

A Statement of the Nominee's Teaching Philosophy



My teaching philosophy stems from my nursing philosophy. For me nursing is a way of being – it is my identity. I am not ‘just’ a nurse – I am a nurse. I am a person who can make a difference between pain and comfort, life and death, acuity and chronicity, health promotion and disease progression, to name a few. I like to think in metaphors and nursing for me is a journey – a journey of self-discovery as a health care provider and member of a healthcare team, as a past and future patient and recipient of care, as an educator and life-long learner, and a researcher who can make a difference in how patients experience the healthcare system and live with their conditions in the community.

My teaching philosophy comes from the belief that to be a successful nurse educator, I must first know myself and what I can bring to each teaching-learning encounter with my students. With each subsequent teaching experience and reflection of such experience, I can provide students

with a richer learning environment. To that end, I treat each set of students as a new group of educators who can aid me in learning how to better meet the needs of students in the future. Through this I apply Mezirow's Transformative Learning Theory to myself as an educator, but also with my students. Mezirow's Transformative Learning Theory identifies that when learners acquire new information, they are also evaluating their past knowledge and understanding of the topic and begin to shift their worldview. Critical self-reflection is vital for this to occur. Throughout each course that I teach I continuously ask for student feedback on my teaching at multiple points throughout the course. This provides students with an ability to influence my teaching and learning strategies as the course evolves to suit their needs.

I apply Mezirow's Transformative Learning Theory with my students through inviting them to engage in critical reflection on the content for discussion on a weekly basis. As an example, when I taught MN 8931: Diversity and Globalization: Promoting Urban Health course at Ryerson University in Fall 2020, I would start each one of my lectures asking students to reflect on what they have learned so far, how has this new learning challenged their previous understanding of the topic, how it has impacted on how they see themselves as healthcare providers in the healthcare system, and how can this new understanding apply to their future practice as graduate prepared registered nurses. At the end of the class, I would ask students to reflect on how what we just discussed in the lecture connected to the topics we looked at so far in the course, to their personal and professional life, and their thinking about their own positionality as global citizens. As one of my students mentioned during a mid-term course evaluation, *"I have been raving about this course to my friends and colleagues as I am not only learning about important topics pertaining to urban health, but also learning more about myself and my paradigm."*

Next, through encouraging student learning to occur through the lens of Mezirow's Transformative Learning Theory and being open to students influencing my own learning and teaching abilities, this leads to my belief in the importance of knowledge co-construction. Co-constructing knowledge between teacher and learner allows for curiosity, diversity, creativity, and passion to spark and leads to more meaningful application of material for discussion. These four concepts are part of complexity science (Davidson & Turkel, 2011). I often ensure my lectures are filled with innovative and engaging teaching-learning activities that call upon students to apply the learned content. Together with my students, we co-construct knowledge on the topic for discussion that is meaningful for the learner and helps the learner grasp the information in a way that will lead to easier uptake in their professional endeavours.

To achieve this, I aim to provide a nurturing, safe, and welcoming learning environment open to diversity in expression and critical thinking, where students feel free to be creative and awaken their imaginations in each of my teaching-learning encounters. As one of my first-year students mentioned during a final-course evaluation:

"Kateryna conducts her class in a fun and realistic way, having best prepared me for the reality of nursing amongst all of my courses. The classes were fun and memorable, especially for a first-year student straight from high school and emphasized collaboration and critical thinking in practice."

When instructing students or colleagues in the clinical setting, my view of teaching stems from the perspective of Vygotsky's social constructivism and the notion of potential development that a learner is capable of only achieving under the guidance of collaboration with peers. In a clinical

setting I ensure to guide students to work in collaboration with each other, healthcare providers on the unit, and most importantly the patient and their family/caregivers. Through collaboration and application of principles of person/patient centered (patient as expert) and interprofessional care (as viewed through the lens of Bainbridge et al.'s (2010) National Interprofessional Competency Framework), personal and professional satisfaction is experienced by the students as well as patients in our care. I also teach in the clinical setting from the perspective of Peplau's Interpersonal Relations Theory which focuses on mutual growth of the nurse and patient, and communication as being the key to excellent nursing care. I believe that each patient in our care transforms the nurse just as each student I interact with as an educator transforms me as a teacher. At the same time, each interaction we have with the patient, transforms them in relation to their health trajectory, but personally as well.

Lastly, I like to develop strong, therapeutic working relationships and instill a sense of confidence, responsibility, empowerment, and critical thinking/inquiry in all students under my supervision. I enjoy providing consistent constructive feedback through open communication so that students can continue to enhance their skills and expand their knowledge base at each practice session. As Nelson Mandela once said, "Education is the most powerful weapon which you can use to change the world." I continuously live by this quote and remain mindful of the privilege I have to impact the future of nursing through my students. Today, more than ever before, there is a need for students to apply a critical lens to all that they are seeing and doing, especially in a clinical setting. Thus, I have modified my approach to clinical practice teaching to include principles of critical pedagogy calling upon my students to question and challenge the beliefs and practices which appear to dominate in our healthcare system. I strive to aid my students to achieve critical consciousness. As an example, I continuously incorporate mindfulness activities with my students to help them be more aware of the injustices within our healthcare system. Furthermore, I call upon them to engage in activism if they feel what they are seeing is not benefiting the patient in their care. I try to equip them with the tools to make them feel ready and confident to initiate change and be involved in not only policy uptake, but in policy development.