

Learning and Teaching in Ophthalmic Medical Education: Need for Change

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Learning and Teaching is evolving in the present age of improved technology. Therefore, medical education in our environment must keep pace with the present-day advances.

The learners are also changing to becoming the millennial students, hence the need to review old traditional way of teaching. Curriculum development and review need to consider these changes for it to be beneficial to the learners. It is not uncommon to find sleepy, bored and distracted students in a medical education class where the teacher delivers the usual repetitive long lectures! Whole class teaching has been reported to be associated with poor attention span of students [1]. It is therefore imperative for medical colleges to review their teaching methods to meet learners demands in the current dispensation.

I hope to briefly look at how the traditional way of teaching compares to the proposed new method and suggest the way forward.

Traditional objectivist teaching

The traditional objectivist way of teaching view learners as blank slates. Teachers as the sole custodians of knowledge need to transfer knowledge to passive learners usually as whole class didactic teaching. The teacher is the 'sage on the stage' who is knowledgeable and has a final say. The passive learners without question must take in the knowledge and be ready to regurgitate at some examination. Memorisation and regurgitation of content is no longer fashionable if the student cannot apply knowledge [2]. The assessment is usually summative at the end of the course. It is judgemental, either pass or fail with no significant feedback.

Modern constructivist teaching

The learners can construct their knowledge if allowed to do so. They are not blank slates. The learners can air their views in a social environment where learners learn from themselves. The teacher should be a 'guide by the side'. Learners can question the teacher. Case based discussions, project-based learning and questions that allow the learner to construct knowledge is given. Didactics whole class teaching is minimised. Assessment is formative with timely feedback. The feedback is constructive, individualised with suggested ways of improvement [3].

Multiple intelligence and learning styles

Gardner [4] in his work found that learners are unique in their own way. They learn differently due to their different specific gifts and intelligence. The subject of the VARK learning styles of learners should be considered by teachers before teaching. While some are visual learners (V) utilizing graphics and flow charts, some are auditory learners (A) who learn from listening and discussing in groups and social media chats. Readers (R) prefer to study alone by reading texts, essays, and blogs. Kinaesthetic (K) learners prefer practical classes. They learn by doing [5]. Medical students learn differently utilizing multiple learning modalities [6]. It is therefore obvious that the traditional way of teaching needs to be modified.

The way forward

Medical Education teachers need to change their orientation about teaching and learning. The first step is accepting to change and seek further training on modern teaching methods. Teachers often show resistance to change [7,8]. Furthermore, teachers should step down from being the 'sage on the stage', allow the learners to air their views, learn from themselves and construct knowledge [9].

The learners should contribute to their learning [10]. The millennial learners are not ready to learn the traditional way in this digital age. They are the digitalised students in constant touch with mobile phones, pads and the social media. The teachers should then teach learners the way they want to be taught. In a study, about 65% of the millennial learners learn outside the formal classroom [11]. The teachers need to develop new ways of teaching.

Teaching methods should take into consideration the learning styles of the learners [12]. Assessment should be more of formative, non-judgemental with timely constructive feedback [13]. The use of media discussion platforms such as WhatsApp, Edmodo and other established teaching platforms should be explored to improve contact time with the learners.

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