

EXPERIENCE EXCHANGE

Teaching toward contextual instruction in the classroom

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ABSTRACT

Background and purpose: As instructors look for ways to incorporate necessary nursing concepts that address a myriad of student learning outcomes, educational practices must shift from decontextualized instruction to teaching toward salience. The purpose of this teaching strategy was to provide context to classroom instruction and integrate clinical practice with theory. As such, a pedagogical approach for contextual instruction in the classroom is presented.

Methods: Contextual instructional strategies that bring clinical experiences into the classroom was presented showing the possibilities for classroom context in education allowing for students to have a deeper understanding of course concepts and topics where context to action was applied.

Results: Using contextual teaching in the classroom allows students to be engaged in active inquiry where actions and decisions regarding care become “the lecture”.

Conclusions: Contextual pedagogical instruction through the use of clinical experiences encourages instructional practices that motivate students and provide relevance for what they are learning.

Key Words: Contextual instruction, Pedagogical teaching strategy, Nursing education, Teaching and learning

1. INTRODUCTION

Curriculum revision and a call for innovative pedagogy in the classroom to produce competent and qualified nurses is not new.^[1-3] This shift in educational pedagogy is needed to support teaching and learning practices that prepare nursing students for the complex health environment they will enter upon graduation.^[2,4,5] Nursing education has evolved from a medical and disease focused teaching model, to concepts that are central to instruction. This move away from content-focused teaching has been crucial in keeping pace with health care, education, and technology changes.^[5] While nursing education moved to incorporate creative teaching strategies in the classroom, an integrated framework for optimal classroom delivery and theory-driven instructional strategies based on best practice are lacking.^[6-8]

As instructors look for ways to incorporate necessary nursing concepts that address a myriad of student learning outcomes, educational practices must shift from decontextualized instruction to teaching toward salience.^[7] This must be accomplished while meeting professional competencies and mandates, state and national licensing, and accreditation requirements. Too often, classroom practices may not use pedagogies that translate learning content into practice.^[1] Teaching strategies that bring context to the classroom can provide students with a deeper understanding of a topic and integration of the content for greater meaning.^[1,2,5,7,9] Contextual instruction provides students with realistic content in which to ground information and then apply within situations thereby giving meaning and significance to the information.^[10] Contextual-based learning is defined as: “A peda-

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gogical methodology that . . . centers on the belief that both the social context of the learning environment and the real, concrete context of knowing are pivotal to the acquisition and processing of knowledge.”^[11] Pedagogical instruction that uses authentic situations or storytelling to relate the practice side of nursing in which information is situated in context can have an impact on student learning.

Nursing education continues to seek a learner-centered approach through teaching methodologies that assist nurse educators in the classroom by, “actively engaging the learner and focusing on making cognitive connections from previous to new knowledge and from theory to practice”.^[4] These teaching strategies draw synergy from students’ learning experiences and factual knowledge, this process can then build on previous knowledge while expanding breadth and understanding of new content.^[7] To provide context to classroom instruction and integrate clinical practice with theory, a pedagogical approach for contextual instruction in the classroom is presented.

2. CONTEXTUAL INSTRUCTION

As nurse educators seek to improve knowledge acquisition and transform learning, they need to consider how information is received in addition to what is disseminated.^[6] Too often, nurse educators teach how they were taught; nurse faculty may be unaware of “. . . the need to use evidence in their teaching and faculty responsibilities.”^[6] Evidence for what and how we teach must be based on learning outcomes from pedagogical strategies.^[3]

Contextual instruction uses a case-based approach where information is meaningful for the learner and placed in-context to situations and the environment.^[7] Following a constructivist approach, this strategy links information promoting schema formation.^[9] Case-based instructional practices using high-fidelity simulation and student directed learning activities has shown effectiveness in thinking disposition.^[1,3,5] Kantar^[7] found the use of contextual instruction in the classroom heightened student’s understanding of real practice and professional formation. Contextual instruction as applied to lifelike situations in simulation has been shown to promote necessary critical thinking skills while providing a mechanism for linking classroom content with the clinical environment.^[5,12]

Despite inclusion of interactive activities within the classroom, the gap between practice and theory still exists. To rectify this issue efforts should be made to continue to integrate classroom instruction and clinical practice in a meaningful way where context to action can be applied.^[5] As a practice profession, nursing is situated to learn through clinical ex-

periences.^[2] Pedagogical strategies that are learner-centered and predicated on evidence-based teaching and learning practices, are, therefore, necessary. While literature supports a contextual approach in the classroom, limited guidance on this pedagogical strategy is provided.^[7]

3. CONTEXTUAL INSTRUCTION IN THE CLASSROOM

In a community health class, clinical experiences are applied to weekly lecture course content (for example, vulnerable populations). Faculty consideration for diverse clinical settings and experiences and how they apply to course content is important to consider. The example below demonstrates how one setting can elucidate a variety of experiences which can provide a rich and inclusive discussion beyond content coverage:

Several students have a clinical placement at a non-profit senior facility. The facility case managers receive intake requests from providers and discharge planners to improve coordination of care and reduce hospital admissions. Students make home visits and perform assessments in the clients’ homes. Student A works with a client who is a refugee having recently been relocated to a rural community in the area. Student B visits a client who has been living in the community for 20 years but is not a citizen.

Class discussion on vulnerable populations includes information on refugee and immigrant populations regionally and nationally using student A and B’s clients as examples. Tangential topics such as legislation and social determinants of health are then integrated with the clinical examples to provide further contextual understanding of topics that typically might have isolated coverage and discussed without context.

The concept of contextual instruction can be applied to most any nursing class. Another example includes cardiac content where pathophysiology is the focus of the lecture. Instead, with faculty consideration for the clinical situations in which students are exposed to for their rotation, a different scenario can be provided that brings context for student understanding beyond just pathophysiology coverage:

Students are placed in an acute care setting where several have cared for a 58-year-old female with cardiac complications and a history of high blood pressure and cholesterol. The patient history and background identify a family history of high blood pressure and cardiac issues. The students observe a patient with a BMI of 33, who works nights, has limited exercise, and lives in a food desert region.

Class discussion could include differentiating for students how heart disease effects women as compared to men, and

research specific to women's risk factors as compared to the male population. In addition, guidelines specific to women and cardiac health, as well as treatment options can allow students to be familiar with the health needs of this population. Rather than a lecture focused solely on pathophysiology, the discussion could be inclusive of other topics such as pharmacology, population health, and levels of prevention to provide a more comprehensive and contextual understanding of the situation.

This strategy offers inclusion of current clinical situations encountered by students which is enhanced by the faculty's ability to introduce context and broader patient experiences. Students are then engaged in active inquiry where actions and decisions regarding care become "the lecture." Additional topic areas to be integrated for contextual instruction might include:

- Population health
- Policy
- Healthcare infrastructures
- Levels of prevention
- Competencies and professional standards
- Pathophysiology and pharmacology
- Cultural values and beliefs
- Ethics

Paramount to this teaching strategy is the alignment of course objectives with student learning goals, and the evaluation of these outcomes. For these examples, course objectives included application and analysis cognitive taxonomies supporting this contextual instructional strategy. This was not a research study, however, anecdotal student comments from course evaluations indicate appreciation of real clinical situations in the classroom that provided for greater insight and understanding of classroom topics.

4. DISCUSSION

Nursing practice allows for an abundance of real-life case scenarios and situations which can be used as learning opportunities in the classroom. Classroom instruction should not be solely reliant on passive presentations. Opportunities for content to be presented that integrates clinical experience with broader concepts should be included in the classroom. Nurse educators must lay a foundation with which students can use the knowledge from multiple settings and a variety of situations. Similar to the literature, the use of contextual instruction through case-based examples allows students

to make connections that can be applied across many contexts.^[1,5,7,12]

Contextual pedagogical instruction through the use of clinical experiences as presented here encourages instructional practice that motivate students and provide relevance for what they are learning. Outcomes from other studies have found that students support the use of contextual instruction in the classroom. Nursing students in Kantar's^[7] study said they felt more ready for practice, had increased knowledge about the content, and improved critical thinking. Chang,^[13] found that contextual instruction provided better learning performance, attitude, motivation, and critical thinking tendencies over students who received traditional instruction. Contextual instruction is a strategy that brings relevance to a topic by providing a real, social context for the situation combined with a concrete context for knowing.

The presented instructional strategy is theory based, supported by research, and is just one example of how contextual instruction can be applied in the classroom. This approach can be easily integrated into the classroom using student's lived clinical experiences eliminating the need to purchase vendor material or employ game strategies that might "...trivialize course material".^[1] As noted in the literature, faculty must adopt teaching practices that are engaging and effective; pedagogies must be based on theoretical constructs and measured for effectiveness.^[2,3,8] Nurse educators should encourage a culture that supports the use of evidence in our teaching;^[6] knowing how to teach our students is just as important as knowing what to teach.

5. CONCLUSION

The profession of nursing requires future nurses to have clinical reasoning skills, and the ability to process complex situations in interactional environments. Fragmented content and the chasm between classroom and clinical teaching where subject matter content is decontextualized, has not supported nursing education and best outcomes in producing nurses to meet the challenges of today's healthcare environment. Nurse educators are uniquely positioned to share the practice aspect of nursing integrating classroom concepts with clinical experiences supporting a contextual education process for the student.

CONFLICTS OF INTEREST DISCLOSURE

The author declares that there is no conflict of interest.

REFERENCES

[1] Benner P, Sutphen M, Leonard V, et al. Educating nurses: A call for radical transformation. Jossey-Bass; 2010.

[2] Giddens J, Caputi L, Rodgers B. Mastering concept-based teaching: A guide for nurse educators. Elsevier-Mosby; 2015.

[3] Herinckx H, Munkvold P, Winter E, et al. A measure to evaluate

- classroom teaching practices in nursing. *Nursing Education Perspectives*. 2014; 35(1): 30-36. PMID:24716339 <https://doi.org/10.5480/11-535.1>
- [4] Fletcher K, Hicks V, Johnson R, et al. A concept analysis of conceptual learning: A guide for educators. *Journal of Nursing Education*. 2019; 58(1): 7-15. PMID:30673087 <https://doi.org/10.3928/01484834-20190103-03>
- [5] Jeppesen K, Christiansen S, Frederiksen K. Education of student nurses- a systematic review. *Nurse Education Today*. 2017; 55: 112-121. PMID:28575708 <https://doi.org/10.1016/j.nedt.2017.05.005>
- [6] Kalb K, O'Conner-Von S, Brockway C, et al. Evidence-based teaching practice in nursing education: Faculty perspectives and practice. *Nursing Education Perspectives*. 2015; 36(4): 212-219. PMID:26328288 <https://doi.org/10.5480/14-1472>
- [7] Kantar L. Context-based pedagogy: A framework from experience. *Journal of Nursing Education*. 2016; 55(7): 391-395. PMID:27351607 <https://doi.org/10.3928/01484834-20160615-06>
- [8] Malik G, McKenna L, Griffiths D. Using pedagogical approaches to influence evidence-based practice integration-processes and recommendations: findings form a grounded theory study. *Journal of Advanced Nursing*. 2016; 73(4): 883-893. PMID:27706835 <https://doi.org/10.1111/jan.13175>
- [9] Bruner J. The act of discovery. *Harvard Educational Review*, 31, 21-32.
- [10] Prins G, Bulte A, Pilot A. Designing context-based teaching materials by transforming authentic scientific modeling practices in chemistry. *International Journal of Science Education*. 2018; 40(10): 1109-1135. <https://doi.org/10.1080/09500693.2018.1470347>
- [11] Springer. Context-based learning. 2020. Available from: https://link.springer.com/referenceworkentry/10.1007/978-1-4419-1428-6_1872#:~:text=Definition,acquisition%20and%20processing%20of%20knowledge
- [12] Parker B, Myrick F. A critical examination of high-fidelity human patient simulation within the context of nursing pedagogy. *Nurse Education Today*. 2009; 29: 322-329. PMID:19081656 <https://doi.org/10.1016/j.nedt.2008.10.012>
- [13] Chang C, Kao C, Hwang G, et al. From experiencing to critical thinking: A contextual game-based learning approach to improving nursing students' performance in electrocardiogram training. *Education Tech Research Dev*. 2020; 68: 1225-1245. <https://doi.org/10.1007/s11423-019-09723-x>