social sciences and humanities subjects reached 7.0 points, accounting for 48.9%. The difference of 0.3 points indicates that from the early stage of the training process, students tend to focus more on specialized subjects, while the level of investment in self-study of social sciences and humanities subjects remains limited. This situation reflects that the self-study skills of second-year students are not yet truly stable, partly due to their incomplete

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adaptation to the requirements and learning methods at the level of medical higher education.

TABLE 1. Learning outcomes in specialized medical subjects and social sciences and humanities subjects of students by academic year

Academic year	Subject	Average score	Percentage (%)
Year 2 (119 students)	Medical specialized subjects	7,3	51,1
	Social sciences & humanities	7,0	48,9
Year 3 (304 students)	Medical specialized subjects	7,8	50,9
	Social sciences & humanities	7,5	49,1
Year 5 (93 students)	Medical specialized subjects	7,5	50,3
	Social sciences & humanities	7,4	49,7

For third-year students, learning outcomes in both groups of subjects show improvement. The average score in medical specialized subjects reached 7.8 points (50.9%), while social sciences and humanities subjects reached 7.5 points (49.1%). Although a difference of 0.3 points between the two groups of subjects still exists, this gap is not large, indicating that students' self-study skills have been enhanced. At this stage, students gradually form relatively stable learning methods and self-study skills, contributing to improved learning outcomes in both groups of subjects.

For fifth-year students, the average score in medical specialized subjects reached 7.5 points (50.3%), while social sciences and humanities subjects reached 7.4 points (49.7%). The difference between the two groups of subjects is only 0.1 point, lower than in previous academic years. However, the average score of social sciences and humanities subjects has not yet surpassed that of specialized subjects, indicating that although students' self-study skills have become relatively stable, due to the characteristics of the final stage of the training program with high intensity of specialized study and practice, the time and investment devoted to self-study of social sciences and humanities subjects remain limited.

Overall, the data in Table 1 show that the average scores of social sciences and humanities subjects in all academic years are lower than those of medical specialized subjects, with differences ranging from 0.1 to 0.3 points. Although the differences are not large, this trend clearly reflects the reality that students prioritize self-study of specialized subjects, while self-study skills for social sciences and humanities subjects have not received commensurate attention. This serves as an important practical basis for the requirement to implement appropriate measures to enhance the effectiveness of developing self-study skills for social sciences and humanities subjects in current medical education.

Proposed solutions: The differences in self-study skills among academic years and between groups of subjects indicate that teaching organization methods and learning orientation play a decisive role. Integrating guidance on self-study and self-research methods into the teaching of social sciences and humanities subjects contributes to enhancing students' initiative, especially in the early stage of the course. At the same time, learning content linked to the practical requirements of the military medical profession helps improve students' level of interest and the effectiveness of self-study. These adjustments contribute to limiting the tendency toward unbalanced learning and improving the quality of self-study in social sciences and humanities subjects.

The survey data show that the self-study skills in social sciences and humanities subjects of medical students still differ across academic years. The implementation of basic self-study skills is uneven, reflecting limitations in the process of forming and maintaining self-study skills, especially in the early academic years.

TABLE 2. Comparison of the level of implementation of selected self-study skills in social sciences and humanities subjects among medical students

Skill	Year 2	Year 3	Year 5
Preparing a study plan for each day, week, and month	22,1%	36,8%	41,1%
Reading materials in advance before learning new lessons in combination with listening to lectures and marking the materials	24%	38,6%	37,4%
Listening to lectures, taking notes, then reading materials to revise and adjust the notes	20,9%	57,4%	21,7%
Asking lecturers about unclear issues	26,4%	33,3%	40,3%

Table 2 shows that second-year students have a lower level of implementation of self-study skills in social sciences and humanities subjects compared with third-year and fifth-year students. In particular, the skill of study planning reaches only 22.1% among second-year students, while this rate among third-year and fifth-year students is 36.8% and 41.1%, respectively. Third-year students demonstrate advantages in organizational and lesson-processing skills, notably the skill of listening to lectures, taking notes, and revising notes (57.4%). The results reflect differences in the level of formation of self-study skills across academic years.

3.2. The Current Situation of the Level of Manifestation of Self-Study Skills in Social Sciences and Humanities Subjects Among Military Medical Students

The formation and development of self-study skills in social sciences and humanities subjects among military medical students are reflected through the level of study planning, organization of implementation, and self-monitoring and adjustment during the learning process.

Within the structure of self-study skills in social sciences and humanitie subjects among military medical students, self-study planning skills show a clear advantage (Mean = 2.39; SD = 0.33), reflecting that students have initially formed awareness of self-study objectives and orientation. However, the level of implementation of the plan reaches only a moderate level (Mean = 2.04; SD = 0.39), indicating that the organization and execution of self-study activities still lack consistency and stability. Notably, self-monitoring and adjustment skills show the lowest level of manifestation (Mean = 1.88; SD = 0.42), reflecting limitations in self-assessment and adjustment of learning activities. The disparity among the three skill groups

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indicates that the self-study skills of military medical students currently tend to focus on awareness and planning stages, while the skills that determine the effectiveness of self-study have not been developed proportionately.

TABLE 3. The current situation of the level of manifestation of groups of self-study skills among military medical students

No.	SKILLS	MEAN SCORE	STANDARD DEVIATION	LEVEL	GROUP MEAN
	Self-study planning skills				
1	Ability to identify and select learning problems	2,87	0,503	3	Skill Group 1 $\bar{X}$=2,39 $\overline{SD}$=0,33
2	Ability to develop and implement a self-study plan	2,75	0,531	3	
3	Abilityto maintain a self-study plan	1,58	0,471	1	
4	Ability to synthesize and systematize learned knowledge	2,36	0,527	3	
	Skills in implementing the plan				
5	Ability to read and take notes when reading materials	2,14	0,678	2	Skill Group 2 $\bar{X}$=2,04 $\overline{SD}$=0,39
6	Ability to select books and materials for reading	2,48	0,652	3	
7	Ability to use self-study tools and resources	2,21	0,751	2	
8	Ability to complete written assignments	2,19	0,735	2	
9	Ability to overcome difficulties in self-study	1,87	0,662	2	
10	Ability to apply theory to practice	1,31	0,640	1	
11	Ability to combine multiple self-study methods	2,08	0,635	2	
	Self-monitoring and adjustment skills				
12	Ability to exchange opinions during discussion sessions	1,94	0,593	2	Skill Group 3 $\bar{X}$=1,88 $\overline{SD}$=0,42
13	Ability to critically evaluate read materials	2,20	0,690	2	
14	Ability to draw experience from self-study	1,90	0,615	2	
15	Ability to self-check and self-evaluate self-study outcomes	1,34	0,649	1	
16	Ability to identify gaps in received information	2,02	0,646	2	

Self-study planning skill group: In the self-study planning skill group, military medical students reach a moderate level (Mean = 2.39; SD = 0.33). Notably, the skill of identifying and selecting learning problems records a high mean score (Mean = 2.87), reflecting a relatively clear ability to recognize learning requirements. In contrast, the skill of maintaining a self-study plan remains at a low level (Mean = 1.58), indicating that the organization and sustained implementation of self-study activities have not been truly effective, especially within the specific context of the military medical training environment.

TABLE 4. Level of manifestation of self-study planning skills among military medical students

No.	Skills	Mean score	Standard deviation	Level	Group mean
1	Ability to identify and select learning problems	2,87	0,503	3	Skill Group 1 $\bar{X}$=2,39 $\overline{SD}$=0,33
2	Ability to develop and implement a self-study plan	2,75	0,531	3	
3	Ability to maintain a self-study plan	1,58	0,471	1	
4	Ability to synthesize and systematize learned knowledge	2,36	0,527	3	

Self-monitoring and adjustment skill group:

In self-study activities, skills in implementing the plan play a key role, determining the effectiveness of transforming plans into learning outcomes. The level of implementation of these skills in learning social sciences and humanities subjects among medical students is reflected in the following data.

TABLE 5. Level of manifestation of self-monitoring and evaluation skills in self-study among military medical students

No.	Skills	Mean score	Standard deviation	Level	Group mean
1	Ability to exchange opinions during discussion sessions	1,94	0,593	2	Skill Group 3 $\bar{X}$=1,88 $\overline{SD}$=0,42
2	Ability to critically evaluate read materials	2,20	0,690	2	
3	Ability to draw experience from self-study	1,90	0,615	2	
4	Ability to self-check and self-evaluate self-study outcomes	1,34	0,649	1	
5	Ability to identify gaps in received information	2,02	0,646	2	

The data in Table 5 indicate that self-monitoring and evaluation skills in self-study among military medical students are manifested at a low-to-moderate level. Within this skill group, students perform relatively well in critically evaluating read materials and identifying gaps in received information, with mean scores ranging from 1.90 to 2.20. In contrast, the skill of self-checking and self-evaluating self-study outcomes records the lowest mean score (Mean = 1.34), indicating that students have not yet clearly formed the habit of reviewing and comparing their learning achievements against learning objectives. This reality shows that the self-study process remains focused mainly on information acquisition and processing, while the stages of evaluation and completion of learning outcomes have not received commensurate attention.

Proposed solutions: It is necessary to strengthen guidance and training in maintaining self-study plans and in self-monitoring and evaluation skills in order to overcome limitations in skills with low levels of manifestation, particularly the skill of self-evaluating learning outcomes. At the same time, the organization of teaching social sciences and humanities subjects should be innovated toward linking self-study tasks with requirements for application and feedback, thereby enhancing the effectiveness of implementing students' self-study plans. Creating conditions for military medical students to form habits of reflection and adjustment in self-study activities will contribute to the comprehensive and sustainable development of self-study skills.

3.3. Current Status of Objective Factors Affecting the Development of Self-Study Skills in Social Sciences and Humanities among Military Medical Students at Le Huu Trac University of Medicine and Pharmacy

a) Factors Related to Lecturers:

The group of objective factors originating from the training environment and the organization of teaching activities at the university has a direct impact on the formation of self-study skills in social sciences and humanities among medical students. The survey results indicate that these factors exert a moderate to fairly strong influence, thereby confirming the important role of training conditions in the development of self-learning capacity.

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The findings also show that factors related to lecturers have a moderate to fairly high level of influence on the development of students' self-study skills ($\bar{X}$ = 2.54). Among these factors, teaching methods and lecturers' responsibility are rated higher than factors related to learning materials, study time, and learning facilities.

TABLE 6. Level of Influence of Objective Factors Related to Lecturers on Students' Self-Study Skills

No.	Factors (Objective)	Mean Score	Standard Deviation	Level	Group Mean
1	Teaching methods	2,91	0.798	3	$\bar{X}$=2,54
2	Military medical training objectives	2,72	0.547	3	
3	Supporting facilities and equipment	2,52	0.612	3	
4	Learning materials	2,35	0.831	2	
5	Study time	2,3	0.865	2	
6	Study time	2,21	0.904	2	
7	Learning atmosphere	2,83	0.886	3	

These findings indicate that innovating teaching methods toward self-study orientation, problem-posing approaches, and enhanced practical relevance plays a crucial role in promoting learning autonomy among military medical students.

b) Factors Related to Educational Management Staff

According to the assessments of educational management staff, factors related to training management exert a relatively clear influence on students' self-study skills ($\bar{X}$ = 2.51). The organization of learning activities, allocation of study time, and the development of a supportive learning environment play a direct supporting role in students' self-study activities.

TABLE 7. Level of influence of objective factors related to educational management staff

No.	Factors *(Objective)*	Mean Score	Standard Deviation	Level	Group Mean
1	Teaching methods	2,46	0.812	3	$\bar{X}$=2,51
2	Military medical training objectives	2,52	0.746	3	
3	Supporting facilities and conditions	2,41	0.835	3	
4	Learning materials	2,38	0.861	3	
5	Study time	2,34	0.889	2	
6	Learning atmosphere	2,71	0.603	3	
7	Responsibility CBQL	2,76	0.587	3	

The survey data indicate that objective factors related to educational management staff have a fairly clear influence on the self-study skills of military medical students in social sciences and humanities courses ($\bar{X}$ = 2.51). Among these factors, the responsibility of management staff and the learning atmosphere exert the strongest impact, with mean scores of $\bar{X}$ = 2.76 and $\bar{X}$ = 2.71, respectively. This finding highlights the important role of management, organizational practices, and the creation of an appropriate learning environment in promoting students' initiative and effectiveness in self-study.

c) Factors Related to Training Objectives

The survey results from students indicate that military medical training objectives exert the strongest influence on self-study skills ($\bar{X}$ = 2.85). A clear awareness of training objectives helps students correctly identify the role of social sciences and humanities courses in the process of forming professional qualities and competencies.

TABLE 8. Level of influence of objective factors based on students' assessments

No.	Factors *(Objective)*	Mean Score	Standard Deviation	Level	Group Mean
1	Teaching methods	2,47	0.822	3	$\bar{X}$=2,49
2	Military medical training objectives	2,85	0.533	3	
3	Supporting facilities and conditions	2,81	0.59	3	
4	Learning materials	2,43	0.852	3	
5	Study time	2,25	0.846	2	
6	Learning atmosphere	2,17	0.892	2	
7	Responsibility CBQL	2,43	0.91	3	

Overall, objective factors influencing the self-study skills of military medical students are assessed at a moderately high level ($\bar{X}$ = 2.49), with training objectives showing the strongest influence ($\bar{X}$ = 2.85). These findings indicate that when students clearly understand training objectives, their motivation and effectiveness in self-study of social sciences and humanities courses are enhanced. Conversely, factors such as study time and learning atmosphere have lower levels of influence, reflecting certain limitations in current learning conditions.

d) Learning Environment Factors

The learning environment, particularly study time and learning atmosphere, is also assessed by students as having a significant influence on self-study skills. Given the specific characteristics of medical education, the large volume of knowledge makes it difficult for students to allocate sufficient and appropriate time for self-study of social sciences and humanities courses.

These results suggest that improving learning conditions and the learning environment constitutes an important basis for enhancing the effectiveness of self-study skill development among military medical students at Le Huu Trac University of Medicine and Pharmacy.

Proposed Solutions: Strengthening self-study orientation in the teaching of social sciences and humanities courses, with an emphasis on inquiry-based methods and practical relevance, is necessary to address limitations in students' application of knowledge. The role of training management should be enhanced in organizing study time, fostering a positive learning atmosphere, and supporting learning conditions, thereby creating a favorable foundation for self-study activities.

Clarifying military medical training objectives throughout the entire training process will help orient students' motivation, enhance awareness, and strengthen their responsibility for self-study.

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3.4. Current Situation of Subjective Factors Affecting Self-Study Skills in Social Sciences and Humanities among Military Medical Students

In the process of training military medical students, factors originating from the learners themselves play an important role in the formation and development of self-study skills in social sciences and humanities. An analysis of subjective factors helps clarify students' levels of autonomy, motivation, and self-regulation in learning activities.

TABLE 9. Level of influence of subjective factors on self-study skills in social sciences and humanities among military medical students

No.	Factors (Subjective)	Mean Score	Standard Deviation	Level	Group Mean
1	Self-study content	2,80	0.723	3	$\bar{X}$=2,39
2	Self-discipline in self-study	2,81	0.59	3	
3	Willingness to overcome difficulties	2,55	0.845	3	
4	Self-study methods	1,60	0.789	1	
5	Self-study experience	2,22	0.853	2	
6	Self-study motivation	2,04	0.892	2	
7	Teaching content	2,61	0.657	3	

The subjective factors affecting the self-study skills of military medical students are assessed at a moderate level ($\bar{X}$ = 2.39). Among these factors, self-discipline in self-study ($\bar{X}$ = 2.81) and self-study content ($\bar{X}$ = 2.80) are the most prominent, reflecting the decisive role of learners' awareness and learning attitudes. Willingness to overcome difficulties and teaching content are also rated at a fairly high level, indicating that students make certain efforts within the specific context of military medical training. In contrast, self-study methods have the lowest mean score ($\bar{X}$ = 1.60), revealing clear limitations in skills and approaches to organizing self-study activities, which directly affect the effectiveness of developing self-study skills in social sciences and humanities.

Proposed Solutions: The current situation shows that subjective factors influencing the self-study skills of military medical students are at a moderate level. While self-discipline and awareness of self-study content are evaluated relatively positively, self-study methods remain a clear limitation. This finding highlights the need to place greater emphasis on the formation and improvement of self-study methods for students during the learning process of social sciences and humanities. At the same time, creating conditions for students to accumulate self-study experience and strengthen their willingness to overcome difficulties will contribute to improving the effectiveness of self-study skill development.

Discussion of Research Findings:

First, the research findings indicate that the self-study skills in social sciences and humanities of military medical students at Le Huu Trac University of Medicine and Pharmacy have been formed to a certain extent during the learning process. Students generally demonstrate a relatively clear awareness of the role of self-study in acquiring knowledge, broadening understanding, and improving their individual learning competence. This is reflected in their level of self-discipline in learning as well as their noticeable attention to the content of self-study in social sciences and humanities. These findings reflect the positive impact of the military training environment, which emphasizes high standards of discipline, responsibility, and compliance with study plans, thereby contributing to the development of a serious learning attitude among students.

However, the level of development of self-study skills has not yet been fully commensurate with the requirements of higher education in general and military medical education in particular. The gap between students' awareness of the role of self-study and their ability to effectively implement self-study activities remains quite evident. Particularly in social sciences and humanities, students' self-study activities have not yet achieved the necessary depth and have not truly become a proactive, self-regulated, and long-term oriented learning process. This reality indicates that the formation of self-study awareness is only a necessary condition, while the capacity to organize and carry out effective self-study remains an issue requiring further attention.

Second, the components of self-study skills show uneven development across different skill groups. Skills related to orientation—such as identifying learning objectives, recognizing the content to be self-studied, and preparing for learning activities—are evaluated more highly than skills related to organizing and regulating the learning process. This suggests that students have initially established self-study goals and content; however, they still face considerable difficulties in implementing subsequent steps of the self-study process in a scientific and effective manner.

Limitations in accumulating self-study experience and in self-assessing learning outcomes reflect the fact that students' self-study activities remain largely focused on receiving and memorizing knowledge, with insufficient attention paid to reflection, self-monitoring, and adjustment of the learning process. The lack of self-assessment skills makes it difficult for students to identify their actual level of achievement, thereby limiting their ability to improve and enhance learning effectiveness in subsequent stages. This situation indicates that students' self-study skills have not yet developed in a sustainable and comprehensive manner and have not fully met the requirements of contemporary higher education, especially in the context of a strong shift toward competency-based education.

Third, self-study methods are identified as the most prominent limitation in the development of self-study skills in social sciences and humanities among military medical students. Deficiencies in planning self-study activities, selecting appropriate learning materials, systematizing knowledge, and conducting self-testing and evaluation directly affect the effectiveness of self-study. Many students have not yet developed well-structured study habits and still rely heavily on immediate course requirements, resulting in self-study activities that are passive and lack continuity.

In the context of medical training programs characterized by a large volume of knowledge, high learning intensity, and significant time pressure, these limitations in self-study methods become even more apparent. Students often have to

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prioritize time for specialized subjects, while self-study in social sciences and humanities is not organized in a rational manner. This explains why, despite the important role of social sciences and humanities in shaping political awareness, ethical qualities, and social thinking capacity of military physicians, students' investment in self-study activities for these subjects remains inadequate.

Fourth, students' willingness to overcome difficulties and their learning motivation are evaluated at a fairly high level, reflecting their effort and adaptability within the military training environment. These are favorable factors that provide an important foundation for the formation and development of self-study skills during the learning process. Military medical students generally demonstrate perseverance, good compliance with learning and training requirements, and readiness to make efforts to complete assigned academic tasks.

However, when willpower and learning motivation are not closely integrated with scientific self-study methods and self-regulation skills, self-study activities are unlikely to achieve depth and sustainability. Learning motivation that is limited to fulfilling course requirements or addressing immediate tasks is insufficient to encourage students to proactively explore, expand, and creatively apply knowledge. This reality indicates that fostering students' motivation and willpower must be organically linked with the development of self-study methods and skills, particularly in social sciences and humanities within the context of military medical education.

In summary, the discussion of research findings shows that self-study skills in social sciences and humanities among military medical students have been formed but have not yet developed in a comprehensive and synchronized manner. The main limitations lie in self-study methods and organizational skills, while awareness, motivation, and willpower have a relatively solid foundation. The lack of coherence among the components of self-study skills is a key factor limiting the effectiveness of self-study in students' actual learning practices. This provides an important scientific basis for further research and for proposing appropriate solutions to enhance the development of self-study skills among military medical students in the teaching of social sciences and humanities.

IV. Conclusion

The study has clarified the current status of the development of self-study skills in social sciences and humanities subjects among military medical students at Le Huu Trac University of Medicine and Pharmacy. The results indicate that students' self-study skills have been formed to a certain extent, with self-study planning skills being more clearly demonstrated than skills related to implementation and self-monitoring and adjustment. However, the skills that play a decisive role in the effectiveness of self-study, particularly the application of knowledge to practice and self-assessment of learning outcomes, remain limited.

This situation is simultaneously influenced by subjective factors originating from students themselves and objective factors related to lecturers, training management, and the learning environment. The research findings provide an important practical basis for proposing appropriate solutions to enhance the effectiveness of developing self-study skills in social sciences and humanities subjects for military medical students in the current context.

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