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Exposing Medical Education's Hidden Curriculum through an Exploration of Teacher-Learner Relationships

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Abstract: *The purpose of this study was to explore third-year medical students' perceptions of their teacher-learner relationships with their clinical educators.*

The conceptualization of situated cognition in the field of adult education was recently called into question by Niewolny and Wilson (2009) who suggest that the theory fails to take into consideration the ways in which “learning and cognition are culturally constituted through socially structured relations of power” (p. 41). Similar assertions have been made about communities of practice and the process of legitimate peripheral participation (Hay, 1996) – concepts underpinned by situated cognition. Communities of practice are “groups of people who come together informally to share enterprise, learn, and practice” (Merriam et al., 2003, p. 171); in turn, legitimate peripheral participation describes the process by which individuals enter such a community as members of the periphery and, in time, through the adoption of members’ attitudes, behaviors, and beliefs, eventually become more central community participants. According to Hay, the problem of advocating for increasing opportunities for situated learning and enculturating learners into a community of practice is that this process inevitably de-centers both the expert (“old-timers”) and the learner (“newcomers”). As a result, learners become powerless over what and how information is taught, and by whom. More specifically, “students have no ‘space’ to create knowledge within the community of practice until they reach a certain station in relationship to the center of the community- by which time most newcomers have become old-timers” (p. 93). It can be argued that Hay’s view of communities of practice manifest within the field of medicine through the existence of what is known as medical education’s hidden curriculum. According to Kibble et al. (2006), the hidden curriculum is used to describe the socialization process into medicine, and its existence sheds light on the “the commonly held ‘understandings,’ customs, rituals, and taken-for-granted aspects of what goes on in the lifespace we call medical education” (Hafferty, 1998, p. 404). For example, in the third-year of medical school, as students enter the clinical environment for the first time in their training, they are confronted by curriculum embedded with the attitudes, behaviors, and beliefs which appear to be necessary to solidify their success as future physicians. Taking this into consideration, some have argued that there is a need to take a critical approach to medical education that focuses on deconstructing issues of power and the hegemony that pervades the clinical environment (Wear, 1997). In response to this concern, there are calls for research to explore the hidden curriculum (AAMC, 2005), and to investigate the social aspects of learning and its relational components (Haidet & Stein, 2006); as it has been suggested that “relationships are a critical mediating factor in the hidden curriculum” (p. S16). More specifically, Haidet and Stein suggest that by “investigating the processes of the culture of medical education through the ‘lens’ of student-teacher relationships, medical educators may be able to harness the power of relationships to modify students adoption of the prevailing premises of the medical culture” (p. S18). This investigation may be most critical in the relationships developed between third-year medical students and clinical educators, as it is through these relationships that students begin to adopt the premises of the medical culture and, in turn, begin on the path that leads to the

replication of patterns that have often been associated with negative learning experiences (e.g., berating, humiliating students) (Seabrook, 2004). In order to address this call, the purpose of this study is to examine third-year medical students' perceptions of their teacher-learner relationships in the clinical environment.

Theoretical Frameworks

Informing this study are communities of practice and legitimate peripheral participation (CoP/LPP) (Lave & Wenger, 1991) and the relational-cultural theory (Miller & Stiver, 1997). CoP/LPP are employed due to the distinct parallels that can be drawn between current research of third-year medical students' experiences and the tenets espoused by these concepts (Lave & Wenger). Although, this framework provides a lens through which previous findings may be explained, it falls short in examining the role of relationships in the enculturation of students, as it downplays the role relationships play in the teaching and learning process. Thus, this study also draws on the relational-cultural theory, which is a psychological developmental theory that seeks to provide insight into the ways in which individuals grow within and through relationships (Miller & Stiver). This theory posits that relationships consist of both connections and disconnections. Connections, being the "source and goal of development" (p. 22), involve "a sense of mutual engagement, empathy, authenticity, and empowerment" (Dooley & Fedele, 2004, p. 230). Connections, in turn, lead to positive outcomes such as increased zest, self-worth, clarity, ability to take action or create change, and an increased desire to establish future relationships. Disconnections, on the other hand, lead to these outcomes being diminished in individuals (Miller & Stiver). Thus, this framework when coupled with CoP/LPP, can provide significant insight into third-year medical students' perceptions of their teacher-learner relationships.

Methodology

This study employed a basic interpretive qualitative design, which seeks to understand "how participants make meaning of a situation or phenomena," and looks for an emergence of themes from the participants' experiences (Merriam & Associates, 2002, p. 6). Participants were recruited via email, which was sent to the third-year class at a single medical school, and a purposeful sample was selected. Thirteen interviews were held during the students' second semester, providing ideal context for reflecting on experiences. Data from interviews were transcribed, and a constant comparison analysis was used for analysis (Merriam, 1998).

Findings

Findings suggest that students view their relationships as: a source of empowerment; lacking authenticity; impacted by empathy; dependent on personality compatibility; shaped by contextual factors.

A Source of Empowerment

Students spoke about their teacher-learner relationships as being a source of empowerment—a feeling of being encouraged, strengthened, and of having the capacity to act (Dooley & Fedele, 2004). Positive relationships gave them a sense of strength and hope that they

were going to make it as physicians, and a sense of encouragement that their schooling was a means to an end. One student, for example, stated, “whenever you have particularly good relationships like you would say, I want to be like this person when I’m a doctor,” and went to say, “they kind of give you a sense of motivation and purpose ...they kind of give like a sense of the light at the end of the tunnel.” Others expressed similar feelings, particularly in relation to encouraging feedback through the words of their educators. One student suggested, “he [educator] gives a lot of feedback and I follow him around because it is like a drug because if you do something right he’ll give you a little bit of feedback and it feels so good.” Similarly another noted, “if you get good feedback from someone who you feel you really had a good connection with... it helps your confidence, it makes you feel like there’s a future for you.” In this sense, students suggested that relationships, particularly positive relationships coinciding with positive feedback, led to a belief that they were capable of achieving the goal of becoming a physician.

Lacking Authenticity

Students also suggested that their relationships lacked authenticity; an awareness of the self and the other, and an openness to being genuine (Dooley & Fedele, 2004). The major factor in this regard was the knowledge of being graded, where students felt that they could not be themselves, and that they needed to act in certain ways in order to ensure they received high marks. One student stated, “if you want the person to like you, you want to act a certain way so you can be liked,” and went on to say, “you might not necessary try to do anything that might make someone upset or make someone lower your grade.” Such comments were echoed by others who reported acting a certain way to please educators; ranging from pretending to be happy or helpful to not standing up for something they believed in. As one student noted, “I think if it weren’t graded at least I would feel more comfortable with standing up for... something I didn’t think was too funny...I hate to think of myself as a weak person like that that doesn’t stand up for what I believe in but sometimes you have to do that I guess.” Although students expressed concerns about being able to be themselves, their comfort level increased with time. One student, for instance stated, “the first couple of days are usually very different than the last couple of days because you’re not terrified anymore by the end.” In this respect, authenticity appeared to require time to develop; suggesting students needed time to become comfortable before revealing themselves to educators, knowing that these individuals were responsible for grading them.

Impacted by Empathy

Another factor impacting students’ relationships was empathy, or the “joining with and understanding [of] another’s subjective experience” (Jordan, 1997, p. 15). One student, for instance, noted that “[empathy is] an important part of just relating to people and that helps the educational process to move forward if you are able to connect with an individual on a human level.” This was echoed by others, who suggested that not only did their experiences on a rotation benefit when educators attempted to connect with them and gain an understanding of their experiences, but that their relationships with educators benefitted as well. For instance, it was stated that “it’s easier to make relationships when they ask you about yourself up front.” Interestingly, the discussions about empathy primarily revolved around educators’ ability to understand the student’s experience, and not vice versa. In this regard, students focused primarily on how educators either displayed or did not display empathy toward them. Most frequently,

students referenced empathy as something that was shown when educators recognized their responsibilities; understanding that they were limited in what they could do in the clinic and that they have to study for exams. As one student noted, “educators who have a lot of empathy...they’ll look at you and say...you should probably go home and do a little bit of reading and get some rest.”

Requiring Reciprocal Engagement

Students also saw it as important that their relationships with educators involved reciprocal engagement, or a perception of mutual involvement and commitment (Dooley & Fedele, 2004). In this respect, they spoke about how their relationships benefitted from educators taking an interest in them. For instance, one student noted, “I think it goes a long way when people show an interest” while another stated, “I think when they take an interest in you as a student and as a future doctor, it’s just makes you feel really good, especially when you have a good relationship with them.” In addition to educators’ interest, students also felt a need to be able to contribute to the relationship. As one student noted, educators do a “favor” by teaching, and he would like to repay this “favor” by contributing to the work that needs to be done; suggesting that relationships with educators were “like a mutual trade sort of thing.” Others also suggested that it was important to feel they were able to help, and that their presence was appreciated. For example, one participant stated, “one of the most important things...as a third year is to feel like you’re helping and to feel like they want you there” and went on to say, “people who you have a relationship with are more likely to make you feel like you’re making some kind of contribution.” Likewise, another suggested that “those are the experiences you remember is when you leave a room and you feel like you have contributed in a positive way and that your mentor recognized and facilitated that.”

Dependent upon Personality Compatibility

Students also stated that relationships with educators are dependent upon personalities being compatible. For instance, one student commented, “It’s just whether your personalities match. That’s like with any work environment,” whereas another noted, “just like in life outside of education you’re gonna meet people that your more comfortable with and that your personalities blend well and there are some personalities that you don’t mesh well with.” In addition to recognizing the role of personality in the forming of relationships, a number of students also suggested that certain personality types were more common among particular specialties. As one student stated, “the surgery rotations are more notorious for having kind of the more personalities who might be a little harder to deal with.” Students made sense of these differences by suggesting it was necessary for physicians to have certain personalities in order to fulfill the duties that the position requires. One student stated that “it’s commonly known...that surgeons are more gruff...it’s not a bad thing...you kind of want your surgeon to be anal and insane and very functional.” Recognizing that fields tend to attract individuals with particular personality led students to view their compatibility as a signpost for where they may belong in terms of their future career. One student noted, “the reason you pick specialties is because of your personality, and hopefully the people that you’re with on your rotation reflect the personality of that specialty and see if you fit there or not.” In this regard, it appears that one may be attracted to a specialty as a result of how his or her personality seems to match those physicians working in that field.

Shaped by Contextual Factors

Students also discussed contextual factors unique to the clinical setting that impacted their relationships with educators, including time, the clinical hierarchy, and the specialty.

Time. Students commonly referenced time as being a factor that impacted their relationships. For example, one participant noted that “there’s not the time to build that educator - educatee relationship” while another stated, “you might not work with someone close enough for a long period of time.” Being that time played an important role in students’ accessibility to educators, they noted how they may be more likely to develop relationships with those educators closer in proximity within the clinical hierarchy, as these individuals may be more accessible.

The Clinical Hierarchy. Students spoke explicitly about the clinical hierarchy, referring to the “chain of command” which dictated that students answer to interns, who answer to residents, who answer to attendings. In turn, students suggested that it determined the individuals with whom they formed relationships and the types of relationships that they had. For instance, one participant stated, that students “have the ability to connect more with the resident because they are closer to what you are going through, kind of like we said, the hierarchy thing.” Being closer in the hierarchy also for the most part meant being closer in age, and therefore students talked about how their relationships with residents differed from those they have with attendings. As one student suggested, “residents ...they’re younger, they’re at your level most of the time, like they’re my friends on facebook.” In turn, students spoke about being “friends” with residents versus having “professional” relationships with attendings.

The Specialty. There was an understanding among students, that the specialty and the team assigned to the rotation impacted one’s experiences, and in turn, the relationships they developed. As one student articulated, “It’s kind of hard to say because...every person’s different...[and] the different fields are different” while another noted that she had “been lucky with having really good residents...But talking to...friends, it’s kind of luck of the draw. You could both do the same rotation and have completely different residents and have completely different experiences.” Ultimately, students recognized relationships as variable and dependent upon numerous factors, including the team with whom they worked as well as the work at hand.

Discussion

Based on the findings, much can be gleaned about how students’ perceive their relationships with clinical educators, resulting in a number of practical and theoretical implications. In regard to practical implications, it is clear that relationships are a key factor in how the hidden curriculum is experienced by students. In particular, students view the clinical hierarchy as impacting the types of relationships they have with their educators. In addition, due to the power differences that exist and the fact that students are being evaluated, they are much less likely to be able to engage in authentic relationships with their educators, and feel more compelled to act in a certain manner, or replicate certain behaviors in order to achieve particular marks. Further pedagogical implications can be gleaned as well. Perhaps most glaring is the impact of positive feedback, which clearly provides students with motivation, purpose, and hope for the future. Additionally, educators’ empathy seems to be an important component of relationships for students, who view the strength of their relationships both by educators’ understanding of their responsibilities as well as by educators’ interest in them as a student. In this respect, it becomes imperative that educators begin to critically reflect on their practice and

recognize that their actions and the relationships that they develop with their students have a significant impact.

In terms of theoretical implications, this study also shows that relationships are a key factor in how *newcomers* (Lave & Wenger, 1991) learn and make meaning of their profession. Relationships as a central construct is missing in the literature on CoP/LPP, and more research is needed to determine how relationships impact the informal, or hidden curricula, and how they may ultimately impact issues of access in terms of entering and becoming participants of communities of practice. Furthermore, the CoP/LPP framework does not address the challenges of becoming “old-timers” in complex organizational structures, or the ways in which organizational cultures, power structures, and hierarchies impact one’s navigation from the periphery (Lave & Wenger). Further theoretical implications can be gleaned from looking at these findings through the lens of the relational-cultural theory. The findings seem to support the theoretical assumptions that relationships are impacted by factors of engagement, authenticity, empathy, and empowerment, and that the presence or absence of these factors may contribute to positive or negative feelings among students, particularly self-worth. However, much still needs to be learned about this theory, particularly in terms of its application for teacher-learner relationships, as well as looking at relationships within organizational structures and exploring how these structures and their underlying cultures influence the development of relationships.

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