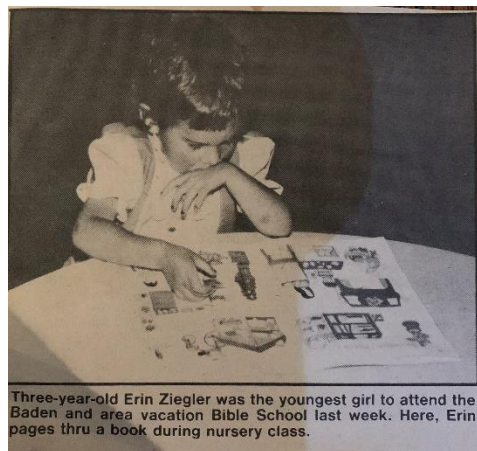# "The art of teaching is the art of assisting discovery"
– Mark Van Doren

Some of my earliest memories involve learning, exploring and asking questions. Learning and striving for knowledge is a key to who I am. If you ask my mom, she will tell you that "Erin always wanted to go to school and learn". The picture to the right is me, age 3. I wanted to go to school so badly that my mom got special permission for me to attend vacation Bible school. Such big news it made the local paper. Learning from an early age lit a fire in me. I am a lifelong learner, continually striving to increase my knowledge and improve my clinical and academic practice. I believe it is important to constantly seek educational opportunities, gain new insights and knowledge that will enhance my professional

Three-year-old Erin Ziegler was the youngest girl to attend the Baden and area vacation Bible School last week. Here, Erin pages thru a book during nursery class.

and personal growth as a nurse, researcher, and educator. As a nurse practitioner, my clinical experience informs my teaching, allowing me to reflect on questions like "how can I teach this skill to my students?", "how can I get students to understand this patient's experience" and "what did I learn from caring for this patient that I can share with my students". I am always incorporating reflective stories into my teaching.

My philosophy of teaching is grounded in the constructivist approach to critical inquiry. Constructivist teaching fosters critical thinking and creates motivated and independent learners. Learners are the makers of knowledge; it is therefore important that students and teacher share knowledge (Tam, 2000). I am constantly looking for the teachable moments, in the classroom, skills lab or clinic. As a teacher I learn from my students. I believe that effective teaching is a dialogue between the students and the teacher. I encourage students to share their personal and professional experiences as it relates to the topics in class. Personal reflection is a guiding principle of nursing practice and education and therefore woven into my teaching and class activities. Schon (2016) describes reflective practice occurring when professionals become aware of their implicit knowledge and then learn from that experience. I continually encourage students to engage in critical discussions, share their experiences and ask questions. I regularly adapt course content to include current evidence-based research, clinical scenarios and hands on clinical skill development. I believe it is important to apply concepts and learning to real-life practice situations.

My clinical practice, research and teaching are informed and guided by critical theory, cultural humility and anti-oppression theory. Drawing on these theories I acknowledge and incorporate issues of oppression into my lessons, giving a voice to those who might otherwise not have one. Challenging students to explore and reflect on the social, economic and environmental structures that contribute to health inequities. I strive to incorporate my research and practice expertise into course content. For example, understanding the healthcare needs of LGBTQI2S individuals and the barriers these individuals may experience can help novice nurses develop an inclusive nursing practice. Using these theoretical perspectives, I encourage students to think "outside the

norm". Incorporating marginalized and vulnerable populations into nursing scenarios to get students to think about the "what if" and how different client experiences and situations can change the nursing encounter. When teaching about pregnancy, I use the term pregnant person as opposed to the normalized pregnant women; opening up the discussion to explore what if this pregnant person identified as a transgender male, how would that change your approach? What else do you need to think about? Challenging students to explore their unconscious bias around vulnerable and marginalized groups. In one class activity we watched a virtual simulation I developed about a transgender youth experiencing discrimination in the ER. Using Mentimeter, I asked students "what is the first word that comes to mind when you think of Cody's story?" Watching the word cloud develop was a powerful experience as students identified not only the negative points such as fear and distress, but also identified Cody's strengths such as uniqueness,

self-determination and hope. Their thoughts about the nursing actions, including non-judgemental, open mindedness, support and inclusive highlighted how the students were learning to apply an anti-oppressive framework and gender-affirming approach to the care of this vulnerable youth.

What is the first word that comes to mind when you think of Cody's Story?

My teaching philosophy is based on the notion that the students I teach are tomorrow's colleagues and leaders. is enhanced when educators show a passional and enthusiasm for the content. I have a passion for nursing and the advancement of nursing knowledge, and this passion and enthusiasm is demonstrated through my teaching. I believe in providing feedback to students that will help them grow and develop. When I am marking written assignments, I often pose additional questions to the student to encourage them to continue to think about topic or situation and engage in reflective practice to extend the learning. I encourage students to develop learning plans at the beginning of the semester, outlining their personal goals within the course and strategies to meet these goals. I provide students with feedback that identifies their strengths as well as provides guidance and direction to allow them to address their areas for development.

I seek feedback consistently in order to grow as an educator. I believe that understanding students' learning needs is key to effective teaching. I provide students with both formal and informal opportunities to provide me with ongoing feedback. Within my online educational platforms, I have incorporated weekly feedback forms specific for that weekly content. I send out a google survey mid-semester and use that feedback to develop the classes for the rest of the semester. Formal course surveys are used at the end of the semester, but I find it helpful to provide multiple check in points throughout the semester to gage how effective my teaching is and change or rethink strategies that are not effective. Teaching, like learning requires practice and feedback to grow and develop. Providing students, the opportunity to provide me with feedback empowers them.

It is my goal to instill an excitement in learning, encourage knowledge development, and foster a desire to learn more. Students need and want to be partners in the learning process. As a teacher, I use my expertise as an advance practice nurse to put resources in the hands of the students and to ensure that they are equally able to find and evaluate additional resources independently. I endeavour to build knowledge, explain, and clarify concepts with students.

I believe that it is vital to create an inclusive and safe classroom, addressing issues of power and vulnerability and creating a learning environment that affirms diverse experiences. I open every new class by introducing myself using my preferred pronouns and encouraging everyone else to identify their pronouns to normalize this as part of all introductions. Within the virtual classroom I encourage students to turn on their cameras, but also allow them the privacy to keep them off and communicate using the chat box versus turning on their microphone. When discussing sensitive topics such as intimate partner abuse, I give students advanced notice and let them know that they can take space if they need to during these challenging discussions.

I aim to present information in a variety of learning methods including PowerPoint slides, case studies, facilitated discussions, and hands-on practice experiences to support a variety of learning styles. Practicing from an inclusive approach, when discussing nursing assessments and skills I bring in additional resources to support students developing an inclusive nursing practice. Examples include conducting a trauma informed pelvic exam and PAP test on a transgender male, and teaching assessment and recognition of skin lesions across skin tones beyond Caucasian. I enjoy finding a balance in learning styles to engage all students, allowing them to draw of their personal 'funds of knowledge" (Moll et al., 2005).

References

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