Blended learning in first year curriculum – Melding pedagogies to support student engagement and empowerment

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Blended learning involves a careful and considered approach to the identification and combination of different modes, times, places and purposes of learning, with emphasis on judicious integration of fit-for-purpose educational technologies in order to enhance student learning experience and outcomes. Students commence their first year of university with a vastly diverse set of personal, social and cultural characteristics that can shape their tertiary experience and engagement with learning. This can present a challenge to first year curriculum design, delivery and evaluation.

This presentation will explore how blended learning pedagogy, transition pedagogy and transparent pedagogies were melded within a first year Allied Health unit at Australian Catholic University in an aim to enhance student engagement with and empowerment within the program. Processes of decision making regarding design, delivery and evaluation of first year curriculum will be shared and supported with case examples and data from the discipline of Speech Pathology.

Keywords: Blended learning, Transition Pedagogy, Transparent Pedagogy, first year experience, curriculum

Background

It is often assumed that students today are technologically savvy and digitally literate individuals who are familiar with the use of technology in learning and for learning and are eager to embrace flexible, multimodal strategies to manage their learning (Department of Education, Employment and Workplace Relations, 2009). Certainly, this is the case with many students. However, the experience of teaching staff within the discipline of Speech Pathology at Australian Catholic University is that there are also many students who require scaffolded and supported introduction to the educational technologies used within the university setting and the pedagogical underpinnings for their use. To this end, explicit, incremental and reflexive approaches to introduction of technologies and expectations of independent, self-directed learning are often required within first year units.

This observation is consistent with what is known about first year cohorts of students within universities across the country, in so far as students commence their first year of university with a vastly diverse set of personal, social and cultural characteristics that can shape their tertiary experience and engagement with learning. Factors such as age, gender, culture, linguistic background, socio economic status, family situation, past education experiences, paid work and other life commitments can all contribute to a student's academic success at university. Therefore, it falls upon universities to provide the "conditions, opportunities and expectations" for effective student engagement in the first year, with the goal of enhancing student success and retention (Coates, 2005. p. 26).

Australian Catholic University embraces a blended learning approach to teaching and learning, within a framework of study modes than encompass a continuum from fully face to face physical attendance through to exclusively online delivery. Integration of pedagogically sound blended learning is therefore an area of focus across the university. Speech Pathology is a new program within the School of Allied Health, Faculty of Health Sciences and is committed to enhancing first year experience through the integration of educational technologies within a blended learning framework, melded with best practice principles of Transition Pedagogy encompassing: Transition, Diversity, Design, Engagement, Assessment and Evaluation/Monitoring (Kift, 2009), and Transparent Pedagogies i.e. strategies that are active, engaging, innovative, democratic, student centred and foster critical thinking and multimodal learning (Fullen & Langworthy, 2014).

The focus of this poster presentation will be on showcasing strategies for constructing a first year experience that enables *engagement* with learning, that is, the attitudes and commitment to study demonstrated by an individual student, as well as *empowerment* or self-regulation of learning, which involves equipping students with the skills to take responsibility for their learning and exercise control over the way in which learning is approached (Nicol, 2009).

What will be presented?

Context

In 2015, several units in the first year of the Bachelor of Speech Pathology at Australian Catholic University underwent a process of curriculum redesign to integrate a blended learning approach. The strategies were implemented nationally across three campuses and 200 students. The unit that will be the focus of this poster is a first year, first semester unit called *Introduction to Speech Pathology Practice* delivered over a 12 week semester.

Details of the Initiative

The presentation will outline how the six principles of Transition Pedagogy: Transition, Diversity, Design, Engagement, Assessment and Evaluation and Monitoring (Kift, Nelson, & Clarke, 2010), have been utilised as a framework to integrate blended learning into a first year unit. Specifically, the following components of the initiative will be addressed:
• Audit of curriculum against First Year Curriculum Principles (FYCP) – Transition Pedagogy
• Design of blended learning strategy including a Flipped Classroom approach
• Integration of educational technologies in Flipped Classroom, video conferenced lectures and tutorial based learning activities
• Examples of transparent pedagogies, rationales for selection and processes for implementation (Including 'Classroom Community Building', 'Expert Jigsaw', 'World Café' and 'Collaborative Learning techniques')

Evaluation

Qualitative student evaluation feedback and data analytics from 2 years of delivery of *Introduction to Speech Pathology Practice* (2015, 2016) will be presented, demonstrating impact of a melded pedagogical approach on student engagement, empowerment and discipline specific knowledge and skill. Feedback themes will address: Access and engagement with educational technologies, engagement with lecturers and tutors, orientation to the chosen profession, building relationships with peers and developing a professional identity.

Conclusion

When designing first year units, there are multiple pedagogies that support the aim of engaging and empowering students, and facilitating the development of successful lifelong learning attitudes and strategies. Reflection on relevant literature and our experience of redesigning a first year unit in light of blended, transition and transparent pedagogies has led to the following key learnings. Student success can be facilitated by:

• Explicit presentation of *behavioural,* skill based learning outcomes, teaching and assessment
• *Learner*-centred curriculum design
• Engagement of existing knowledge and past *experiences* of students
• *Naturalistic* and authentic resources; real clients, real clinicians, real settings and scenarios
• *Embedding* blended learning into unit level assessment tasks
• *Diversity* of learning modes, times, places and purposes to encourage competency with self-directed and multimodal learning strategies.

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