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**PEDAGOGICAL FOUNDATIONS OF INFORMAL EDUCATION
OF MEDICAL UNIVERSITY TEACHERS**

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Abstract

Globalization and rapid development of medical technologies provided teachers of medical universities with opportunities for lifelong learning. These opportunities are available in the framework of traditional training courses and non-formal and informal educational institutions. Opportunities for professional development of a university teacher are provided by informal education which underlies is a basis for successful non-formal and formal types of lifelong education of teachers. The basis of successful informal education of a university teacher is professional autonomy based on deep understanding of the educational context and readiness to respond to challenges of the educational environment, acquiring new knowledge and competencies. One of the effective ways for developing professional autonomy and skills of informal education is to train teachers by creating a special space for a pedagogical dialogue. Within the higher medical education, conditions for the dialogue of teachers can be created by establishing professional communities that implement informal education principles and stimulate the growth of the level of professional autonomy of teachers which allows teachers to search for new ways of personal and professional self-development. Informal education based on professional autonomy can form a basis for a new personal-conditioned, flexible, evolving and responsive to global and regional changes in the system of personal-professional development of a medical university teacher. The purpose of this article is to investigate the pedagogical basis of informal education of a medical university teacher. The problem was discussed at scientific and methodological conferences with participation of representatives of departments of foreign languages of Russian medical universities.

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Keywords: Medical teacher, informal education, non-formal education, professional autonomy, mutual learning.

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1. Introduction

Globalization and rapid development of medical technologies provided teachers of medical universities with opportunities for lifelong learning. These opportunities are now available in the framework of traditional formal refresher courses and non-formal and informal education.

Emergence of new knowledge and the demand for new competencies are characteristic of the modern education context. A new education paradigm requires a new type of teacher who can work productively in the innovative context (Goodson, 2010). Traditional approaches to advanced training are unable to respond to new educational needs of teachers (Gavrilyuk, Nikulina, Avdeeva, & Artyukhov, 2017; James & McCormick, 2009).

Wide opportunities for professional development provide informal and informal types of education which greatly contribute to the teacher's personal and professional development, offering opportunities for the development of all elements of professional competences (scientific, methodical, didactic, special competences) (Cameron, Mulholland, & Branson, 2013).

2. Problem Statement

Meanwhile, opportunities for the development of personality of the teacher are understudied (Van Driel, Meirink, Van Veen, & Zwart, 2012). A few articles studying the problem of informal education of medical university teachers in the framework of teachers' mutual learning or exchange of experience (peer learning) argue that the feedback is rare and often useless (MacDougall & Drummond, 2005). Medical school teachers learn how to teach in isolation, based on individual perception of their teaching experience and early negative or positive experience (Cook, 2009; MacDougall & Drummond, 2005). In most cases, teachers interact only within the departments, and informal and non-formal education outside the is not a common practice (Patarai, Falconer, Margaryan, Littlejohn, & Fincher, 2014; Roxå & Mårtensson, 2009).

Young teachers of clinical disciplines have limited knowledge and skills in the theory and methodology of training. Opportunities to start their teaching activities with relatively simple tasks, for example, as observers, are limited. Most teachers are immediately immersed in an intensive teaching practice. Moreover, they are rarely supported by colleagues and often feel that they have to choose their own teaching methods (Lankveld et al., 2016). Opportunities of informal education become attractive for teachers of medical universities, in particular, for improving their pedagogical skills.

Thus, on the one hand, the modern educational situation contains ample opportunities for the personal and professional development of medical university teachers. On the other hand, educational resources do not ensure the success of informal and non-formal education of teachers.

3. Research Questions

In contrast to formal education, informal and non-formal types of education are associated with professional human communication in the framework of full-time or online activities and projects involving the exchange of experience and knowledge in non-formal settings. Examples of non-formal education are conferences, trainings, open online courses (Coursera, eDX, etc.), Internet resources.

Nowadays, almost all the aspects of teacher's professional activities are permeated by non-formal education. It is the most effective way to gain personal and professional experience motivating the teacher to review educational opportunities, gain knowledge, skills and abilities within formal and non-formal education (Okreshko, 2017; Kyndt, Leuven, Gijbels, & Donche, 2016).

The non-formal education is based on informal education which is individually-conditioned, internally-motivated cognitive activities (Opfer & Pedder, 2011) involving individual cognitive activities implemented through personal activities of individuals in the cultural and educational environment (Marsick & Watkin, 1992).

4. Purpose of the Study

The purpose of this article is to investigate the pedagogical basis of informal education of a medical university teacher.

5. Research Methods

The literature describing the concept "informal education", its connection with such concepts as "non-formal education", "formal education", its potential in relation to the development of the educational system, factors that ensure the readiness of a teacher for non-formal education were studied. Mutual education as a type of informal education was analyzed. The problem was discussed at scientific and methodological conferences with participation of representatives of the departments of foreign languages of Russian medical universities

6. Findings

The results of the study suggest that the basis for successful informal education of a university teacher is willingness to change, adapt knowledge and skills to new tasks and acquire new skills and competencies throughout his life. The modern educational paradigm goes beyond providing access to new educational resources and technologies (Forzani, 2014). It requires transformation of the way people think about education, motivation and strategies for the efficient use of technologies and resources as tools for adapting teachers to new realities. Researchers say that academic skills should be accompanied by personal qualities and independent mind (Smethurst, 1995).

The literature review allowed us to identify professional autonomy of the teacher as a leading factor in teacher's readiness for non-formal education (Jungert, 2015; Núñez, Fernández, León, & Grijalvo, 2015; Hyungshim & Reeve, 2016; Wermke & Höstfält, 2014; Ravikumar, Abdul Ghani, & Aziah, 2015). In pedagogy, autonomy is associated with the ability to develop freely, consciously, independently and responsibly within and outside the formal educational environment (Jiménez Raya, 2007). It is noteworthy that the philosophical interpretation of the term "autonomy" is also based on the idea of a person's ability to "push the boundaries" or "go beyond the limits of institutional culture" (Marchenko, 2013). Teacher's professional autonomy is a metacompetence based on the teacher's readiness for intensive professional activity and personal professional development, relative independence from external circumstances, independent goal setting, free choice of regulatory forms, means, methods and content of professional

activities, reflection of their experience and professional behavior, initiative, self-reliance and responsibility (Gavrilyuk, 2013). The autonomy of teachers is related to personal characteristics, including internal motivation for professional achievements and continuous personal and professional self-development, internal locus of control, responsibility, creativity, ability to set goals, make decisions, and choose. These characteristics ensure the desire and willingness of the teacher to control personal and professional self-development through planning, making choices and responsible decisions.

Autonomous teachers transform and personalize new knowledge, making it relevant and valuable. Autonomy transforms the thinking style and focuses attention on knowledge. Autonomous teachers are able to recognize those aspects of their professional competence that need development, develop strategies for finding, evaluating and studying educational resources. Teachers with different levels of professional autonomy perceive challenges of the educational environment in different ways. Thus, teachers with a high level of autonomy are open to the new, able to respond quickly, flexibly, in a non-standard way to challenges of the educational environment. Teachers with a low level of autonomy perceive the new with rigidity.

Teacher's professional autonomy acts as a driving force of non-formal education. Informal education is a basis for non-formal and formal types of education.

It is particularly difficult for young medical school teachers to master pedagogical professionalism based on activity rather than simple rules (Kelly, 2006). Accordingly, development of professional autonomy and skills of informal education requires a special space for the dialogue of teachers (peer learning).

In the context of mutual learning, the space for the pedagogical dialogue can be created in several ways, including through collective decision-making, thinking about practical activities of teaching in the form of discussion or through joint decisions. The dialogue allows teachers to share ideas about success or failure of teaching methods, contributes to personal and professional development and stimulates inner motivation to further self-improvement.

Conditions for a dialogue can be created by organizing professional communities of teachers. They are useful for informal education of medical school teachers (Farmer, 2004; Bowman & Hughes, 2005). According to the latest study on this topic, informal education through teaching communities facilitates the training of young teachers and helps them change their pedagogical practice which generates a feeling of involvement in the faculty of a medical school (Lankveld et al., 2016).

There are several key processes that reflect features of the development of professional autonomy of young teachers and their informal and non-formal education in the teacher community. Professional communities of teachers help young teachers create a network of contacts that facilitates teaching activities. Teacher communities help understand their roles in a student-centered educational process accept their roles (Steinert, Cruess, Cruess, Boudreau, & Fuks, 2007). Stories about difficult situations and possible reactions to these situations in the teaching practice are crucial.

The second process in the teacher community is the development of a feeling of belonging to the teachers' community. Teachers' communities allow young teachers to create connections with young teachers from other departments. Second, they provide a forum for young teachers where they can designate their place in local discussions.

Thus, teachers' communities are alternative communities in which teachers feel their importance and develop connections with other educators. Thanks to these communities, young teachers realize their value. As a result, the level of their autonomy is growing, which provides an opportunity to search for new ways of personal-professional self-development.

7. Conclusion

Systematization and analysis of pedagogical theories of informal, non-formal and formal education and autonomy in education allow us to argue that effective informal education of medical university teachers is based on a high level of professional autonomy and requires conditions for a dialogue of teachers in the educational space of the university and beyond its boundaries. One of the ways is professional communities of teachers. In the context of globalization, informal education

a) helps perceive challenges as incentives for self-development;

b) contributes to performance of the teacher in new conditions going beyond the existing experience and knowledge (due to constant changes in society, technology and education generating the need for constant reassessment of higher education);

c) provides a special professional competence anticipating changes, integrating thinking and practice, implementing transformations and meeting the requirements of education for sustainable development;

d) contributes to efficient non-formal and formal types of life-long education. Informal education based on professional autonomy can be a basis for building a new system of personal professional development of the teacher which would be flexible, evolving and responsive to global and regional changes

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