

Chapter 11

Informal Learning in Medical Education

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ABSTRACT

A great deal of valuable learning—informal learning—takes place within medicine’s informal and hidden curriculum. It is this kind of informal learning that brings about more diverse and personal learning gains. Informal learning contributes to individuals’ continuing professional development, personal mastery, and capacity building. Recognition of informal learning can be the key to the development of a strong lifelong learning orientation for learners as they go through the process of developing and forming their professional identity. Expanded insights into the informal learning process will contribute to the design and development of strategies, methods, and informal learning spaces that promote a broader spectrum of human learning within formal medical education settings. It is hoped that discussion on informal learning will also stimulate interest in investigating the impact of informal learning on learners across the spectrum of medical education.

INTRODUCTION

Physicians are expected to pursue a lifelong discipline of continuous learning and professional development throughout the lifespan of their career. Lifelong learning has been regarded as a vital skill for any physician committed to providing current, safe, and high-quality medical care to individual patients (Schrock & Cydulka, 2006). Lifelong learning is considered as an indicator of professionalism. Accreditation bodies for educational programs require lifelong learning goals integrated into medical education curricula across the spectrum of medical education (Accreditation Council for Graduate Medical Education, 2002; Liaison Committee on Medical Education, 2016). Previous research establishes the link between past academic performance and a lifelong learning orientation (Hojat, Veloski, & Gonnella, 2009) and between the orientation and future academic achievement (Schrock & Cydulka, 2006).

Lifelong learning occurs in both formal and informal learning opportunities afforded by the workplace (Nisbet, Lincoln, & Dunn, 2013) or in the medical school educational environment. Learning involves

DOI: 10.4018/978-1-5225-2098-6.ch011

both formal and informal learning processes that overlap as well as interact (Peeters et al., 2014). Learning is also a reflexive process. Learning facilitates a process which enables the learner to reflect on his/her life and learning environment (Medel-Anonuevo, Ohsako, & Mauch). In the educational arena, recommendations for promoting lifelong learning or active learning have been primarily focused on fostering and facilitating participation in formal learning.

Informal learning contributes to individuals' continuing professional development, personal mastery, and capacity building. As informal learning can complement and supplement formal learning in reaching learning goals and objectives, it would likely foster the development of individual lifelong learning skills and attitude. Students who are trained for careers in the fast changing health care system need to master more than just clinical skills; they should develop skills necessary for becoming master adaptive learners—"expert, self-directed, self-regulated and lifelong workplace learners"(American Medical Association, 2015).

Engaging in informal learning may pique learners' interest or curiosity, lead them to enroll in a formal education program to expand what they have informally learned before. Learners in a formal learning program upon completion of their learning experience may decide to continue learning informally by self-directed learning (Peeters et al., 2014). When learners are encouraged to reflect on their self-directed learning and recognize that their informal learning is an additional and tangible way of continuous learning, they will identify connections between formal and informal learning activities. As a result, the recognition could facilitate their lifelong learning which becomes more concrete (Livingstone, 1999).

Recognizing informal learning and creating a culture for the organizational learning that embraces informal learning will likely develop an enabling condition for developing master or expert lifelong learners who engage in continuing professional development and professional socialization. The Liaison Committee on Medical Education (LCME) requires that the medical curriculum in a medical school include "self-directed learning experiences and time for independent study to allow medical students to develop the skills of lifelong learning" (Liaison Committee on Medical Education, 2016). Furthermore, the recognition of informal learning can be the key to the development of a strong lifelong learning orientation for students as they go through the process of developing and forming their professional identity. The recognition encourages them to appreciate more their own learning capacities, identify their personal learning preferences, recognize the connections between diverse learning activities, and better understand the use of informal learning as a lifelong endeavor (Werquin, 2010).

How do medical educators leverage informal learning opportunities and develop strategies to promote a continual learning mode for lifelong learning? There is still a lack of understanding of and insight in informal learning in medical education. Similarly, there is little discussion about informal learning that occurs between students (Ozolins, Hall, & Peterson, 2008) and between students and faculty. Education research has been predominately focused on formal learning--the intentional, preprogrammed, and structured part of learning.

This chapter will define informal learning in relation to lifelong learning; address multifarious aspects of informal learning and its associations with various factors; discuss approaches to supporting informal learning; and offer recommendations for medical education and research with respect to informal learning. Expanded insights into the informal learning process will contribute to the design and development of strategies, methods, and informal learning spaces that promote a broader spectrum of human learning within formal medical education settings. It is hoped that the knowledge of informal learning will stimulate interest in investigating the impact of informal learning on learners in the medical school educational environment.

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