

IZOBRAŽEVANJE V MEDICINI

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Uvodnik

V zdravstvu pogosto poudarjamo, kako pomembno je izobraževanje. Vse strokovne organizacije, ki poudarjajo svoj profesionalizem, posebej poudarjajo pomen izobraževanja svojih kadrov, saj je skrb za izobraževanje lastnih kadrov ena temeljnih značilnosti profesionalizma [1, 2]. Ob tem pa je včasih prav nerazumljivo, da je pristop do izobraževanja pogosto bistveno slabši kot pristop do znanosti in medicinske prakse. Strokovnjaki s področja medicinske edukacije pogosto ugotavljajo, da se pri izobraževanju še vedno držimo napačnih prepričanj in tradicij, ne glede na to, da se je področje medicinskega izobraževanja v preteklosti močno razvilo [3]. Izvor znanja, ki ga uporabljamo v izobraževanju, pogosto ni v medicinski znanosti, temveč v področjih, ki z medicino nimajo veliko skupnega. Morda je ravno v tem razlog, da tradicionalne medicinske vede tako težko sprejemajo novosti na tem področju. Kljub vsemu pa se tudi v zdravstvu pojavljajo novi standardi.

Medicinsko izobraževanje temelji na trdnih teoretičnih predpostavkah [4] in terja specifično znanje. Tisti, ki se ukvarjajo z izobraževanjem, se morajo spoznati na svoje ozko strokovno področje, ampak ob tem pa morajo nekaj vedeti tudi o tem, kako učiti. Že dolgo ne velja več, da je samo znanje z določenega področja dovolj, da dobro poučujemo [5]. Poučevanje se je tudi zelo demokratiziralo in naloga učiti ne pripada samo največjim strokovnjakom, ampak tudi vsakemu, ki določeno delo dobro opravlja in ga zna učiti. Izobraževanje zdravstvenih delavcev se je preselilo iz akademskih krogov fakultet in učnih bolnišnic v okolje, kjer se odvija vsakdanja praksa, ob profesorjih in asistentih se pojavljajo kot učitelji tudi zdravniki z izkušnjami v praksi, ki nimajo akademske kariere, pa tudi drugi kadri v zdravstvu, pogosto tudi uporabniki zdravstvenih storitev [6]. V zadnjem času imajo učitelji na razpolago celo vrsto novih metod, ki počasi, a zanesljivo izrinjajo tradicionalne pasivne oblike pouka, kamor sodijo predavanja. Vse bolj se poudarja aktivna vloga učenca, spodbujanje njegovih interesov in kreativnosti ter prilagajanje pouka učencu [7-10]. Zaradi napredka na tem področju je tudi načrtovanje pouka

vse bolj zahtevno [11, 12]. Veliko sprememb je doživelovo tudi preverjanje usposobljenosti. Ustni izpitki kod edina metoda preverjanja usposobljenosti so stvar preteklosti, uveljavljajo se vse bolj kompleksne metode preverjanja, stalno spremeljanje napredka, spodbujanje in preverjanje usposobljenosti v okoliščinah, v katerih delamo [8, 13-16]. Moderna tehnologija nam je dala na voljo celo vrsto novih možnosti, ki jih lahko uporabljamo v pouku. Te novosti prinašajo izzive, saj moramo vedeti, kako jih najbolj pravilno uporabimo, da nam bodo koristne in da ne bomo zaradi blišča novosti zavrgli uveljavljenih metod [10, 17-20]. Vse bolj se zavedamo pomembnih etičnih dilem v izobraževanju, predvsem pomembne vloge uporabnika zdravstvenih storitev [21, 22].

Vsa ta teoretična izhodišča so našla svoje mesto v praksi tudi v Sloveniji [23-25] in vse več je tudi znanstvenih objav s tega področja. Vse več je tudi revij, ki se specializirano ukvarjajo s področjem izobraževanja zdravstvenih delavcev.

Področje javnega zdravja ima tu svoje posebnosti in tudi posebne priložnosti. Z ustrezнимi metodami izobraževanja lahko motiviramo študente in dobro naučimo strokovnjake, da se bodo znali soočati z izzivi prihodnosti. Javno zdravje lahko prikažemo kot področje, polno izzivov in skrivnosti, lahko pa z neustreznim pristopom ubijemo v mladih vso željo in radovednost za probleme, s katerimi se sooča javno zdravje v tretjem tisočletju.

Zato smo se v uredništvu revije odločili, da namenimo izobraževanju v javnem zdravju tematsko številko, v kateri smo zbrali ugledne strokovnjake z različnih strokovnih področij in zbrali njihove izkušnje. Upam, da bodo prispevki koristni in zanimivi za bralce naše revije.

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EDUCATION IN MEDICINE

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Editorial

We often stress the importance of education in healthcare. All expert organisations, which stress their professional nature, put special emphasis on the importance of educating their personnel, as promoting the education of own personnel is one of the main characteristics of professionalism [1, 2]. In this respect, it is sometimes incomprehensible that the approach to education is considerably worse than the approach to science and medical practice. Professionals in medical education often establish that we still cling to the wrong beliefs and traditions in education, regardless of past developments in medical education [3]. The source of knowledge, which we use in education, often does not lie in medical science but in fields that do not have much in common with medicine. This might be the reason why traditional medical sciences experience such difficulties in accepting novelties in this field. Nevertheless, new standards are appearing in healthcare.

Medical education is based on sound theoretical assumptions [4] and requires specific knowledge. Those involved in education have to be experts in their narrow field of expertise but they also have to know something about how to teach. It has long been known that only knowledge from a specific field is not enough to be a good teacher. [5]. Teaching has also become more democratic and the task to teach no longer belongs only to the greatest of experts but also to all who perform a certain job well and who know how to teach it. The education of healthcare professionals has moved from the academic circles of faculties and study hospitals to an environment that offers everyday practice. In addition to professors and assistants, experienced practicing doctors, who do not have an academic background, appear as teachers. They are joined by other healthcare professionals, often even the users of medical services. [6]. Lately, teachers can choose from a wide variety of new methods that are slowly but surely pushing aside traditional passive forms of education, such as lectures. The active role of the students is being stressed as well as the facilitation of their interests and creativity and adapting the course to the students [7-10]. Advancements in this field make lesson planning more

demanding [11, 12]. A lot of changes have occurred in the testing of qualifications. Oral examinations, as the only method of testing qualifications, have become a thing of the past. More complex methods of verification have asserted themselves together with continuous monitoring of progress and the facilitating and verifying of qualifications under the circumstances in which we work [8, 13-16]. Modern technology has provided us with a number of new possibilities that we can use in teaching. These novelties represent new challenges, as we need to know how to use them correctly, so that they can be useful and that the lure of novelty does not cause us to discard established methods [10, 17-20]. We are becoming increasingly aware of the important ethical dilemmas in education, especially the important role of the user of healthcare services [21, 22].

All these theoretical starting points have found their place in practice also in Slovenia [23-25] and there is an increasing number of scientific papers dealing with this field. There are also more journals focusing on the field of educating healthcare professionals.

The field of public health has special characteristics but also offers special opportunities. Appropriate education methods can motivate students and teach professionals to be able to face the challenges of the future. Public health can be shown as a field that is full of challenges and mysteries, while the wrong approach can smother the desire and curiosity of the young for the problems that public health is facing in the third millennium.

This is why our editorial board has decided to prepare a themed issue dealing with education in public health. We have united renowned professionals from different fields, who have shared their experiences. I hope that these papers will be useful and interesting to our readers.

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