

Chapter 23

Applicability of Transformative Learning Theory in E-Health Teaching

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ABSTRACT

The use of information and communication technologies (ICT) in health/medical practices is widely known as e-Health. Evidence suggests that the use of e-Health offers new opportunities for effective clinical practices, time and cost savings for patients, doctors and health services. However, the lack of appropriate education and training opportunities is considered to be a main barrier to provide necessary knowledge and skills in e-Health. Practice of e-Health demands rethink of the existing frames of reference and the adoption of new frames of reference in health and medical practice. Resistance to such change is an obvious challenge. Carefully designed education programs are the key to address this challenge. This chapter shares the experience of adopting key tenets of transformative learning theory in designing, developing and delivering e-Health teaching at the University of Queensland Centre for Online Health in Australia.

INTRODUCTION

The shift in education research has emphasised that teaching is an activity to facilitate leaning rather than delivering knowledge (Peschar et al., 2000). This thesis is particularly relevant to adult leaning in which the focus is on active participation of the student in the learning process. Learning process must also help adult learner to review and re-

examine already established values, assumptions, understanding and motivations. In other words, the learner acquires new knowledge and skills through a critical reflection of information rather than passive absorption of knowledge. In this process learning partnerships and communities play a critical role. Hands-on, experiential and self directed activities are also at the heart of adult learning. In short, adult learning is a process of facilitating a learner to learn.

The concept of transformative leaning (TL) encapsulates a large number of abovementioned

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features. It helps the learning process by encouraging learners,

“to become critically aware of one’s own tacit assumptions and expectations and those of others and assessing their relevance for making an interpretation for their own learning” (Mezirow, 2000).

Transformative Learning is a developing theory. Merriam and Caffarella (1999) have highlighted the importance of three main stages (i.e. critical reflection, reflective discourse and action) in the learning process. Recently the notion of ‘soulfulness’ (Dirkx, 1997) was added to the process emphasising the value of intuition and the unconscious meaning-making in the learning process.

The objective of this chapter is to investigate the applicability of transformative theory in the process of teaching and learning in e-Health which an emerging field. The development of curriculum for new/emerging disciplines always poses new challenges. Thus, this chapter dwells on some of the specific challenges that the designers faced while developing e-Health courses and how we addressed those challenges with a particular reference to the transformative learning theory.

What is E-Health?

E-Health is an emerging discipline focusing on the use of information and communication technologies (ICT) to deliver health services. A number of different terms and terminologies have been associated with this discipline. For example the terms such as telehealth, telemedicine and health informatics have been used interchangeably. It is apparent that the definitions are continuing to evolve. In broader terms e-Health connotes a tool for healthcare delivery, diagnosis, consultation, treatment, and transfer of medical data/images and education by using ICT (i.e. interactive audio, visual, and data communications) at a distance.

From the practical point of view, e-Health makes a very good sense in countries such as Australia where people and communities are geographically dispersed and divided by large distances. Distance, is a major barrier to provide quality health care in many parts of the world. The use of new technologies to provide health services at distance has been tested widely. Studies across the world have shown that some e-Health applications can be feasible, efficient and cost effective (Hailey et al., 2002; Jennett et al., 2003; Kairy et al., 2009; Schwamm et al., 2009).

Regardless of the growing body of research evidence for the effectiveness of e-Health, its practical use remains limited. Unlike in other spheres of human activities (such as banking, communication or media), health sector has been reluctant to embrace new information and communication technologies. There are a number of factors such as lack of funding, infrastructure, networking and privacy issues which constrain the wider use of ICT in health sector.

Apart from the logistical and financial barriers, the issues relating to the change management have been identified as very important factors for the slow progress of the integration of e-Health in modern healthcare sector. Reluctance of medical and health practitioners to adopt new technologies in their practices has been a main reason. As a result, despite of rapid developments in ICT, little change has taken place in the way how health and medical practices are traditionally carried out.

One of the main reasons for this situation is the lack systematic e-Health education. The need for proper education in e-Health has been well documented (Edirippulige, Smith, Young et al., 2006; Edirippulige, Smith, Beattie, 2008). Although, e-Health education is beginning to grow, it is imperative that the e-Health teaching focuses on the change management. In this regard, the consideration of pedagogical theories such as transformative theory has a particular relevance.

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