Interview with Meagan Rogers

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Lisa Bonsall: Hello, this is Lisa Bonsall, Senior Clinical Editor for Lippincott NursingCenter. I'm here at the Nursing Education Innovation Summit, and right now I get to speak with Meagan Rogers. Meagan is the Associate Chair for Undergraduate Nursing in the College of Nursing and Health Innovation at the University of Texas at Arlington. Her research interests include transition to practice, disparities in educational persistence and attainment, and the use of predictive analytics to target interventions for at risk students.

Thanks so much for speaking with me.

Meagan Rogers: Thank you, Lisa.

Lisa Bonsall: How can advances in cognitive science inform teaching?

Meagan Rogers: So one of the more important things we've learned in in recent years is the concept of metacognition as it relates to the teacher's role. And what we know is that we have to be deliberate in thinking about how our learners learn.

So the concept of metacognition really tells us that thinking about thinking produces more knowledge construction and better knowledge construction, which is an important concept. The other piece that has really changed recently with the advancements in cognitive science and research centered around best practices in education, is the faculty's role in the teaching and learning process. For so long, we have stood in front of students and primarily lectured and told them what we know.

Then we send students outside of our classroom and we leave the hard part up to them. We leave the part about what they do with what we told them for them to discover. And as it turns out, they need our help with that more than they need us to stand in front of them and lecture for hours on end.

And so for our strategies as faculty, that really flips that. Now we stand beside students instead of in front of them. It's a big paradigm shift for us as faculty.

Lisa Bonsall: How can we reach beyond customary teaching practices to link the science of learning to strategies for guided student reflection?

Meagan Rogers: So instead of lecturing with students, one of the strategies we can use is helping them reflect on not just what they know, but how they've come to know it. It can be done in a number of ways.

The easiest is having a conversation with students that looks similar to debriefing in a clinical situation or a simulated situation. In the classroom situation and in the learning process, this goes from having a discussion in our traditional sense about what happened with a patient to now we're moving to reflecting on the learning process. “Talk to me about what you already know” is the approach here to start, rather than assuming we know what they know.

Students come to us with all kinds of biases, experiences and beliefs, core beliefs, and those all shape how they show up to us as educators. So we have to discover and explore that. And that starts with asking them how they came to know something or what knowledge they have used to come up with this decision making.

The other piece is modeling decision making. So as a faculty, I may stand in front of students and think out loud about how I would approach a situation. And what I'm doing is telling students I know that X, and because I know that, I believe this should occur. And helping students get inside your head as an educator is a really powerful tool to help them also build those neural networks for that cognitive schema to be able to pull on information that they've learned from you.

And in our traditional sense, the first time students go and retrieve information is when they sit down to take your exam. And we've left, as we said, we've left the hard part up to them to construct knowledge, to figure out what to do with it. So there's a so what element that faculty have to fill in the gap with us.

Lisa Bonsall: Thank you so much for speaking with me today.

Meagan Rogers: Sure. Thank you.

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