

Korea's blended learning in nursing: Issues and the way forward

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Blended learning is receiving significant scholarly attention in Korean nursing education for a number of reasons: the downsizing of universities due to low birth rates; the high demand for nurses in a super-aged society; and nursing's distinctive characteristics, i.e., theory-driven practical scholarship (Park, 2016). However, the lack of scholarly evidence on this subject suggests that current nursing scholarship is not satisfying the needs of the times. This article thus addressed problems in the current literature on Korea's blended learning in nursing and suggested a way forward for the future.

A rigorous literature review and synthesis were conducted from July 01 to August 10, 2016 using an electronic database operated by Korea Education & Research Information Service. The key words were "blended learning" and "nursing." The search result included twelve publications on "blended learning" and "nursing" in Korea and thirty publications on "blended learning" and "nursing" in other countries. All articles were first scrutinized by the author for relevance to blended learning in nursing and were then compared and synthesized.

Korean articles had straight research structures from central casting in contrast to the articles from other countries. Specifically, these structures included 1) an ambiguous definition of the scope of blended learning: i.e., multiple instructional methods or delivery media, rather than an integration of technology-mediated instruction into a face-to-face (F2F) learning environment (Bonk & Graham, 2005); "enhancing blends[1]" rather than "enabling blends" or "transforming blends" (Bonk & Graham, 2005, see Table 1: Different categories of blended learning systems), 2) a very small sample size with a limited location, 3) the use of very basic descriptive statistical analyses, 4)

[1] "Enhancing blends" refers to making incremental changes to the pedagogy: e.g., providing supplementary online materials in a traditional F2F learning setting, while "transforming blends" refers to making a significant transformation of the pedagogy: e.g., letting learners experience dynamic technology-mediated interactions and actively build up knowledge and skills (Bonk & Graham, 2005, see Table 1: Different categories of blended learning systems). "Enabling blends" refers to making changes of modality in educational content delivery for easier access, better convenience, and more flexibility (Bonk & Graham, 2005, see Table 1: Different categories of blended learning systems).

undifferentiated types of a blended learning: i.e., most articles referred to blended learning in nursing education as on-line lectures for a few hours plus face-to-face lectures or practicum. Flipped learning and Virtual-reality-based (VR) education were nonexistent in Korean nursing literature despite the fact that these have already entered US and UK publications, 5) the use of clichéd variables such as "self-efficacy," "satisfaction," "motivation," and "self-directed learning ability," and 6) a study design lacking in scientific rigor.

Blended learning is significantly and rapidly transforming our education environment. This change is accordingly accelerating improved pedagogy toward interactive rather than transmissive learning, increased learner-centered access/flexibility, and enhanced cost savings. Considering that practice is vital in nursing education, "mixed-reality and problem-based embedded training" (Kirkley & Kirkley, 2005, pp. 533-549; Kirkley & Kirkley, 2007, pp. 42-53) such as "Live-Virtual-Constructive Simulations" (Wisher, 2005, pp. 519-532) are expected to play a key role in ensuring well-equipped nurses in the near future.

However, scholarly preparations to embrace advanced technology-based innovation in nursing education are, at present, insufficient. Before trying to present empirical study findings on the effects of blended learning in nursing education, 1) a clear definition and scope of blended learning must be established, 2) theories, models, and ethical considerations in the context of nursing education should be developed, and 3) the nursing science community must reach a consensus on the first two points. On this solid foundation, future research can be built.

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