

## Principles of Adult Learning: A Brief Overview

Adults learn better when:

- Learners are active contributors to their learning
- Content relates to a learner's current work or life experience
- Content is tailored to a learner's current or past experience
- Learners have opportunity to identify their own learning goals and direct their education
- The educational setting allows learners to practice what they learn
- The educational setting provides support for self-directed learning
- The faculty and peers provide feedback during the active learning
- The educational setting allows learners to reflect on their learning
- The educational setting provides learning from multiple sensory channels
- The learning environment is safe and free from intimidation
- The content "makes sense" to learners and can be used immediately

When developing the activity, include some of the techniques described below:

1. Solve genuine problems
  - Participants could be prompted to look at their own practice
2. Reflect using analogy/comparison
  - Include cases, comparison of cases and prompts to compare what they are experiencing within their practice
  - Use "if-then" type of statements in discussions
3. Practice
  - Time to practice, interact and discuss new application/strategy/knowledge
  - Any non-educational interventions that include practice
4. Develop framework for application
  - Use commitment to change contracts
  - Create a diagnosis and treatment plan
5. Link new knowledge to previous
  - Need to understand what they know and how a clear vision of what should be achieved (Too large a gap or too small a gap lead to lack of motivation. Too large, not achievable; too small, not worth it.)
6. Involve learner in the learning process
  - For learning to occur, the learner must be alert, attentive and engaged in the process. To assure engagement, involve learners in tasks that require application of knowledge in patient care
7. Seek environment that encourages critical self-reflection and peer collective inquiry
  - Adults use self diagnostic model, peer collective inquiry, and safe and effective reflection
8. Avoid authority position
  - Move from unequal status of teacher and student
9. Feedback

- Provide feedback with good performance measures
10. Process information from multiple sensory channels
    - People have different learning and cognitive styles, use a variety teaching styles to accommodate all
  11. Address practical problems with useful and immediate application
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### Sources

Tools to Support Implementation of the ACCME's Updated Accreditation Criteria – Complete Toolkit. The Accreditation Council for Continuing Medical Education. January, 2007. Available at: [http://www.accme.org/dir\\_docs/doc\\_upload/de070cff-f614-4f83-8659-837e4318aeb3\\_uploaddocument.htm](http://www.accme.org/dir_docs/doc_upload/de070cff-f614-4f83-8659-837e4318aeb3_uploaddocument.htm)

Reporting of Adult Learning Principles. Effectiveness of Continuing Medical Education, Structured Abstract. (Publication No. 07-E006 - Appendix E) February 2007. Agency for Healthcare Research and Quality. Available at: [www.ahrq.gov](http://www.ahrq.gov)

### Additional Reading

Abela, Jurgen. Adult Learning Theories and Medical Education: A Review. *Malta Medical Journal*. 2009; 21(01) Available at: <http://www.um.edu.mt/umms/mmj/PDF/234.pdf>

Conner, Marcia L. How Adults Learn. *Ageless Learner*. 2003-2007. Available at: <http://www.agelesslearner.com/intros/adultlearning.html>

Russell, Sally S. An Overview of Adult Learning Processes. Society of Urologic Nurses and Associates, 2006. Available at: <http://www.medscape.com/viewarticle/547417>

Scott, Carol Jack. Applied Adult Learning Theory: Broadening Traditional CME Programs with Self-Guided, Computer-Assisted Learning. *The Journal of Continuing Education in the Health Professions*. 1994; 14: 91-99. Available at: <http://www3.interscience.wiley.com/cgi-bin/fulltext/114208740/PDFSTART>