

New Instructional Strategies Needed

Naeem Aon Jafarey (Ziauddin Medical University, Clifton, Karachi.)

Pages with reference to book, From 26 To 26

The word Lecture according to Webster's Dictionary is "an instructional discourse given by a member of the college or university faculty". Another meaning it has is "the act of reading". This is exactly what some members of teaching staff do. Read out their notes. These notes are then faithfully transferred to the notebooks of the students. According to one wit during this process of transfer of notes from that of the teacher to that of the students no lasting impression is left in the minds of either party.

The modern version of the story is about a famous professor of one of the leading universities of United States who was often called away on Out of town engagements. To make up for his absence he decided to record all of his lectures on tapes and asked his assistant to play the appropriate lecture whenever he was not there. One day his out of town trip was cancelled at the last minute and so he decided to go to his class. On nearing the classroom he heard his own voice giving the lecture and was quite pleased that his assistant was doing his job conscientiously. When he entered the classroom he found that there was the tape recorder on the podium playing his lecture and on the student benches there were a series of other tape recorders recording his talk. There was no one in the classroom, only the tape recorders. Without a discourse or some interaction between the lecturer and the students, a lecture is a monologue which is easily replaced by a tape recorder or a photostat copy. Unfortunately this is what is happening in most of the classrooms of our medical colleges. In this issue of the Journal there is a report of a study on the effectiveness of the lecture method conducted at Fatima Jinnah Medical College, Lahore¹ in which 74% of the students stated that the lectures were not beneficial and only 12% reported that they were attentive throughout the lecture. What is even more disturbing, is the fact, that after one month only 20% of the students could correctly recall 50% of the lecture content.

The rapid development of new information in the biomedical field is another factor that is eroding the sanctity of traditional lectures. Gone are the days when the lecture notes of the grandfather could still be used by the grandson². The flow of new information, both in terms of new facts and as updates of existing facts. By the time a medical student graduates a significant part of his lecture notes are likely to become obsolete. This is one of the main reasons, which has led to the emphasis on self-learning in the new curricular strategies. An instructional strategy heavily dependent on lectures does not produce self-learners. Hence, the current emphasis in undergraduate medical education on training the students to find and critique new information. In the new curricular models, lectures have a smaller and a different role to play.

What is needed is a re-orientation of the students (and the faculty) to an instructional strategy in which the students take up the responsibility of their own learning with the guidance of the teachers. Groomed in a teacher-oriented system where the students strictly follow what they are told, the exponential growth of new information is forcing the medical colleges to redesign their instructional strategies and produce self learners rather than rote learners. To bring about this change from the present teacher-oriented programme to a student-oriented programme requires careful planning and sustained effort.

As a step towards bringing about such a change there is another article in this issue of the Journal³, which describes an introductory course for new entrants to the medical college on how to develop their study skills. The course has been designed to smoothen the transition from a teacher centered to a student centered curriculum where the medical students learn to assume control over their own learning, in other words become self learners.

Since the article is from the institution where I work, the only comment I will make is to request the readers to send us their comments so that we can improve upon what is an experimental step. I will also urge fellow teachers to explore different means of preparing our medical students to face the uncertainties of future developments.

References

1. Najmi RS. Lecture as a mode of instruction in undergraduate medical education. J. Pak. Med. Assoc., 1999;49:30-33.
2. Douglas C. All change. BMJ., 1999;318:1085.
3. Huda N, Brula AQ. An introductory course on study skills. J. Pak. Med. Assoc.,1999,49:27-30.