

## Editorial

# Teaching the cat to learn!

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Editor, JMCJMS

I was attending a session by a respected Nepalese medical educator who is fond of telling health educators the following story. A teacher was once gifted a cat. He told an assembled group of teachers that within a month he will teach the cat to speak. Everyone was waiting with bated breath for the day when the teacher would get back with the 'talking cat'. After a month on the appointed day the teacher was back with the cat. The audience waited with bated breath for the cat to speak. The cat started meowing loudly. The assembled audience berated the teacher for misleading them. The teacher told the audience that they did not listen carefully to his words. He had said he will teach the cat to speak but did not say the cat will learn to do so.

The distinction between teaching and learning is an important one. As the undergraduate medical program coordinator previously in Nepal and as Chair of the Curriculum Committee in Aruba I often highlight the difference between these two terms to my colleagues. A problem with medical education in many regions in my opinion is that medical teachers do not receive formal training in education. We assume that as they have the required medical knowledge they will be capable of teaching. I have noted on many occasions that this assumption is not always true.

A problem within many teachers and medical curricula is information overload and information not being tailored to the course requirements and the time allotted. Teachers often think only in terms of teaching and not enough attention is devoted to learning. The emphasis these days in health sciences education is on student learning. The lesson plan for a session begins with learning

objectives where the teacher describes what students could do after the session in terms of knowledge, attitude and skills which they could not before the session. With clarification of learning objectives and a detailed lesson plan the teacher is able to think and crystallize what the student should be able to 'do' at the end of the session and arrange and manage the resources needed to conduct the session.

As teachers it is a challenge for us to put ourselves in the position of a student and tailor the session to their needs. Many teachers especially at the beginning of their career see themselves mainly as information delivery agents and try to cram as much information as possible into their lectures. I have seen this often in both Nepal and Aruba and the challenge is encouraging faculty who are new to teaching focus on 'must know' areas and facilitate student understanding.

Many teachers feel happy and satisfied that they did a good job of 'teaching' and were

able to deliver all the 'needed' information without much thought being devoted to what students were able to assimilate and retain. Teacher's training programs in many medical schools concentrate on shifting the emphasis from teaching towards learning. Over the years as I progressed from being a new to a mid-level faculty the amount of information I provide has decreased. Today my emphasis is on student learning, providing information in context and on repeated summarization and student activities during the session. Student interaction plays an important role in facilitating learning.

As teachers we should shift our focus from teaching towards learning so that our students do not end up like the cat which was taught but did not learn!

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