

POLICY FORUM

Training Tomorrow's Health Professionals

Introduction

It is tempting to say that what goes around comes around. Certainly the new educational projects and programs described in this issue of the NCMJ have built on prior innovations, and the popularity of various educational methods sometimes seems as cyclic as fashion trends. At the same time, some of what seems new really is new, and when it comes to health professions education, the difference between today's initiatives and their progenitors is akin to the shift from black-and-white television to Technicolor.

During my medical school training, much if not all of our classroom time was offered as self-learning modules. The instructors gave regular lectures, but it was acceptable to pick and chose—to attend all of them or to skip the lecture hall altogether to study page after page of the Xeroxed curriculum in all its detail (and all its obfuscation, to tell the truth). We did not have to take exams at the end of each module. Instead we would study for what we felt was most urgent and then anonymously take the test, labeling our papers with any eccentric identifier we adopted. The catch was that the end-of-year tests were required, and pass or fail were the only possible outcomes. My cohort was also among the first to take full advantage of the North Carolina Area Health Education Centers (AHEC) program, which encouraged—and sometimes required—that we attend clinical rotations off site, leaving our collegial learning and peer-support networks miles behind.

Those days are a far cry from today's health professions education. Computers, webcasts, and telelearning are now the norm, and additional dedicated faculty have been added to AHEC, enhancing on-the-ground training. We not only allow but often require that students leave the golden towers of academia to learn in the community, and longitudinal clerkships and similar programs are offering alternatives to intermittent, short, and joltingly unrelated clinical rotations. Today we also try to make it easier for students to choose a career in nursing, pharmacy, or clinical practice that acknowledges their commitments to their family and their community, not to mention the financial debt that can strangle ongoing career advancement. By recruiting talented and ambitious students and providing immersive experiences, we make it more likely that students will bring advanced health care to the communities where we live, work, play, and learn. NCMJ

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