

QuaranTrain: An international community of practice for learning

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Abstract

The Covid-19 pandemic presented challenges for students and teachers to engage and create good learning environments. In this situation, new opportunities for learners and teachers to engage and learn have evolved. Historically, communities of practices have been developed and used to help solve complex and dynamic challenges in society. The idea is that people get an opportunity to work together to solve a specific challenge or task. Here we present a pedagogical community of practice (CoP), QuaranTrain, where students from different countries have developed a platform for co-creation and sharing material and strategies for better health during a period with social distancing. This student-led and self-organised CoP have created a framework for learning that our health care educations can be inspired by and use in their programs. We conclude that out of this challenging situation, new and creative ways of learning emerged, which can enrich and develop health care education.

Keywords: community of practice, interdependence, learning, self organisation, uncertainty

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Introduction

This spring, as a direct result of the Covid-19 pandemic, the way in which we organise our education had to change. Planned exchanges between organisations were cancelled, teaching sessions and meetings postponed, and classes and conferences were moved online. We had to find new ways of communicating and working together in order to keep education going, both within and between campuses and universities.

A community of practice (CoP) can be defined as a group of people that share a passion or concern for something, and that they do better by interacting on a regular basis (Wenger, 2009). During this period, we experienced how students and teachers came together in such CoPs to learn despite the need to close universities.

Reaction to an acute social challenge

In early March 2020, the impact of the Covid-19 pandemic and its consequences became both more tangible and visible. In addition to the direct impacts of the disease, the impact of self-isolation and quarantine on mental and physical states started to be discussed. Undergraduate physiotherapy students of the Delta-stream at HAN University of Applied Sciences, Nijmegen, Netherlands (van Wijchen, 2018) wanted to be of support to people in self-isolation and quarantine. Inspired by Ann Gates, the founder of Exercise Works (Gates et al., 2017), they felt a

responsibility for supporting and advocating physical activity and mental well-being. They turned to us, their teachers, and we started a discussion about how we might support each other and what undergraduate physiotherapists possibly could contribute to in this situation.

The result was *QuaranTrain*, a student-led network aiming to promote activity, social contact, and good health during the period of isolation. The students were introduced to our international networks and more and more countries and higher education institutions joined. The students decided to create a web page (<https://quarantrain.org>) containing videos promoting physical activity both for exercise and leisure. Videos came from the Netherlands, England, China, Malta, and Switzerland. Videos showing strength training on the floor in a student flat, dance in an empty living room, and tai chi from a Chinese hall, started to fill the site. We, being teachers at different higher education institutions, looked at this development with excitement and enthusiasm. It was a lot of energy, a lot of joy, many hours of struggle, informed by a strong wish to do good in a difficult time.

In higher education, we see and experience many positive effects of internationalisation. Students who enter an exchange programme to visit other educational institutions, experience what it feels like to be a stranger, and get their perspectives challenged (Curzon-Hobson, 2013). They experience being in a new group, learning about a new campus, a new city, and maybe even a new language. However, this is not possible to manage

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for everyone. Therefore, there are other opportunities within the internationalisation strategies that can give students (and teachers) useful experiences without travelling, for example, “internationalisation at home” programmes (Beelen & Jones, 2015).

However, we struggle to create good options for international experiences, and often we end up with ineffectual attempts to bring the world into our classrooms without really managing to do so. This is one reason why we were, and are, excited about QuaranTrain. It gives our students and our upcoming professionals the possibility to collaborate with colleagues from other educational institutions, from home. At HAN University of Applied Sciences, the University of Nottingham, and Western Norway University of Applied Sciences, QuaranTrain has subsequently become a part of the programme within physiotherapy education from Autumn 2020. This is not simply because we live in a time surrounded by a coronavirus but because the experience of QuaranTrain has provided a great opportunity to work together, to co-construct, and to give our students an accessible opportunity for internationalisation. It feels like a gold mine of new opportunities.

QuaranTrain - a community of practice as pedagogy

QuaranTrain is a network, a group, a solution, and an example of self-organised learning, an open-ended design in which all learners create and develop (Ostuzzi, De Couvreur, Detand & Saldien, 2017). Independent of our status, being a student, a lecturer, or a clinician, we learn from each other and our contribution is based upon interest and competence rather than title (Blaschke, 2012). We are interested in framing QuaranTrain as a Community of Practice (Wenger, 2009). In doing so, we recognise the dynamics, the power balances, the ‘connectedness’, and the learning of new knowledge as something much more than merely the outcomes of a group of individuals sharing ideas and facts.

A community of practice, as described by Wenger-Trayner (Wenger-Trayner & Wenger-Trayner, 2015), transcends the idea of a network of individuals. The domain for QuaranTrain was influenced by a common identity of the people involved – advocates of best health care for a global population. The collective competence of members was, and is, highly valued. During the development of the project the specific identity of each member became less overt. Traditional pedagogical structures were soon dismissed and any notion of hierarchical power was dissolved through discourse and behaviour. Two characteristics of a community of practice are its inclusivity and humility. Diffusion of ‘student’ ideas and personal histories was a natural outcome of the modesty and openness of members that soon became explicit.

The QuaranTrain community was supported by the access to common digital platforms (Microsoft Teams, Zoom, Facebook, and Snapchat). Activities and discussion could exist within these platforms and members were able to help each other and share

ideas. The digital platforms made it possible to have direct and immediate communication in smaller or larger groups. The early phase of QuaranTrain witnessed regular interaction with all members, thereby encouraging social learning. Later in the process, members worked more separately, or in smaller groups, but with the ethos and spirit of the community at the forefront of their minds. Sustainability of a community of practice is challenging as the domain and landscape change, as do its members. The appearance of a community can change and perhaps become unrecognisable. For example, QuaranTrain developed to have hardly any ‘large group’ meetings, although the community remained busy at work to solve the problems of self-isolation induced health matters.

What this community offers as practice is sculptured by ‘doing’ people. A community can only exist if its members are proactive and industrious in their character. Such membership is observable in QuaranTrain and is evidenced by its output of shared knowledge, problem-solving activities, narratives, methods, and experiences. The collective pursuit of a practice that readily and efficiently shares and creates knowledge framed as a community of practice offers us a lens and a model to observe and develop a modern education that can be responsive to social challenges. Self-organised learning sits at the centre of our community, and the seeds of the new pedagogy have been sown.

QuaranTrain - a socialisation of becoming a healthcare professional

We believe there is an added value in learning from each other, in having to trust each other across borders, nationalities, and languages. In seeing that difference is a strength, that there is no need for managing all aspects within a project because there are others who can contribute with their experiences, knowledge, and competencies (Dall’Alba & Bengtson, 2019). This is an important aspect in health care where each health care professional plays a different role, but with a shared responsibility in interdependence. We experience that many students were uncertain about using another language, and we are of the opinion that it is beneficial to get an opportunity to practice this.

Also, the various educational programmes have differences in the way they have been built and arranged, and we believe it is important that students and teachers within physiotherapy can experience that there is not only one way to become a good physiotherapist. We believe an understanding and respect of the strength of our differences is an important part of the socialisation of becoming healthcare professionals (Biesta, 2015). We also believe that such collaborations as QuaranTrain can promote socialisation in dealing with diversity, complexity, and uncertainty (Solnit, 2006). We strongly mean that understanding complexity and being able to endorse differences are important skills in our society and that our health care systems and patients benefit from having health care professionals who master this (Miller, 2015).

What we learned

We, teachers and educators, had the experience of providing an immediate educational response to a social challenge. We experienced that the learning needs of the students were a central aspect of the education, and that their immediate responses and reflections were the most relevant questions at the time. We became learners in this process. We learned to navigate in the unknown, to trust the journey we embarked on and to share this trust (Green, 2005). We have also been socialised into dealing with diversity, complexity, and uncertainty. We learned to be curious and courageous, to explore, co-construct and create new opportunities. The experience in QuaranTrain forced us as educators to focus on the process of becoming a healthcare professional, with the folding and unfolding of possibilities as a primary notion and the traditional goal for learning as secondary.

We believe there are several examples similar to QuaranTrain from different educational institutions, providing different strategies and ideas that will be implemented in the educational programmes. Those will not only be solutions during a special time but will be considered valuable ways of education. We see QuaranTrain as an example of how an acute social challenge became a basis for learning and how uncertainty could provide a necessary space for development and collaboration (Barnett, 2012). There is a demand for responsiveness in education to emerging social challenges, and QuaranTrain was one example of how this can be achieved.

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