Expectations of Medical Training. Physicians' View to Skill Enhancement.

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Contribution

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Physicians are among the most active group attending further education in Germany (Gerstenberger 2006, p. 12). This target group is participating in further education continuously, not only due to the fact they are forced to (quality assurance regulations). Astonishingly there is hardly any research about this further education of physicians from an (adult) educational or didactical point of view. Recent studies (Gerlach & Beyer 1996, 1997, 1999; Gerstenberger 2007; Knieling 2003; Vocke 2002; Weiss 1991) show a bundle of aspects that influence physicians’ satisfaction and discontent with medical further training. But a coherent model illuminating physicians’ perspectives and strategies to fulfil the necessity of further training is missing.

The aim of our study was to understand physicians’ point of view on (lifelong) learning and the relevance of organised medical trainings and workshops they are attending. Our explorative study was focussed basically on three research questions: What do physicians expect of medical training? What kind of demands do they make? What are typical disturbing factors from their point of view? During the research process, analysing the first collected data, the necessity became clear to broaden our focus and to reconstruct the complex strategies of physicians to gain medical knowledge and improve practical competencies to understand their way of talking about medical training and their way of evaluating their learning experiences in organised further education.
Method

The study is based on approaches of qualitative research (Denzin & Lincoln 2000), orientated on Grounded Theory (Glaser/Strauss 1967, Strauss 1987) but with a focus on interview data. Preparing our own empirical work, we made a systematic review of already published topic-related studies and informed ourselves about the official regulations of further education for physicians in Germany. A theoretical sampling lead to 15 problem-centred interviews (Witzel 2000) with physicians working in different contexts (hospital, general practitioner service) and in different levels of hierarchy (up to head physicians) in Germany. The interviews were transcribed completely, analysed (coding) with a focus on continually comparing of the emerging strategies, and interpreted collaboratively by the three members of the research team. During the last phases of our process of analysis and interpretation the data we used the Software MaxQDA to overcome some limitation of paper-pencil work.

Expected Outcomes

The physicians showed interesting patterns of coping with trainings and workshops that are not satisfactory – especially not from a didactical point of view. Compared to other groups of adult education physicians are the opposite of insurgent. Our findings show, that this is a result of a special attitude towards lifelong learning. Physicians expect from themselves to be in a continuous cycle of gaining new information about recent medical developments, for them attending trainings or workshops is just one way to gain new information, to make contacts to peers or interesting specialists and not necessary to enhance skills or knowlegde. The results show clearly the importance of analysing the whole learning attitude and the commitment of the individual to a community to understand the strategies of skill enhancement and course-attendance.

References


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