Overcoming Resistance in Learning: Bridging the Gap Between Educator and Learner, Phase 3

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Resistance in learning (RIL) defines a set of attitudes or behaviors demonstrated by learners in an educational setting that result in decreased learning. Literature describes the etiology as multifactorial, including learning environment, characteristics of the learner, and teaching style.

In order to maximize student learning and success, we must first identify the types of resistance being demonstrated. To begin understanding resistance in learning, we first focused on the student perspective.

In conjunction with a team of academic hospitalists, we are using QI methodology to conduct a series of PDSA cycles to identify types of RIL with the goal of implementing an intervention during the first 2-year curriculum at our medical school.

We hypothesize that reduction in RIL will contribute to higher USMLE Step 1 scores.

**BACKGROUND**

Resistance in learning (RIL) defines a set of attitudes or behaviors demonstrated by learners in an educational setting that result in decreased learning. Literature describes the etiology as multifactorial, including learning environment, characteristics of the learner, and teaching style.

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**METHODS**

**Survey** (PDSA Cycle 2)

We implemented a series of eight intersession weeks throughout the 2-year basic sciences curriculum designed to focus on Wellness, Integration, Step 1 preparation, and Education about learning.

**Focus Group** (PDSA Cycle 1)

We conducted a focus group with both Block Chair faculty and medical students (years 2-4).

**“WISE” Weeks** (PDSA Cycle 3)

We implemented a series of eight intersession weeks throughout the 2-year basic sciences curriculum designed to focus on Wellness, Integration, Step 1 preparation, and Education about learning.

**OBJECTIVES**

1. Identify the types of resistance in learning demonstrated during the preclinical years of medical school.

2. Design and implement an intervention to reduce resistance in learning and improve student academic success.

**LESSONS LEARNED**

1. Newly matriculated students maintain a strong sense of self-efficacy in academic achievement and prioritize wanting to master content, yet also want to perform well.

2. Students are intrinsically motivated at the start of medical school, citing making an impact, serving others and curiosity as their top motivations to enter Medical School.

3. As curriculum progresses, motivation to learn is increased by making content more relevant to USMLE Step 1.

**NEXT STEPS**

1. Motivation for learning, study strategies and test anxiety will be surveyed throughout the new WISE curriculum to evaluate change over time.

2. Pre and post-curriculum USMLE Step 1 scores will be compared.

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