

Abstracts

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KIEGALDIE, D., Centre for Medical and Health Sciences Education, Monash University, Melbourne, Australia. **The "Y" generation: Teaching and learning challenges.**

"Generation Y" is cynical, street-wise, and remarkably resourceful. They are adaptable, talented, and innovative, but they are also desensitized, skeptical, and disengaged. They first want to understand the reason behind any direction, assertion, or policy. They want to know "Why?" (Chester, 2002) The "Y" Generation, those born between the years 1982 and 2000, provide new challenges for today's educators. The expectations these students bring with them strongly influence their attitudes, beliefs, and teachability. In many ways, they are no longer the people our educational system was designed to teach. Their world is online, immediate, convenient, visual, subjective, nonlinear, and constantly changing (Ngatai and Towle, 2004). Meeting the needs of this generation requires educators to rethink their attitudes and their teaching methods. There are now contested perspectives on teaching this group of learners. This presentation will raise awareness of these issues and reveal some typical approaches Gen "Y"ers have towards learning. It will also provide some guiding principles for teachers closely working with this group. Key aspects for teachers to consider include engagement, inclusivity, and challenge. Practical strategies to address these considerations will also be discussed in the presentation.

REFERENCES

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ANSCOMB, H.L.,¹ N.T. SWAILES,² ¹School of Medicine and Dentistry, James Cook University, Townsville, Australia, ²School of Veterinary and Biomedical Sciences, James Cook University, Townsville, Australia. **Authentic and career-relevant teaching and assessment approaches in medical human anatomy.**

Good teaching practice aims to create a constructivist environment for learning where the student is centrally placed, actively engaged, and deep learning is promoted. This can be achieved through an integrated curriculum where the boundaries imposed by traditional discipline areas are transcended and a career-relevant context for the assimilation of content, skills, and processes is achieved. However, current integrated curriculum designs appear better to align some disciplines than others. Human anatomy is an important pre-clinical discipline that links directly to clinical skills and to postgraduate surgical specializations. Yet through some teaching approaches, preclinical human anatomy can fail to focus on the skills, strategies, values, and principles that link to clinical practice in a meaningful framework. This article describes the design and development of a preclinical human anatomy module within an integrated medical curriculum. The module design not only complements the current integrated curriculum, it does so in a way that fully engages and motivates students and develops a preclinical-clinical learning continuum. This is achieved through the use of authentic assessment tasks and by repositioning assessment within the module to align meaningfully with the ultimate career relevant goals and needs of the student. Student satisfaction, experience, and competencies in anatomy were then assessed. Human anatomy is a discipline area potentially widely underserved by current inte-

grated curricular design and assessment practices. The teaching and learning strategies applied here have led to demonstrated improvement in the understanding and clinical application of anatomy and an enhanced student learning experience.

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The E-learning platform offers many challenges and opportunities in the delivery of subjects such as anatomy in distance-taught programs. The purpose of this article is to describe different E-learning approaches used to deliver the clinical anatomy components in an international distance article, and in the other case, a distance article offered nationally. Two distance-taught articles were designed for graduate physiotherapy students with a minimum of 2 years clinical experience with a strong musculoskeletal focus and utilizing Blackboard for their respective E-learning clinical anatomy modules. The modules for clinical anatomy in the international article focused on conceptual issues relating to connective tissue, its responses to mechanical loading, vertebral anatomy, and current models of discogenic pain, and assumed a basic level of anatomical knowledge. In contrast, the E-learning component for the national article comprised a series of weekly problem sheets focusing on regional anatomy in which the student was encouraged to acquire knowledge of, and insight into the interrelationships of gross anatomical structures and their clinical relevance. In this latter article, the E-learning was supplemented by three on-site study blocks including a dissection task in which the students were required to demonstrate skills in exposing anatomical structures and document their findings. Feedback indicated that the students from both articles valued their clinical anatomy experience. From the educator perspective, this experience has raised questions regarding the optimal method for delivery of clinical anatomy via E-learning and the need to further investigate the relative merits of each model.

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Cambodia ranks among the 50 poorest and least developed nations. Tertiary education is slowly recovering from the devastation of the Pol Pot regime in the 1970s, during which many academics were killed and university infrastructure and hospitals were destroyed. Medicine and dentistry are 8 year courses in Cambodia. English skills and anatomy teaching in English are highly sought after, and new graduates are making a wonderful impact on the health of the nation. A voluntary program was administered at the public Université des Sciences de la Santé and private International University, Phnom Penh, Cambodia in 2005 and 2008. The 1-week intensive program involved undergraduate and postgraduate basic and surgical anatomy teaching, and supervised instrument handling training and head and neck dissection, not previously available to dental