

Social Media In Learning Environment (SMILE)

Social media is not about exploitation of technology but service to the community. There is an obvious danger, a notion that information is enough, and you don't have to think. This can be, and has changed; the information that is gathered can be applied in day to day working and feedback provided by those involved would help in further improvement. Facebook group "The Anaesthetist" has achieved this and benefitted many members across the globe. The group, which is more than 7500 members strong, mostly comprises of anaesthetists/ anaesthesiologists but also has members from other specialties to provide input.

How is this learning environment so different?

The present generation is known as the "net generation" and smart phones have made this possible. This "net generation" is socially centred, "immediate" in nature and always connected. This means, they are constantly exposed to information that was once only available to a limited group of people who had access to books and libraries. Being constantly connected also means; help can be sought or offered immediately in difficult situations. This is almost like "remote medicine". In difficult situations where an individual may not be able to think straight, advice and help from a person who is not directly involved can save a life. Members can help by giving suggestions as to how the case can be managed in different ways, as is often said, "there is more than one way to skin a cat".

Learning theories and social media

learning

There are many learning theories and how these theories are applied to social media is very interesting. There are large numbers of learning theories but most follow certain fundamental rules. These are: (1) a set of explicit assumptions about learning; (2) explicit definitions of key terms; (3) specific principles derived from assumptions that can be tested; and (4) explanations of the underlying psychological dynamics of events that influence learning.

Traditionally, as proposed by Albert Bandura in the late 1970s, learning can be categorized into three types; behaviourist, cognitivist and constructivist.

Behaviourist theory proposes that learning occurs passively through observing others and their outcomes. Learning can occur cognitively by actively acquiring knowledge and built on previously learned material and without change in behavior. Learning also occurs constructively in an active way by changing the meaning i.e trying to produce desirable outcomes (for both learners and the teachers) [Table 1]. Social media and social learning are not the same; they give birth to what we call "social media learning". Social media provides a platform for people to connect, share information and develop relationships. On one hand, social media can be a wonderful means of learning and on the other it can lead to aimless wandering and wastage of time. It is therefore important that those who wish to utilize the social media for teaching and learning set out some rules and

regulations that would ensure teaching and learning is not only focused but at the same time enjoyable. One of the advantages of the social media is that, it allows people to learn at their own pace. There need not be a syllabus for teaching and the

learners themselves can pose questions. The roles are not defined, a learner can become a teacher and vice versa, everyone learns in the process. "The anaesthetist" group has achieved all this and more and helped 1000s of its members to develop professionally. The group is a daily dose of continuous medical education (CME). The discussions on the group are mostly real time cases and this makes them interesting. New information is shared and discussed. Videos related to regional anaesthesia and acute pain management are very popular amongst the members. "The Anaesthetist" facebook group is registered as a society (The Anaesthetist Society) and organizes educational activities like low cost workshops and conferences regularly. The workshops organized by the society not only teach advanced techniques using ultrasound but also simpler techniques like PNS guided and loss of resistance (LOR) blocks and thus cater to entire spectrum of anaesthetist from those working in limited resource centres to those working in most advanced settings. Creation of the society has provided a solution to the disadvantage of social media learning, that there is no personal connect. The activities organized by the society allow people to meet each other face to face. To conclude, working together is not new, it has happened since Greek civilization and has been part of the educational process ever since. With increasing technology and connectivity, this approach to learning has been reinvented by active teachers and learners. Improvements in information and technology (IT) and online communities have redefined what it means to be social and what social media learning is. "The Anaesthetist" facebook group has used this new concept to the greatest advantage of many. The learning takes place at individual's own place, own pace and own time. Help and advice is available to the members 24 x7, locally and globally

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Table 1 : : Categories of Learning

	Behaviourism	Cognitivism	Constructivism
Learning Is Achieved Through	Transmitted Information	Acquisition Of Knowledge	Construction Of Knowledge
Learning Is Believed To Be	A Change In Behaviour	Built On Previously Learned Materials	A Change In Meaning
Teaching Is	Instructor Centered	Instructor Centered	Student Centered
Process Of Learning Is	Passive	Active	Active

References

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2. <https://www.facebook.com/groups/indiananaesthetist/?fref=ts>

Conflict of Interest: Nil
Source of Support: None

How to Cite this Article

Singh SK. Social Media In Learning Environment (SMILE). Journal of Anaesthesia and Critical Care Case Reports May-Aug 2016; 2(2): 3-4.