ARTICLE IN PRESS



Available online at www.sciencedirect.com

ScienceDirect

Health Professions Education ■ (■■■) ■■■-■■■



www.elsevier.com/locate/hpe

A systematic review of Reciprocal Peer Tutoring within tertiary health profession educational programs

Swapnali Gazula^{a,*}, Lisa McKenna^b, Simon Cooper^d, Penny Paliadelis^c

aSchool of Nursing, Midwifery and Healthcare, Faculty of Health, Federation University Australia, Mt Helen campus, VIC 3353, Australia
bNursing and Midwifery, Monash University, 10 Chancellors Walk, Clayton, VIC 3800, Australia
cExecutive Dean, Faculty of Health, Federation University Australia, Mt Helen, VIC 3353, Australia
dSchool of Nursing, Midwifery and Healthcare, Federation University Australia, Gippsland campus, Churchill, VIC 3842, Australia
Received 1 August 2016; received in revised form 15 November 2016; accepted 9 December 2016

Abstract

Introduction: Reciprocal Peer Tutoring (RPT) is a form of collaborative learning that involves students of similar academic backgrounds experiencing interchanging roles of tutor and learner.

Purpose: Use of RPT has not been explored to the same degree as other forms of peer-assisted learning which may involve learners of different levels. The aim of this systematic review was to examine the role of RPT in health professions education in order to identify the benefits and challenges, as well as the best approach for its successful execution.

Method: A search of the literature between January 2005 and February 2016 was conducted using applicable electronic databases and snowball referencing searches. Methodological quality of the selected studies was ascertained with the use of the Critical Appraisal Skills Programme (CASP) checklist.

Results: Eight articles met the set inclusion criteria for the review. Within these it was found that RPT could potentially enhance cooperative learning, communication, metacognition and teaching skills apart from enhanced understanding of the topic under study. Discussion: Whilst RPT has been found to have a positive impact upon learner experiences, further investigation is required around its use, particularly in assessing learning outcomes in health education programs.

© 2017 King Saud bin Abdulaziz University for Health Sciences. Production and Hosting by Elsevier B.V. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).

Keywords: Health professional education; Literature review; Peer assisted learning; Reciprocal Peer Tutoring; Systematic review

Contents

1.	Introduction			
	1.1. Peer Assisted Learning (PAL)	2		

E-mail addresses: s.gazula@federation.edu.au (S. Gazula), lisa.mckenna@monash.edu (L. McKenna),

s.cooper@federation.edu.au (S. Cooper), p.paliadelis@federation.edu.au (P. Paliadelis).

Peer review under responsibility of AMEEMR: the Association for Medical Education in the Eastern Mediterranean Region.

http://dx.doi.org/10.1016/j.hpe.2016.12.001

2452-3011/© 2017 King Saud bin Abdulaziz University for Health Sciences. Production and Hosting by Elsevier B.V. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).

Please cite this article as: Gazula S, et al. A systematic review of Reciprocal Peer Tutoring within tertiary health profession educational programs. *Health Professions Education* (2017), http://dx.doi.org/10.1016/j.hpe.2016.12.001

^{*}Corresponding author. Tel.: +61353276163.

S. Gazula et al. / Health Professions Education I (IIII) III-III

	1.2.	Reciprocal Peer Teaching: a form of PAL	2		
2.	Methods				
	2.1.	Design	3		
	2.2.	Search strategy	3		
	2.3.	Inclusion and exclusion criteria	3		
	2.4.	Assessment of study quality	3		
3.	Resul	ts	. 4		
	3.1.	Overview of studies	4		
	3.2.	Study designs, participant characteristics, theories and aims	4		
	3.3.	The use of RPT	10		
	3.4.	Benefits gained from RPT	10		
	3.5.	Challenges encountered, limitations and recommendations	10		
4.	Discu	ssion	11		
	4.1.	Need for RPT	11		
	4.2.	Role of the academic in the use of RPT			
	4.3.	Aspects to be considered when implementing RPT	12		
	4.4.	Lack of consistency in RPT terminology	12		
	4.5.	Paucity of research that explores RPT use in health professions education	13		
5.	Limita	ations	13		
6.	Concl	usion	13		
One sentence bios					
Disclosure					
Ref	References 14				

1. Introduction

1.1. Peer Assisted Learning (PAL)

Peer-assisted learning (PAL) is a form of collaborative learning described as the acquisition of knowledge and skill through active help and support among status equals or matched companions. PAL is an umbrella term encompassing various forms of peer-assisted learning including peer teaching, peer learning, peer assessment, peer mentoring and peer leadership. Whilst distinct from each other, all variations have some commonalities such as similar discipline groups, mutual interaction and non-professional teaching roles. ²

Earlier work in the field has been undertaken in primary and secondary schools ³ and is increasingly being disseminated within higher education healthcare programs. ^{4,5} Incorporating peer teaching within professional curricula helps to meet expectations of health professional competency standards related to teaching others. ⁵ PAL is not a new innovation but it is suggested that despite its ancient existence, it is an underused, yet highly prospective resource in higher education. ⁶

1.2. Reciprocal Peer Teaching: a form of PAL

Reciprocal Peer Tutoring (RPT) is one form of PAL specifically involving structured switching of tutor-

tutee roles amongst individuals of the same academic-year level. 7,8 Numerous systematic reviews have been conducted to gain an understanding of PAL within medical, 9,10 nursing, 11 medical and allied health education programs 2 as well as undergraduate health sciences education, 12 however none have focused on RPT specifically.

Initial documented evidence of RPT use was found in the 1970s with primary school children in USA, where fellow classmates interchanged roles of learner and tutor to study remedial reading facilitated by undergraduate teacher trainees.3 Benefits to the approach have been identified within tertiary education¹³ including improved understanding and retention of content, 7,13 better skill retention, 14 improved communication 7,15 and greater self-direction. 16 In a study with language students within Ireland, ¹⁷ RPT was found to be the catalyst for improving individual responsibility and accountability, as well as increased group solidarity. Due to the nature of interchanging roles of learner and teacher, RPT enables students to simultaneously learn while contributing to their peer's learning, sharing mutual experiences and reducing power differentials. Academics from various fields including medicine, ¹⁵ physiotherapy, ¹⁸ language learning, ¹⁷ teacher training, ^{19–21} mathematics ²² and information technology 23 have successfully embraced the use of RPT. However, despite identified merits, RPT is not widely popular in health professions education.

Download English Version:

https://daneshyari.com/en/article/8582908

Download Persian Version:

https://daneshyari.com/article/8582908

<u>Daneshyari.com</u>