Teaching Philosophy Statement
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My philosophy has been developed through 25 years of teaching nursing and pre-hospital medicine, and through my graduate work in the theory and practice of teaching at the Columbia University. Conceptually, my teaching philosophy is based on Transformative Learning as defined in Learning as Transformation (Mezirow, 1999), Discussion as a Way of Teaching: Tools and Techniques for Democratic Classrooms (Brookfield, 1999) and The Power of Critical Thinking: Liberating Adult Learning and Teaching (Brookfield, 2005).

In my recently-defended dissertation (March 2009), I developed and tested my own model for learning. Learning is most effective and transferable when it takes place at the intersection of content and communication. Therefore my teaching focuses on effectively conveying accurate information, using innovative communications techniques.

![Venn Diagram]

(Cohn, 2007)

I am the lead teacher and coordinator for all 24 sections of Medical-Surgical Nursing (N375). This course serves as the foundation and conveys the principles of scientific nursing practice, including the pathophysiology, presentation, treatment, management, and patient education for the major life-threatening diseases. This is the point where the “rubber meets the road” in nursing education – there is an exponential increase in the amount of material taught and the vocabulary used to teach it. Moreover, students must master the process of self-directed learning and critical thinking. This class is the first time that the students are taken into the hospital setting. They are expected to integrate all their previous coursework in therapeutic communication, physical assessment, chemistry, and pharmacology, and apply what they know to actual patients. This needs to be done with clarity, compassion, knowledge, and confidence. To assure the highest quality experience for them, I designed a companion handbook and training program to enable our clinical instructors to continue to foster the basic principles taught in the classroom. This course is my primary teaching responsibility, but I also teach Fundamentals of Nursing (295) and Nursing Internship (498).
Because my philosophy of teaching is based on the model of Transformative Learning, I am most concerned with the impact of teaching and learning on my students, I believe that what I am teaching is not nearly as important as what they are learning. For that reason, I have inserted my students’ own words into this statement. To reflect how they are being affected, and sometimes transformed, in my classroom. The quotes are taken without editing (with the exception of removing names of other instructors when present in the evaluations) from the end-of-the-semester evaluations at Adelphi University (a full set of evaluations including those quoted here can be found in Volume 2 of this submission.)

Seven values inform my teaching: Respect, Participation, Mindfulness, Hope, Creativity, Shared Knowledge, and Connection. For each of these, I have developed teaching strategies that have earned consistently positive responses from students.

1. **Respect.** I foster respect by creating a classroom atmosphere in which students are invited to participate. I encourage a mutual receptivity to new ideas and perspectives. In my first day of each class I discuss the fact that I am reverent about the profession of nursing, about my role as a nurse, and about my commitment to the education of nurses. To measure whether I am achieving this value, I use the narrative comments of the Adelphi student evaluation form, and the scores on items, especially item number 19, “treats the students with respect”. From that indicator, I know I am achieving my goal of a safe and respectful classroom.

“**Liz Cohn was GREAT. Unlike other professors in this program who seem to think you are challenging their authority when you ask a question Liz Cohn seemed to ENJOY when her students had questions. Such a simple way to encourage critical thought and engagement in class.... She was really respectful of everyone in class and treated us as equals. That was a huge departure from some of her colleagues as well - respecting us as equals. Also she is REALLY smart and I learned a lot. I think that she probably has the most intensive class but she did a great job of getting through all the material. She really had her s--t together. She was just a breath of fresh air. Many of the professors here are really smart but I just can’ t say enough about how nice it was to have a prof who was not only smart but RESPECTFUL and kind. And funny to boot She was just great.**”

“**Professor Cohn is the best professor I have had so far in the nursing program. She is knowledgeable, caring, respectful, funny and a pleasure to be in her class. She is so respectful of her student and treats everyone as equals.**”

2. **Participation, critical reflection and deliberation.** I welcome each student’s participation as significant and important. The homework for each section is in the form of annotated readings (AR). Annotated readings are an innovation which I developed in 2004 in response to students’ requests for better ways to study. ARs guide the student to read the text in the same way that medical professionals read and learn about unfamiliar diseases. Essentially, ARs effectively motivate the student to “think like a nurse”. ARs
are assigned and graded with detailed feedback. (Samples of Annotated Readings are attached as Sample 1.)

“Annotated reading notes are really helpful. Prof. Cohn is EXTREMELY helpful, knowledgeable, relateable (sic) and informative. I look forward to working with her again in the future.”

“Great, engaging teacher who is really open to other viewpoints. She is a sweet, smart, knowledgeable person.”

ARs are followed by simple and then more complex case studies to foster the value of deliberation. These case studies are guided by worksheets to direct groups of students through diagnosis and problem solving. I define “deliberation” as providing opportunities for different points of view to be presented and supported by evidence, data and logic. Students work in groups to diagnose and treat diseases, and develop strategies for patient management. (An example of a case study is provided in the supplementary materials as Sample 2). Students are asked to develop teaching material for patients as another method of demonstrating depth of understanding and the ability to explain simply and in their own words. (A sample of student-designed patient teaching materials is provided as Sample 3.) Review is then provided in the form of NCLEX-based questions.

“Professor Cohn is an amazing individual. She is a role model and I hope that I will be as passionate about my career and the field of nursing as she is when I'm done. The course content was very thorough and the preparation for the exams with the blueprint was perfect. Please continue to test using NCLEX questions because it only helps us in the long run.”

To further assist the students in putting the pieces together, they are assigned to work in groups to design and evaluate a nursing care plan for a mock patient utilizing the same data collection sheets they use to collect patient data in the hospital setting. The students are guided through this process with problem-goal oriented outcome worksheets which reflect the order and presentation of patients in the hospital. For example the worksheet directs the student to start the verbal report with “This is an 11-year old female with a history of asthma.” as would be expected in the hospital when the nurse participates in rounds. (An example of the mock patient and worksheet is provided as Sample 4.)

“Professor Cohn is the best professor I have ever had in a nursing course at Adelphi. She breaks everything down into little pieces that we can understand and then draws everything together so we can see the big picture. I look forward to taking future classes with her.”

3. Mindfulness and the development of critical incidents. I encourage reflective practice as part of the academic process in my class. The pedagogy behind the creation of critical incidents is that learning occurs when an individual encounters an alternative perspective, and habits of the mind are called into question. To provide opportunities for critical incidents, I challenge my classes in several ways: medical narratives, reflective
journaling, trying to understand how patients might become difficult in the hospital, and creative teaching techniques.

I use medical narratives to get students to see each patient as a whole human being. Students are assigned to write a medical narrative of a family member or themselves. If they do not wish to share a personal story, they can interview a patient in the hospital during their rotation and tell the patient’s story (HIPPA compliance is required for this assignment, no actual personal identifiers are used). This is a narrative essay which describes what it is like to live with a disease, or care for someone who is living with a disease. What does it feel like in their bodies? What are their worries? What is it like to live day-to-day? This exercise is designed to foster a more holistic approach to patient care, by including the patient and family, and to help students to see the patient as more than “the gallbladder in 24-door”. (Examples of medical narratives appear as Sample 5.). Students typically capture and reflect on difficult themes such as despair at being ill, fear of dying and frustration with the medical system. They see the patient and themselves in a multidimensional complex relationship, both able to contribute and affect the outcome.

Reflective journals are another form of structured self-reflection. Students are asked to journal weekly about their clinical rotations, and describe what they like best about the experience, what they would change, what they wish they knew before they started. They are also asked to describe their best and worst days, what could be done to improve the experience and what we can do to maintain the best parts of the experience. An example of a reflective journal appears as Sample 6.

“I loved this course. I wish it could have been longer because I feel like Dr. Cohn has so much to teach. She loves teaching and made that clear in her lectures. I felt appreciated as a student, in that she listened to questions and talked them through instead of sticking to the right answer without wavering. She was engaging and I enjoyed listening to her. I will always remember the heart arrhythmias because of the exercise we did in class. Thank you Dr. Cohn for everything you taught me and I hope I can be like you one day.”

“How I became a difficult patient” is a monologue presented to students on the day before they start their clinical experiences. In a 15-minute monologue, wearing only a hospital-gown and socks, I impart how patients feel when they are scared in the world of the hospital, and how they rely on and trust nurses to guide them in this world. It is a compilation of what I have learned during 25 years of listening to patients. I want student nurses to realize how vital they are to patients, in ways that transcend technical expertise.

“Professor Cohn was the major strength of this course! She has become a role model for me when I think of how a health care professional should be. Her compassion for patient and passion for nursing were apparent and infectious. I feel like she reinvigorated a lot of the students and got people excited about health care. I really enjoyed this course overall I will always remember Professor Cohn; I think SON is lucky to have her”. 
4. **Hope and autonomy.** I evoke hope by supporting students as they develop from nursing students to student nurses. I try to provide an environment of clear expectations, nurturing, and celebrating success. We expect our students to advocate for their patients – with respect and compassion. The way to teach students to do this is to do so for the students themselves, so they experience personally, the difference that one person can make in another’s life. I want them to understand that *in the world, you might only be one person -- to one person, you might be their world.*

“Professor Cohn rocks!!! She is so sweet and funny and really makes learning in her class fun. She looks for new teaching methods and treated ALL of us as if we were intelligent and important. You can absolutely tell how much she cares for her patients because she cared for us in the same way. She was absolutely available to us. I hope I can be as caring a nurse as she is. She really was an example to us and one that we will all take with us into our practice hopefully. She was patient and kind and fun and smart and delightful! I only hope that I can have her as an instructor again! Thank you Prof. Cohn!”

“Professor Cohn is not only an exceptional human being, but her intelligence has inspired me to not only be a nurse, but a knowledgeable one with a big heart. She truly pours her heart and soul into this class. She is extremely fair and very straightforward. I know so much now about nursing, that I feel more confident about my performance in the clinical area. Professor Cohn is truly blessed by transferring her nursing passion to her students.”

5. **Creative teaching techniques.** My most recent addition to creative teaching techniques is the Interpretative Dance of the EKG. In this exercise, after teaching how to read and interpret an EKG, the classroom is set up as a huge anatomically-correct human heart, and students are given EKG rhythms and challenged to perform an Interpretative Dance (A video clip of the Interpretative Dance of the EKG is available on the DVD, Sample 7.) Out of similar class exercises over many years, I wrote *Flip and See ECG,* now in its third edition, published by one of the foremost medical publishers, Elsevier/Mosbys. (A copy is attached to this submission, inserted in packet). This innovative text remains the best-selling 3-lead EKG book on the market, because it helps students to “think like cardiac nurses”.

“Prof. Cohn is an excellent professor. She makes each content interesting and fun with her quirky sense of humor. She thinks of fun ways to teach us. She is extremely knowledgeable, but will admit if she does not know a piece of material (instead of pretending like she does). She is one of the best professors I've ever had -case studies - interpretive EKG dances. Bottom line: If I was sick I would want her to be my nurse.”
6. Shared knowledge. A basic tenet of my teaching philosophy is that college faculty should continually improve their performance by learning from each other. I have learned so much from my colleagues here at Adelphi, and I have sought to share what I have learned. To do this, I disseminate the best innovations by other faculty both here and on other campuses, by researching, selecting, composing, and disseminating the 30-Second Teaching Tips by email (Sample 8). I also serve on the Teaching and Advisement Committee. I have designed and delivered several workshops on better teaching, such as Extreme Teaching: How to teach so your students will never forget, and the Valentine’s Day Love of Teaching Workshop where faculty from across the university celebrated their love and passion for teaching. (Outlines and announcements are available as Sample 9).

“Professor Cohn is a highly energetic and interactive individual and brings these strengths to her presentations and lectures. Creative teaching methods kept students' attention and made us eager to attend class. Professor Cohn was always available, even outside the classroom to provide students with help and guidance. Exams were very fair. Thank you for a great and a most valuable learning experience!!!”

7. Make the Connection. Perhaps the most important aspect of teaching excellence is making a connection with the students. Excellent teaching and excellent nursing share the common ground that people need to feel recognized as individuals, with distinctive strengths, thoughts, feelings and values. I try to elicit the best in each student, by listening carefully, with understanding and compassion, while still maintaining a high work ethic and standards. I remain reverent about my engagement in these two meaningful professions, while continuing to strive for excellence in both.

“Professor Cohn is a wonderful teacher who honestly changed my life for the better. When placing her students in a clinical setting, she truly goes above and beyond to figure out what they would like and where they would excel. She offered me a placement different than what I first wanted, but it turned out to be exactly what I was looking for and now I will be working there. Professor Cohn really listens to her students, care for us and provides the best guidance possible. I would suggest all students take a course with Professor Cohn”.

“Professor Cohn is not only an excellent prof but also a friend to all of us. We can always talk to her and there is nothing better then to have a prof who understands coping with school and family. We all love her.”

“Professor Cohn is an asset to the School of Nursing at Adelphi University. She is an advocate for all (the) students she mentors.”

“Amazing professor - by far the best professor I've had so far in this program. Her clinical and nursing practice knowledge is excellent, her humor is refreshing, and her ability to teach and listen to students to ensure everyone is grasping the material is also refreshing, and unparalleled in this program. Specific high points were the ECG interpretive dances (we won't forget those rhythms now!), and the use of case studies.
This hasn't been used much up until now in the program, and I found it very helpful to isolate information in that more realistic way. Bottom line: kudos, Dr. Cohn!"

In summary, I have learned some from my teachers, more from my colleagues but I have learned, and continue to learn the most from my students.