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ENHANCEMENT OF CLINICAL TEACHING IN NURSING GUIDED BY ADULT LEARNING THEORIES - A CRITICAL REVIEW REPORT

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Title of The Article Reviewed

"Using Adult learning theory to enhance clinical teaching"

The article "Using Adult learning theory to enhance clinical teaching" by Jill Wilkinson addresses four theories of adult learning theory (self-directed learning; experiential learning; constructivist theory and critical thinking) as well as theories about motivation to learn. The author also suggests how the theory may be applied to the clinical learning environment. That was the reason, the article seemed relevant for me to explore and review. Being lecturer in college of Nursing, I'm teaching and dealing with the students who are young adults in the nursing program. This article was found very relevant to my area of work and experience and it would guide the other nursing faculties.

The author introduces the article by mentioning the importance of being knowledgeable of the adult learning theories and its application to enhance the clinical teaching to baccalaureate nursing students. Theory, in broad sense, is construction and interpretation of aspect of cognition. In other words, theory is a set of related propositions, which should be able to describe, explain, predict, or control the phenomena. Learning theories have tried to provide explanations about learning and their application.

The term. Andragogy in Greek means the man-leading. It should be noticed that the term pedagogy is used since the Ancient Greek times while pedagogy means leading the child.

PRINCIPLES OF ANDRAGOGY

Knowles formulated 4 Principles of Andragogy, which is considered as the base for many androgogical concepts that are applied to adult learning. They are (a) Adults need to be involved in the planning and evaluation of their instruction. (b) Experience (including mistakes) provides the basis for the learning activities. (c) Adults are most interested in learning subjects that have immediate relevance and impact to their job or personal life. (d) Adult learning is problem-centered rather than content-oriented.

CHARACTERISTICS OF ADULT LEARNER

Apart from the above mentioned principles, he, Knowles (1970) also described the characteristics of Adult learner (a) As a person matures his/her self-concept moves from one of being a dependent personality toward one of being a self-directed human being (b) As a person matures he/she accumulates a growing reservoir of experience that becomes an increasing resource for learning. (c)As a person matures his/her readiness to learn becomes oriented increasingly to the developmental tasks of his/her social roles. (d) As a person matures his/her time perspective changes from one of postponed application of knowledge to immediacy of application, and accordingly his/her orientation toward learning shifts from one of subject- centeredness to one of problem centeredness. (e) As a person matures the motivation to learn is internal.

The author of this article gives an over view of four of the adult learning theories. In this report I will be presenting briefly about them and focusing mainly on the self-directed learning theory, its application relevance in my profession, points of agreement and disagreement with support from my work experience and the literature source as follows.

Experiential Learning Theory: central to adult learning is grounded in experience (Knowles 1974) which is the core of experiential learning theory. Learning takes place interactively between individual & environment and it is ongoing (Dewey 1938).

Constructivist Theory

Learners try to fit new information with what they already know. (Scaffolding).Learners don't just absorb information- they then to relate and elaborate and test.

Learning based on "ZPD" – zone of proximal development, allows student to perform skill that would normally be slightly beyond their ability without their lecturer/ preceptor. Appropriate support at appropriate time – enhances student performance.

Critical Thinking

In higher education- main aim –To develop students to think critically. Critical thinking in Nursing is much more than contents of classroom, and books. It is the skills and habits of the mind" (Scheffer 2000) Skills- Analyzing, Discriminating, information seeking, logical reasoning, predicting and transforming knowledge. Habit of the critical thinking mind- confidence, contextual perspective, creativity, flexibility, inquisitiveness, intellectual integrity, intuition, open mindedness, perseverance and reflection. Critical thinking bridges the gap between theory and practice. Reflective practice. Holistic approach to learning.

Self-Directed Learning Theory

Self-directed learning is seen as any study form in which individuals have primary responsibility for planning, implementing, and even evaluating the effort. Much of this learning takes place at the learner's initiative, even if available through formal settings. A common label given to such activity is self-directed learning.

Several things are known about self-directed learning: (a) individual learners can become empowered to take increasingly more responsibility for various decisions associated with the learning endeavor; (b)self-direction is best viewed as a continuum or characteristic that exists to some degree in every person and learning situation; (c) self-direction does not necessarily mean all learning will take place in isolation from others; (d) self-directed learners appear able to transfer learning, in terms of both knowledge and study skill, from one situation to another; (e) self-directed study can involve various activities and resources, such as self-guided reading, participation in study groups, internships, electronic dialogues, and reflective writing activities; (f) effective roles for teachers in self-directed learning are possible, such as dialogue with learners, securing resources, evaluating outcomes, and promoting critical thinking; (g) some educational institutions are finding ways to support self-directed.

In this article critique report I will be focusing mainly on the self-directed theory and its application in my profession especially in the education front.

Though SDL is been defined and represented by various scholars using various terms as Self education, Andragogy, Self-directed learning, Independent study, Autonomous learning, Self-planned learning, Adult's learning project, Auto didactic, Self-imposed responsibility (Guglilmino et al,2005) the best of all the definitions are considered to be given by Knowles.

M.Knowles (1975)
"*It is the process in which individual take the initiative, with or without help of others, in diagnosing their learning needs, formulating learning goals, Identifying resources for learning, choosing and implementing appropriate learning strategies and evaluating learning outcomes.*"

A. Goals for Self-directed learning theory

Merriam, Caffarella and Baumgartner (2007) have described 3 main goals for Self-directed learning theory
1. To enhance the ability of learners to be self-determined in their studies.
2. To foster transformational learning.
3. To promote emancipatory learning and social action as an integral part of SDL.

Goal one poses that learning should be self-initiated, with a sense of discovery coming from within (Rogers, 1983). I believe, in agreement with Knowles that ideally, as learners mature, they move from a self-dependent personality towards one of self-direction and autonomy. This includes both a process and a desired outcome, and our role as educators is to facilitate this process. I also think, that whenever possible, we should foster in our students motivations for learning that are internal rather than external. As mentioned by Knowles & Associates (1984), internal motivations are usually more potent and effective; and more consistent with a truly independent, autonomous and self-motivated desire to learn and to change.

Goal two is considered that the critical reflection process, as an intrinsic and critical component of SDL, leads to transformational learning. In addition, critical reflection and transformational learning support the third goal of promoting emancipatory learning and social action (Merriam, Caffarella, & Baumgartner, 2007) mentions that through critical reflection and SDL students can truly emancipate themselves and exert positive social actions. Self-direction and self-determination can only be achieved when we favor problem-posing education, which solves the student-teacher contradiction by recognizing that effective knowledge is not given from the teacher to the student.

B. History of self-Directed learning Theory

Self-directed learning has existed even from time immemorial. For example, self-study played an important part in the lives of such Greek philosophers as Socrates, Plato, and Aristotle. Other historical examples of self-directed learners included Alexander the Great, Caesar, Erasmus, and Descartes. Hiemstra (1994). Lack of formal educational institutions gave rise to the idea that many people have to learn on their own. Early scholarly efforts to understand self-directed learning took place some 150 years ago in the United States. However, it is during the last three decades that self-directed learning has become a major research area.

Houle (1961) (University of Chicago, Illinois). He interviewed 22 adult learners and classified them into three categories based on reasons for participation in learning: (a) goal-oriented, who participate mainly to achieve some end goal; (b) activity-oriented, who participate for social or fellowship reasons; (c) learning-oriented, who perceive of learning as an end in itself.

C. Conceptual framework of Self Directed Learning theory

Self-directed, lifelong learning is defined in the nursing Course as the development of graduates who (a) are conscious of the need and accept responsibility for evaluation of practice in the light of changing

understanding (b) are able to identify deficiencies in their own knowledge, skills and attitudes are motivated to generate a learning program to address deficiencies, including finding and using the best evidence (c) have the skills to identify, access and use resources wisely and efficiently (d) are able to evaluate learning efforts, including resources used, and the effects on practice, and (e) are committed to repeating the cycle with each patient and clinical situation.

This cycle of evaluation, learning and action is illustrated as the conceptual framework in Fig. 1. & Fig. 2(Kearsley, 2010), Boyatzis's theory of self-directed learning (2002).
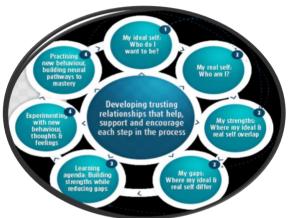

Fig. 1 (Kearsley, 2010),

Fig. 2 Boyatzis's theory of self-directed learning

D. Application of self-directed learning theory & clinical learning

Swanson and Holton (1998) mentions that the learners need to be aware of the value the learning topic. Being knowledgeable about the Rationale for every intervention in nursing is vital for the nursing students to achieve a comprehensive outlook of the patient and to plan and implement the relevant care. Therefore this idea about the self-directed learning is compatible with learning in clinical setting. The clients with health problems whom the students will come across in the clinical setting provide stimulus for the students to respond and thereby learn. They also need to be aware of the evidence underpinning every nursing action. Scope of self-directed learning (SDL) depends on clinical acuity of clients. SDL requires time and allowance to make mistakes. For this aspect I both agree and disagree, when I agree I mean that yes, it provides the student, the opportunity to exercise freedom in learning and take trial and error method of learning which is made possible by providing the virtual simulated teaching using high fidelity simulation learning. I also disagree to the same aspect if the same learning is expected to happen in the clinical setting, where the students cannot be allowed to commit any errors since they will be dealing with the care of patients.

E. Staged Self Directed Learning model

Grow (1991) formulates Staged Self Directed Learning model, where the students are known to go through stages from I to IV in which during the initial stage the students who is dependent, then moves to the next stage in which the learner develops interest, then becomes involved in the learning activity to achieve the learning outcome and later becomes self- directed. During each of these stages of students, the role of the teacher also changes starting from being, the authority coach, guide and motivator, then the facilitator and finally the consultant and the delegator respectively as mentioned in Table:1. (Merriam et al, (2007).

Table 1: Staged Self-Directed Learning Model; Grow (1991).

Stage	Student	Teacher	Examples
Stage 1	Dependent	Authority Coach	Coaching with immediate feedback. Drill. Informational lecture. Overcoming deficiencies and resistance
Stage 2	Interested	Motivator, Guide	Inspiring lecture plus guided discussion. Goal-setting and learning strategies.
Stage 3	Involved	Facilitator	Discussion facilitated by teacher who participates as equal. Seminar. Group projects
Stage 4	Self-Directed	Consultant, Delegator	Internship, dissertation, individual work or self-directed study-group.

F. Competencies to become self-directed learners in nursing

Through educational experience and support from the literature (Brockett & Hiemstra, 1991;

Candy, 1991; Collins, 1988; Houle, 1961; Tough, 1979), where available, the nursing faculty proposed that six competencies are required for individuals to become self-directed learners:
a) Assessment of learning gaps.
b) Evaluation of self and others.
c) Reflection.
d) Information management.
e) Critical thinking.
f) Critical appraisal.

The difference between these competencies and those proposed by Knowles (1975) is that the nursing faculty identified a broader selection not based solely on the process of SDL, as Knowles defined it, but reflect the demand for evolving technological and professional skills necessary in Today's world.

G. The SSDL model application in nursing clinical learning. Chris et al (2007)

Each of the competencies required to become self-directed learners, these skills are not mutually exclusive but are interrelated in such a way that students use all or a combination of them simultaneously to direct and control their learning experiences. In addition, students need to be reflective, flexible, empathetic, collegial, communicative, and insightful within the context of learning to take charge of their learning in a positive way. Table:2 is an example depicting the application of SSDL, Staged self-directed learning model applied in nursing addressing the competencies of self-directed learner.

Table 2: SSDL model in nursing clinical learning.

Assessment of Learning Gaps				
Skills	**Level 1**	**Level 2**	**Level 3**	**Level 4**
Assessing knowledge gaps	Students identify gaps with the assistance of the tutor.	Students develop independence in identifying knowledge gaps.	Students identify gaps because of their awareness and comfort in their strengths and areas of improvement.	Students are independent and confident in identifying gaps through the integration of data from a variety of sources within a broader context of learning.
Learning about ambiguity in expectations	Students are confused in the expectations for learning related to limited accountability, responsibility, and knowledge base.	Students' ambiguity is more focused on group learning process and their role as self-directed learners.	Students are more comfortable in the blend of group and individual SDL skills, making expectations clearer.	Students pay attention to discrepancies in self versus tutors'/peers'/preceptors' expectations in knowledge, attitudes, and skills.
				Students test a number of learning styles to augment and demonstrate their learning.
Exploring learning styles	Students identify learning styles using prescribed learning styles inventory.	Students integrate role as group members and self-directed learners with their personal learning style(s).	Students develop awareness of alternate learning styles.	Students develop their ability to work with individuals with different learning styles.

H. Emerging trends regarding Self Directed Learning

The recent trend is been observed that SDL is widely used in Job related training. In 1992 International Symposium was conducted and out of the 35 concurrent sessions 9 were about SDL and even among the 9, 8 were related to the integration of self with technology. Hiemstra (1991).

In the past, education was viewed as preparation for entire life. But In the late 1940's, an individual could expect to graduate from high school with 75% of the knowledge needed to remain successfully employed until retirement. Fifty years later, that figure decreased to 2% (Barth, 1997). Just as childhood learning is no longer enough adequate preparation for life, initial training or learning is not an adequate preparation for maintaining competence in a profession. Therefore, in the present era of constant change and new information being added every day it is realistically not possible to have tutors / teachers that are constantly guiding us through our learning. Self-directed learning, therefore, becomes absolutely necessary as an instrument of development for individuals in the 21st century and especially in dealing with adult learners. I personally do encourage and strive towards taking the students through this continuum.

Abbreviations
SDL – self-directed learning
SSDL – staged self-directed learning
RSDLS – Readiness for self-directed learning scale
ZPD – zone of proximal development

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