**STATEMENT ON TEACHER-LEARNER RELATIONSHIP**

**IN MEDICAL EDUCATION**

 **CODE OF BEHAVIOR**

The following statement is excerpted from a report by the AMA Section on Medical Schools in cooperation with the AMA Student and Resident Sections and reflects the policy of the UMDNJ-New Jersey Medical School:

The teacher-learner relationship should be based on mutual trust, respect and responsibility. This relationship should be carried out in a professional manner in a learning environment that places strong focus on education, high quality patient care, and ethical conduct.

In the teacher-learner relationship, each party has certain legitimate expectations of the other. For example, the learner can expect that the teacher will provide instruction, guidance, inspiration and leadership in learning. The teacher expects the learner to make an appropriate professional investment of energy and intellect to acquire the knowledge and skills necessary to become an effective physician. Both parties can expect the other to prepare appropriately for the educational interaction and to discharge their responsibilities in the educational relationship with unfailing honesty.

Certain behaviors are inherently destructive to the teacher-learner relationship. Behaviors such as violence, sexual harassment, inappropriate discrimination based on personal characteristics must never be tolerated. Other behavior can also be inappropriate if the effect interferes with professional development. Behavior patterns such as making habitual demeaning or derogatory remarks, belittling comments or destructive criticism fall into this category. On the behavioral level, abuse may be operationally defined as behavior by medical school faculty, residents, or students which is disapproved by society and by the academic community as either exploitive or punishing.

Examples of inappropriate behaviors are:

a. physical punishment or physical threats

b. sexual harassment

c. discrimination based on race, religion, ethnicity, sex, age, sexual orientation and physical disabilities

d. repeated episodes of psychological punishment of a student by a particular superior (e.g. public humiliation, threats and intimidation, removal of privileges)

e. grading used to punish a student rather than to evaluate objective perfor­mance

f. assigning tasks for punishment rather than educational purposes

g. requiring the performance of personal services

h. taking credit for another individual's work

i. intentional neglect or intentional lack of communication

While criticism is part of the learning process, in order to be effective and constructive, it should be handled in a way to promote learning. Negative feedback is generally more useful when delivered in a private setting that fosters discussion and behavior modification. Feedback should focus on behavior rather than personal characteristics and should avoid pejorative labeling.

Should you experience instances of non-compliance with this policy, you are encouraged to notify Dr. Soto-Greene, Dr. Hill, or Dr. Heinrich. The reporting of incidents which violate appropriate teacher-student relationships will be held in the strictest confidence and will be dealt with quickly and appropriately by the Dean of the New Jersey Medical School.