

Editorial

In preparing this issue, I have been thinking about what drives our practice. The articles that come together in an issue are usually by nature heterogeneous; after all, FoHPE's remit is multiprofessional and broad. As such, I appreciate the diversity, range of influences and "cross-fertilisation" that seems to be integral to our practice and research. However, in an attempt to categorise what drives us, we seem to be gazing in three main directions: we look to what we are doing; we look at what others are doing (including education outside of the health professions); and crucially, we look to what we should be doing. The emphasis in that third gaze should be on generalisability, meaningful outcomes, reflecting on the unexpected and extending the discipline.

Looking over the fence: As educators, we are wise to keep an eye on what is happening in the general educational landscape as well as our own backyard. Flick through the abstracts for any current conference and you will quickly find the in-vogue theories and approaches that are influencing our practice; phenomenology, threshold concepts and video-ethnography for instance. In this issue, Barratt leads us from our familiar embracing of mindfulness and reflection to a more rounded view of contemplative pedagogy from a general education and psychology perspective. She argues that embracing this pedagogy would help to marry the objective and subjective aspects of practice, but acknowledges the need for more efficacy studies. Often discussed in popular media, generational traits have also come to influence professional settings. In their study of feedback preferences, Hills, Levett-Jones, Warren-Forward and Lapkin question the stereotyping of Generation Y students, reflecting upon the multiple influences on an individual's approach to learning. Their findings are perhaps unexpected, given conventional views of Generation Y.

Looking inside the fence: The content of any journal should also reflect what is current and, to a greater or lesser extent, what is on the horizon. The commodification of education is discussed in this issue in relation to the changing landscape of post-registration training (Walsh & Rogers). Again, in the same post-registration setting, Nicholas, Day, Pirkis and Harvey explore the benefits and challenges of implementing online learning for a wide range of professionals in mental health; access was a pivotal issue.

Evaluation is embedded in our educational systems, but isn't always as meaningful as we would like. Using focus groups is not new, but Edgar and Gibson present a framework and cycle that demonstrates clear outcomes and meaningful actions for learners. Iramaneerat, Udompap, Bangchang, Thongtan and Jaruthamsopon explore the effects of systematic lecture recording, which has become incorporated into students' resources in many programs. There have been concerns about how these recording systems will affect approaches to learning and attendance, so Iramaneerat et al. compared student engagement with two modules, where one had a recording system and the other did not. The availability of lecture recording in their setting did not supplant other approaches to learning.

Looking to the future? As health professional education has grown as a discipline, the focus of what is published has changed. We have tended to move from the descriptive

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to the exploratory and the explanatory (see last issue's editorial). I was reminded of a Delphi project within New Zealand (NZ) that sought to set an agenda for programmatic medical education research (Wilkinson et al., 2010). Six themes were identified: (1) engaging in community and clinical learning environments, (2) improving recruitment and retention, (3) improving phases of transition, (4) assessing professional behaviours, (5) promoting quality feedback and (6) engaging clinical teachers. To what degree have those of us working in NZ taken up these themes and questions? I suspect that the themes and challenge also have currency for Australia and the wider health professional arena. Returning to this issue of FoHPE, how do we measure up? Moore and Horstmanshof nod to the sixth theme through offering tips on proactively growing educators. Graham, Graham and West describe a workshop approach to uncovering biases, relating to theme four. Two of the previously mentioned papers address theme five in exploring improvements in feedback (Edgar & Gibson; Hills et al.).

I hope that you find the content of this issue valuable and challenging. We might also reflect on what are the important themes for research in our individual settings, both now and looking to the future.

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Editor

References

Wilkinson, T. J., Weller, J. M., McKimm, J., O'Connor, B. J., Pinnock, R. E., Poole, P. J., . . . Wearn, A. M. (2010). Programmatic research in medical education: A national collaboration. *The New Zealand Medical Journal*, 123(1318), 24–33.