The traditional ‘coverage’ model of learning threatens to become more and more inefficient and impractical, as the sheer size of the ‘body of knowledge’ needing to be absorbed necessitates a different style of learning.

Contemporary learning methods will place increasing emphasis on collective work, knowledge-sharing and communication, as well as on refining analytic thought and decision-making processes.

In the first module of this series, Learner-centred teaching: Part 1, we looked at modifying current methods of both teaching and learning to suit learner-centred approaches.

In this module, we discuss an alternative teaching-learning process: problem-based learning. This process, with its innate constructivist character, is of particular importance to the holistic approach in psychiatry training and practice.

We show that:

- in PBL (an inquiry-based learning process), students use triggers from case scenarios to define their own learning objectives, usually relating and mapping those objectives to a defined curriculum
- although students rate themselves less highly on the possession of medical knowledge, systematic reviews support the superiority of PBL over traditional methods of teaching for student attitudes and clinical performance
- the discursive nature of PBL is particularly suited to psychiatry, as often its scientific basis is not all that ‘cut and dry’, but involves shades of grey, which, in order to be made explicit, need discussion and exploration
- trainees can be insecure about what is required of them and cast doubts on the extent of the curriculum coverage.

Reflection

(1.10) What might you expect to be the difference in results when using PBL instead of traditional teaching methods for teaching medicine and psychiatry?

(2.2) How might you go about organising a PBL group for psychiatry trainees preparing for the MRCPsych Paper 1 exam?

(3.6) Think about a scenario where you might implement PBL in your Trust. What would be the limitations that you have to overcome? How would you overcome these? How do your thoughts tally with the disadvantages discussed in this section?

Tables and figures

(2.3) The ten-step PBL process of the Norfolk Psychiatric Training Scheme

(3.3) Advantages and disadvantages of PBL
References


General Medical Council (1993) Tomorrow’s Doctors; Recommendations on Undergraduate Medical Education. London: GMC. [website]


