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Spotlight on Peer Assisted Learning: a world of opportunity

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Peer-assisted learning is not a new concept ... the idea of students teaching other students stretches far back into history and we all experience informal peer learning at every stage of our development and in our undergraduate and postgraduate careers. Some feel this valuable form of learning is integral to medical education and is a largely under-used and undeveloped resource, which can be harnessed in a more formalised way. The term Peer-Assisted Learning (PAL) as an educational concept has been accepted in the medical education literature to mean organised educational programmes where students tutor or teach their peers, and the literature to date suggests that these programmes could potentially benefit the peer tutors, those being tutored and the medical school more generally (Ross and Cumming, 2005). Peer Assisted Learning was the theme of a short communication session, a workshop and a spotlight at the recent AMEE Edinburgh 2004.

The short communication session, "Students as teachers and assessors" introduced a variety of different approaches to PAL from around the world. Senior medical students from the Norwegian University of Science and Technology facilitate PBL groups for Year 1 and Year 2 students alternately with faculty members (Hansen and Holen, 2004). Feedback in some respects was better for senior students than faculty staff, and it was proposed that they may be more aware of the skills and areas of knowledge most in need of development because they had recently studied the topics themselves. From Argentina, we heard of a scheme in which senior students, after a year of training, work as teaching assistants for younger peers in core biomedical science topics (Centeno and Primogero, 2004). A form of Reciprocal Learning from Heidelberg was described in which students worked in groups to identify learning needs and prepare a teaching session for year-group peers (Kadmon et al, 2004). In Glasgow, Scotland, a group of three students, in a student selected module, coordinated sessions and tutored younger peers on the principles and processes of clinical examination (Burke et al, 2004). There were also two short communications and other AMEE sessions which reported on peer assessment specifically (Velan et al, 2004; Schonrock-Adema et al, 2004). The area of students as assessors overlaps heavily with PAL, but deserves separate consideration.

For those attending the workshop on peer-assisted learning, things became somewhat more surreal! Participants were split into three groups and asked to perform an origami task from an instruction sheet. One group was trained in the task by facilitators and became the tutors of the second group and the third, 'self-directed learning' group had only the instruction sheet. The idea was to help participants experience and reflect on PAL from a personal perspective, with an opportunity to consider the potential benefits and pitfalls of such a programme and ways in which these could respectively be enhanced and avoided in planning PAL approaches for their own curricula (Aftab et al, 2004). From the enthusiastic and enlightened discussions of the participants before, during and after the origami task, these goals seem to have been largely successful. The facilitators of this workshop were all involved in a PAL programme at Edinburgh in which year 4 tutors are given some training in facilitation skills and are validated in clinical examination before facilitating groups of year 3 students in rehearsing their clinical examination skills. Like the scheme in Glasgow, this was originally initiated by a group of year 4 students and has since become a popular extra-curricular addition to the course.

The variety of schemes presented is testimony to the broad applicability of peer assisted learning and the enthusiasm of the students who participate. Students themselves are an untapped learning resource, which can be used to enhance curricula in many fields, but particularly medicine where informal networks often already exist. Tutors see PAL as a chance to reinforce their own knowledge, perhaps in an area of particular interest, as well as an opportunity to develop their own teaching and communication skills. Equally, those tutored seem to benefit from these sessions by having a relaxed and less formal learning atmosphere in which to ask questions, and by having a tutor who has recently studied the same material, is aware of problem areas and can provide meaningful feedback and advice on study skills, approaches to learning and content.

In Plenary 2 of AMEE 2004 Kirsti Lonka of the Karolinska Institutet, Sweden, discussed ways to overcome the limitations of individual minds, and extolled the benefits of working with others and learning in one's zone of proximal development (Lonka, 2004). PAL provides ideal examples of ways to enhance these opportunities in medical curricula, as students are tutored by other students at roughly the same educational stage as themselves, and focus on subjects on which the tutors are by no means experts but are those which they are themselves studying or have recently studied. The overwhelming consensus at AMEE 2004 was that PAL programmes are an exciting and developing area in medical education which seem to benefit students, whether tutoring or being tutored, and the medical schools which co-ordinate them. Expect to see Peer Assisted Learning themes recurring across the whole spectrum of medical education and the literature.

Aftab S, Anderson J, Lui M, Powell E, Ross M, Varma B. Peer Assisted Learning. Workshop 4Q, AMEE Conference Edinburgh 2004 (ABSTRACT)

Burke J, Field M, Lloyd D, McAllister D. Peer Assisted Learning (PAL) in clinical examination. Short Communication 10F 4, AMEE Conference Edinburgh 2004 (ABSTRACT)

Centeno A and Primogero C. Students' reasons to select a discipline to teach in a student-as-teachers program. Short Communication 10F 2, AMEE Conference Edinburgh 2004 (ABSTRACT)

Hansen TS and Holen A. Senior students as facilitators in PBL groups. Short Communication 10F 1, AMEE Conference Edinburgh 2004 (ABSTRACT)

Kadmon M, Berger I, Holler S, Autschbach F. Clinical-pathological conference – an innovative concept of an interdisciplinary course by students for students. Short Communication 10F 3, AMEE Conference Edinburgh 2004 (ABSTRACT)

Lonka K. How to overcome the limitations of individual minds? The psychology of learning meets medical education. Plenary 5A AMEE Conference Edinburgh 2004

Ross MT, Cumming AD. Peer Assisted Learning. In: Dent J, Harden R, eds. A Practical Guide for Medical Teachers, 2nd edition. Churchill Livingstone 2005 (chapter 13 -in press)

Schonrock-Adema J, Penninga M, Cohen-Schotanus. Assessment of student behaviour: more differentiation in tutor ratings by introducing peer assessment? Short Communication 10F 6 AMEE Conference Edinburgh 2004

Velan G, Hughes C, Toohey S, Harris P. Online peer rating of teamwork participation. Short Communication 10F 5, AMEE Conference Edinburgh 2004