



Reflection Article

Learning as a life proposal: Reflection from teaching in health sciences

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ABSTRACT

The following reflection is the result of a microanalysis exercise in education carried out during the Masters in Higher Education Teaching of the Universidad El Bosque, which arose from the analytical and descriptive elaboration of categories, properties, and dimensions from the following questions: what is learning? What should a professor of medicine do for the student to learn in the clinical practice site?

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El aprendizaje como propuesta de vida: reflexión desde la docencia en ciencias de la salud

RESUMEN

La siguiente reflexión es producto de un ejercicio de microanálisis en educación llevado a cabo durante la maestría en Docencia de la Educación Superior en la Universidad El Bosque. Este texto surge de la elaboración analítica y descriptiva de categorías, propiedades y dimensiones ante las siguientes preguntas: ¿qué es el aprendizaje?, ¿qué debe hacer un profesor de medicina para que el estudiante aprenda en el espacio de práctica clínica?

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Palabras clave:

Aprendizaje

Educación médica

Knowledge is the greatest adventure of humanity. The evolutionary acquisition of cognition is the differentiating characteristic of the human being on the planet; it is the engine that stirs an insatiable curiosity to delve into the unknown. Knowledge produces an infinite number of emotions when exploring nature and seeking an explanation for

all the phenomena that determine history; therefore, the adventure of learning is full of risks, paths, disappointments, and passions that lead to the delight of a restless mind to understand the world that surrounds it. Knowledge is not an imposition; it is born from a full life whose pleasure is to fly free, beyond the horizon. The reward is found both in enjoying the journey and in the satisfaction of what has been learned.

The challenge of learning is built as a team. Expectations, feelings, and objectives are shared, which find in cooperation a form of personal fulfillment, through the construction

of common projects motivated by knowledge. The creation of the methods that allow the discovery of new findings is a playful and intellectual enterprise, in which strategies are planned that move the human spirit before the unexpected moments and surprises that hold the unknown and the best of the future. The practice of all knowledge requires the prior acquisition of full mastery of the subject. The conceptual foundation of a discipline is an exercise of appropriation whose success lies both in the identification of the essential components of the new knowledge and in the complete functional understanding of the logic inherent to the discipline in question. Therefore, when we can assemble, compose, design, predict, and find new uses for what we have recently learned, we will be able to say that we have mastered a topic and we will be on the right path of innovation and significant learning, by being able to transform and «build new mental models of reality»¹; at this moment, an infinity of cognitive potentials open up around us.

The construction of knowledge through history is not a lonely enterprise; all the great discoverers and innovators have stood “on the shoulders of giants” and have used all the knowledge accumulated by civilization over the centuries, which has made possible the advancement of science and society. In addition, the growth in research is supported by professional networks, cooperation between scholars, multidisciplinary approaches, transnational technological tools, and a whole host of creative opportunities that allow surprising and innovative results, thanks to teamwork that broadens the expectations of entrepreneurship both in social and exact sciences.

When exploring a particular field, such as educational sciences immersed and applied to health sciences, it is not possible to understand the new proposals of constructivist approaches without the active, reflective, and inquiring participation of institutions, researchers, students, and the community to which they belong.

All individuals involved in a social practice have their contributions, connections, perspectives, and transformations within their specific praxis, whose various contributions provide significant progress and meaning to the great set of universal knowledge; even in the dissemination of research results with relevant and enlightening conclusions, a complex and interactive dissemination network is required through databases and publications that amplify the results beyond a closed scientific community, capable of making them reach the most distant latitudes, with access for all.

The various tools used as mediation to build learning are both a field of study and techniques used by didactic discourse to achieve teaching competencies². In a given disciplinary knowledge, the instrumentalization of language through multiple training resources determines that the content of learning transforms the student’s mind. The selection, modification, innovation, and consolidation of each tool are an integral part of the teaching-learning process as a factor of appropriation and construction of knowledge; it is up to each discipline to study and implement those strategies that will successfully lead students toward the performance of the competencies proposed by the instructional objectives².

In the field of health sciences, the traditional behavioral models of passive transmission of contents do not consis-

tently achieve significant learning for the student in training, nor their insertion as an active social subject in a multicultural, pluralistic, and democratic community; on the other hand, the implementation of a constructivist model, whose didactic strategies are the product of the participatory reflection of the teacher, the student, and the patient, such as problem-based learning³, allows the formation of critical students, with metacognition, self-learning, and communication skills, acquiring the capacity of reinterpreting reality¹, not only solving health problems but also adapting according to ethics to the values and feelings of their patients.

One of the new tools implemented with a constructivist approach is neuroeducation, understood as an integrating model of the properties of the brain that is based on discoveries and constructions from disciplines such as neurology and psychology⁴. The application of neuroeducation by each teacher in their instructional area opens up various possibilities for significant learning, by recognizing that emotions mediate brain processes that have a lasting imprint on the minds of students; therefore, the knowledge of teachers about the properties of the brain, the stimulation of empathy, concentration, and sensitivity in agreed learning environments will constitute an unforgettable experience that will mark the know-how and being of their students, in each of their brain structures most sensitive to change and to the reinterpretation of the contents of teaching⁴.

The foregoing requires, on the part of the teacher and the educational institutions, to select and train in the relevant didactic resources that guarantee, according to the foundations of neurosciences, the achievement of those skills that impact learning according to genetics, the environment, and neurodevelopment, with experiences in sensitive times and spaces that lead students to develop new ways of relating to knowledge.

In conclusion, knowledge is the achievement of knowing, knowing how, and being, which defines us as participating individuals in each of our communities. Therefore, faced with the immense challenge of building from the academy a teaching practice that allows the transformation of the student and society, teaching must be evaluated and adapted towards a student-centered approach that enables the development of the multiplicity of the biopsychosocial potential, through meaningful learning, with the construction of knowledge that integrates new associations, interactions, practices, experiences, and skills that transform the world, through the deep reflection of a full mind that is willing and committed to the precept of “helping people to live well in a world worth living in”⁵.

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Conflict of interests

The authors declare that they have no conflict of interest.

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