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Bending the Odds: Pedagogy and Dialogue in Large Lecture Courses

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As academics in large public research universities, I am always amazed that when we speak of an ideal pedagogy, we speak about our small intimate seminars where we have the time and resources to experiment with 25 students or less. In my 13 years of teaching, I look forward to those settings when I get to teach one small undergraduate seminar a year. Over the years, I have also tried to make my large lecture hall shrink by trying to utilize different techniques to foster student based learning and most important, to create more interactive group problem solving and reduce the teacher as lord model of education. While this often works in small seminars, those wonderful nuggets of intimate interactive learning, I find it a challenge to accomplish this when I am in large lecture halls (over 200 students) with limited to graduate student teaching support.

In a large Introduction to Medical Anthropology course (what is called Anthropology 227 at McGill), I have worked over the years to integrate more student-interactive learning. I often compare teaching this course to managing a large ocean-liner with staff of different standing and students who are extremely eclectic as they are drawn from across campus from multiple faculties. For example, students in engineering and medicine will take the course as their one social science requirement and for others they find introduction to medical anthropology intriguing. Students in the humanities are also looking to take their one social science course. There are also medical practitioners and their allied health colleagues often nursing students returning to university to complete their BS. Then there are a few PhD students who want a basic course in medical anthropology as a background for their work in medicine. Finally we have the undergraduate students that run the gamut from those majoring in religion to philosophy to political science to sociology and anthropology. It's a wonderful mix although a bit daunting to teach. Since coming to Canada and McGill, I made it my goal to share this course with my other two colleagues in medical anthropology, thus we rotate it every two years and I teach it twice every six years. This also helps keep the course fresh and allows me to revise it when it is my turn.

Interactive learning in the large classroom.

Like many contemporary research universities, McGill places a lot of emphasis on the technical tools of teaching, such as laser pointers, clickers (a local company offers free MAC tablets to faculty that require them, at a cost to students), video-taping lectures, and video-Skyping guest lectures to name but a few of these techniques. Over time, I find myself like a Buddhist monk where each time I teach the course, I taper down my reliance on these techniques – finding them more like what my former undergraduate advisor Langdon Winner called *techniques run out of control*. Instead, I try to focus on research that shows students learn better when they use pen and paper to take notes – meaning they can only write down what they remember and know and thus absorb. [1] I create a classroom that allows for both the large lecture format but accompany it with small conference sections that follow the outline of my course that has six content modules. In my undergraduate years, we had weekly discussion sections lead by a graduate student with a small group of 15 students. However, at McGill we do not have the resources or labour to provide weekly conferences with such small numbers. What is a professor to do? I found a way around this by providing 7 small discussion sections a term, or roughly one every other week, where students register for these sections for consistency, collaboration and building group dynamics. The class is organized around 6 modules and for every module there are 5 events – 4 lectures (2 given by me and 1 by a guest lecturer) and 1 small discussion section (between 20 to 25 students) that is run by our graduate teaching assistants who manage 3 of these every five classes, or roughly every two and quarter weeks. I also organize a final review session for the final exam in these small conferences run by the graduate teaching assistants.

The discussion sections are built into the course, where every lecture I conclude with what I call *Wiz questions* – meaning the questions that I want students ideally to answer after listening to lectures and doing the readings. The *Wiz questions* are where the teaching assistants begin their bi-weekly discussion sections. I do encourage TAs (graduate students in Anthropology, Medical Anthropology, Transcultural Psychiatry and Public Health) to draw on designs that work for them to experiment with interactive learning styles. Each lecture then builds toward an interactive discussion section and assignments that allow students to play with the material, with the exception of a multiple-choice final exam (thus making time for small discussion sections instead of more grading). I design each assignment around a different learning style so that every student has at least one assignment that speaks to their strengths, including science students who excel at the final multiple-choice test. A caveat is in order: to provide small discussion sections, the only solution for the final assignment is to resort to a multiple-choice test because I have limited

teaching assistant hours that preclude another labour intensive graded assignment. I realize this is not ideal; however, I draw on the *Wiz questions* that we address each week and it is worth no more than 35% of their final grade.

As for integrating interaction in the large lecture hall, I also structure events like debates over controversial medical issues. One year, we took up the question of the right to die and drew on two current cases, one in Oakland California where Right to Life groups were pressuring a local hospital not to take a brain-dead adolescent off life support, and one in Texas, where the laws would not permit a husband to take his wife off life support because she was pregnant. Conveniently, the physical layout of my classroom is divided into three sections where I organize three different positions on a topic and create in-class time for students to discuss their positions with students sitting next to them and also in front and behind them. Having provided three roughly equal positions, I then open of the entire classroom for a debate. In the beginning this means some students are much more loquacious and open, more likely to speak up to a large audience, but usually by the end of the term, a large percentage of the class engages with either those directly sitting next to them and many more speak up as a whole.

For those of you looking to add more interactive learning styles, I hope these suggestions: 1) bi-weekly discussion sections, 2) building *Wiz questions* into the end of each lecture, 3) providing support to the teaching assistants who run conference sections, and, 4) creating large lecture debates, collectively structure a more low-tech interactive large-lecture classroom.

[Download the syllabus here](#)

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