



# QUEEN'S UNIVERSITY BELFAST

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## Using Technology to Enhance Assessment

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## Description

### **Background/ Context**

The health promotion module is run as part of the Masters in Public Health, EuroPubHealth and Masters in Dental Public Health programmes.

### **Motivation & Aims**

Pedagogic strategies suggest that groups achieve more collectively than individuals, particularly through the process of assessment (Violet and Mansfield 2006). Whilst the objective of online learning may be to increase learning opportunities for distance learners, the use of technology may compound feelings of isolation (Dickey 2004). One suggestion is that creatively using tasks to challenge the thinking of small groups online may facilitate the level of 'critical consciousness' that Freire argues is important to develop students (Freire 1972:47). The role of the tutor as facilitator appears vital for online work and proactively creating an online community of students appears to be one factor in successful collaboration (Song et al 2004). An additional factor appears to be finding ways of facilitating the development of technical skills in order to reduce barriers and for students to feel comfortable with the task (Muilenburg and Berge 2005). An effective online learning environment would appear to be one that is flexible, develops collaboration, increases social interaction and crucially one that increases subject knowledge; enabling the student to develop transferable skills to use in their workplace.

Health promotion, when it occurs in the real world, is not a task done in isolation; it is dependent on teams working together and collaborating to enhance the health of people. Students need a variety of skills; working together with people from diverse backgrounds; developing insight into researching with and working in multi-disciplinary teams; acknowledging diversity which can also be translated into their practice when working with different groups within the population; developing critical skills are also crucial tools for the health promoter so they can assist in addressing the issues of the target groups. Assessment was therefore devised to develop these alongside academic skills.

## Methodology

Initially it was decided that students would work together on a Wiki, but the technology tools were insufficient for the task so students were encouraged to use an online collaborative document [e.g. Google docs.]. This was paired with an individual reflective log, accompanied by instructions based on a blend of Gibbs (1988) and Atkins and Murphy's (1993) models of reflection. This aimed to encourage students to think about the experience of completing the activity and reflect on how it helped them to use and refine particular skills.

Students are asked to work together to produce a coherent, critical, health promotion resource in groups (there are a maximum of 5 students per group to enable participation). Group assessment takes place through an online collaborative document where an area of health promotion is researched, explored, and critiqued in depth. Each student contributed a minimum of 1000 and no more than 1500 words. Students also used a discussion board to discuss ideas about the document with their peers. They were also asked to complete an individual self-reflective diary. This evidenced the process and asked students to outline their participation, discussing areas of personal self-development, such as insights about academic/interpersonal skills they had developed (or realised they possessed) throughout the process. The reflective nature of the diaries was designed to support students to evaluate their thoughts and progress. This form of evaluation is extremely positive as a way of facilitating self-directed learning and peer support in a group. Marking Rubrics are shared with students so they can see the areas on which they are assessed. For the collaborative document the areas of assessment are; research, critical analysis, organisation and information, focus. For the diary/journal the areas of assessment are;

reflection, evidence, layout, adaptability. Feedback is given to match the rubrics with guidance on how to improve.

### Successes/ Challenges/ Lessons Learnt

We knew from the outset that we had to be very clear about the outcomes we wanted the students to achieve because we were giving them an extremely unstructured task which some students struggle with. Initially, the area to be researched and approach was chosen for students which followed a more instructivist position which has a well-defined boundary but 'discounts the reality of the ambiguous, complex, and continually changing world in which we live' (Kanuka and Anderson 1999). Feedback from students after the first iteration of the task indicated that they found it difficult to research an area in which that they had little interest. The decision was made to move the task more towards a constructivist framework which was more open, unstructured and learner-centred which considers that learning is an active, not a passive process.

The loose structure means we suggest milestones (e.g. a deadline set for students in May for having an outline document in place as the basis for provisional feedback) and need to keep an eye on progress, especially for groups who appeared to be struggling, although this happens infrequently (twice in 8 years). We also send the occasional reminder and offer of help. The students are required to keep a weekly account of their work during the activity in the form of a diary or journal, which is done online and assessed. From our 8 years of experience with this method we have found that it is particularly useful for distance learners because it helps them feel less isolated when building something collaboratively. This is supported by evidence which suggests loneliness and feelings of isolation are significant barriers to learning and motivation for online courses (Lake 1999, Song et al 2004, Muilenburg and Berge 2005). The assessment also enables the development of critical and writing skills through peer support. The groups all appear to function well and support one another and some students have learnt not to over scrutinise their peers but to tactfully offer support if they feel there is a problem. The acquisition of health promotion knowledge around an area is deepened by the supportive and collaborative approach because each student brings a different perspective and skill set to the exercise

### Scalability/ Conclusion

The assessment has also been used successfully for face-to-face learners because they can proceed with the assessment virtually whilst engaging with the module. The potential use of technology for online learning appears most successful when students are being supported in tasks, either by their peers, or facilitated by a tutor. The movement towards an open, learner-centred assessment away from a teaching-focused assessment appeared, in this example, to promote autonomy and develop student learning. The level of transferable skills developed was an artefact of the assessment and related directly to the diversity of the student cohort. The online journal enabled students to reflect on their skills and attitudes to the work, making conscious and deliberate the acquisition of group working skills but was also a means of monitoring participation and engagement. What became obvious through the assignment was that whether the student was at the centre or part of a learning community or learning network, learning effectiveness could be greatly enhanced.

### References

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## Additional Resources/ files

### Rubric for collaborative document

Criteria	30%	50%	70%
<b>Research</b> Weight 25.00%	- very limited range of sources e.g. only using websites - majority of assertions not supported by references to literature - inaccurate and incomplete referencing - no wider reading	- a range of sources used e.g. journals, books, web but with some omissions - referencing generally accurate and complete but with some inconsistencies - some assertions supported by evidence but with notable exceptions	- good range of research from a variety of sources with reliability of sources considered - e.g. books, journals, websites, policy documents and grey literature - correctly referenced using Harvard
<b>Critical Analysis</b> Weight 25.00%	- purely descriptive - no attempt at synthesis or analysis of the material	- some comparison and contrasting of resources but little synthesis of the information	- coherent and consistent comparison and contrast of resources - good synthesis and evaluation of information to form conclusions
<b>Organisation and Information</b> Weight 25.00%	- haphazardly presented - does not present a logical train of thought - no separation of Health Promotion actions - no depth to information presented	- some attempt at building a logical narrative separating Health Promotion actions	- well structured, logical narrative - clearly defines Health Promotion actions - thorough exploration of action areas.
<b>Focus</b> Weight 25.00%	- biomedical, disease oriented approach - moves towards victim-blaming - little consideration of context	- Some consideration of wider context - Includes socio-economic factors etc.	- focus on contextual issues which have implications for Health Promotion for particular groups/populations/individuals - displays awareness of the implications of context

### Rubric for Journal/diary

#### Rubric Detail

Criteria	Levels of Achievement		
	Novice	Competent	Proficient
<b>Reflection</b> Weight 25.00%	30 % Fails to reflect on process	50 % Reflects on process but could have expanded more	100 % Highly reflective of process and their involvement/effect on process.
<b>Evidence</b> Weight 25.00%	30 % Minimal evidence of engagement with Wiki group.	50 % Some evidence of engagement but did not explain in enough detail as to the ways in which they contributed	100 % Explicit engagement with the process and the part they played. Examines their search for information and process of evaluation in detail. Reflects on own needs and limitations. Displays awareness of self.
<b>Layout</b> Weight 25.00%	30 % Poor. Lack of care and attention to presentation. Difficult to read	50 % Well laid out but care and attention to detail needed.	100 % Attention to detail, spell checked, neat, well formatted.
<b>Adaptability</b> Weight 25.00%	30 % High level of negativity and lack of ability displayed to compromise and work in a group. Controlling and ready to point out others shortcoming and not consider their own. No respect for diversity and cultural differences.	50 % Struggled but managed to carve a position in the team. Worked as a team member but too ready to assign 'blame' to others. Aware of cultural and diversity issues.	100 % Ability to compromise and negotiate displayed. Worked as a team member but felt able to voice opinions. Found solutions to obstacles. Mature approach evidenced in log book.