SECTION ONE

Teaching and Learning
This section sets the scene by examining some important concepts related to ‘teaching’, ‘learning’ and ‘education’.

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**The words we use to talk about teaching and learning**

People use different words when talking about teaching and learning. Sometimes the same word will mean different things to different people, and sometimes different words will carry the same meaning. For example, Americans tend to use the word ‘evaluate’ to describe testing students to see if they have learnt, while the British often use the word ‘assess’. Here are some other examples of words with related meanings:

- educator, teacher, trainer, tutor, lecturer, facilitator
- student, pupil, learner, scholar

What do these words mean to you? There will never be full agreement about the ‘real’ meaning of each of them. If people appear to misunderstand us, we have to explain what we intend them to mean.

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**About ‘learning’**

All of us understand things in the light of our past experience. This is also true of ‘learning’ – we get our ideas of what ‘learning’ means from what happened to us in the past. So, for example, we may think of ‘learning’ as something which takes place in a school or college, in a classroom. We may think of it as a person sitting alone at night, trying to memorise a lot of facts so that s/he can pass an examination. However, a bit of reflection will show us that ‘learning’ is much wider than that. After all, children learn a great deal before they even get to school – they learn to speak, to walk. Educational psychologists tell us that any activity which leads to a change in our behaviour is ‘learning’ (Stones, 1966, pp.50–51).

Here are some more ideas about ‘learning’:

- **Learning can be formal or informal.** We learn informally from what we experience day by day – things which happen to us make us change the way we think and act. We may not even be aware that we are learning, which may cause problems – for example, health workers may learn bad attitudes from the example of others. Of course, learning may also be formal – we attend a course which is planned in a structured way, in a school or college.

- **We don’t just learn knowledge and facts – we also learn skills and attitudes.** This is especially important for health workers, since it is in our practical work that we have an effect on the health of the people we serve. A skill that is often overlooked is the ability to make decisions well, and this has to be learnt systematically. Note that we learn knowledge, skills and attitudes in different ways – for example, we may learn a new idea from a discussion, but we learn skills by practising them and getting feedback.

- **People learn in different ways.** Researchers have identified different ‘learning styles’ (Harris and Bell, 1986, pp.118-126). Some people are ‘receivers’ – they like to memorise what is given to them. This is a very common style. It is reinforced by teachers who expect students to memorise, and reward them for it. Other people are ‘detectives’, they like to investigate what they are learning themselves to get to understand it. Yet others are ‘generators’, they like to decide themselves what they want to learn, and then look for opportunities to learn those things.

- **Learning can be superficial or deep** (Pedler, 1974). If knowledge is only memorised (superficial learning) it is soon forgotten and may never affect the way that person does her/his work. If the learner is made to use the new knowledge actively, the learning becomes deep. The learner connects the new knowledge to the concepts that s/he already has and understands how it can be used practically. It is therefore much more likely to be remembered and used.

- **Motivation is important for learning** (Handy, 1976, pp.31–47). What is it that makes people want to learn? Some learn because they want to do a better job – they get satisfaction from the feeling that they are competent. People are also very strongly motivated by the hope that they will be rewarded – for instance,
by gaining a qualification, leading to a promotion and better pay. The need to pass exams is therefore a very strong motivator.

• Learning continues throughout a person’s lifetime – at least informally. We all know that health workers should continue to learn throughout their careers because new information about health is constantly becoming available. However, many workers do not have access to formal in-service training. This means they have to take personal responsibility for staying up-to-date and they have to become ‘life-long learners’.

About ‘teaching’

Our understanding of what ‘teaching’ is, is based on our past experience. Our earliest experience was in school, where the teacher was also a ‘master’ or ‘mistress’, standing in front of the class, telling us what to do and what to learn. Some of us experienced the same kind of ‘teaching’ at college. Others may have experienced teaching where the ‘teacher’ is more of an equal, who takes account of our experience and even learns from us. That is why Abbatt and McMahon (1993, pp.15–21) say: ‘teaching is helping other people to learn.’ They go on to say that the job of ‘teaching’ health care workers has four elements:

• The teacher has to decide what students should learn. The students and their potential employers may take part in this decision, but all are guided by the same principle: it is the job that people have to do, that determines what they should learn. They have to learn all the knowledge, skills and attitudes needed to perform a specific job.
• The teacher has to help the learners to learn. This does not mean that the teacher ‘spoon feeds’ the students, as if they were babies. It does mean that the teacher’s first concern should be that the students should learn as well as possible. Teaching sessions or classes have to be planned carefully, taking into account the learning styles, the language, the background of the students. In short, the teachers must be student centred, not teacher centred. Teachers are not dictators and students are not servants.
• The teacher has to make sure that the students have learnt – he/she has to assess them. Assessment helps teachers and students to see how well the students are progressing, so that they can attend to any weaknesses. It sets a standard, so that society is given people who are competent to practice. We must plan assessment carefully so that it supports the learning we want to see – we know that students learn what they believe they need to pass the exams, and leave out the rest.
• The teacher has to look after the welfare of her/his students. Students who are stressed and unhappy do not learn well. Good teachers try to ensure that the general living conditions of their students are adequate. They also provide opportunities for personal counselling for them. Teachers need to cultivate an open and trusting relationship with their students.

About ‘education’

We know that scientists are able to teach rats and even worms to perform certain actions, by rewarding them if they choose the ‘right’ action and punishing them if they choose the ‘wrong’ one! Is that what teaching is all about? We feel instinctively that teaching is much more than this. We would like our students to grow intellectually, to widen their horizons, to start reasoning independently. Many people like to use the word ‘educate’ for this process. Here is what two very different people have said:

• The great Socrates said that a good teacher should be like a gadfly (or black fly, well known to eye care workers!) which is an irritating and disturbing insect. The teacher asks difficult and important questions, and expects students to work out the answers themselves. This takes place in the form of a dialogue (not a lecture).
• The 20th century Brazilian educationalist Paulo Freire says the same thing in another way – teachers can be ‘bankers’ or ‘problem posers’. The ‘bankers’ see their students as empty vessels, to be filled with the teacher’s knowledge and ideas (as one puts money into a bank). The ‘problem posers’ understand that their students already have knowledge and experience, and stimulate them to use those resources by giving them problems to solve. This is clearly very important for people planning and delivering eye care services. They have to learn knowledge and skills, true enough, but then they have to be able to apply them in a variety of different circumstances. They constantly have to solve problems, to make decisions – and they have to learn to do this well.