

STRATEGII DE ÎNVĂȚARE ACTIVĂ ÎNTR-UN CURS DE LIMBĂ ENGLEZĂ MEDICALĂ

ACTIVE LEARNING STRATEGIES IN AN ENGLISH MEDICAL LANGUAGE COURSE

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Abstract

For learning to occur, students need to be given opportunities to engage in activities that help them create their own meaning, relating new information to what they already know. Active learning strategies provide such opportunities. A variety of active learning strategies – from simple to complex, exist and teaching methods can be chosen according to suitability. The study’s purpose is to provide five general categories of the active learning strategies which can be adopted in an English medical course course.

Key words: *active learning strategies, lecturing, teachers, students, communication skills, English medical language, knowledge*

Cuvinte cheie: *strategii de învățare activă,lecție,profesori,studenți,deprinderi de comunicare, limbă engleză medicală, cunoaștere*

The concept of knowledge has also changed from one of static transmitted contents, to knowledge that is ever renewable and often construed jointly with other learners. Knowledge creation is socially shared, and emerges from participation in socio-cultural activities. The contents and processes are intermediating. While knowledge continues to be available in educational institutions such as schools and universities, it is increasingly located in workplaces as well as in everyday life, accessible through various media- and technology-based environments. Open access to knowledge creates new requirements for learners and learning research. Learning environments have changed radically. Along with schools and educational institutions, they now also cover a large range of different kinds of learning spaces, including virtual environments.

Matthew B. Robinson makes a comparison between the traditional lecture and active learning strategies. While traditional classroom teaching uses lecturing and the attention span of the typical undergraduate student lasts about 10-15 minutes, after which time boredom and fatigue set in and student retention of knowledge and student performance decline significantly after this period. Active learning strategies increase student retention of knowledge, and student attention and interest; and strategies which actively engage students make class more fun. [1]

Lecturing also allows the teachers to present large amounts of information in a relatively short period of time

Lecturing permits the teacher to deviate from the textbook(s) to present the most up-to-date information from other sources. For example, teachers can access a lesson from YouTube in-class. Finally, lecturing gives the teacher great influence over many people at one time. Many teachers have struggled with classes of hundreds of students. The lecture can become a platform for an influential speech to a large audience. Class size may dictate how teachers teach, at least to a degree. [2]

Scholars notice that the teacher has maximum control of the audience when the purpose of lecture is to deliver course information to students. Also, the student is not charged with being an active participant in the learning process.

Lecturing is a practice of one-way communication, where the teacher is the giver and the student is the taker, where the teacher is the provider and the student is the receiver. This has led others to call the lecture approach the “banking model” where students merely make withdrawals of information from experts in the subject matter [3]

In this type of atmosphere, students can be anonymous. Students may be sent the message that their participation is not important, and hence that they do not matter. Since students are allowed, and even encouraged, to be passive rather than active when teachers lecture, the risk is that students will not learn the material being presented. If the lecture is boring and monotone, it does not sustain student attention, meaning students are free to fade away even into sleep. Students actually learn more when they create their own knowledge bases, with help from each other and with the assistance of the teachers. Lecturing is most appropriate for lower levels of the cognitive domain. That is, it promotes short-term knowledge retention, rote memorization, and student regurgitation of dates, names, and other facts. It does not promote critical thinking skills such as application, analysis, synthesis, and evaluation. Much educational research demonstrates that the very nature of the lecture approach does not promote student learning. For example, confusion and boredom may occur ten to twenty minutes into lectures, students remember more information from the first ten minutes of class than from the last ten minutes, and students recall significantly more information immediately following a lecture than one week later. In one study, students could only remember 5% of information presented via lecture on the same day it was presented [4]

Creativity and critical thinking skills suffer at the hands of the lecture approach as well. Students apparently are aware of such results, because they report “perceived levels of diminished quality of learning” in passive lecture approaches. When students are more actively involved in class, valuable skills such as critical thinking and decision making increase.

Active learning strategies suggest other positive outcomes such as increased participation and enjoyment of the in-class materials and text(s). [5]

Stunkel (1998) reminds teachers of the “neglected phenomenon called ‘good lecturing’” and argues that a good lecture can be “a critical, structured, skillful, thoughtful discourse on questions and findings within a discipline, delivered by a person who knows what he or she is talking about.” He views the supplemental activities as a replacement to lecturing

And concedes that “lecturing is not the only way to deliver learning, but it works well in the right hands.” This is precisely what active learning proponents claim. Lecturing has a place in the classroom because it serves an important function. Lecturing can be most effective for teachers who have developed expertise in their academic discipline, a passion for learning and an ability to perform on stage.

Stunkel claims that teachers have two choices, then. One is to become a better lecturer by displaying “lucid exposition, cogent argument, and enthusiasm about the subject” (Stunkel, 1998). The other is to provide opportunities for student involvement in the classroom: to get students involved by not relying exclusively on lecturing. [6]

Semiology and Clinics is an ideal discipline for active learning strategies, primarily for two reasons. First, the nature of the content is complicated and controversial. For example, to establish a complete understanding of symptoms of a disease, students are required to build a foundation about main concepts such as the definition of disease. To do this, students are expected to learn the, the main types of diseases. This requires that students have a complete understanding of the causes of illnesses, and case studies. Active learning strategies (e.g. group activities) are well suited to enhance student participation in class so that students can discover their own “truths” about pain and disease. A definition of disease can be achieved through numerous group activities where students work together to come up with an acceptable definition. These group definitions can then

be compared with medical definitions presented by the teacher to discuss differences, similarities, and student conceptions about the nature and extent of crime. Other controversial aspects of setting a diagnose can be addressed through active learning activities. Active learning strategies allow teachers to engage their students in examinations of such issues. For example, students can engage in structured debates where they support a stance that they do not personally believe in. Alternatively, students can react in writing to all sides of an issue after watching a video focused on a controversial issue.

Such activities also address the second reason that active learning strategies are important in medical system. Jobs obtained by medical graduates require them to work well with others and to develop good communication skills. Active learning strategies assist in developing these needed skills.

Active learning strategies encourage group work, as well as speaking and writing skills. For example, in a debate, students can be encouraged or required to argue one side and then to actively listen to other students; then they can fairly and accurately summarize the main points of the other side verbally or in writing.

Matthew B. Robinson presented five general categories of the active learning strategies/ which can be adopted in medical school/ including:

- 1) Enhanced lecturing
- 2) Questioning and testing
- 3) Pair/group discussion
- 4) Controversial topics
- 5) Generating ideas.

He underlined that each active learning strategy can be placed into a particular category based on the main purpose that is served by each. Enhanced lecturing techniques are used specifically to increase the effectiveness of the transmittal model of teaching where the teacher does most of the work and students are mostly passive. Questioning and testing techniques are used to increase student questioning skills and performance on tests by increasing student involvement in the classroom, pair/group discussion techniques are used to allow students to work together to solve common problems, controversial topic techniques are specifically designed for potentially heated subjects and to increase student listening, speaking, and arguing skills, generating idea techniques are used to enable students to be creative and are used to increase higher order knowledge skills such as analysis, synthesis, and evaluation.

He shows the list of these types of active learning strategies and identifies the main benefit of each and gives examples to demonstrate how to use them in medical classes.

Enhanced lecturing strategies contain :

1. Active Listening
2. Guided Lecture
3. Lecture Summaries
4. Minute Papers
5. Attack the Text

and serve not only to increase student participation in class but also to increase student performance, interest, and knowledge retention. [7]

1. Active Listening:

The strategy involves the increases of student listening and speaking skills. Students who listen will paraphrase what they learned. Students can switch roles so that the listener also gets a chance to be the presenter. For example, students are divided into small groups of five or six students each, and have one student list types of cardiovascular diseases and define them, and the other repeat what he or she heard. Then have the second student list and define types of symptoms.

2. Guided Lecture:

The strategy gives students examples of how lectures can relate to the learning objectives, which is the most important material being presented, thereby increasing student performance. For example, students have from teachers learning objectives for a lecture before it begins, they have to take notes during the lecture only on key points relevant to the main learning objectives. In the last ten to twenty minutes of class, students are called on to identify correct answers to each learning objective.

3. Lecture Summaries:

The strategy teaches student show to take better notes, thereby increasing student learning and performance. For example, after a brief lecture of about ten to twenty minutes, teachers stop and give students ten minutes to summarize the material in writing without notes. Teachers collect the summaries and begin the next class by identifying the main strengths and weaknesses of students' notes. They review the main points most often missed by students.

4. Minute Papers:

The strategy gives students the opportunity to learn something that remains unclear. For example, toward the end of a class, or at the beginning of the next class, teachers ask students to recall in writing one thing that they learned from the day's class and one thing that remains unclear. Teachers clarify the material that is still not being grasped. .

5. Attack the Text:

The strategy encourages students to speak in class and develops critical analysis of the book rather than passive reading.

For example, teachers ask students to find an image or passage in their text(s) which they feel accurately represents or misrepresents a key fact or concept; then have them explain why they chose that image or passage. [8]

Conclusion

Active learning strategies promote developing good communication skills and retention of the material through teaching and discussion among small groups. Students enjoy the activity because they take an active role in medical analysis and discussion and are given an opportunity to develop their thoughts and opinions in conversation with peers. Teachers take pleasure in the enhanced lecturing because students become more responsible for their learning, actually read the text, and actively take part in debating medical topics.

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