

EDITORIAL

Developing the teaching instinct

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Steven Pinker (1994) in his book *The Language Instinct* describes language as an instinct . . . as innate to us as flying is to geese. He suggests that language is not a cultural artefact that we learn the same way we learn to tell time or how the government works. It is a complex specialized skill that develops in the child spontaneously, without conscious effort or formal instruction, and is deployed without awareness of its underlying logic. He suggests that people know how to talk in more or less the same way that spiders know how to spin webs. It could be argued that much the same can be said for teaching. With this in mind we have selected the ‘The teaching instinct’ as the title for a new series of practical guides on teaching. To a greater or lesser extent, everyone has some ability and experience of teaching others—the five-year-old girl teaching her three-year-old sister how to dress a doll, the plumber showing his assistant how to repair a faulty cistern or the office manager inducting a new junior. They may or may not be doing it well, but they are all teaching. The same applies to doctors—they also are implementing a teaching role to a greater or lesser extent. The assumption in this series is that we all have some natural instinct to teach. The aim of this series is to help develop further that instinct.

For some doctors the teaching role is a formal one. This might be as a teacher in the undergraduate curriculum or, at postgraduate level, as an educational supervisor or a clinical tutor. For many the teaching role is an informal one. In the first year after graduation, for example, the Pre-registration House Officer leans heavily on the expertise of the Senior House Officer. Both lean heavily on the Specialist Registrar and, of course, the consultant. All have a teaching role.

The GMC recognizes this teaching role. The document *The Doctor as a Teacher* (1999) states that “All doctors have a professional obligation to contribute to the education and training of other doctors, medical students. . .” and “Every doctor should be prepared to oversee the work of less experienced colleagues. . .”. The diversity of these teaching responsibilities for doctors and the skills required of them have been highlighted and described in the AMEE guide by Harden & Crosby (2000).

As we are all aware, some doctors have a more developed teaching instinct than others. The GMC also recognizes this and states not only that teaching skills can be learnt (GMC, 1999) but that junior doctors should be further developing their ability to teach (GMC, 1998). Courses in Medical Education have been available for many years, but have tended to be at diploma or Master’s level. These have been aimed particularly at the individual with special teaching responsibilities. Not everyone, however, is an enthusiast to that degree. Bearing in mind the GMC’s recommendations,

courses have been more widely available recently to all doctors regardless of their teaching commitment and enthusiasm for the subject. Hesketh *et al.* (2001) describe a framework that takes a holistic approach to the roles of the teacher and helps to define different competences for different categories of teachers, which can prove useful for course providers. There still remains, however, for some a mismatch between courses provided and doctors’ perceived needs for training in this subject area. Reasons for this mismatch include the following:

- Courses are seen as too in-depth, i.e. they are really for the enthusiast.
- Courses frequently require a substantial commitment of time.
- Courses are sometimes aimed at or open only to those with a formal teaching role, for example, an in-house course for educational supervisors who have to appraise and assess trainees.
- A course is not seen as relevant or of interest to those for whom the subject of teaching is not a priority—this may be because their main interest is in research, or simply that their priority is their clinical training and passing their membership exams.
- Courses are too theoretical and not practical enough. The doctors are not convinced that a course will help them in their job.
- The educational jargon is off-putting.

The ‘Developing the teaching instinct’ series aims to address these problems. It covers a range of teaching topics relevant to most doctors, e.g. giving feedback, supervision, mentoring, learning contracts. *Medical Teacher* will publish a new topic from the series in each issue. Each unit or mini-programme is short and concise and can be seen as not too daunting or requiring a considerable commitment of time—a commodity we seem to have less of these days. Several strategies are used to ensure the topic is seen to be relevant to readers’ practice. The ‘snippets section’ gains readers’ attention, and motivates them to read on. For many of the topics the snippet is an everyday problem to which the reader can relate. This is followed by a brief summary of and introduction to the topic.

Next the topic is elaborated on in the ‘in action’ page. A basic non-jargon approach is taken as far as possible and the amount to read is not daunting. It gives a basic insight into

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the subject and helps to de-mystify the topic and some of the educational terms frequently associated with it. The use of examples and practical tips ensures that the course is relevant to practice and not too theoretical.

The programme may be used by a doctor working on his/her own. Alternatively it could be used as a resource for face-to-face courses. The series also encourages the reader to develop skills in the topics further, by engaging in prescribed group activities and through linking to other resources on the topic. These may be books, journal articles, videos, tapes and other distance-learning courses or units. A short review is given on each resource cited, giving readers an insight into it and allowing them to judge for themselves whether or not the resource is pitched at the right level for them.

Production of the series has been supported by the Scottish Council for Postgraduate Medical and Dental Education (SCPMDE), now part of NHS Education for Scotland. Printed copies of some of the units are available in print format and all will be shortly available electronically through a website.

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