

Could Lectures Be Stimulating? An Approach To Encourage Active Learning.

Bakoush O¹ and Benamer HTS²

¹ Department of Nephrology, Clinical Sciences, Lund University, Sweden

² Department of Neurology, New Cross hospital, Wolverhampton, UK

Medical education is the cornerstone of building an effective health care system. Newly qualified doctors have to be equipped with knowledge, skills and attitudes to face the challenges of treating patients. Therefore the majority of medical schools in Western countries adopted, to varying degrees, the Problem Based Learning (PBL) approach. However the PBL is an expensive approach as it is based on small group teaching with a maximum of 8-10 students per group. This makes it difficult to apply in countries like Libya where the medical schools enrol larger numbers of students, often without appropriate resources. Hence the majority of the teaching is based on didactic lectures.

Although the majority of teachers are doing a good job, students usually find the lectures of limited benefit. This leads students to memorize facts simply to pass exams, only to forget them soon after. The whole process lacks stimulus and challenge to students. However, highly motivated students tend to create their own PBL environment! They skip lectures and organize themselves in groups of two or three to discuss course material. They try to understand the subject, learn from each other, and review previous exam papers. Although this can be a useful stimulating teaching environment, it lacks proper guidance and less capable students find it difficult.

It seems unlikely that Libyan medical schools will be able to adopt PBL in the near future. Traditional lectures to large groups of students will continue to be the main method of teaching. However, the general approach should change from teacher-centred to student-centred. Hence the most pressing question remains: could lectures be stimulating to students, and could they encourage thinking rather than memorizing? In other words: could the students be active rather than passive learners during the traditional lectures? The answer is definitely yes!

There are many practical methods that could be adapted to make this change. The students could receive in advance the course material and outlines of planned lectures. This could include several problem based scenarios (problem-centred method). The students should be advised to arrange themselves in groups to discuss main scenarios before class. During the lecture, the teacher should lead the discussion of the main focus to illustrate the most important message of the lecture.

Other scenarios could be discussed by students in their arranged groups at coffee time, home, or in tutorials led by teaching assistants (senior students and newly qualified physicians), to encourage self directed learning. Also, posing multiple choice questions during lectures and

asking students to answer by electronic voting is another method to engage students during a large group session leading to a stimulating environment. It is essential to end the lecture by a clear "take home message" and indicate to students other sources that they could seek for further learning.

Continuous feedback is crucial in building the learners' and teachers' knowledge, identifying weaknesses and gaining confidence. This leads to a regular interaction between the teachers and students which is essential in forming a healthy relationship. Some teachers do not appreciate that feedback is a two-way process. It is probably more important for the teachers to seek feedback from their students by asking them to fill in an evaluation form to rate the different components of the lecture. This vital part of the teaching process has been completely ignored in the Libyan medical education system. Using e-mail and electronic discussion forums are easy and affordable ways to encourage the appropriate interaction, too. Again teaching assistants should have an essential role in engaging the students in these activities.

The senior academics in Libyan medical education need to take the lead in changing the current teaching culture by introducing a more active learning approach. Also, they should learn how to be more creative in methods of delivering lectures to help create an interactive and stimulating environment. This would hopefully raise the teaching standard and lead to produce better quality physicians who can critically discuss, assimilate, deliver, and improve the standard of health care in Libya. Adopting this active learning approach may initiate the driving force to establish PBL systems in the Libyan medical schools. These steps are vital to move forward the medical education in Libya, leading ultimately to improving the overall health care system.

Finally, it is important for all the teachers to remember what the famous Canadian born physician William Osler once said "It goes without saying that no man can teach successfully who is not at the same time a student."

Further reading

1. McKeachie WJ and Svinick M. McKeachie's Teaching tips (12th Ed). Houghton Mifflin Company, Boston, USA. 2002
2. Kugel P. How professors develop as teachers. *Studies in Higher Education*. 1993; 18:315-328
3. Hoban G, & Hastings G. Developing Different Forms of Student Feedback to Promote Teacher Reflection: A 10-Year Collaboration. *Teaching & Teacher Education*; 2006; 22 (8):1006-1019

More are listed on the ljm website; www.ljm.org.ly