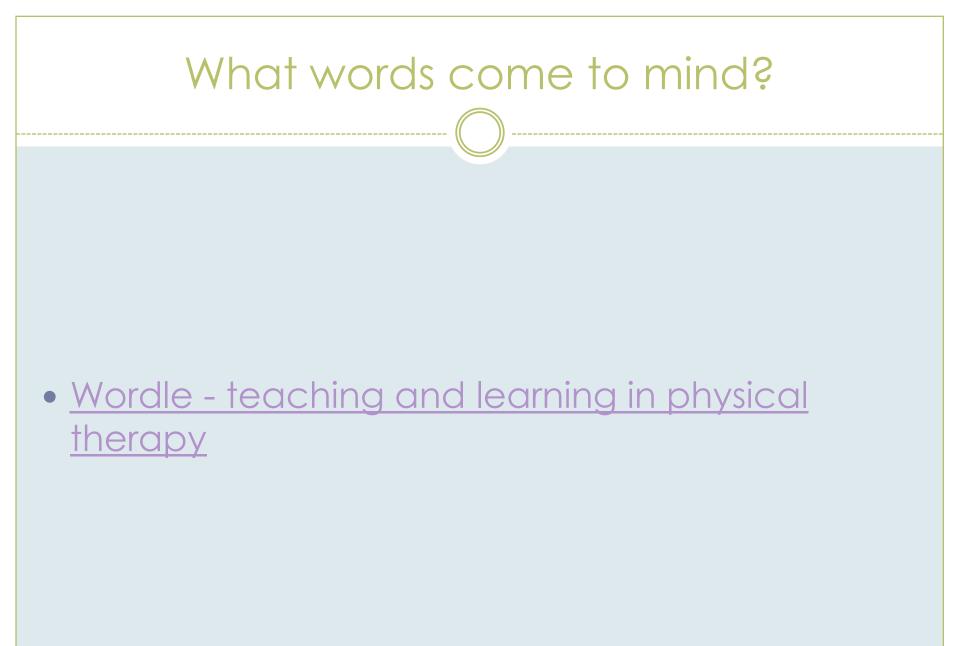
Teaching and Learning in Physical Therapy

FROM CLASSROOM TO CLINIC

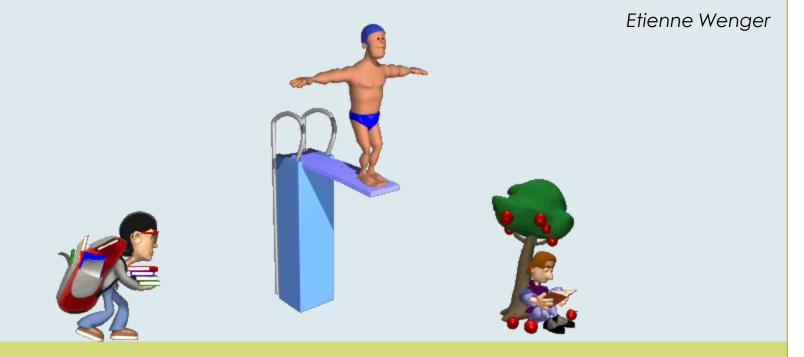








 "Learning and teaching are not inherently linked. Much learning takes place without teaching, and indeed much teaching takes place without learning."



- How much experience do you have as a learner?
- How much experience have you had with teachers?

Good and bad....



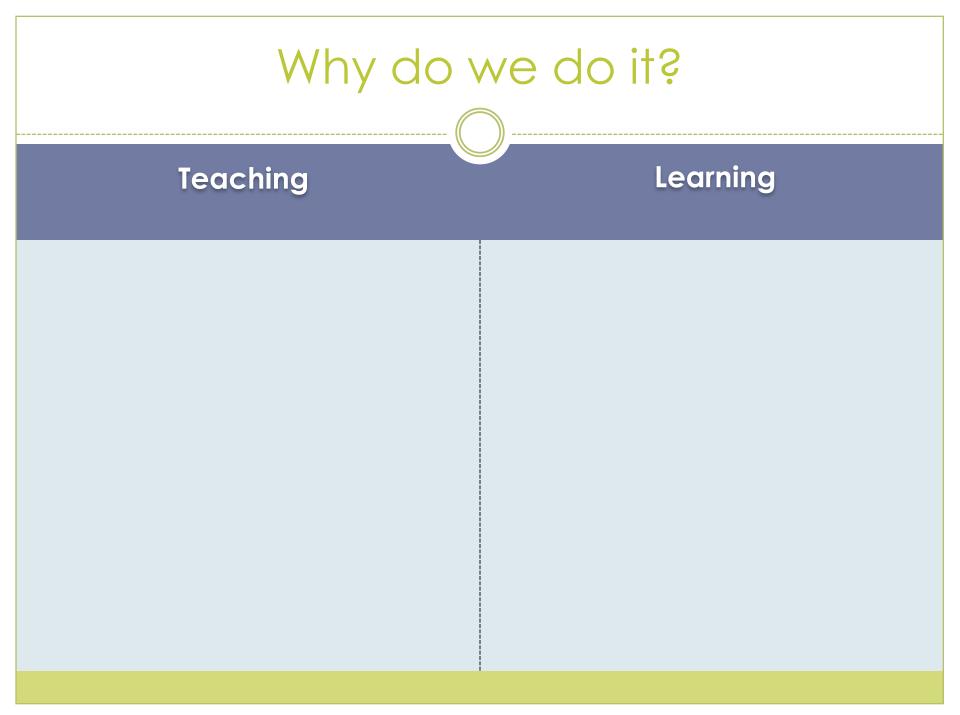
- What do you remember as your first learning experience that really "stuck" with you?
 - o Why do you think that's true?
 - Compare "notes" with your classmates...
 - What's similar about their learning memories and what's different?

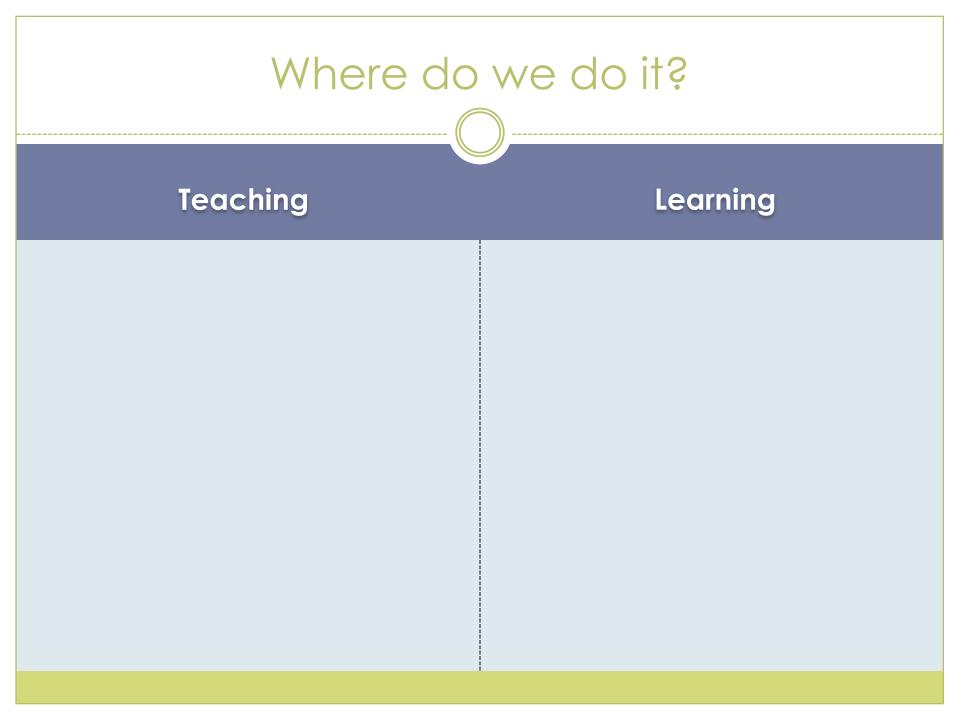


What do you remember about your first teaching experience?

• When was it and what was it?







- What influences us as teachers and learners?
 - Personal filters or lenses
 - o What do you see when you look at this image?
 - How old is the person that you see?
 - What type of work if any does she do?
 - Would you describe her as young or old?
 - How would you describe her? Is she an attractive person or not?



- What do you think is happening in this photo?
- What do you think she is feeling?



What is your reaction to this picture? What do you think is going on? What do you think the person is thinking and feeling?



- Each of these examples presented:
 - Opportunities to explore your filters!
 - They are based upon your experiences
 - Our values
 - × Our realities
 - Our perceptions of the World
 - We make assumptions that the World <u>IS</u> the way that <u>WE</u> view it!



Critical Thinking in Clinical Education

A second year PTA student has just completed her 1st 4 week full time clinical affiliation. When she met with the ACCE, she described her CI, who had many years of experience, as awful. When asked why, the student responded that the CI had poor evaluation skills. She noted that a goniometer was <u>never used</u> and that the evals were based upon the results of a couple of tests.



• What's up with that?

- What do you think was going on in the scenario?
- How might the student's limited experience influence her perception of the CI's skills?
- How might the PT's expertise influence her approach to the evaluation?
- How might the perceptions of each differ?
- What other explanations might there be for what may have happened in this scenario?

Intention

- 1. To be humorous
- 2. To be fair
- 3. To be flexible

 To understand someone's thinking (ie, asking "why?")

Potential Impact

- 1. Sarcasm, flip, silly, making fun of
- 2. Rigid, unyielding, inflexible, unfair
- Wishy-washy, unfair, favoritism, weak, indecisive
- 4. Insubordinate, rude, challenging, confrontational

- Have your intentions ever been misunderstood?
- What was the impact on the other person?



In any given situation, there are 2 experts:

- The person behaving is the expert on the <u>intention</u> of the action
- The person on the receiving end is the expert on the <u>impact</u> of the action
- Clarifying the intent and checking the impact of the communication is essential!



"No, I said 'paralegals'."

Cultural Differences and Patient's Expectations

- Is the "Golden Rule" universal across all cultures?
 - If I am unsure of how to treat you, I simply imagine how I would want to be treated, and act accordingly.
 - Others will value and want to be treated the way that I want to be treated
 - Everyone is basically the same and <u>should</u> want the same thing whether or not they admit it



The Golden Rule Cultural Filter

• The influence of stereotypes:

- Generalizations that individuals make about people of other cultures
 - They may either reinforce the stereotype or help form a starting point for understanding
 - Must be validated and checked for accuracy

• There will be exceptions!



Cultural Filter

• What's up with that?

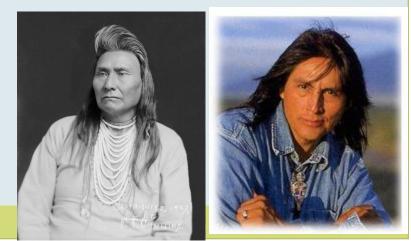
- An Orthodox Jewish male patient may prefer a male therapist
 - What happens if a female therapist in the clinic is more skilled with the patient's diagnosis?





• In the clinical setting, it's not about YOU!

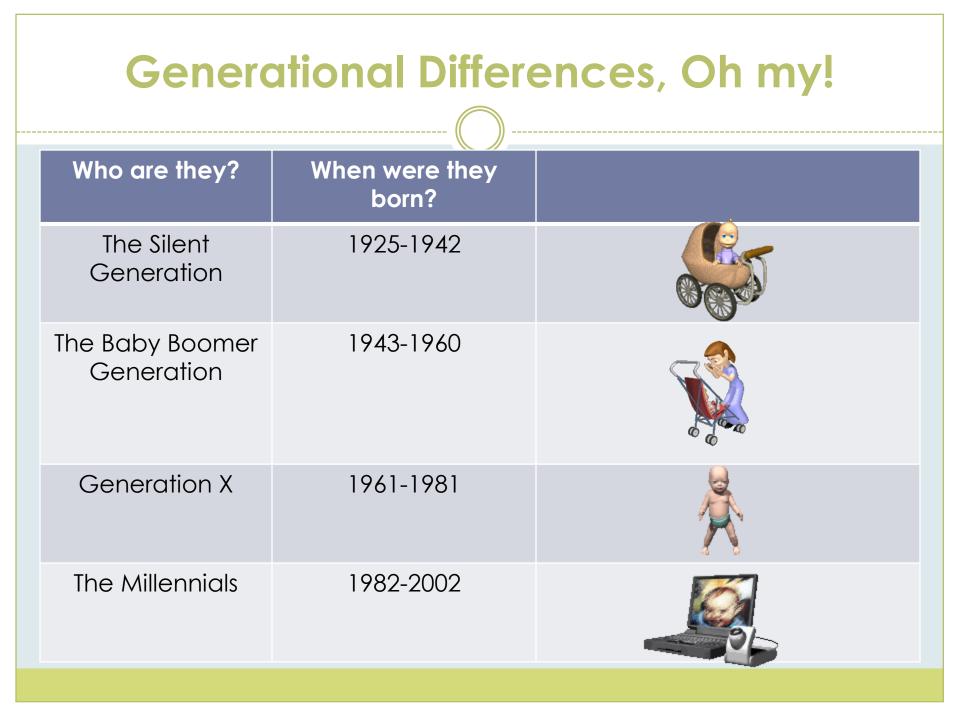
- Be aware of your own cultural beliefs and their potential impact on the situation (for the patient).
- Be aware of and respect the needs and beliefs of others.
- Adapt your teaching to meet the needs of your learners, not yourself!
 - Check these out...
 - o Growing Up Native American
 - Mascots or People?



What do you think about your...

- Heritage, family's country of origin
- Communication, awareness of space
- Family roles, status of elders, alternative lifestyles
- Workforce issues, autonomy
- High risk behaviors, sedentary lifestyles
- Nutrition, food rituals and taboos
- Pregnancy, childbearing practices, birth control
- Death rituals, burials, funerals
- Spirituality, religious practices
- Health care practices, providers, health beliefs





Generational Differences, Oh my!

- How can you use them in your work with a patient?
- Do they make a difference in how you understand something?



Let's see if you know anything about...

1964

- 1.28% Yearly Inflation Rate USA 874 Year End Close Dow Jones Industrial Average \$13,050.00 Average Cost of new house \$6,000.00 Average Income per year 30 cents Gas per Gallon \$3,500.00 Average Cost of a new car 21 cents Loaf of bread 5 cents United States Postage Stamp \$115.00 Average Monthly Rent \$1.25 Ticket to the movies
 - Dr. Martin Luther King, Jr receives the Nobel Peace Prize
 - Washington D.C. residents are able to vote in a presidential election for the first time.





1.189 Psychiatrists Sav Goldwater Is **Psychologically** Infit To Be President

Learning & The Generations

Who	Strengths	Challenges	Preferences
Silent Generation	Loyal, detail oriented, consistent	Wants to maintain status quo, technophobe	Detail oriented, sequential, teacher as expert
Baby Boomers	Strong work ethic, want to please	Competitive, sensitive, judgemental	Organized lectures, consensus-building
Generation X	Independent, challenges status quo, multi-tasker	Impatient, expects instantaneous feedback	Self directed modules, exam reviews, teacher must demonstrate expertise
Millennials	Expects customer service, blends info from many sources	Overconfident, short attention span, expects 24/7 service	Visual media is expected, immediate feedback

What potential difference could a generation make?

- You are taking a look at the chart for a patient that you will be seeing this afternoon. You notice that her birth date is May 19th, 1990. She will be seen postoperatively after the reconstruction of her ACL.
 - Thinking about her "generation"...
 - How much information might you expect her to have about her surgery and potential course of Rx and where did she most likely find it?
 - 2. How involved do you think she will want to be in any decision-making regarding her Rx? How about her parents, will they be involved?
 - 3. What do you envision as effective tools of communication for her in between sessions?

What potential difference could a generation make?

- You are taking a look at the chart for a patient that you will be seeing this afternoon. You notice that his birth date is May 19th, 1960. He will be seen postoperatively after the reconstruction of his ACL.
 - Thinking about his "generation"...
 - Would you deal with him any differently than you dealt with the previous patient?

<u>Do you remember when?</u>

Andragogy & Pedagogy

Andragogy-

o the art and science of helping adults learn

Pedagogy-

o the study of how <u>children</u> learn

Is there a difference between the two?





Characteristics of Pedagogy

- Transmittal of knowledge
 - The teacher is the expert and is responsible for the learning
 - Makes the determinations about what, how and whether something has or will be learned
 - Content is subject driven and standardized and everyone progresses as a unit
 - Determined by grades on exams
 - × Lectures, drills, readings, quizzes and memorization







 Learning is a lifelong process of learning and problem solving based upon life situations, rather than a process driven by the need to learn a particular subject.



Andragogy

- Adults bring a need to know to the learning situation (what makes the teacher qualified?)
- Adults bring an independent self-concept to the learning situation (self-directed)
- Adults bring experience to the learning situation
- Adults bring a readiness to learn, that is life centered, to the learning situation (relevance is everything!)
- Adults bring a motivation to learn to the learning situation (self-esteem, quality of life)





Check this out...

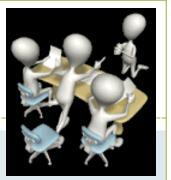
- While in the clinic, you are asked to instruct a pt. on a HEP. He is 42 and has returned to therapy for Rx of a chronic shoulder problem. He wants to return to playing tennis. He had a HEP previously but since his problem is now chronic, he doesn't think it was effective.
- This is the first time that you have ever independently done a HEP instruction with a pt.
- He arrives, you introduce yourself and tell him what you want him to do. He reacts negatively and questions EVERYTHING and suggests something different.

Now what???

- What characteristics of an adult learner did he display?
- Why might he be questioning the exercises in the HEP?
- How could this have been handled considering the pt. as an adult learner?



Adult Learners must have...



Choice

• Options are a necessary part of virtually everything!

Voice

 Listen to the needs of the learners, their interests, goals and respect past experiences. They helped to shape who they are!

Relevance

 Find a way to connect the learning activities selected to the valued activities of your learners.

Ownership

 Develop goals through collaboration with the learners to meet their greatest needs

Andragogy versus Pedagogy

- Flexibility is important regardless of how you approach teaching and learning.
- All teaching situations must be learner centered!
- Voice and respect must be maintained to ensure a safe environment to optimize learning
- All learners like to have FUN!



In any group of learners there will be..

- Individuals along the continuum from:
 - Dependent to independent
 - Needing a great deal of direction to little direction
 - Needing a great deal of support to little support
 - Having much experience to little or no experience
 - Having much content knowledge to little or no content knowledge



The Continuum...where are you?

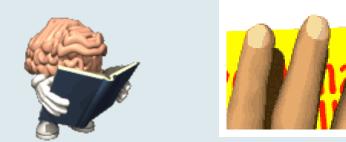
- Unconscious incompetence Don't know what you don't know
- Conscious incompetence Know what you don't know
- Conscious competence-



- Know what you know but have to remain "on top of it"
- Unconscious competence-
 - Know what you know but can't explain it. It just happens.
- Conscious unconscious competence-
 - Know what you know and can teach others about it too!

Your Learning Style Mission:

- We've all heard about Learning Styles
 - 1. Find out what they are
 - 2. Find out how they are similar & different
 - 3. Find out what type of learners are in your group
 - 4. Determine your learning style
 - a. Is it the same as what your group members had identified?
 - 5. Provide at least two references to support your work



What's up with that?

- You are on your second clinical affil and at midterm, your CI indicated that you "lack initiative and are reluctant to try new approaches."
- You believe that your CI moves at a fast pace and expects you to keep up. You explain to her that you prefer to take time to review your texts and make sure that you have solid rationale before trying different things with your patients.

 Identify the influences upon the situation that you think are important.

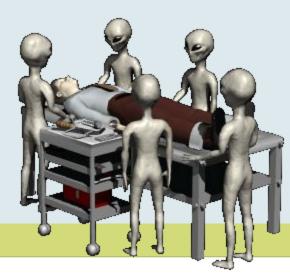
2. What learning styles does this scenario have examples of within it?

3. How could this situation have been improved?



Formula for Success?

- Include the following in your teaching:
 - Concrete examples
 - Theory & Rationale
 - Time for observation and reflection
 - Time for active experimentation and application of what was learned



Filters Teaching & Learning

- Perceptual
- Generational
- Learning Style
- Cultural
- Adult

Characteristics

Now What?

 What teaching strategies would you incorporate into an in-service presentation that would help engage all 4 types of learners? Your audience is PTs, PTAs and possibly SDPTs and SPTAs.

 Good question since you need to now do this for this class and for your last clinical affil!

