

Strengths-Based Pedagogy: Opening the Door of Possibility for Faculty Development

By

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To the many students who I have been blessed to have known, thank you for sharing your story's and reminding me everyday that a strengths-based approach is important in nursing education. How we understand and engage with you is just as important as what we teach you. May this project open the door of possibility to enhance how educators teach and learn and how students learn and succeed in nursing education.

"I am not what happened to me, I am what I choose to become"

-Carl Gustav Jung

Abstract

The complexities and insecurities that are facing nursing today are causing uncertainty in what educators know or do not know, with what is considered right or good. It is during uncertainty that a sense of self-awareness and particular way of being needs to be fostered, and how we approach knowledge and knowing needs to shift to an ontological orientation. Taking an ontological turn in education shifts the relationship between epistemology and ontology. Specifically, epistemology is put to the service of ontology (Dall’Alba & Barnacle, 2005; Thomson, 2001). Using a strengths-based pedagogy is an orientation that is grounded in an ontological turn, and allows us to teach in the space between certainty/uncertainty, and promotes the integration of knowing, acting, and being as an educator. The purpose of this project was to develop a faculty workshop that explores the practical application of a strengths-based pedagogy and its potential use in nursing education.

The project is located in a constructivist paradigm where student’s previous knowledge and learning is acknowledged, while integrating and drawing on the literature of the ontological turn (Barnett, 2012; Dall’Alba & Barnacle, 2007). The project specifically draws upon a strengths-based pedagogy for the theoretical orientation as well as relational inquiry tools to address the *how*. Using relational inquiry tools, learning experiences are explored within the intrapersonal, interpersonal, and contextual domains; and informed by five ontological capacities (5 Cs) – compassion, being curious, commitment, being competent, and corresponding may provide insight into how these values can enhance teacher/student relationship and students’ academic success.

The faculty development workshop consists of two parts: a 4-hour workshop that provides educators the opportunity, through active learning strategies, to open the relational

space to explore a strengths-based approach in their practice to recognize what is working or not and relearn and how this approach can work in their practice; and 11-weeks of 1-hour follow-up sessions that continue the strengths-based conversation and provide support. In the design of the workshop and the learning goals, Fink's taxonomy of significant learning was used which is congruent with strengths-based and nursing education. The overall goal of the project was that educators would develop a more comprehensive understanding of a strengths-based approach and how they can use or enhance this approach in their practice within nursing education.

The project has potential to change the template in which educators and students in the Bachelor of Nursing (BN) program view their practice and their experiences. Using a strengths-based pedagogy opens up the possibility for educators to explore their strengths; revise the story of their teaching and learning from one of deficits and challenges to opportunity and potential; increase their confidence and belief in who they are as an educator; and for enhancing student/teacher relationship and academic success. Ultimately, it is a starting point to opening the door to changing educators' perspectives of students to one of privilege and possibility.

Key words: strengths-based, nursing, pedagogy, faculty development, and resiliency

Table of Contents

Title Page.....	1
Supervisory Committee.....	2
Acknowledgements.....	3
Abstract.....	4
Table of Contents.....	6
Forward: Looking Back-Situating Self.....	11
Introduction.....	15
Rationale for project.....	16
Understanding the Current Situation in Nursing Education.....	15
Why is a New Orientation Important?.....	21
For Learners.....	21
For Educators.....	24
Reorienting Nursing education.....	26
Philosophical orientation.....	26
Constructivism.....	27
Ontological orientation.....	30
Theoretical Orientation.....	34
Strengths-Based Pedagogy.....	34
Strengths-Based Values.....	36
Strengths-Based Principles.....	39
Power.....	40
What Roles Do Educators Play in Strengths-Based	

Teaching and Learning.....	42
Strengths-Based Teaching and Learning Philosophy and Underlying Beliefs.....	45
What are Strengths?.....	50
Strengths-Based Questions.....	52
Relational Inquiry.....	58
Five Ontological Capacities (5 C's).....	60
Compassion.....	61
Being Curious.....	62
Commitment.....	63
Being Competent.....	64
Corresponding.....	65
Levels of Relational Inquiry.....	66
The Intrapersonal Domain.....	66
The Interpersonal Domain.....	68
The Contextual Domain.....	69
Developing a Strengths-based Approach in Nursing Education.....	71
Strengths-Based Pedagogy: Opening the Door of Possibility for Faculty Development:	
A Faculty Development Workshop.....	72
Overall Workshop Structure.....	72
Learning Goals.....	73
Finks Taxonomy of Significant Learning.....	73
Specific Learning Goals.....	75

Description of Workshop.....	77
4-Hour Workshop.....	77
Follow-up Sessions.....	78
Week 1.....	78
Week 2-10.....	78
Week 6-Midway.....	79
Week 11.....	79
Workshop Process Facilitation.....	79
Facilitators Role.....	79
Learners' Role.....	81
Teaching and Learning Process.....	84
Mindfulness.....	86
Modeling a Strengths-Based Approach.....	87
Facilitation Strategies and Tools.....	93
Being Present.....	93
Use of Language.....	94
Active Learning.....	96
Questioning.....	97
Discussions.....	98
Mind Mapping.....	100
Reflection.....	100
Group Activities.....	102
Experiential Learning Environment.....	103

Extenuating Factors Affecting Learning Process.....	106
Institutional Context.....	106
Curricular Context.....	107
Instructional and Learner-Related Context.....	108
Faculty-Related Context.....	108
Nursing-Related Context.....	109
Evaluation.....	110
Learners Self-Assessments.....	111
Workshop and Follow-up session Evaluations	111
Learners.....	111
Facilitator.....	111
Workshop Structure.....	111
Opportunity for research.....	112
Future steps.....	113
Conclusion.....	113
References.....	115
Appendix A: Strengths-Based Language.....	131
Appendix B: Finks Taxonomy of Significant Learning.....	132
Appendix C: Workshop Outline.....	133
Appendix D: Session 1 Learning Plan- Introduction.....	136
Appendix E: Session 2 Learning Plan- Understanding Strengths-Based Approach.....	138
Appendix F: Session 3 Learning Plan- Understanding the Influences.....	140
Appendix G: Lesson 4 Learning Plan- Comparing and Contrasting: Envisioning New	

Learning Experiences.....	142
Appendix H: Lesson 5 Learning Plan: Bringing Strengths-Based Approach to Practice.....	144
Appendix I: Follow-up Sessions Outline.....	147
Appendix J: Follow-up sessions Learning Plan- Developing a Community of Strengths- Based Learners.....	148
Appendix K: Roles and Responsibilities for Follow-up Session.....	154
Appendix L: Potential Learner Self-Assessment Questions.....	155
Appendix M: Potential Questions for Evaluating the Workshop.....	156

Forward: Looking Back- Situating Self

If I were to wish for anything I should not wish for wealth and power but for the passionate sense of what can be, for the eye, which ever young and ardent, sees the possible. Pleasure disappoints, possibility never. And what wine is so sparkling, what so fragrant, what so intoxicating as possibility?"

- Soren Kierkegaard

I would consider my nursing career to be very diverse with experiences in both acute and community setting. However, it took more than twenty years of nursing before I heard the term 'resiliency.' Why it took so long I do not know but I remember the circumstances as if it was yesterday. In 2004, while I was working in Public Health, I attended an educational workshop where Dr. Wayne Hammond was speaking about resiliency and the importance of this concept for working with youth. It was at that moment I had a realization. Resiliency resonated with me. I could see how it would improve the outcomes of vulnerable populations. This would send me on an exciting and yet challenging journey to understand how this concept could fit into nursing.

That presentation triggered a change in how I viewed and interacted with my colleagues, clients and communities. I made a point of setting the intention of working with the concept of resiliency without much more than my experiences as a nurse and the theories and literature available to me. It was not until I actually coordinated a specific research project looking at developmental assets and comprehensive school health program for students' ages 11-14 years that the research made practical sense. I began to find some evidence to support the importance of how resiliency and working from a strengths approach plays in the lives of youth. More importantly, I learned that the concept of resiliency and the strengths approach aligned more with who I was as a nurse and an individual. I found the strengths approach to be an extension of my

own beliefs in health care and this gave me the confidence to pursue this area of study even more.

Working from this perspective seemed to embody how I had always been. In turn, I found it enhanced how I practiced as a nurse. Resiliency seemed to fill that gnawing question I had for years that something was missing in how we were practicing as nurses. This new knowledge compelled me to want to educate everyone I knew about it. I initiated conversations with individuals in my organization, community agencies, and also presented my research at various conferences in hope that they would want to be on my bandwagon. Upon reflecting, I think I was a little naïve to think that everyone would embrace this concept as I had. In turn, I had some unexpected challenges. I found most individuals agreed that resiliency was important but they were more concerned with how to promote resilience in their own practice. My colleagues at public health also suggested that a template would need to be developed in order for them to understand its application. This was an ethical dilemma for me, as I did not know how to articulate what I was doing as this was my way of being. I continued planting the seed about resiliency where ever I could but that nagging question of “how” stayed with me.

In 2009, I moved on to start a job as a Nursing instructor at Mount Royal University (MRU) and later University of Calgary, Bachelor of Nursing (BN) program. Further discussions with my colleagues, various observations and working with students I came to the realization that resiliency was just as important in nursing education. The nursing students could benefit greatly by using the concept of resiliency in order to increase their overall confidence in their training and desire to be professionals and yet how?

Through researching the literature and having discussions with key stakeholders in resiliency I came across the strengths-based approach used to build resiliency. The more I

learned about strengths-based practices, the more I believed it would be an effective approach to use in nursing and especially nursing education.

In 2011, I enrolled in the Master of Nursing program with a focus on nursing education, which allowed me to continue to expand my knowledge on strengths-based approach. This provided me the theoretical foundations to better understand this approach in nursing education. In my practice, I was noticing inconsistency in how students related to their clients and how my colleagues were working with the students. For example, students were focusing more on the issues and concerns and forgetting that their clients had a voice in the situation that was not being heard. Educators were not necessarily working with their students in a collaborative partnership but taking on the stance of more of the expert, and ignoring students voice and their strengths. There also seemed to be undefined areas in strength-based education and practices but no one group, or person had defined a standard to go by. As I was highly convinced of the benefits, I continued to use and educate about strengths-based in hope of finding that answer some day soon. It was not until my last Master's course NUED 574 that I came to realize the connection between a strengths-based approach and what in the educational literature has been termed an "ontological turn" (Barnett, 2012; Dall'Alba & Barnacle, 2007; Doane & Brown, 2011).

Adopting a strengths-based approach was not just about the knowledge. That was a turning point in my journey of strengths-based and I began to see that perhaps I could play a role in defining and implementing this approach especially in nursing education with nursing students and educators. Reading Dr. Gottlieb's book on *Strengths-based nursing care* and attending two conferences on strengths-based where she was the keynote motivated me to make a contribution to this body of knowledge. All of these experiences inspired me to envision how nursing

education could take the lead in making a change in how we think, act, and work with our clients, patients, and communities. I hoped for a comprehensive model to return nursing to its roots of caring for another human being. Perhaps I had been searching for simplicity and effective and compassionate care, but there would need to be a model for its application and success. I believe I arrived at this point because of my desire to help people including the nurse, the patient and the student to work together for the health, healing and growth within our profession.

I am preparing to study, review, and achieve a focused platform for strengths-based delivery, well defined and universal in its training, teaching and care for people who need our help. I realize that being a nurse has been my greatest joy and now I believe it is my time to research this area further to add to this body of knowledge. This is the impetus of my graduate work. I am so grateful to have dedicated myself to nursing in my quest to know more.

Strengths-Based Pedagogy: Opening the Door of Possibility for
Faculty Development

“Look well into thyself; there is a source of strength which will always spring up if thou wilt always look.”

— *Marcus Aurelius*

The purpose of this project is to develop a faculty workshop that explores the *how* of a strengths-based approach and consider its potential use in nursing education. The workshop is designed for educators working with students in a Bachelor of Nursing (BN) program and consists of a four-hour workshop and 11-weeks of follow-up sessions. Faculty who participate in both will have opportunity to: (1) explore using a strengths-based approach in practice; (2) to identify potential strengths and knowledge on their current teaching and learning practice; (3) experience what a strengths-based approach would look like in practice; (4) enlist the relational inquiry tools in the learning activities to develop the capacities and skills to explore *how* to utilize a strengths-based pedagogy in their practice; and (5) develop a community of strengths-based learners.

This project is divided into two sections: (1) philosophical orientation & theoretical perspectives guiding this project and (2) the faculty development workshop. In section one, I first provide a discussion of the rationale for the project at this point time including why a new orientation is important for learners and educators. Second, I provide a full discussion on the philosophical (constructivism and ontological) orientation, which will better address the learning needs of students today. Constructivist pedagogy is discussed as a meaningful philosophical foundation for nursing education today, as it seems a better fit than conventional pedagogies. After I discuss constructivism I go beyond epistemology to take an ontological orientation and

discuss a term used in education literature called “ontological turn” (Barnett, 2012; Dall’Alba & Barnacle, 2007; Doane & Brown, 2011). Third, I address the theoretical perspectives that guide the design of the faculty development workshop. I am drawing upon strengths-based pedagogy (Gottlieb, 2013c), and enlisting relational inquiry tools – the levels of inquiry and the 5 C’s (Hartrick Doane & Varcoe, 2015) to outline an educational approach to address the current needs and challenges facing students and educators today. In addition, I discuss why this is important for learners and educators considering this point of time in nursing education.

In the second section, I outline the faculty workshop. The overall learning outcomes for both the workshop and follow-up session are identified using Finks taxonomy of significant learning. Information is provided on the learning activities used in the workshop, and how the relational inquiry tools will be used to address the *how*. In addition, specific information is provided about what is required in the workshop and the follow-up sessions including detailed learning plans. I also provide a discussion on evaluation for learners and the workshop and follow-up session, opportunity for research, and future steps for the project.

Through this project, educators working with BN students can partner with me on the journey of understanding *how* to adopt a strengths-based pedagogy in their practice. Educators have an opportunity to explore what they are already doing that is strengths-based and how to extend it; identify what is not working and relearn how this can work in their practice; and through support and conversation, keep the journey going.

Rationale for Project

Understanding the Current Situation in Nursing Education.

Since 2009, I have been working in academia in BN program as a clinical instructor in child health and community settings. The majority of my focus has been to support students

learning by bridging the gap between theory and practice. It was apparent that as a nursing educator I would need to help students understand theory well enough so they could adapt to various patient needs under complex conditions.

Nurses in the 21st century are faced with unpredictable work environments, nursing shortages, and shorter careers (Hodges, Keeley, & Grier, 2005). The Canadian Association of Schools of Nursing (CASN) (2010) also found three trends impacting and imposing a challenge to nursing education in Canada today; complexity of health care; demand for human resources; and the recent economic recession. Nursing programs are challenged with meeting the populations changing needs in health care; expediently graduating nurses with the skill, knowledge and attitude for the demanding role in the evolving and complex work environment; and sustaining the nursing workforce with an adequate supply of faculty due to an increase in aging and retiring faculty (CASN, 2010). Educators, in turn are challenged with better preparing students to work in these environments. Furthermore, nursing students require support, supervision, and teaching to achieve the desired learning outcomes in clinical and academic success.

The current challenges are impacting nursing program faculty and students with increasing risk of stress and burnout. Educators have revealed to me that they are tired and overwhelmed with all the extra expectations, challenging students, and do not seem to have enough time to get the job done during their normal day. Shirey (2006) found faculty face many stressors from high job expectations, heavy workloads, inability to maintain a personal/professional life balance, pressure to maintain clinical competence, and feelings of frustration associated with demands of multiple constituencies' (p.96). DalPrezzo and Jett (2010)

agree and add those faculty that teach are susceptible to “physical, psychological and emotional harm from students, peers, and administrators” (p. 132).

The picture became clearer as I listened to educators discuss concerns about their exhaustion from the increase workload and being overwhelmed with the amount of content that needed to be covered. They were feeling frustrated and angry about having to deal with *students from hell*, and challenging students who were disengaged in learning, demonstrating unprofessional behavior, and lacked confidence in their ability to be nurses. Most of all educators lacked confidence in their teaching ability and capacity to work with students in a meaningful way.

What I was hearing from educators I was also seeing and hearing from students. On one hand, students complained their instructors seemed disinterested in teaching and getting to know them as people and made them feel they were incompetent. There were inconsistencies as some on the other hand, thought their instructors were excellent in their delivery and they were made to feel that they could accomplish their goals. Most agreed that they were distressed often within the course and practice workload. In one of my very first clinical groups I witnessed a 3rd year nursing student emotionally break down and cry during an evaluation in clinical when I discussed her exceptional strengths and competencies that I and the staff were witnessing during her time at an elementary school. This student did not believe what I had said because no one had ever told her she was capable of being a good nurse. This demonstrated a lack of connection between what was being taught and what was required to be a superior nurse provider.

Students have also revealed to me that they are stressed and struggling with a lack of confidence in their ability to cope with their courses and clinical practice. I have also found that

they have difficulty expressing who they are as an evolving nurse and what their capacities are. Reeve, Shumaker, Yearwood, Crowell, and Riley (2013) concur that the overwhelming stress can impact the nursing students experiences in school and potentially their ability to thrive in their journey as a professional nurse. Furthermore, faculty can impact students ability to deal with the stress they are experiencing at school (Gibbons, 2010). Edwards, Burnard, Bennett, and Hebden (2010) longitudinal study investigated students experiences of stress and levels of self-esteem during their three year undergraduate nursing program found the highest level of stress was reported at the beginning of third year; self-esteem was lowest at the end of training; and self-esteem acts as a buffer against stress. Lindop (1999) noted that in third year there was greater professional stressors placed on students and they expected more of themselves. Del Prato, Bankert, Grust, and Joseph (2011) found educators could impact the teaching and learning environment, the development of students' sense of competence and self-efficacy, and their capacity to thrive and meet successful outcomes. Cook (2005) found educators teaching behaviours have an effect on students' anxiety level in clinical and ultimately their learning and performance. Furthermore, Marchiondo, Marchiondo, and Lasiter (2010) study found that 35% of the students reported feeling depressed, anxious in response to faculty incivility.

As a nursing instructor, I have had students reveal to me that how their educator treats them in clinical impacts their belief in themselves, and comfort in asking questions to enhance their learning. For example, an instructor informed her clinical group that pedagogically she worked from a strengths perspective but she only discussed with the students what they did wrong or when they were not meeting competency standards and never acknowledged when they did something right. Furthermore, this limited student's willingness to ask questions and their confidence diminished due to fear of being wrong and potentially humiliated in front of the rest

of the group. In some cases educators label students for what they lack or unwanted behaviors, which limits resources, reinforce already existing and unhelpful behaviors, and also block opportunities for change (McCashen, 2010; Resiliency Initiatives, 2012). Gottlieb and Benner (2013) contend that some educators are evaluating students learning challenges or failings against the standard without assisting students to develop their capacities (Gottlieb & Benner, 2013). Furthermore, it “fails to recognize learning from mistakes and sees these opportunities for the students personal and professional growth and development” (Gottlieb & Benner, 2013, p. 3). However, Hodges, Keeley, and Troyan (2008) found new nurses spent a large amount of time learning their place in the social structure; noticed discrepancies between their ideas of professionalism and actual experiences in work setting; lacked confidence when confronted with serious patient conditions in practice; and drop-out rates of graduate registered nurses (RN’s) has been increasing.

Even though, I was new to teaching in academia I could not understand why there was so much discontent and fear. I was challenged to understand why educators and students lacked the empowerment needed to take the lead in their own practice and confidence in their potential and ability to thrive in their practice. I understand that technical skills and knowledge are essential and important for students but why are they more important than the student as a developing person and nurse (Doane & Browne, 2011)? I am left to ponder on knowledge (epistemology) and ontology (being), and how are they privileged in nursing education. Is nursing only about knowledge and knowledge development (epistemology)? What about ontology? What role does the student play in the educative process? Where was the passion and creativity in teaching and the acknowledgement of the student? Teaching had to be more than what I was encountering. Without change nursing educators would fall short in producing young nurse providers that

demonstrated decision-making processes, confident approaches, and evidence-based practice.

What would the quality of care become?

Why is a New Orientation Important?

It is evident that there needs to be a change if we want to transform the health care system, reclaim nursing roots, and prepare future nurses for the demands of healthcare. The current challenges in the health care system and nursing education have had an impact on nursing programs ability to support and provide adequate education to students who will be practicing in the evolving and complex work environment (CASN, 2010). However, given these challenges why is a new orientation important for learners and educators.

For learners. Given the current situation within nursing and nursing education, students are working in a world of uncertainty—that is their reality. Barnett (2012) contends that there are two forms of uncertainty in our current world. First, given the rapid pace of knowledge development and technological advances there is a perpetual uncertainty of knowledge. There is simply too much to ‘know’ in any full or complete way. Moreover, any knowledge that may be learned is quickly outdated. Second, there is uncertainty that arises from the “supercomplexity” of our world. Since the way we understand the world and the situations we encounter “are themselves contested” (Barnett, 2012, p. 70), the answers to initial questions leave us with more questions and more uncertainty (Barnett, 2012). This combination of an unknowable world and information overload” creates “anxiety, ‘fragility’, ‘chaos” that signify “we can never come into a stable relationship with the world” (Barnett, 2012, p. 68).

This unstable relationship with the world has implications for nurses. Knowledge is continually developing at a rapid pace therefore nurses are never going to be able to know

everything. Subsequently, nurses can never be certain about their knowledge, as knowledge is always incomplete and can become outdated. The reality is that students have to be prepared for and be able to work within an uncertain world where their knowledge is always up for question.

The educational task is to prepare students for the complexities and have them “prosper in a situation of multiple interpretations (Barnett, 2012, p. 68). Thus education that focuses on knowledge acquisition is insufficient. Simply focusing on knowledge acquisition does not promote student the development of capacities to navigate in uncertainty. Moreover, it has the potential to leave the student unsupported and not understanding how to integrate knowledge into their practice (Dall’Alba & Barnacle, 2007).

Barnett (2012) contends that learning for an unknowable, uncertain world requires an “ontological turn.” In an ontological turn the primary focus of education is on the development of the student as a person/nurse who has the capacity to navigate in complex, uncertain health care situations, which is the current reality nurses face today. An ontological turn could help bring attention to those very real tensions/complexities and offers an opportunity for students to learn how to navigate through them. Furthermore, it cultivates a different relationship to knowledge, one that enables nurses to competently work between what they know and don’t know (to be uncertain and still competent).

Shifting to an ontological turns requires that we help students develop and understand their strengths and capacities to be in uncertainty. This does not mean that it is done in isolation but together as partners through the relational situation (Hartrick Doane & Varcoe, 2015). Furthermore, Hartrick Doane and Varcoe (2015) contend that recognizing and affirming potential or hidden strengths and capacities can assist students belief in their power and choice in their learning despite the uncertainty they are experiencing in their practice. The focus is on

strengths but it does not mean that challenges, weaknesses, and vulnerabilities are ignored. It is about finding a balance between the two to promote health and healing, and learning how to use strengths to mitigate the vulnerabilities and challenges (Gottlieb 2013c). Strengths should not just be acknowledged but positioned as part of the developmental process, otherwise students may develop a fixed mind set, and unrealistically think that the mere presence of a strength is enough to deal with any challenges they may encounter in their life (Louis, 2008). It is the students' responsibility to proactively seek new experiences to expose them to new information, resources, and skill to increase their knowledge and skill on how to mobilize their strengths more efficiently during times of uncertainty. Therefore, strengths should not be conceptualized "as static traits but dynamic qualities that can be developed over time" (Lopez & Louis, 2009, p. 6)

Strengths-based pedagogy is well suited to address students' needs. Strengths-based is not one approach but is an orientation that is grounded in an ontological turn. This orientation requires educators to accept being in a world of uncertainty, and acknowledge that who the student is and becomes, as a person/nurse is an integral part of the teaching and learning process. A strengths-based approach provides students with the foundation to grow, and succeed at positive change (Nissen, Markin, Weller, & Tarte, 2005) and transform into "confident, efficacious, lifelong learners whose work is infused with a sense and purpose" (Anderson, as cited in Lopez & Louis, 2009, p.2). In essence, strengths-based is an approach to teaching and learning that promotes the integration of knowing, acting, and being.

Being aware of their strengths, challenges, and vulnerabilities provides learners the confidence to work within the uncertainties in their practice where they do not know everything. The ontological turn orients learning toward the development of knowers who are able to navigate in the uncertainties of contemporary health care milieus. It provides the opportunity for

students to develop the confidence and flexibility to traverse across knowledge(s) and to be comfortable in that space between knowing/unknowing (Hartrick Doane & Varcoe, 2015).

For educators. Educators are also working in uncertainty. Barnett (2012) describes the future as an age of fragility...risk...chaos...complexity...fragmentation" (p. 66). The notion of complexity and competing claims on educators' attention, and how efforts to satisfy one set of demands can have impact elsewhere such as in their homes and workplaces. Educators are challenged to create meaningful and worthwhile learning experiences to support the learners to 'become' knowers who are able to navigate in the uncertainties and supercomplexity of contemporary health care milieus.

Educators' are dissatisfied and frustrated with faculty shortages, heavy workloads, low wages, and dissatisfaction with teaching career due to the increase in workload, and institution pressures to meet the demand of the realities of clinical pressure (Benner, Sutphen, Leonard, & Day, 2010; Shirey, 2006). Furthermore, educators are challenged with the knowledge explosion and "epistemologies' grasp" on nursing education (Diekelmann, 2002, p. 470). To meet the demands of nursing more and more content is being delivered to students with the expectation they integrate into their practice, which is essentially impossible (Diekelmann, 2002; Diekelmann, Ironside, & Gunn, 2005). Students are also complaining they have reached their limit of memorization (Diekelmann, 2002). On the other hand, educators are socialized in conventional pedagogies, where epistemology is privileged in teaching and learning.

It is evident that educators are suffering too, and at risk for in increase stress, exhaustion and fatigue, and ultimately burnout (Shirey, 2006). Educators need a way of working with these complexities. Integrating strengths-based pedagogy and relational inquiry provides a very targeted approach to assist educators to deal with the complexities. Inviting students into the

uncertainty to walk together in that in-between space of knowing/not knowing actually offers a way-of-being that opens the spaces between educators and students, and keeps the educator on the edge of their own 'knowing' with students.

Two students I taught in clinical affirmed what the research was saying and what I was witnessing in nursing education. Below are exemplars from a former nursing student named D who just graduated from the BN program and is waiting to write the NCLEX exam, and 2nd year nursing student named E. Verbal consent and permission has been provided by both students to use the narratives in the project.

I began my very first semester in my nursing degree with a supportive and encouraging instructor who used a strengths-based approach. She gave the novice nurse inside of me the confidence to move forward and find out what I loved about nursing by using the strengths I brought to the table. Coincidentally, I also ended my nursing degree with an instructor who helped me build self-confidence, who recognized strengths I did not even know I had, and provided an invaluable mentorship. However, many of my instructors that I had in between did not nurture the beginning nurse inside of me, and instead, were belittling, and used fear and intimidation to instruct. Those instructors had an incredibly negative impact on my self-esteem as a nurse, and I felt my confidence in my ability to provide safe and appropriate care for my patients, was at times non-existent. Under the supervision of these types of instructors, I dreaded going to clinical each day, and would often have sleepless nights leading up to my shifts. I would spend hours preparing before shifts not to improve my practice, but for fear of being berated in front of my peers. I felt scared instead of supported, and viewed myself as inadequate instead of gaining new skills and strengths as a budding nurse.”

- Graduate nurse D

Prior to entering nursing school, I had an entirely deficit-focused idea of what it meant to practice as a nurse: healing illnesses and injuries, solving problems, and so on. Patients, in my mind, were essentially problems to be solved, with bodies and minds in need of "fixing". This conceptualization of clients maintains a power imbalance between client and caregiver, and does nothing to empower them to believe in their own abilities and exercise control over their own health.

-2nd year nursing student E

Educational theorist John Dewey (1938) stated, "the purpose of education is to allow each individual to come into full possession of his or her personal power" (p. 10). Therefore, how educational institutions view students may be an indicator of whether the student can be empowered to reach their own personal best. Equally, Bernard (1997) suggests that looking at students... through a deficit lens obscures recognition of their capacities and strengths, as well as their individuality and uniqueness" (p. 1).

Reorienting Nursing Education

Philosophical Orientation

I am locating my project in a constructivism paradigm. I understand knowledge through a constructivist philosophy of education and understanding of learning while at the same time integrating and drawing on the literature on the ontological turn (Barnett, 2012; Dall'Alba & Barnacle, 2007). The ontological turn goes beyond the epistemological level to the ontological,

which address how we are in the world, and how we practice and go about our work as educators.

Constructivism. Constructivism is a philosophical orientation that is based on a relativist ontology and subjectivist epistemology (Crotty, 1998). Based on Kantian beliefs, the knower is both a perceiver and interpreter who construct their own reality through engaging in the activities (Jonassen, 1996). Each individual produces their own “mental models” or “rules” of the experience depending on their unique set of experiences and beliefs (Jonassen, 1996; Splitter, 2009). Therefore, truth is socially negotiated (with others) and the meaning of knowledge is internally constructed. In addition, there are multiple interpretations of any given situation and ultimately no single truth, and knowledge comes from the individual’s interpretation of their interactions in the world (Kala, Isaramalai, & Pohthong, 2009). Constructivism rests upon the belief that every individual is unique and will construct their own understanding and knowledge of their situation through engaging in experiences and reflecting on them (Brown, 2005; Splitter, 2009).

In constructivism learner’s prior knowledge is foundational to the learning process and views knowledge as socially constructed (Young & Maxwell, 2007). Muirhead (2006) found the constructivist education philosophy functions on four assumptions: (1) students understanding of their world is based on existing knowledge and new information is formed and interpreted based on previous learning; (2) assimilation and accommodation processes lead to new knowledge; (3) learning is organic and not mechanical therefore the students ability to construct knowledge is more meaningful than memorization of facts; and (4) meaningful learning occurs through reflection.

With constructivism learning is an active process (Kelsey, 2007; Brandon & All, 2010) where the focus is on learning rather than just teaching (Ali, Hodson-Carlton, & Ryan, 2004). Learning is thought to be a process of meaning making or knowledge building where learning is built upon previous knowledge (Young & Maxwell, 2007; Hoover, 1996). Savery and Duffy (1995) add that learning is not just about acquiring new knowledge but also a reconstruction of what the person already knows. In essence, learning is continuous, therefore students must always be checking new information against the knowledge they already have and reshaping if they have to. Furthermore, learning is best when it is contextual and takes into account the students' understanding; active by engaging students in learning activities that use a variety of strategies such as debating and analyzing as opposed to memorization; and social using discussion and direct interaction with educators and peers (Brown, 2005; Williams & Day, 2007).

A constructivist paradigm emphasizes learners to be actively involved in the learning process (Nyback, 2013) and encourages the creation of their own knowledge (Educational Broadcasting Corporation (EDC), 2004). The role of the learner is to take the new information and construct new ideas, make decisions while relying on their present knowledge paradigm (EDC, 2004). Brown (2005) adds that each learner comes to the learning environment with pre-existing knowledge; the environment is tailored for each learner and is option rich; each learner's talents are nurtured and explored; and the educator is an expert and mentor (Brown, 2005; Williams & Day, 2007). Constructivist teaching does not just entail introducing students to new information but intentionally placing students in situations that challenge their current understandings and cause some form of cognitive dissonance where the student becomes engaged in the activity of developing their own understanding (Young & Maxwell, 2007).

However, Brandon and All (2010) found learners invent solutions and construct knowledge in the learning process, instead of just relying on educators' knowledge and textbooks.

Using a constructivist-based approach to instruction, students become engaged in a more interactive environment where they feel comfortable challenging their previous skills and knowledge, and try them out on different aspects of their nursing practice with guidance from educator (Caputi, 2005; Greeno, 2006; Kafai, 2006). Brooks and Brooks (1993) found that "constructivist teaching practices...help learners to internalize and reshape, or transform new information" (p. 15). The constructivist teacher provides students an authentic learning environment, which is designed to simulate real life complexities and occurrences in their professional practice (Brown, 1996; O'Donnell, 1997; Strommen & Lincoln, 1992; Williams & Day, 2007). Furthermore, student's prior experiences are acknowledged and recognized as important to the learning process. The role of the teacher is to view the learning through a different lens where the learning is student centered, collaborative, authentic, and active (Wilson, 1995; Richardson, 1997). In turn, the teacher becomes a facilitator not a dictator (Maor, 1999); and their focus of teaching and learning changes to thinking about 'what students need to learn' as opposed to what they will teach the students (Brandon & All, 2010).

Constructivism is an inviting and commonly utilized philosophical paradigm that has potential to impact the complex situations present in nursing education and with our students today. With the changing landscape in health care the type of knowledge needed for competent practice is changing (Doane & Varcoe, 2011). No longer can conventional pedagogy that privileges epistemological orientation or knowledge and content be enough in nursing education (Diekelmann et al., 2005). Whereas conventional pedagogy is built on positivist view of knowledge where teachers are the experts and depositor of the knowledge and students are seen

as recipients of the knowledge (Gynnhild, Holstad, & Myrhaug, 2007), constructivism students are actively involved in learning and constructing knowledge and meaning through engaging in experiences. Furthermore, in constructivism students are not unmotivated and disengaged in learning but empowered to take control of their own learning and engage in “reflection, praxis, and effective dialogue” (Allen, 2010, p. 35). The current uncertainty and complexity requires a constructivist environment that facilitates “students learning of problem solving skills to use in real-world of clinical practice” (Kala et al, 2010, p. 66) not one that just covers content and hinders development of skills needed to function in the health care system and nursing education (Weimer, 2002). Specifically conventional pedagogy is more of a banking system (Freire, 2007) that focuses more on “cognitive gains, skills acquisition, effective/efficient provision of information and foundationalism” (Ironsides 2001, p. 77). In turn, learners become dependent on the teacher to provide them the information needed for learning and assessment of outcomes rather than active participants in the learning process (Allen, 2010). Constructivism is an inviting and commonly utilized philosophical paradigm that has potential to impact the complex situations present in nursing education and with our students today. With the changing landscape in health care the type of knowledge needed for competent practice is changing (Doane & Varcoe, 2011). No longer can conventional pedagogy that privileges epistemological orientation or knowledge and content be enough in nursing education (Diekelmann et al., 2005).

Ontological orientation. While constructivism provides an epistemological orientation, for education, writers in the area of education philosophy are now talking about something called the “ontological turn” (Barnett, 2012; Dall’Alba & Barnacle, 2007; Doane & Brown, 2011). Where epistemology is the “study of knowledge” and is concerned with the questions, ‘what is knowledge’ and ‘how do we know what we know’ (Rodgers, 2005, p. 13), ontology is the

philosophical understanding of the nature of being or what is (Flaming, 2004). The ontological aspect asks us to consider who we are and how/who we want to be as nurses. This is a fundamental concept that explores the nature of being a nurse and what nursing is. Importantly, drawing upon Heidegger, Barnett (2004) implies all epistemology is rooted in ontology. Taking an ontological turn in education shifts the relationship between epistemology and ontology. Specifically, rather than privileging epistemology as most conventional pedagogies do, epistemology is put to the service of ontology (Dall’Alba & Barnacle, 2005; Thomson, 2001). Knowledge still remains important but education is no longer simply about the transfer of knowledge and skills but also focuses on ways-of-being (Dall’Alba, 2004, 2005).

Taking an ontological turn Barnett (2012) contends there is a “new world order in which the changes are characteristically internal...how individuals understand themselves, with their sense of identity (or lack of it), with their being in the world... characterized by ontological dispositions” (Barnett, 2012, p. 66). Barnett (2012) states the answer to a pedagogical approach for the uncertain world lies in fostering a sense of *self-awareness and being*. The author claims teaching that promotes human qualities such as “thoughtfulness, humility, critically, receptiveness, resilience, courage, and stillness” are what is required for a secure sense of self and adaptability in the uncertain future (p. 75). Barnett (2012) points out that these dispositions may give way to qualities of ‘adaptability’, ‘flexibility’ and ‘self-reliance’ (p.75). These qualities are noted as life skills for the individual to be prepared for uncertainty if possible. In addition, these dispositions can serve as the stabilizing factor for the uncertainty. Furthermore, Barnett (2012) has applied this ontological orientation as central to developing competence as a nurse in today’s complex health care system. This is consistent with Hodges et al. (2005) contention that in today’s chaotic practice resilience is an essential and vital element for nursing practice.

Every challenge that is successfully navigated by the individual provides opportunity to learn about himself or herself, their environment, and the people involved, thereby adding to their catalogue of strengths. CASN (2010) state that to deal with the uncertainty and complexities in health care educational institutions need to prepare future registered nurses who “possess the resilience, flexibility, and competencies needed to provide quality services in...demanding health care environment” (CASN, 2010, p. 4). Furthermore, McAllister (2013) found resilience could benefit nurses and nursing students wellbeing and possibly help achieve “self efficacy and longevity in the workforce” (p.56).

The complexities facing nursing education today are causing uncertainty in what educators know or do not know, with what is considered right or good. The increasing number of uncertainties indicates the need for, and promotes life long learning. To navigate these situations requires a particular way of being. Therefore, how we approach knowledge and knowing needs to shift to an ontological orientation. In times of supercomplexity the educational task is not an “epistemological task...but a “ontological task” (p. 70).

In education an ontological orientation focuses on “people, experiences, and action (Doane & Brown, 2011). In Barnett’s (2012) view of uncertainty there is a way to use knowledge, and also shifts to the use of this information as it applies to the person. This does not mean that we let go of having or using expert knowledge but to shift the way we relate to knowledge. Dall’Alba and Barnacle (2007) found in higher conventional education focusing just on knowledge treats learning as unproblematic even though there is no support or assistance to help students situate the knowledge within practice. There is no end to learning or to knowledge, rather is always more that can be learned as the world evolves, culture collide and interact, and science discovers new things (Barnett, 2012).

Since any pedagogy inherently constructs a particular kind of relationship to knowledge, the way we relate to knowledge has implications for everything we do as educators. Barnett (2012) highlights how an educator's way of relating to knowledge shapes the pedagogy that informs one's teaching practice, and also the opportunities one creates for students. Therefore, in ontological orientation knowing and knowledge development shifts to the student and moving the student from "acting like a nurse to being a nurse" (Benner et al., 2010, p. 176), and enhancing their way of being to become "responsive, knowledgeable, ethical, competent nurses" (Doane & Brown, 2011, p. 22). Furthermore, teaching ontologically the students do not "follow or apply knowledge..." but learners are "invited to stand in front of the text" (Doane & Brown, 2011, p. 24).

Dall'Alba and Barnacle (2007) quote Heidegger as saying "teaching is more difficult than learning because what teaching calls for is this: to let learn" (p.688). The authors found that what is relevant to learning is "commitment, openness, and passion" and that creating spaces and opportunity is imperative (p.681). Letting learn requires "creatively enacting situations as pedagogical, being open to, and engaging with, the issues encountered, being sensitive to student needs, and promoting self-awareness and reflective practice...[and] demands a capacity for responsive spontaneity as a means of enhancing the integration of knowing, acting and being among our students" (Dall'Alba & Barnacle, 2007, p.688). However, Doane and Brown (2011) found that with an ontological orientation the un-knowing becomes "the impetus for ongoing inquiry and learning, and the educational emphasis shifts to supporting the student as they grapple with how to be responsive and effective in particular situations" (p. 25).

Seeing uncertainty as the reality in which we work we are called to bring a somewhat new orientation to nursing education. Doane and Brown (2011) found an "ontological turn" in

education requires educators to foster inquiry, and consistently investigate their teaching and learning practices against the theories that guide their practice, and how we work with students. According to Dall’Alba and Barnacle (2007) educational programmes need to “reorient their focus by assisting students to integrate knowing, acting and being...emphasis is placed on learning and its enhancement, not on knowledge in itself” (p. 686). The ontological turn helps one work between the ideal and the real which could be helpful and bring attention to those very real tensions/complexities and offers the opportunity for students to learn to navigate through them. As educators our goal is to not lead the student to the path of being a nurse or continuing their nursing education, but to walk beside them. Therefore, highlighting an ontology approach can transform learners (Dall’Alba & Barnacle, 2007).

Theoretical Orientation

Constructivism and ontological turn have provided the philosophical foundation for education and explains how knowledge and learning are understood in my project. However, there are many approaches within constructivist philosophy of education. In this project I am specifically drawing upon a strengths-based pedagogy as my theoretical orientation. In addition, because I am working with epistemology and ontology, I am drawing on relational inquiry (RI) to address the *how* (Hartrick Doane & Varcoe, 2015).

Strengths-based pedagogy. Grounding education in an intelligence of uncertainty and shifting the relationship between epistemology and ontology we are called to orient differently in the learning process. Gottlieb’s (2013b) strengths-based teaching and learning (SBTL) shifts learning from traditional to constructivism paradigm. In SBTL “knowledge is constructed, not given; it is contextualized, not absolute; it is mutable, not fixed” (Belenky et al., 1997, p. 10). However, at the same time strengths-based is an ontological approach that allows us to teach in

that space between certainty/uncertainty, and directs how we think, act, and relate as educators and nurses. It orients us as educators to give priority to individuals and their development, to look for potential and capacity without merely focusing on filling the deficits. Therefore, in SBTL knowledge is understood through a constructivist paradigm but at the same time is an ontological approach that allows us to teach in that space between certainty/uncertainty. In essence, embodies how we are in the world as nurses and how we practice as educators.

A strengths-based approach is not a model for practice but an approach to practice based on a philosophy (Hammond, 2013; McCashen 2010; Saleebey, 2002). McCashen (2010) relates that it depends more on values and attitudes (rather than skills and knowledge). It is the values and attitudes that will determine the processes and outcomes that the individual engages in. Skills and knowledge are mobilized to serve as resources that enable change. An individual's beliefs and what they believe in (values) are more influential in determining the way someone will work with people (and the outcomes for them) than the knowledge or skills the person has (McCashen, 2010).

Madsen states that:

The stance we take in relation to others reflects choice. We can position ourselves in relation to others in ways that invite respect, curiosity, and connection. We can also position ourselves in ways that invite judgment, disconnection, and disapproval. The stance we take has profound effects on relationship and is shaped by our values and conceptual assumptions (Madsen, 1999, p. 15)

Below is an example from my practice of how the strengths-based approach was used in the learning of a young nursing student (The name has been changed to protect the student). This student's profile will be used further to supply real life applications of the principles, values

and beliefs behind a strengths-based approach. Furthermore, the story will provide the insights gained from this experience and provide 'heart' to the journey of understanding practice through a strengths-based approach.

Adam was a 3rd year nursing student in my child health community placement at an elementary school. Upon our first meeting I noticed him to be an extremely reserved young man who rarely spoke without being asked a question. As time went by I also noticed the same behaviour in pre or post conferences even though it appeared he was listening. The grade 2 teacher also noticed him to be quite quiet in the classroom with the children. She found that he would stand off to the side just observing the students, and seemed uninterested. From what I was observing and hearing I really did not know who he was or what he was capable of. In essence, I had very little to give me a picture of who Adam was. My first impression of Adam was he seemed unmotivated, and possibly lacked confidence. I did not want to label him unmotivated, as I believed that he did have strengths, and I just needed to find a way to tap into them. In the first week of clinical I continued to observe Adam interacting with the children in the classroom and with his peers in his clinical group during lunch break to see if his behaviour changed, but it did not.

Strengths-based values. Strengths-based nursing is comprised of values that guide nurses, managers, and researchers but how enacted will be different depending on the setting and the concerns (Gottlieb, 2013c). The strengths-based values are interrelated and work together to inform the nurse or educator about the person, family or student, what to focus on, and how to nurse and educate (Gottlieb, 2013c; Gottlieb & Wright, 2013).

A strengths-based nursing approach has eight interrelated core values that can relate to teaching and learning (Gottlieb, 2013c, 2013d, 2014).

(1) Health and healing consists of creating healthy environments to support learning. The focus is on students becoming a nurse and learning to promote health illness prevention and facilitate recovery.

(2) Strengths-based nursing recognizes the uniqueness of the person and that no two people are alike. Involves respecting students uniqueness and understanding that each possess unique skills and potentials as well as limitations, weaknesses and areas needing improvement. Students need to be able to identify their clients and patient's strengths and vulnerabilities.

(3) Holism and embodiment, with the focus on the whole, such as content of class and how it is connected to clinical practice rather than fragmentation. Therefore, the focus is on integration of theory to clinical practice and how the individual is affected physically, socially, and mentally by learning.

(4) Subjective, shared, and created meaning. The focus is on knowledge constructed and recognizing students are the agent seeking the skills, knowledge, values, and attitudes in order to become a nurse. Therefore, provide students different experiences in order to construct knowledge.

(5) Self-determination and ethical comportment as a nurse. Focus is on choice and choosing; and involves developing a "sense of salience for clinical reasoning, clinical judgment, and clinical decision making" (Gottlieb & Benner, 2013, p. 4).

(6) Person and environment are integral. Students are influencing and being influenced by the physical and social learning environments.

(7) Learning, readiness, and timing. Every experience whether planned or unplanned, intentional or unintentional is an opportunity for learning.

(8) Collaborative partnerships. Educators and students are partners in the teaching and learning. Every person in a learning situation brings a rich perspective for which others can learn. Students gain a deeper understanding of themselves by engaging in conversation and sharing with peers in the learning environment.

I intentionally met with Adam at times convenient for him and myself to discuss and help him identify his strengths, and connect him to strategies for mastering the learning outcomes for clinical. I viewed Adam as a unique individual who had strengths, capacities, potential, and vulnerabilities. My intent was to get to know that person. I started where Adam was at in his learning, and did not assume he was unmotivated but I believed that underneath his lack of motivation was a potential strength that needed to be explored. We were partners in the learning experience. As his instructor I was not just there to educate him but to also learn from him. Through conversations with him, and observing him with the students I learned about Adam and the inherent strengths and capacities that he had. For example, I noted him to be a good listener. When someone was talking he would actively listen and use nonverbal cues such as nodding to let the person know he was listening. At one of our meetings Adam identified that he wanted to be a nurse because he liked caring for people. Adam informed me that various family members had also commented on his caring ability and his kindness towards people. He also revealed to me that he enjoyed helping people feel good. His main goal was to graduate and become a nurse. I discussed further with him “how that would look” “what would he need to do to achieve that.” Once we had a vision of what that looked like for him we looked at his strengths. I worked with him to identify his strengths. When a strength was identified we developed steps that would help enhance or how to use that strength/capacity in his practice to enrich his experience with the children, and meet the learning outcomes to be successful in clinical. Whenever, Adam was

using his strengths I acknowledged and affirmed them in our conversations and feedback. I also had Adam reflect on his strengths, and how they helped him achieve his learning outcomes or assignments. This became a process and a goal for Adam understanding the strengths and capacities that would determine his own path to success. As an educator I was the facilitator of change not the expert.

Strengths-based principles. According to Gottlieb (2013c) strengths-based nursing is based on principles that are built on “empowerment, self-efficacy, and hope” (p. 31). Empowerment gives people control over their own life. Self-efficacy provides individuals the confidence to believe in their competencies and resources and their ability to achieve goals and take control in their health and healing. Hope provides the individual the expectation that something positive will happen. The nurses’ role is to open up the possibilities and create opportunities for clients to amuse different options to find solutions. Furthermore, Gottlieb (2014) found that these principles need to be in play if people are to assume control of their life and health and healing; and are not just theoretical but the real attitudes and values people hold that shape and influence their way of caring for others.

The following principles are considered the foundation for guiding and implementing a strengths-based approach in practice. (1) All individuals have potential and it is these unique strengths and capabilities that will determine their story. (2) What we focus on becomes one’s reality. Thereby, focus on strengths not labels and see challenges as opportunities to increase resilience (not something to avoid) and create opportunities for hope and optimism. (3) The language we use can create our reality for educators, health care practitioners, or clients. (4) In a strengths-based approach, the belief is change is inevitable and all individuals want to be successful. (5) Positive change occurs in the context of authentic relationships. People need to

know that educators and health care providers care about them. The relationship is a transactional and facilitating process of supporting change and capacity building not about fixing. (6) A person's reality is their story. Therefore, we need to honor that and start at the point that is important for the person not the "expert." (7) People will have more confidence and ability to venture into the unknown if they are invited to start with what they already know. (8) Building people's capacity is a process and a goal- a life long journey that when successful will allow clients to write the next chapters of their life in meaningful ways. (9) Valuing differences and the essential need to collaborate is important. Effective change is collaborative, inclusive, and participatory process (Hammond, 2013; Hirst, Lane & Navenac, 2011; McCashen, 2010; Rapp & Goscha, 2006).

As an instructor I did not assume I knew Adam by what I was observing. I could of taken a deficit focus and labeled him as 'unmotivated' but that would disempower him and would be based on 'dominant' knowledge which in this case was limiting. In turn, Adam would become the problem, and reinforce that something was wrong with him. If I had labeled him as 'unmotivated' from the beginning without getting to know his story I would of fed into the dominant discourse. This discourse would have affected how I communicated with him, and what I thought of him as an evolving nurse. Furthermore, being unmotivated would become the focus of our time together thereby missing any opportunity to discover Adams strengths or opportunities to help him enjoy learning, reach academic success, and enhance his wellbeing. I chose to not feed into that discourse, and instead decided to give Adam a different template to understand his learning and who he was that was strengths-based.

Power. In a strengths approach there is *power-with*, which involves value, beliefs, and action that do not stigmatize or disempower individuals as is with *power-over*. Traditional

teaching and learning assumes power-over where the educator undertakes the expert role; uses assumptions based on dominant knowledge that diagnoses and describes the student; define what students will or will not achieve or what their strengths are; knows what is best for the person; creates passive students; labels and classifies students; blames students for failures; and suppresses self-determination (McCashen, 2010). However, McCashen (2010) found in *power-with* there is respect for individuals' uniqueness and potential and seeks to learn from them; validates individuals unique experiences and respects their meaning; avoids burdens of dominant discourses; recognizes that common experiences enable educator and student to "connect, understand, empathize with, learn from and support each other"(p. 32); reduces power imbalances; and collaborative partnership where the knowledge and expertise of students and educators is valued and shared.

By opening the relational space with Adam and listening to his story, I was working with him as opposed to assuming I was the expert that knew everything about him. I respected Adam for who he was, and what he had to offer to the learning environment. By understanding Adam's experiences and what they meant to him I was allowing him to feel heard and validated. I did not want to generalize that all students experience the same things in the community placement. Through this process, I wanted Adam to feel safe and confident in his ability, hopeful, and have optimism. Through asking questions in our discussions, I also learned that at the beginning when he was in the classroom he stood back and watched the children because he did not know what to do. He was hoping that watching them would help him figure that out what to do with the children. This let me know that my assumption of Adam being unmotivated was inaccurate even though he seemed disinterested to both the classroom teacher and myself. I also learned that Adam was feeling his shyness was a deficit impacting his learning experiences. Without listening

to his story, I would not of learned that. I wanted to increase his power in the situation and as partners help him to understand he had the knowledge and skills to do something about it and together we would investigate how he can work towards achieving this goal.

What roles do educators play in strengths-based teaching and learning? To assist educators in adopting a strengths-based approach in practice Gottlieb and Wright (2013) identified educator roles in strength-based teaching and learning (SBTL) pedagogy. One, enacting a strengths-based approach requires educators to practice what they preach. The authors further discuss that “there is not a divide between talking about strengths-based, ethical practice and treating students with respect and dignity by working with their strengths” (p. 4). In the teaching and learning environment, educators are responsible for modeling the values they want the students to enact in their own practice. We cannot assume that students will enact a strengths-based approach in their practice if we are not practicing that way.

Two, SBTL pedagogy is student-centered as opposed to the traditional or conventional modes of teaching where the focus is on the teacher and is content centered (Anderson, 2004; Gottlieb & Wright, 2013). Young and Maxwell (2007) define student-centered teaching as an approach that moves away from the focus on content and teacher to the learner with the educator actively engage the learner. Student-centered teaching aligns more with nursing for the 21st century vision of nursing (Morris & Turnbull, 2004; O’Shea, 2003). Young & Maxwell (2007) posit that student-centered teaching is “conceptually aligned with client-centered or patient-centered nursing both that are relational and generative” (p. 7). In turn, the educator begins with the experience of the learner and fosters professionalism by enhancing the learners’ capacity for lifelong learning (Candy, 1991; Jerlock, Falk & Severinsson, 2003; Koerner, 2003). It also shifts the evaluation from the teacher to the learner, which enhances self-awareness through reflection

(Bandura, 1986; Lepp, Zorn, Duffy & Dickson, 2003); and provides opportunity for students to learn from each other (MacIntosh, MacKay, Mallet-Boucher, & Wiggins, 2002). However, Hammond (2013) found a strengths-based approach not only invites the educator to listen to the students' stories but to also listen for three essential things: the students' lived experience; students' hope dreams, preferences and goals and; students' strengths, capabilities; and the story behind them.

In SBTL, the educator intentionally works with the strengths of the students as opposed to just deficits or challenges. In working with strengths, it is important for educators to understand and acknowledge that students have both internal (motivation, courage, resilience, spirituality) and external (strong learning community, teachings from faculty, goals, and support) strengths (Gottlieb & Benner, 2013). Therefore, educators are responsive to students and teach from a '*power with*' as opposed to a '*power-over*' or intimidating way. Educators acknowledge and appreciate each student's unique experience and perspective and create teaching and learning environment that bring forth their strengths and develop their potential. In turn, educators respect that students are the experts in how they learn and value their experiences and points of view. Hammond (2013) agrees and adds that students are the only ones that have the essential knowledge required for change that is meaningful and sustainable. In order to cultivate students' strengths, educators encourage an attitude of self-directed learning. Working from a SBTL pedagogy requires educators to be open and appreciate diverse and different perspective, while recognizing and taking every opportunity to build on teachable moments.

Third, SBTL pedagogy fosters discovery through self-directed leaning and engagement. Educators create safe, interactive environments so that learners can learn to expand on their own learning and reflections to discover and nurture their passion for nursing (Gottlieb & Wright,

2013). The SBTL environment provides students the opportunity to achieve their learning goals whether personal or as a nursing student. Classroom and clinical activities should challenge the students' assumptions and beliefs and expand thinking (Brooks & Brooks, 1999). Some learning strategies educators can use are unfolding cases and posing problems that assist student to develop a sense of salience educators can use learning strategies such as using unfolding cases and posing problems (Benner et al., 2010) and lessons and activities that help students see the bigger picture (Brooks & Brooks, 1999). Educators need to devise activities that help learners see the patterns and make connections.

Four, SBTL pedagogy creates goodness-of-fit environments that facilitate growth and learning. In order to facilitate this SBTL pedagogy requires educators to be flexible and responsive to the individual learner's situation. This approach also implies that educators create environments that fit the students' situation and provide students the opportunity to succeed, grow, and thrive (Gottlieb & Wright, 2013). However, educators do not always have control over the practice environments, selections of patients or even what is taught, therefore it may pose a challenge. Therefore, encouraging strengths-based approach in leadership may help to create environments that "facilitate learning, civility, and patient-centered care and safety" (Gottlieb & Benner, 2013, p. 9).

Fifth, educators need to be flexible and situation-responsive. Practicing from a strengths-based approach in the teaching and learning environment requires educators to be aware of their own strengths, vulnerabilities, and weaknesses. Gottlieb (2013b) describes essential qualities that assist in providing strengths-based care. The qualities are strengths of mind set (mindfulness, humility, open-mindedness and non-judgmental attitudes); strengths of knowledge and knowing (curiosity, self-reflection); strengths of relationships (respect and trust, empathy and compassion

and kindness); and strengths of advocacy (courage and self-efficacy). Educators working in a SBTL environment require many of the same qualities working with students as nurses working in hospital or community settings with patients/clients. What is important is that educators need to be authentic, curious and non-judgmental and open with students to bring about their potentials but also flexible enough in designing evaluation methods and providing feedback (Gottlieb & Benner, 2013b).

Strengths-based teaching and learning philosophy and underlying beliefs. Gottlieb (2013b) based the SBTL on a set of beliefs and values about nursing education, how educators engage students in knowledge development, and how students learn. Gottlieb's SBTL was inspired by the beliefs of many different authors the values of strengths-based care underlie the philosophy. It is believed that the SBTL philosophy, values, and principles will help educators working with students in any setting adopt a way of thinking and behaving (Gottlieb & Gottlieb, 2013a). Furthermore, Hammond (2013) discusses that strengths-based builds the capacity of people in proactive and sustainable ways. However, what is important for educators to understand is that if supports and resources are offered in a way that is not meaningful for the student or build on their strengths, it can undermine their ability to learn and be self-determining. Therefore, students need to understand and draw on their resilience, acknowledge areas that need support, and add resources in ways that are strengths-based and enhance their existing strengths (Hammond, 2013; McCashen, 2010).

Traditionally, educators support students from their skills and knowledge, which risks creating a dependency on educators or the educational system and a perspective of needing fixing in order to achieve success. It is important for educators to support the students' resilience through a strengths-based perspective. When students identify their own resilience and educators

support that through using strengths-based approach to teaching and learning, “knowledge and skills become purposeful tools to support and sustain the journey of embracing a healthy lifestyle” (Hammond, 2013, p. 64). Ultimately, we want students to reach their potential, gain academic success, and overall wellbeing.

According to Gottlieb (2013b), nursing education is about appreciating, discovering, and dealing with complexities and their interrelationships. It is critical for nurses to develop self-knowledge and listening to the inner voice in order to deal with the complexities and uncertainty in nursing (Belenky, Clinchy, Goldberger, & Tarule, 1997). Therefore, in nursing education educators need to assist students in building knowledge, developing a sense of salience, skills of reflection and self-questioning and learn how to tailor knowledge and skills for specific individuals and populations (Benner et al., 2010). Furthermore, nursing involves integrating theoretical knowledge with practice knowledge (Benner, Hooper-Kyriakidis, & Stannard, 2011; Benner et. al, 2010). Therefore, to gain clinical wisdom environments and populations that provide students the opportunity to integrate theory and practice are important.

In SBTL it is believed that knowledge is developed through formal and experiential experiences (Belenky et al., 1997). Gottlieb (2013b) found that students experiences are understand better if described in the context in which they exist. Therefore, conditions and contexts are interrelated and need to be taken into consideration if we want the knowledge gained to be useful. On the other hand, McCashen (2010) contends that thinking of knowledge as being made up of just facts can lead to labeling, and dismiss information that may not be favorable to the dominant culture in health care. Furthermore, it ignores the unique characteristics such as capacities, aspirations and experiences of the individual. McCashen (2010) further implies that if we “think of knowledge as ‘ways-of-knowing’ instead of indisputable fact we are

more likely to be considerate of a range of possible ways of interpreting experience” and in turn change the way we respond to students (McCashen, 2010, p. 33).

Gottlieb (2013b) also found that self-reflection is important for learning as it fosters growth, connection and growth in knowledge, understanding, and learning both personally and professionally. Furthermore, it is believed that learning is best constructed through experiential learning and feedback enhances the experience (Benner et al., 2010). In this understanding, learning shifts from educator to student where they are responsible for developing their own knowledge from a variety of experiences both formal and experiential (Belenky et al., 1997). In contrast, McCashen (2010) found that in a strengths-based approach people make meaning from their experiences; and usually the meaning is subjective as it incorporates values and beliefs from existing culture and social structures such as friends, peers, and community. In essence, the response to a situation depends more on the meaning than the experience itself. Therefore, “exploring meaning and the myriad of ways of interpreting our experiences can shed light on events and open up new possibilities” (McCashen, 2010, p. 29).

It is believed that students in SBTL engage in learning through sharing, discussing, questioning, debating and reflecting (Whitehead, 1929). Students’ learning is enhanced if they are able to choose their own environment for the experiences and make mistakes and learn from them (Gottlieb, 2013b). In addition, students need time to process and digest information. Information should not be so overwhelming and content laden that the student has no time to digest nor understand the information (Whitehead, 1929). However, Gottlieb and Feeley (2006) found that students actively learn how to integrate theory into practice by observing and analyzing; practicing then reflecting; and experiencing a strengths-based approach in the academic and clinical settings.

When I was working with my students I made sure that what I was saying and how I was portraying myself as his clinical instructor was from a strengths-based perspective. I used language that was positive and hopeful, and created environments that were facilitative and reciprocal. For example, I used words such as strengths, at potential, engaged, empowered, and supportive. I also engaged in the elements of being fully present, attentively listening, and appreciating the students for who they were, and what they bring to the clinical environment. To create an inviting environment to get to know the students I had one-on-one meetings with students at the beginning of clinical and throughout the semester as needed. The meetings were flexible and lasted anywhere from 15 -30 minutes. In the meetings I wanted to hear the students story. For example, what their strengths where, learning goals they wanted to achieve and how they think their strengths could help them achieve them, and how I as their instructor could assist. I wanted to promote a learning environment that was facilitated not dictated and students were free to actively engage in the learning for themselves. In the child health course one of the learning outcomes (LO) pertained to growth and development (G & D). To facilitate that learning I had students research a specific age group (usually the age they were interacting with in the classroom) and present to the rest of their clinical group using examples. Whenever I was interacting or providing feedback to the students I would start with the positives before any challenges or issues. I was intentional in using real life examples to help students understand that in every person or situation there is a positive including them.

One example, a school was in a low socioeconomic neighborhood where many of the parents were either single or on social assistance. It was noted by the students that many of the students came to school unclean and dressed either inappropriate or in clothes too big. I looked at the situation through a positive orientation to shed a light that poverty does not equate to

everything being bad. I wanted them to understand that in situations there is a positive that needs to be highlighted so that the challenge can be addressed. In talking with the nursing students, I highlighted the positives I saw in the school children. The children were dressed, the mother walked the child to school every day even if the weather was bad; and the children were participating in class, and seemed to be achieving their learning milestones.

I started all pre and post conferences and informal discussions with students discussing what they were experiencing in the clinical placement. For example, “what was happening”, “what was going well”, and “what was not”. Before I would discuss any challenges I would mention what I was seeing or hearing that was positive. I believe that students come to the learning environment with strengths; therefore I intentionally work with students to help identify them. I also intentionally acknowledged strengths I witnessed students using in their practice during discussion or through feedback in their anecdotal notes and evaluations. I involved the students in the learning. I asked them about their previous experiences and collaborated with them in identifying their learning goals and the experiences they would like to achieve in their clinical placement. I supported students using their strengths to assist with any challenges they were experiencing. For example, if Adam were having a hard time interacting with a student we would strategize how he could use his strength of caring to help him connect with the student. I worked in collaboration with Adam to find experiences that would assist him in meeting his goal of increasing his ability and skill in providing health promotion education to students. At the elementary school there was an opportunity to work with the youth leadership group. They were going to be educating their peers on hand washing. This interested Adam so he worked with the teacher to develop a train the trainer model for the students on hand washing. Adam delivered

the first part to the youth leadership group, which was an educational session on proper hand washing during a lunchtime meeting.

What are strengths? Within the strengths-based approach, we must have a common understanding of the characteristics of individual strengths for continuity and uptake of this approach in nursing practice and nursing education.

Gottlieb (2013c) defines strengths as qualities or capabilities that are unique to that individual and define who they are and contribute to health and healing. Strengths are capabilities that enable individuals to deal with life challenges; deal with uncertainties; recover from illnesses or trauma; and overcome adversities. Strengths are situated possibilities that are or can be biological, psychological, and social in nature i.e. past history, sense of efficacy, goals, and concerns; are subjective and determined by the individual; and can be expressed in different words and phrases. Furthermore, on one hand, strengths enable the individual to take charge, find solutions to their problems, deal with hardships, overcome vulnerabilities, and find meaning. On the other hand, strengths are always “contextualized by the person’s life history, social world, and what matters to them, what strengths, encourages, supports enchants, inspires ...and therefore attending to strengths requires attending to loss, vulnerabilities, challenges and threats in the contexts of one’s possibilities and strengths” (Gottlieb & Benner, 2013, p. 7).

The role of the nurse is to discover the strengths in the individuals, determine which capabilities are needed to deal with any problems or concerns then identify which strengths are available and can be mobilized and which ones need to be developed (Gottlieb, 2013c). According to Gottlieb (2013c) and Hammond (2013) there are three sources of strengths: existing strengths, potential strengths, and deficits. Existing strengths are readily available and easily mobilized. Potential strengths are those that are possible rather than ones that are already

developed; can be classified as capacities; and can be developed into a strength (Feeley & Gottlieb, 2000). Identified deficits can be turned into strengths. In one circumstance, certain behaviour can be a deficit but when the context, environment, or circumstance changes the same behaviour can be seen as a strength (Gottlieb, 2013c, p. 353). Furthermore, Hammond (2013) states that strengths are the “key to health because they are the building blocks of criticalness...and key that enables a person to charge, find solutions to their problems, deal with hardships, overcome vulnerabilities and find meaning in life” (p. 57). Therefore, understanding the different sources will assist nurses in acknowledging and discovering individuals’ strengths including identifying which ones can be mobilized, and which ones can be developed to deal with the individuals concerns or problems.

Gottlieb (2013c) also further explores strengths and identifies characteristics that will assist nurses to understand how to use strengths with those they are working with in their practice. People are born with strengths, traits, and potential specific to them and throughout life can be refined or new strengths developed. Strengths can be developed through learning. Even natural strengths need to be further developed through education and opportunity to practice otherwise they will remain an underdeveloped potential. Strengths and weakness coexist. It is not about ignoring weakness but learning how to use strengths to overcome weaknesses and minimize vulnerabilities.

Strengths are related to goals. Various goals require different strengths and therefore the strengths emphasized depend on the goals of the person. The context and situation defines whether the strength is strength or a weakness. Strengths are multidimensional. Strengths are made up of different qualities that can be combined to create another strength; can be depleted and replenished; and involve energy. Therefore, they can be depleted with overuse and need

replenishing. When working with clients/patients it is the role of nursing to identify when a person needs to recharge. Strengths are transferable therefore can be used for different situations. The individual person determines what is a strength. Therefore, strengths are personally constructed (Gottlieb, 2013c).

Strengths-based questions. In teaching and learning, providing feedback and asking questions are an integral part of the learning process in nursing, and an important element of strengths-based care (Gros & Gottlieb, 2013) and for working with nursing students in clinical setting (Cederbaum & Klusaritz, 2009). In strengths-based pedagogy, questions are important and require a different approach to address and assist students to find their own strengths and meanings. The principles, practice, and processes of strengths-based practice become the starting point to the type of questions asked (McCashen, 2010; Hammond, 2013). The focus is more on finding the right questions to solicit the information as opposed to knowing the answers. The questions open up students' exploration of possibilities and ownership in the change process.

To assist McCashen (2010) and Hammond (2013) found questions are characterized by: (1) not knowing, suspending assumptions and using open ended questions; (2) curiosity about and appreciation for the students experiences, strengths and hope and dreams; (3) open invitation to share their stories and explore their values (personal and in teaching and learning); (4) belief that students are their own experts and can change and grow; (5) expansive and go from specific to exploring feelings and meanings; (6) framed positively; (7) clearly and specifically described the strengths, issues; and (8) are respectful and context-friendly language.

Over the numerous one-on-one meetings and check in's with Adam's I would ask him a variety of questions to open up the space to explore his understanding of his experiences in clinical. Through open-ended questions and strengths-based feedback, I wanted to make him feel

safe, confident, and hopeful. At the beginning, I asked questions such as ‘What is happening in clinical?’ ‘How do you feel about this?’ and ‘how is this affecting you, and the others in your clinical group?’ that invited Adam to share his story, and experiences in the clinical practice at the school and within the nursing program. Specifically, what was the issue, and what it meant to him? I wanted to provide Adam a different picture of his learning. For example, I asked questions that would help Adam explore his aspirations, dreams, interests, and goals such as “What would you like to happen instead in clinical” “What would it look like when the challenge is addressed?” Through our discussions Adam revealed he was shy and that many instructors had commented on this behaviour and thought it was affecting his practice. He also commented that he wanted to change and be more active in clinical with his peers and the students in the classroom. He stated to me that even in his third year of nursing this was still affecting his practice in some way or another and he was getting tired. The only difference he stated was that “I asked for his opinion of the situation and what it meant to him...no one bothered to ask him for his understanding”. This informed me that Adam was feeling heard and validated and was becoming an active participant in the process of change.

In order to address shyness it was important to explore Adam’s strengths and what it would look like without it. I asked “what strengths do you have that might help with his shyness? What is happening when shyness is not present?” I wanted Adam to investigate resources that could help him reach his goal of decreasing shyness and participation in his practice. These could be people or skills that could help. I made a point of providing Adam frequent feedback that identified what he was doing well, what was just adequate, and what maybe needs to be strengthened. Throughout the day, I would ask Adam questions that pertained to what he was doing in the classroom with the children that helped him identify what was most important. I

provided feedback during meetings or discussions, in anecdotal notes, and also through more formal processes such as formative and summative evaluations. For example, I provided feedback when I noticed him doing something spontaneous with the children or spending time talking to a child.

I have described how I have used the principles and values of strengths-based in my practice with my student Adam but what impact does this have on students. Gottlieb and Gottlieb (2013a) contend that strengths-based approach is responsive to students, and creates environments and conditions so that students acquire the knowledge and skills to experience the shift in their practice (Gottlieb & Gottlieb, 2013a). When students experience the approach in their education they develop a more enhanced understanding to enable them to adopt this way of being as their approach to practice and ultimately their approach to nursing. Below are two exemplars from former students who experienced a strengths-based approach in their practice. Both students (2nd year nursing student E and graduate nurse D) describe how experiencing a strengths-based approach positively impacted their assumptions about the profession of nursing, patient/client outcomes, and their belief in their ability to be a nurse. Both students provided verbal consent and permission to use the narratives in the project. These two strength stories provide educators a glimpse of how it might be and possible ideas about how to bring about change in their practice towards a strengths-based approach.

I count myself as extremely fortunate to have been exposed to the concept of a strength-based approach to client care thanks to Brenda, my clinical practice instructor during my very first semester of nursing school. Brenda was very thorough in explaining to us the benefits of taking this approach, especially with a disenfranchised client population. She provided us with several real-world examples of what strength-based

approaches look like in practice, and how their outcomes could compare to a more traditional deficit-based approach. Above all, she asked us to question our assumptions and gently encouraged us to think critically about how and when we could apply a strength-based approach in our work, both as student nurses and after we enter the workplace.

Rather than focusing on what is 'bad' or 'wrong' with clients, this approach has led me to consider them as individuals with unique capabilities and approaches to solving their own problems. Throughout my semester of clinical practice, I found this approach to not only be highly effective, but also to have a positive and emancipatory effect on the homeless youth population with whom I was working. The youth moved beyond simply being passive recipients

'2nd year nursing student E

Coincidentally, I also ended my nursing degree with an instructor who nurtured the self-confidence that I lacked, who recognized strengths I did not even know I had, and provided an invaluable mentorship by doing so. The most impactful strategies my instructors employed were using encouraging language and reinforcing the positive attributes and the skills I was displaying as a novice nurse. One instructor provided real-time positive feedback during my shifts, and would summarize a collection of the strengths she was observing at multiple points throughout the term as well. For example, if I had just come out of a challenging or emotional conversation with a patient that she had observed, she would reinforce the specific choice of wording or the type of therapeutic nursing support I provided as being "great" or appearing to be "very

impactful for the patient". She would also be very vocal about the improvements she was seeing in my practice, and would encourage awareness in myself of the advancements I was making. Both of these particular instructors celebrated my successes as a novice nurse with me, whether large or small. One of my instructors told every nurse on the unit when I would successfully initiate an IV, a skill that I was particularly nervous about. This created a positive environment not only in my relationship with my instructor, but among the other senior nurses on the unit as well. By the end of the semester, the unit had a tally going of how many successful IV attempts I had made consecutively. I felt supported, encouraged, and achieved.

The compliments and encouragement that these instructors provided were based on examples of the type of care I demonstrated in practice, so I felt as though there was truth to the encouragement and the praise. It made a difference to me knowing that their praise was authentic through the use of examples, as opposed to receiving generalized encouragement or praise that I also heard my instructor give to other students in the group. Individualized positive feedback let me know that I had innate strengths inside of me. This increased my confidence in the nursing care I was already providing, as well as in my abilities to overcome the challenges I would continue to face as a novice nurse in a very complex and demanding profession.

I have seen the positive impact in my own practice of having an instructor who helps to build upon the innate strengths that I have, in order to achieve success in the areas of my practice that I am not familiar with, or have not yet achieved competency in. I feel much more equipped to provide safe and therapeutic care to my patients when I have the support of an instructor who recognizes my strengths, and tailors the education

they provide by using these strengths to support my areas of weakness. As I am entering practice now as a graduated nurse, studying for my board exam, and orientating to my first position as a working nurse, I feel resilient and capable. The vast amount of knowledge that I still have to learn does not intimidate me the way it did when I was completing my degree because I now know that I have the skills to reach my own goals as a future RN. I attribute this, and my recent success as a graduate nurse transitioning into the workplace, to the instructors I had that instilled confidence in me when I was not able to find it within myself. My experience with instructors who used a strength-based approach instead of a deficit-based approach has taught me that sometimes it takes having someone else point out your strengths in order to recognize them yourself.”

-Graduate nurse D

Considering the challenges facing educators in nursing education working with students there needs to be opportunity to explore how to use the approach in their practice. Strengths-based is not a one approach but an orientation that is grounded in an ontological turn that requires educators to accept being in a world of uncertainty, and orients the learning process toward supporting students to develop their capacity to navigate the complexities and uncertainties of contemporary health care milieus. Gottlieb's (2013c) book *Strengths-Based Nursing Care* has developed a particular framework to shape thinking and actions central to this model. Health and healing is addressed through understanding that each individual has personal strengths that minimize the effects of health concerns by seeking alternative ways to deal with them (Gottlieb, 2013c). Although, research and Gottlieb's book show there is a need to rethink the influence of the medical model and deficit-based education and invites consideration of the

strengths-based approach, there is minimal literature to explain *'how'* to enact this approach in practice. In order for the strengths-based approach to be embraced in nursing education, addressing the *'how'* is a priority.

Relational Inquiry. Considering the ontological turn and the similarities between strengths-based approach and relational inquiry it became evident that using relational inquiry tools would be appropriate to address the *how* to use this approach in nursing. In relational inquiry (Hartrick Doane & Varcoe, 2015) educators are invited into the inquiry process that serves to “move knowledge from the merely intellectual to something inhabited and enacted; a way of thinking, making, and acting. Indeed, a way of being” (Dall’Alba & Barnacle, 2005, p. 682). This approach provides educators the opportunity to move beyond the individualistic and decontextualized approach in nursing. In turn, we move to an approach that pays attention to people in their context, and how their choices and responsibilities are shaped by others and the contexts in which they are situated (Hartrick Doane & Varcoe, 2015). We can intentionally put epistemology at the service of ontology (Dall’Alba & Barnacle, 2007; Doane & Brown, 2011).

Dall’Alba and Barnacle (2007) demonstrate that students must learn in the context of who they are or ‘their own being’. I observed many educators and nurses ‘know’ yet not ‘know how’ in terms of embodying knowledge regarding a strengths-based approach. However, there are several challenges regarding how to support faculty in the integration and translation of strengths-based knowledge into their practice where uncertainty is the given reality.

In post-secondary education, the student teacher relationship is important but as a human experience it is complex and dynamic. People are relational beings who are in constant interaction with one another and the experiences or influence in their life create a bond, a common thread. Working with students is a relational experience; educators will have the option

of relating to the students as people first with varied backgrounds. Relational inquiry, as outlined by Hartrick Doane and Varcoe (2005, 2015), is an approach that acknowledges the complexity of the human experience and is a way of being, knowing, and doing that is grounded in inquiry. The strengths-based approach and relational inquiry have strong alignment particularly in their understanding of the importance of relationships; in recognizing and affirming capacities inherent in those relationships; and addressing adversities. Both pedagogies honor the individual and allow them to be who they are. As well, relational inquiry is more acknowledged in the discipline of nursing than strengths-based, therefore drawing on this pedagogy provides a link to nursing education that can move beyond the individualistic assumptions, generate exploration of the *how* and add a relational and capacity orientation to educators and learners.

The attention is on *how* educators are relating to students and how this ‘way of being’, shapes successful academic outcomes (Hartrick Doane & Varcoe, 2005, 2015). It requires educators to work within three distinct and interrelated domains of practice: the intrapersonal, interpersonal, and the contextual (Hartrick Doane & Varcoe, 2015). To support the interrelated domains Hartrick Doane and Varcoe (2015) believe there are essential ontological capacities that need to be developed. Relational inquiry provides educators the opportunity to “walk in the space between knowing/not knowing” (Hartrick Doane & Varcoe, 2015, p. 28). In turn, educators become aware of what they know and do not know about their situation, how they relate to the learners, and that this uncertainty can support more responsive interactions with students.

In strengths-based approach people are social beings living in the context of their relationships with others. Positive change not only occurs in the context of authentic relationships but it is a transactional and facilitating process (Resiliency Initiatives, 2011).

Gottlieb (2013b) further implies that in strengths-based the qualities needed to connect and maintain a collaborative relationship are respect, trust, empathy, compassion, and kindness. Relational inquiry moves beyond and extends this interpersonal level of relational attention to also highlight the intrapersonal and contextual domains. Doane (2002) describes relational practice as “a humanely involved process of respectful, compassionate, and authentically interested inquiry into another’s (and one’s own) experiences”(p.401). Similar to strengths-based, relational inquiry is a way of knowing, being, and doing that values questioning to inform knowing; it is an approach to practice that allows educators to inquire into is richness of human experience and the meaning it has for each individual (Hartrick Doane & Varcoe, 2015). Using a relational inquiry approach, educators recognize relationships as “the site where knowledge is developed and acted on” (Hartrick Doane & Varcoe, 2005, p.174). In relationships and through inquiry knowledge is brought together to inform practice. In turn, relational inquiry like strengths-based has the potential to transform the educators understanding, practice and how they relate to students.

Considering strengths-based is an ontological turn using relational inquiry tools to address the *how* makes sense. The ontological capacities (ways-of-being) called the 5 C’s, and the levels of relational inquiry- intrapersonal, interpersonal and contextual domains will be enlisted in the workshop to facilitate exploring *how* a strengths-based approach can be used and enhanced in nursing education.

Five ontological capacities (5Cs). Educators are typically influenced by their values, beliefs, and assumptions (Gottlieb, 2013c). Through a critical relational inquiry (CRI) process, educators can come to know themselves and develop awareness of taken-for-granted and known habits so that they can more consciously choose and respond to academic and clinical situations

with students (Hartrick Doane & Varcoe, 2015). They can come to understand the influence their habits and those of the students has on the interpersonal relationships, and develop an awareness of the contextual elements that may be influencing the academic experiences of students. To assist educators in understanding the values underlying strengths-based approach Hartrick Doane and Varcoe (2015) have developed five ontological capacities or (ways-of-being), which they call the 5 C's. The 5 C's include compassion, being curious, committed, competent, and corresponding. These capacities are intricately connected, depended on each other and continually shape and inform one another.

Compassion. The first capacity, which is considered the most fundamental for nurses, is compassion. Hartrick Doane and Varcoe (2015) define compassion as “to share a common suffering...to be able to relate to human-beings-to share something of ourselves and of what it is to be human” (p. 103). While most educators believe they are compassionate the reality is that compassion requires a conscious intent and way-of-being. To be compassionate requires more than trying to relieve anguish or suffering in our students but to “be with people in their uncertainty, anguish, and suffering as it is in any moment” (Hartrick Doane & Varcoe, 2015, p. 106). In essence, it is about how one relates to suffering. Educators need to recognize that they cannot just make it better for the students who are struggling but realize that they need to be with that student in their challenges. In strengths-based approach the educators role is not to “fix” the students situation but to listen and validate their story to gain an understanding of what they are experiencing. It is through those stories that students will understand their situation and how to deal with it but also educators will gain a deeper understanding of the student and their situation.

Hartrick Doane and Varcoe (2015) found compassion requires educators to develop the capacity for self or internal compassion. It does not mean just being aware of your emotions but

“involves critically inquiring into the meanings, concerns, emotions, and values that are shaping your experience” (p. 113). Therefore, it is important for educators to reflect on their own experiences within the teaching and learning environment including the higher education practices to gain a deeper understanding of what capacities, strengths are available, and what emotions are being evoked. It is through being aware of our own feeling and emotions that educators will be able to identify possibilities that may be available to help promote a strengths-based approach and enhance the wellbeing of the students and the academic institution itself.

Being Curious. Being curious is another ontological capacity that implies that the educator is being interested, inquisitive, and open to the uncertainty present in higher education and in the teaching and learning environment working with BN students. It is the capacity to work “between the knowing and not knowing” (Hartrick Doane & Varcoe, 2015, p. 115). Therefore, it is important for educators working with students to understand that it is ok not to know everything. A strengths-based approach involves empowerment with the belief that students have the ability to do things for themselves. Our knowledge is neither certain nor uncertain. Therefore, educators need to be curious enough to open up to the uncertainty that is present in higher education and working with students. Uncertainty provides the educator the opportunity to open up to new possibilities that otherwise may not be provided if they relied on just their expert knowledge. Strengths-based practice requires educators to be curious and be comfortable with uncertainty as they are not the experts. Educator’s knowledge can be enhanced and changed through the relationship with a student. Being in uncertainty opens up the possible to provide clarity for the educator and the student. In essence, educators may assume they have the answer or solution to the student’s concern but in a strengths-based perspective the student has the answer within them. Being curious opens space for educators to invite the student into

understanding their situation, learn about their own knowledge and capacities and how they can help deal with their situation. Curiosity supports all learning “how to relate within and to uncertainty and how to know and make clinical decisions and act in light of the uncertainty” that is present in nursing education (Hartrick Doane & Varcoe, 2015, p. 118). It provides educators the humility and clarity needed to work with students in a strengths-based approach.

Commitment. Hartrick Doane and Varcoe (2015) state commitment involves “a quality of investment of oneself in a conscious course of action” (p. 118). In essence, being committed means educators consciously and intentionally identify the values and concerns that guide their practice and continuously monitor how the actions are aligning with their commitments (Hartrick Doane & Varcoe, 2015, p. 118). Commitment is about power, choice and investment, differences and requires developing a proximal-distal view (Hartrick Doane and Varcoe, 2015). A strengths-based approach to teaching and learning involves educators being intentional and authentic in how they work and engage with student. It is not just about adopting an approach but understanding and enacting the values and principles of strengths-based with their students and constantly re-evaluating to see if they are being authentic in their enactment of them in their practice. That requires educators to consciously be able to identify the strengths-based values and how they are orientating them in their practice with BN students. A strengths-based approach in teaching and learning involves working with students in a positive orientation; highlighting students strengths and potentials; understanding students have the answers to their concerns; and evoking change. This requires working collaboratively and ‘power with’ not ‘power over’. In turn, educators walk alongside students facilitating their understanding of who they are and how they can reach academic success.

The strengths-based approach in practice can cause educators to struggle however, with differences in background, teaching styles, learning environments and resources. Differences are part of the relational process but it is during these times when educators gain learning about themselves; their values and actions at play in their practice; what matters and causes challenges; and what they are committed to or not (Hartrick Doane & Varcoe, 2015). Often when teaching students, there are differences of values in which educators need to reflect on the situation to understand how this is impacting the students and how the strengths-based values and principles can enhance the learning process on the whole. It is also through communication challenges that educators can have the opportunity to see the limitations of their commitment to a strengths-based approach as they enhance the proximal–distal view of strengths-based teaching and learning. Educators who are working from a strengths-based approach do not label others who may not understand or believe in this approach. They must provide themselves an opportunity to question their own commitment to this approach as it can enhance their intentionality to the approach in their practice. Working with students closely, the proximal-distal view allows educators to see past the situation or challenge and to see how long-term this approach effects self-esteem, confidence and academic success. Commitment provides the fire that ignites educators to continue working with students in a strengths-based approach.

Being Competent. Hartrick Doane and Varcoe (2015) contend that being competent is broader than the individual educator using their knowledge and skills in practice. The authors contend that competence is “person/context-dependent and is determined in and by what transpires in particular relational situations” (p. 125). Furthermore, being competent is interwoven with being compassionate, curious, and committed. When these capacities are manifested together it enables educators to “scrutinize what is being held up as best practice ...

focus on nursing situations that orient you to the living experience of the people and families in those situations. This brings your nursing commitments to life” (p. 128). How educators evaluate their competence will depend on the student situation and contexts. Each situation with a student is unique as is the student. There is an emphasis that educators consistently assess their practice to see if they are enacting the strengths-based values and beliefs with their students and if not what can they do to be more present and authentic.

Corresponding. The final capacity is corresponding to what is. Hartrick Doane and Varcoe (2015) describe corresponding as relating to people in a way that is meaningful to them. It involves being aware of the persons meaning, concerns and life situations; and being aware of how you are relating. Furthermore, how we correspond also shapes our experiences as nurses. A strengths-based approach requires educators to be intentional in meeting students where they are at in their learning; realizing they have potential and their story; and the context are interrelated. How educators enter the relationship with students can affect how the students engage in the relationship as well as the teaching and learning environment. Educators need to be in harmony with the students, carefully listening to their story, relating to them in ways that is meaningful to them and fostering their growth and aspirations. Every interaction with a student or situation requires educators to be corresponding in a meaningful and positive way, as the student is an important partner in the collaborative partnership and relationship. Educators need to ask: ‘what are the students’ ideas about their situation?’; ‘how do they understand their situation?’; and ‘how do they explain it to themselves, the educator and anyone else in their environment? It is through inquiring and understanding their situation that we can meet students where they are at and understand their story and their learning needs.

By inquiring into the five C's educators authentically, intentionally, and responsively orientate themselves and their practice in a strengths-based approach to enhance their practice and build the capacity, self-efficacy, and health and wellbeing in themselves and their students (Hartrick Doane & Varcoe, 2015). The capacities are integral to addressing the *how* of embellishing the way-of-being of strengths-based approach to teaching and learning. In essence, educators need to delve into these capacities to understand how strengths-based values fit into their practice and how they use them in their practice with BN students. They are not only the key ingredients that add depth and form to their practice but each is needed and impacts the other. Moreover, how the capacities work in concert affects the outcome (Hartrick Doane & Varcoe, 2015). The five C's help the educator:

Set the parameters for the kinds of knowledge you will enlist and how you will enlist, the types of observations and analyses you will engage, how you will go about making clinical judgment, the nature of the judgments, and ultimately how you will act as a nurse. (Hartrick Doane & Varcoe, 2015, p. 131).

Each educator will develop the capacities for strengths-based approach in ways that are unique and helpful for them in their practice.

Levels of relational inquiry. Addressing the '*how*' of SBTL through relational inquiry will empower educators to develop a more conscious and intentional way of using knowledge, and orient the learning to address the complexities in their practice as they work with nursing students. Intentionally acting and inquiring at the three levels –intrapersonal, interpersonal, and contextual domains as educators engage with nursing students will enable a better understanding of the factors influencing their practice. It will also enhance the students well being and academic success in responding to complexities (Hartrick Doane & Varcoe, 2015).

The intrapersonal domain. The intrapersonal domain of relational inquiry considers what is going on within students, teachers and anyone in the teaching and learning situation. For example, educators who engage in the intrapersonal domain may direct their attention to the thoughts and feelings of themselves and the students; values, beliefs and assumptions underlying responses and habits of mind and action; and what interpersonal and contextual elements are influencing their understanding, feelings, and actions. In essence, educators focus on what they know or do not know about the students and themselves; what capacities, strengths, and resources are facilitating or impeding students achieving academic success and overall health; and what capacities, strengths and resources are facilitating or impeding educators enacting strengths-based approach in practice and overall wellbeing. In the intrapersonal domain educators' attention is focused on those details within the student and themselves that may be influencing their behaviour, clinical judgment, success, and experiences (Hartrick Doane & Varcoe, 2015)

Supporting students in the teaching and learning environment requires inquiring into the students' goals, motivations, expectations and perhaps fears regarding school. It entails listening to the students' story of who they are and who they want to be as a student and a nurse. It means assessing the students' capacities and resources available to achieve the desired intentions. It is important to understand if there was any time when the student was able to overcome a challenge? What was their mind set during those times? How did they get through that situation before? What did they learn about themselves during that struggle? What strengths, capacities or resources are helping achieve success and reach their goals? How can previous resources, strengths and capacities assist with the current situation? What are the students' hopes, vision and dreams? Where are they in achieving those things? How does the student envision

themselves in regards to their strengths and capacities? What is presently working well for them and what needs enhancing in regards to knowledge or support? How are these factors impacting their values, beliefs, assumptions and experiences in a SBTL environment?

Educators must also reflect on their own values, beliefs and assumptions and how they are influences students' success in academia. Do they have the knowledge and competency to support students in a strengths-based approach? What are their thoughts and feelings in regards to practicing from a strengths-based approach? How are past and present experiences in academia supporting or inhibiting them from practicing from a strengths-based approach? What is their story and do they know their own strengths and capacities? What do they know about their students? How are they being self-compassionate? Furthermore, how are these elements shaping their values, beliefs, assumptions and experiences with supporting or intentionally being present with the students and enacting a strengths-based approach in their practice?

The interpersonal domain. Within nursing education, educators consider the effect of interpersonal influences as “how people are acting in the situation and what they are prioritizing” (Hartrick Doane & Varcoe, 2015, p. 4). Educators engage in the interpersonal domain by investigating the interpersonal elements that are affecting the relationship between the student and the educator. The focus for educators is on what and who is being privileged and who is not being considered in the relationship. Educators consider how people are meaningfully connecting and interacting with one another; and how both the educator and the student are enacting power in the relationship (Hartrick Doane & Varcoe, 2015).

Working from and supporting students in a strengths-based approach requires educators to understand how they can connect with students in a meaningful way. It means working with the student where they are in their understanding and learning. Does one have a clear

understanding on what the student needs from the relationship? What are the students concerns at the present moment, and how can the educator engage with the student in an authentic and intentional way using a strengths-based approach? How is the collaborative relationship between the teacher and the student, the student and their experience and context shaping their values, beliefs, assumptions, and experiences with embracing or enhancing SBTL?

It is important for educators to also consider the interpersonal domain from their experience. What is the educator's intent with developing a relationship? Whose power is being privileged and how is it being enacted? How can the educator be present with the student in an intentional and authentic way? How are all these elements going on between the educator and the student and the educator and their context and experiences impacting their values, beliefs, assumptions and ability to provide strengths-based teaching and learning?

The contextual domain. Within nursing education educators consider the effects of the contextual elements on the students, themselves, and other contextual elements. Educators will focus their attention on what is going on around the students and the situations that maybe positively or negatively impacting behaviour, decision-making, experiences and the interpersonal and intrapersonal responses. In essence, the educator may direct the attention to dominating discourses, values, structures and ideas; current resources, systems and organizations; and language practices including economics, political, sociocultural, and historical influences (Hartrick Doane & Varcoe, 2015).

When educators are working with students this may mean examining the support that they are getting or not to achieve academic success both in theory and practice. It may mean considering the language that is being used and examining 'Is it mindful of stigmatizing language' 'is there attitude' and 'Is there labeling' and whether it is supporting a strengths-based

approach and if not what is it supporting. It may also mean looking at the other demands on the student's time, capacities, and resources. Is the student working? What are their expectations of the teaching and learning environment? To what extent are the demands negatively impacting their learning and achieving goals? Is being a student in the nursing program their focus or are there other priorities such as money, leisure time that are more of a priority to them? What external supports such as family, friends, and teachers are unconditionally there to assist students in achieving their goals and overall wellbeing? How can experiencing a strengths-based approach in practice shape their values, beliefs, assumptions and experiences in nursing?

Educators must also engage in their own contextual milieu. How is the educational institute impacting them? What others priorities or obligations do the educators have other than the student? How are other faculty members influencing them? In a strengths-based perspective every person and situation is unique so what may be a contextual enabler for one may be an obstacle for another? Therefore, is this being realized? Furthermore, understanding how these factors are shaping the educators values, beliefs, assumptions, and experiences with practicing from a strengths-based approach?

Inquiring into the three domains provides educators an expanded perspective and moves beyond individualist view to see that there are other factors hindering them effectively understanding and enacting a strengths-based approach in their practice (Hartrick Doane & Varcoe, 2015).

Using the two relational inquiry tools – the levels of inquiry and the 5 C's provide educators the means in which to address the *how* of strength based teaching/learning. Ultimately, engaging in an inquiry process will open new opportunities and directions for educators to understand and use a strengths-based approach with BN students and realize its importance in

nursing education. One possible way for dissemination is through a faculty development workshop that explores *how* to use a strengths-based approach in their practice working with BN students. This could be a beneficial strategy to start opening up the relational space to explore the viability of a strengths-based pedagogy in nursing education. In section two, I create a foundational workshop for education where you see in action the way I address the *how*. Educating faculty on *how* to use strengths-based pedagogy could increase the awareness and understanding of the approach, and how they can effectively use it to complement or enhance their current practice working with BN students and wellbeing. Currently, no such strategy exists that explores *how* faculty's can enact this approach in their practice.

Developing a Strengths-Based Approach to Nursing Education

"I alone cannot change the world, but I can cast a stone across the waters to create many ripples."

-Mother Teresa

Informed and guided by a strengths-based pedagogy, the specific purpose of my project is to develop a faculty development workshop for educators who are working with Bachelor of Nursing (BN) students to explore a strengths-based approach. I want to open the door of possibility for educator's and students that sparks excitement and belief in their capabilities; and provide educators a new approach to understanding their current conditions even though this may go against their present assumptions of how things operate (Zander & Zander, 2000). A strengths-based framework can bring forth many possibilities for increasing understanding and the quality of teaching and learning. Educators need to develop a language and outlook that explores the possibilities and opportunities inherent in their students (Joyce, 2004).

With the foundation outlined in section one, the faculty development workshop will focus on exploring the *how* of this approach in nursing education. The workshop is intended to provide the environment for “enrolment” which is a spark to generate possibilities in educators and in their teaching and learning practice with students (Zander & Zander, 2000). Strengths-based provides a safe environment to explore the relevance of a changing practice.

In providing relational space and relational inquiry tools the workshop can offer educators the opportunity to develop the capacities and skills to implement a relational, contextual approach that is strengths-based in practice when educating and supporting students. It is through this process that transformation happens. With any change in teaching and learning “transformation happens less by arguing cogently for something new than by generating active, ongoing practices that shift a culture’s experience of the basis for reality” (Zander & Zander, 2000, p. 4).

Strengths-Based Pedagogy: Opening the Door of Possibility for Faculty Development: A Faculty Development Workshop

“Inside every block or marble dwells a beautiful statue; one need only remove the excess material to reveal the art within”

- Michelangelo

In this faculty development workshop educators working in higher education with BN students will have opportunity to share their perspectives in understanding their defining learning situations, and share opinions as respectful equals in many cases. In addition, educators will develop a beginning competence in strengths-based perspective as an approach for supporting students in the teaching and learning environment.

Overall Workshop Structure

The faculty development workshop consists of two parts. The first part entails a 4-hour workshop that provides educators the opportunity to open the relational space to identify what they are already doing that is strengths-based and how to extend it; and to recognize what is not working and relearn how this approach can work in their practice. The second part is 11-weeks of 1-hour follow-up sessions that continue the conversation and provide support. See Appendices C-J for complete outline and learning activities. Specifically in the 4-hour workshop and follow-up sessions educators have the opportunity to explore a strengths-based approach to:

- 1) Gain an understanding of a strengths-based approach and *how* it can be a viable model for working with BN students
- 2) Enlist relational inquiry tools to develop the capacities and skills to implement a relational, contextual approach that is strengths-based in practice when educating and supporting students.
- 3) Give educators the opportunity to alter the trajectory of students' success in nursing and develop a more holistic approach to teaching and learning and their relationships with BN students.

Learning Goals.

Strengths-based pedagogy requires different kinds of learning that go beyond cognitive domain to more communication skills, leadership and interpersonal skills, ethics, character, tolerance and the ability to adapt to change (Fink, 2003).

Fink's taxonomy of significant learning. The Fink taxonomy of significant learning (Fink, 2007; Fink 2013) supported the intentional design of the workshop, so that learners not just understand and remember but experience significant learning rather than something insignificant. Moreover, an educational taxonomy like Fink's assists with classifying,

categorizing and defining educational goals by providing a common language (Candela, 2011). The use of taxonomies in education shifts the focus from what is taught to what learners are expected to learn; and provides educators a way to develop, communicate and evaluate learning objectives (Candela, 2011). Fink's taxonomy of significant learning (Fink, 2007; Fink 2013) is not hierarchical like Bloom's, but is interactive and relational and has six general categories of learning (See Appendix B):

- **Foundational Knowledge-** “The basic understanding that is necessary for other kinds of learning “(Fink, 2013, p. 35). At the basis of all learning is that learners need to understand and remember specific information and ideas.
- **Application-** Allows other kinds of learning to become more useful and puts learning to work. Learners not only learn new facts but also skills that may be intellectual (critical thinking), social (communication techniques) and physical. Also they may learn how to manage complex projects (Fink, 2013).
- **Integration-** Act of making new connections that gives learners a new form of power especially intellectual. Learning comes about when learners begin to see and understand the connections between all they have learned and ideas. It is helpful for learners to be able to identify the similarities or interactions between subject matters or theories (Fink, 2007; Fink 2013).
- **Human Dimensions-** When learners understand the personal and social implications of what they have learned they are better able to function and interact more effectively. It is through this learning a greater sense of self-esteem, self-ideal is gained as well as a better understanding of others and their interaction with them. This is considered truly significant (Fink, 2013).

- Caring- This is what happens when a learner has a learning experience that changes their feelings, interests or values. It is through learners gaining a greater sense of caring that something significant happens (Fink, 2007; Fink, 2013).
- Learning How to Learn- This learning refers to the process of learning how to learn. Learners learn how to ask and answer questions and become a self-directed learner. In turn, this enables learners to effectively continue learning into the future, which in nursing is critical (Fink, 2013).

Fink's six kinds of learning are synergistic. As an educator you do not need to give up one kind of learning to achieve another. For example, when you provide learners with information on strengths-based (foundational knowledge) and the opportunity to explore *how* to use in their practice (application) you may get them excited about strengths-based approach (caring). Also when learners learn how to relate the strengths-based approach to their current teaching practice (integration) this may make it easier for them to see the significance of strengths-based not only for their teaching but for themselves and their students (human dimension). According to Fink (2013) it is when a learning experience can promote all six kinds of learning that is considered significant. I incorporated Fink's sentence-completion exercise to determine the overall goal for the faculty development workshop:

By the end of the workshop my hope is that educators will develop a more comprehensive understanding of a strengths-based approach and how they can use or enhance this approach in their practice within nursing education.

Specific learning goals. Upon completion of the 4-hr workshop and follow-up sessions learners will be able to:

- Identify elements and strategies of strengths-based approach (*foundational knowledge)

- Examine their own learning experiences against the principles, values, and beliefs of strengths-based approach (*application)
- Integrate their new knowledge of a strengths-based approach to transform their practice (* integration).
- Embody the principles, values, beliefs and attitudes of strengths-based approach in nursing education (* human Dimension)
- Discover the potential to transform nursing practice through nursing education when using a strengths-based approach (*caring)
- Through critical reflective inquiry (CRI) develop an individualized learning plan that develops sustainable knowledge transfer (*learning how to learn)

The learning outcomes of each activity in the workshop brings together aspects of Finks significant learning as appropriate for each learning plan which emphasizes to participants that learning entails more than memorizing but involves understanding who they are as a teacher (see Appendices D-J). I believe that Finks taxonomy of significant learning is congruent with strengths-based approach and nursing education. This taxonomy is interactive and like a strengths-based approach shifts the power dynamics from the traditional teacher centered to student centered where the educator is a facilitator and guide. In addition, Finks taxonomy brings in multiple ways of knowing together so we as educators can participate in our practice in more holistic ways. The domains of learning such as caring, human dimensions, and integration provide opportunity for shifting our ways-of-being from beyond medical (or corporate) to creating learning spaces that are ontologically orientated and provide practice environments that can potentially transform nursing to be more client centered. Furthermore, a strengths-based approach is relational and brings nursing back to its roots of a caring profession (Gottlieb, 2013);

thus the synergy between each of the kinds of learning in the taxonomy of learning mimics the dynamics and relational aspect of strengths-based approach and ultimately the nursing profession.

Description of workshop

4-hour workshop. The four-hour workshop outline is found in Appendix (C). The specific learning outcomes of each session within the workshop are captured within the individual teaching and learning plans (see Appendices D-H). The first few learning activities, learners are exploring mindfulness through a three minute breathing activity to set the tone of the workshop and strengths-based approach through a poem and word bank activity and a discussion using the principles and values of the approach. In the remainder of the learning activities learners are exploring their own defining learning experiences using the two relational inquiry tools, the three domains and the 5 C's. Both of these tools help learners gain an understanding of their current teaching situations and how there are influences that may be facilitating or impeding their practice and relationship with students. With their broadened perspective on their teaching and learning and how strengths-based approach could enhance their practice, learners are invited to put these learning into practice and develop a plan. As learners complete the workshop, they are positioned to apply a strengths-based approach in their practice with BN students. When educators understand their strengths and recognize the power they have to make changes in their practice they will gain new freedom to see their future as having opportunity and new possibilities (McLean, 2013). After learners have finished the 4-hour workshop they are in a good position to start using or enhance their use of a strengths-based approach in their practice. Each group of four will attend 11-weeks of follow-up sessions that will provide opportunity to

continue the conversation of unpacking their learning on strengths-based through sharing stories and peer support.

Follow-up sessions. The second part of the project consists of 11-weeks of 1-hour follow-up sessions (see Appendix I for session outline and Appendix J for learning plans). These sessions will consist of 2 weeks of large group meetings and 9 weeks of small-group meetings of four participants.

Week 1. The first session will provide an introduction to the follow-up sessions including the structure and function and roles and responsibilities. Through using open-ended questions I will invite participants into a discussion to promote a conversation on their understanding and vision of the follow-up sessions, which will provide opportunity for ownership and active participation in all of the 11-week sessions. Examples of questions are: What would you like to get out of the session? What would the sessions look like? How will you know you are achieving or not achieving that? During this first meeting I will also introduce the roles and responsibilities document (see Appendix K) for the weekly session to the participants for their review and discussion. At the end of that meeting participants will be randomly arranged into smaller groups of four.

Weeks 2-10. In weeks 2-10 each group of four will meet for at least an hour every week. In addition, each group will decide on the logistics of these 1-hour meetings. For example: the day and time to meet, where to meet, and guidelines and norms to support the sessions. The groups will be invited to use mindfulness or affirmations at the beginning of their meetings to help them focus and set the intent of the sessions. Mindfulness and affirmation resources will be provided if needed. Each participant in the group will have opportunity to discuss a total of two

defining learning experiences during the nine weeks. Therefore, each group may need to develop a schedule that outlines who will discuss their defining moment on what day.

Week 6-Midway. Halfway through the nine weeks on week six I will meet with each group separately for a midway ‘check in’. The 1-hour session will be facilitated during each groups schedule time. However, if there is more than one group at the same time I will work with each group to arrange a convenient time. The check-in will be an opportunity to see how each group is doing, answer any questions or concerns, and provide strengths-based feedback.

Week 11. The last session on week 11 provides participants the opportunity to debrief the follow-up sessions as well as revisit their learning plans developed in session 5.3 of the workshop, and participate in an evaluation

Workshop Process Facilitation

In the faculty development workshop teaching and learning are inextricably linked. In nursing education strengths-based creates opportunities for students to learn to nurse, and identify their talents, strengths, and potential. In addition, it creates environments in which students can grow, learn and try (Gottlieb, 2013b). The workshop aligns with strengths-based teaching and learning but also Zanders and Zander’s art of teaching and learning. Both visions invite a framework of possibility and opportunity for transformation. This workshop opens the space for a universe of possibilities for learners to invent a new story of their teaching and learning that entail new assumptions and conditions that support a strengths-based approach.

Facilitators’ role. In this faculty development workshop I frame strengths-based not only as an approach to support educators teaching BN students but also as a pedagogy to be used in the teaching and learning environment. Strengths-based pedagogy informs how facilitators engage with the learners. The role of the facilitator is to engage the learners in a process of

strengths-based so that they both experience and learn about the approach. Through engaging in this process it becomes apparent that strengths-based helps focus educators teaching and learning practice when working with BN students. Strengths-based is an approach to practice that informs learners ways-of-being, knowing, and doing. The focus is not on the challenges that educators are facing in their practice. It is on how educators are engaging and building relationships with the students in their practice. Throughout the workshop facilitator's role is to model strengths-based approach; highlight what is known and not known; emphasize strengths and capacities; and provide opportunity and space to go deeper in learners understanding of strengths-based approach. Furthermore, facilitator's will be intentional and actively listen for what is not being said and bring forward for deeper discussion. In essence, as I facilitator, I will listen for three essential things: (1) the meaning that learners are giving their defining learning experiences; (2) learners goals and aspirations; and (3) the strengths and capacities that are inherent in the learners and the story behind them (McCashen, 2010)

To support facilitating the workshop using a strengths-based pedagogy it is important for facilitators to have a clear and comprehensive understanding of the philosophy, values, and beliefs of the approach. Therefore, reading *Strengths-based nursing care* is crucial (Gottlieb, 2013). Gottlieb's book provides a basic understanding of the strengths-based approach and how it applies to nursing. However, to enhance the understanding of this approach in other settings within nursing education the following articles were helpful: *Clinical instruction using a strengths-based approach with nursing students* (Cederbaum & Klusaritz, 2009); *Coaching strategies for clinical learning; A strengths-based approach to student development* (Kalkbrenner & Brandt, 2012); *Strengths-based Nursing: A holistic approach grounded in eight*

core values (Gottlieb, 2014); and *Mapping a pathway embedding a strengths-based approach in public health practice* (Hammond, 2013).

The workshop is specifically exploring the *how* of using a strengths-based approach in nursing education. Therefore, I employed relational inquiry tools as developed by Hartrick Doane and Varcoe (2015) to help educators understand the applicability of strengths-based in their practice. To assist in my understanding of the relational inquiry tools and my ability to integrate these tools into the workshop I read the book *How to Nurse* by Hartrick Doane and Varcoe (2015).

To address the *how* the workshop is built around two concepts of relational inquiry, specifically working in the interpersonal, intrapersonal, and contextual domains concurrently and drawing on the five ontological capacities (ways-of-being) or 5 C's. My role as the facilitator is to bring these concepts to life; link them to strengths-based approach and their practice; and identify and cultivate the five ontological capacities, or the 5 C's as learners share and inquire into their defining learning experiences from their practice. Therefore, it is important to provide some explanation of these concepts in the session; draw them out and highlighting them during facilitated discussion; and summarizing sessions with the participants at the end of each session. Highlighting the five ontological capacities of being compassionate, curious, committed, competent and corresponding to 'what if' are foundational to educators authentically, intentionally, and responsively orientated themselves and their practice in a strengths-based approach. Also, while learners focus their attention on these two concepts the principles, the values and language of strengths-based will be embedded into all facilitated and informal discussions with learners. Furthermore, all information will be linked to strengths-based whenever possible during the workshop activities and discussions.

Learners' role. The workshop is not providing in-depth information or discussion on strengths-based therefore learners will be required to read prior to attending the workshop the following two articles: *Clinical instruction: Using the strengths-based approach with nursing students* (Cederbaum & Klusartiz, 2009) and *Strengths-based nursing: An holistic approach to care grounded in eight core values* (Gottlieb, 2014). Both of these articles provide learners a beginning understanding of the strengths-based approach so that they can engage in dialogic conversations and learning with other participants and facilitator in the workshop through interactive learning activities.

Through the process of exploration learners are being asked to look at their teaching and learning practice through a strengths-based lens where there is potential to learn more about themselves and their teaching. This process requires courage, diligence, and reflection. Reflecting may involve an adjustment of learner's self-image, questioning of held assumptions, and readiness to take risks (Amundsen, Winer, & Gandell, 2004). In order for the learners' experiences to be meaningful, transformational or involve any change in practice it will be important to start where each learner is at in his or her process of understanding the strengths-based approach. Specifically, it is crucial for learners to have opportunity to articulate their own defining learning experiences with students. Therefore, each participant is invited to come to the workshop with their own defining learning experiences, which highlights their unique teaching and learning experiences.

Each participant will write brief descriptions of two experiences in their teaching with BN students: a moment when things went well, you felt good about their teaching and can still remember how good it made you feel; and a moment when things went poorly, was painful and maybe left you feeling inadequate as an educator and devalued and deflated in your ability to

teach students. The two defining learning experiences are examined at the intrapersonal, interpersonal, and contextual domains with the positive defining learning experience being examined first. Starting with the positive learning experience provides participants the opportunity to identify and acknowledge the strengths and potential that exists in their teaching and ultimately helps “teach more consistently from our identity and integrity” (Palmer, 2007, p. 72). Furthermore, having the reassurance of their strengths assist learners in taking the next step in examining an experience that did not go as well and was painful. Palmer (2007) found the looking at “failures is always hard, but is easier when done against the backdrop of our strengths” (p. 72).

Learners coming to a faculty development workshop bring their own assumptions regarding the role of the teacher and student, the teaching and learning process, and the institution they work for which can impact their investment in the workshop that is exploring potential and possibility with strengths-based (Saroyan et al., 2004a). For example, if an educator believes in being the subject expert they will probably adopt a didactic approach to teaching where there is more control. However, this control may impact educators involving students in the learning i.e. asking questions or engaging them in informal conversations (Saroyan et al., 2004a). These assumptions may be difficult to change and if left unattended may interfere with educators considering other teaching practices that may encourage and support different types of learning and engaging with students.

Therefore, before learners come to the workshop they will participate in a two self-assessments (see Appendix L). One provides a self-reported account of their engagement with strengths-based, and the other one is a reflection of their teaching of BN students. Both of these

assessments are a beginning step in helping learners understand, change, or enhance their teaching practice in nursing education using a strengths-based approach.

Teaching and learning process. Learners in the workshop are being asked to examine and critically reflect on their own learning experiences, which takes risk and opens the door to fear of vulnerability and uncovering unknown values, beliefs or assumptions or what in one's heart and mind (Lombard & Horton-Deutsch, 2012; Palmer, 2007). In essence, learners are being asked to use their own knowledge and experiences to discern their relational hard spots present in their practice. Learners' experiences, stories and fear of vulnerability can affect their readiness to learn, hinder their opportunity to embrace new experiences, and be in the moment. It takes courage for educators to go against the status quo, broaden the understanding of their experiences, and be authentic in their teaching and learning with students (Lombard & Horton-Deutsch, 2012). Therefore, learners need to understand that in vulnerability "new awareness and growth are knocking at the door and it invites a new level of confidence and fearlessness to manifest" (Lombard & Horton-Deutsch, 2012, p. 48).

However, learners need to also be aware of the gap or space between their experience and the story they tell about their experience. As learners acknowledge their experiences and stories they let go of judgment and provide opportunity to reflect, gain new wisdom, and the space to respond and not react and have transformation (Lombard & Horton-Deutsch, 2012, p. 51). In providing space the learners consciousness is expanded (Trungpa, 2008) and the opportunity for change is possible (Lombard & Horton-Deutsch, 2012). When learners are fully present in the learning and let go of intellectualization there is opportunity for the experiences to be powerful and significant. Giving voice and language to uncomfortable feelings or thoughts generated from their experiences is important to reflective practice and to gaining new

understanding (Lombard & Horton-Deutsch, 2012). To support learners in their journey a space will be created that is safe and trusting for reflection and accessing many kinds of wisdom rather than just logical analysis (Lombard & Horton-Deutsch, 2012). A trusting space helps learners feel a sense of security in discussing their experiences; feel respected; and feel their experiences are important (Kitchie, 2014). A common understanding and guidelines will be established in the workshop to assist learners in upholding the space. As learners connect to the safe space in the workshop there is the opportunity to embody their own authenticity, which has the potential to increase their health and wellbeing (Lombard & Horton-Deutsch, 2012).

In reflecting on and discussing their learning experiences with other participants learners are also gaining knowledge on the influences that are impacting their experiences and the strengths or limits they possess. In moments of vulnerability the answer is not to look for an immediate fix but to gain greater insight into the dynamics of their experience (Palmer, 2007). Uncertainty provides opportunity for significant learning and a “deeper understanding of the gifts and limits, the paradox of our mixed selves, so that we can teach, and live, more gracefully within the whole of our nature” (Palmer, 2007, p. 74). Furthermore, through engaging in dialogic learning there is opportunity for educators to display the courage to examine what they are truly capable of as an educator, their limitations, and develop relational autonomy and a realistic sense of who they are. It is only through having a better sense of who they are as an educator can they begin to understand how this may impact their understanding of their students and their relationship with them (Hartrick Doane & Varcoe, 2015). Palmer (2007) found that “understanding ... identity is the first and crucial step in finding new ways to teach: nothing ...do differently as a teacher will make any differences to anyone if it is not rooted in my nature”

(p. 74). In essence, through discussions and engagement there is potential to develop a community of learners and foster the educator's ongoing development as a competent educator

Mindfulness. The creation of a safe space makes room for “mindfulness awareness, potential and positive conditions for reflective practice...these cultivate the possibility for the development of a successful community of learning” (Lombard & Horton-Deutsch, 2012, p. 50). Gottlieb (2013) states that strengths-based requires a certain way of thinking or mindset that includes specific strengths such as “mindfulness, humility, open-mindedness and non-judgmental attitude” (Gottlieb, 2013c, p, 131). Furthermore, it entails that educators be fully present with their students in the teaching and learning environment. Gottlieb (2013c) believes that mindfulness is necessary for developing therapeutic relationships with students as it enables educators to be fully present and in the moment, open, attuned to their own needs and feel accepted (Gottlieb, 2013c). If learners are mindful they can deconstruct their own experiences to understand the impact these influences have on their teaching and engaging in more open dialogues with their students.

My role as a facilitator is to be intentional in understanding my own emotions, thoughts and feeling so that I can be fully present with the learners and create a learning environment where learners can grow academically, emotionally, and socially. Additionally, I need to create space for learners to attend to, accept, and be present in the understanding of their defining learning experiences (O'Haver Day & McNelis, 2012). Practicing mindfulness as an educator “alerts one to the professional consequences of lack of self-care, including fatigue and empathy” which can negatively impact learning and caring for students (O'Haver Day & McNelis, 2012, p.69). Therefore, being intentionally mindful and present with the learners is an essential element to teaching and caring. Ultimately, the strengths-based approach may start the creation of a

culture where self-awareness, stress management, and self-care are central to providing patient centered care (Horton-Deutsch & Drew, 2012).

As a mindful educator in the teaching and learning environment I am cognizant of learners presence, their non-verbal expressions, and their language; I am attentive and non-judgment; and model self-confidence and self-acceptance which encourage learners to be more accepting of making mistakes and being exposed (O’Haver Day & McNelis, 2012). Therefore, to promote significant learning and mindfulness I want to cultivate learner’s skills in self-observation with their students; encourage them to embrace flexibility; develop an understanding and willingness to see the connection between the head and heart; and through non-judgmental observation begin to recognize biases and distorted thoughts and insights (Baer, 2003).

Mindfulness assists me as a facilitator to make sure that I am non-judgmental, and listen open-heartedly to the learners’ experiences, and provides me the opportunity to take a non-evaluative and non-judgmental approach to the learner’s experiences in the workshop (O’Haver Day & McNelis, 2012). Mindfulness and reflective practice increases our “capacity for patient-centered care and learner centered educational approaches, and for honing our leadership capacity” (Lombard & Horton-Deutsch, 2012, p. 58). However, on the other hand, mindfulness and reflective practice provides opportunity to connect to our authentic selves as nurses and human beings; words to explain our experiences and cultivates our understanding of ourselves and others; and authentic presence and humanity (Lombard & Horton-Deutsch, 2012, p. 59).

Modeling a strengths-based approach. Facilitating a workshop using strengths-based requires “walking the talk” and role modeling for the learners what a strengths-based approach looks like in the teaching and learning environment. Therefore, strengths-based principles, values, philosophy, and language will be used in the delivery and facilitation of the workshop. It

is important for learners to experience the strengths-based approach, and ultimately have opportunities to learn how it can be used in their current teaching and experiences with students. As the facilitator, I am engaging and learning with the participants to acknowledge and build upon their existing knowledge and experience with strengths-based approach (Brown & Hartrick Doane, 2007). In turn, I invite learners into a curious exploration of the approach using their own learning experiences. This provides a more personal and meaningful experience for the learners. Also, through applying the interpersonal, intrapersonal, and contextual domains and 5 C's to their experiences they are learning about strengths-based approach and how it can be used in their practice with BN students. Learners must embody not only what they know about their teaching and learning but they must accommodate the students experiences and where they are at in that relationship with them. Engaging in a relationship with learners and embodying a strengths-based approach the relational space is open for participants to gain a deeper understanding who they are as educators, and how a strengths-based approach can assist them in their practice.

A comprehensive understanding of how a strengths-based approach could affect students learning and the present delivery of feedback and asking questions is imperative. In SBTL, Gros and Gottlieb (2013) contend that feedback should be supportive and facilitate uncovering students strengths, developing potentials and overcoming deficits, and to correct and learn from mistakes. How the feedback is provided can have an effect on how students perceive and uptake the feedback. Therefore, feedback in the workshop should be delivered in a way that is not punitive, demeaning or threatening but sincere, and understood by the learners. Furthermore, as a facilitator it will be important to intentionally acknowledges what learners are already doing that is working and help them to self-determine areas that need improvement (Cederbaum &

Klusaritz, 2009). To help facilitate learners understanding of their experiences and a strengths-based approach any feedback delivered should be detailed and specific, and not so general that they are left confused. To prevent feedback from being misunderstood it is important that the facilitator explore with the learner their understanding of the information provided by having them reflect or rephrase back their interpretation. In the workshop there is opportunity for feedback to be provided by facilitator and peers and also learner to facilitator, as we are co-learners in the learning process.

However, what is just as important and required in SBTL is self-reflective feedback and self-evaluations. When students engage in mindfulness or self-reflection they become their own source of feedback, which is important for their development and growth as a becoming nurse (Gros & Gottlieb, 2013). To support reflection educators can integrate critical reflections, which consist of three phases; descriptive phase involves a description of situation; reflective phase looking at the situation against scientific knowledge, ethical and value standards and aesthetic aspects of practice; and critical phase looks at the learning and change in practice (Kim, 1999). The critical reflective inquiry (CRI) process provides the venue for students to inquire what they know and learned, what are the gaps, is there any other information that is needed, what are issues or problems, and how this new knowledge will change future situations or learning's. To encourage students self-reflection the facilitator can ask questions such as 'What are you observing?' 'What is your understanding?' 'What decisions are you making and what choices do you have?' Facilitators can also promote learners self-reflection and evaluation through dialogue, and having them complete self-evaluation assessment tools.

In the workshop learners have a variety of opportunities to participate in reflections, self-assessments, and evaluations. Through discussion using guiding questions learners are invited to

reflect on their learning experiences and their understanding of strengths-based pedagogy. In learning activity 5.3 learners are invited to reflect on their pre-assessments and the learning's from the workshop and develop a learning plan that details strategies to develop or enhance their practice working with BN students using a strengths-based approach. In addition, during the follow-up session's learners are invited to reflect on their experience and learning's from discussing their story to their peers using the CRI process. As a co-learner in the workshop I also engage in self-evaluation on my experience facilitating the workshop by asking five reflective questions.

Engaging in SBTL contextual and experiential knowledge is co-created. In the workshop, I facilitate dialogue with learners that builds capacity, empowers, and create an atmosphere where they can think, process, and challenge their current ways of teaching while opening the space for identifying assumptions, values and beliefs, and taken-for-granted practices, and linking this knowledge with their practice. Using the strengths-based principles and values and relational inquiry tools I am increasing learners "relational consciousness" (Hartrick Doane & Varcoe, 2015, p. 4), and demonstrating "inquiry as a form of action" that explains the "how to" of relational consciousness (Hartrick Doane & Varcoe, 2015, p. 6).

In using relational inquiry tools I am helping learners to be mindful of the complexities that are shaping their experience, and understand what is going on within, between and among people, and between and among the contextual elements in their experiences (Hartrick Doane & Varcoe, 2015). This opens the space for the known or unknown values, beliefs, assumptions, and habits of practice to emerge and be examined for their influences on their teaching and learning practice and relationship with their students, and determining the right action. For example, as learners are examining their experiences using the three levels of relational inquiry they may be

confused to how the interpersonally and contextually elements can affect their teaching and learning and relationship with the students. It is during these times that I open up the space for questions to be raised and the possibility to explore a new approach like strengths-based to their practice and how it can assist them. Furthermore, learners might gain new insight into their present teaching and learning and how these elements may be impacting their relationships with and academic success of the students; and realize the importance that students play in their learning and in the teaching and learning environment.

As a facilitator, I will engage with the community of learners as a whole, and attend to the knowledge and themes that are being generated and are significant for the learners as the learning is scaffolded throughout the workshop. Understanding learners known and unknown knowledge will be supported by dialogue and intentional space for learning. As learners engage and reflect on their learning experiences I will intentionally orient them to the principles and values of strengths-based using the relational inquiry tool 5 C's or ways-of-being. Intentionally, orientating learners to the ways-of-being highlights these values and how they are using them to discern the uncertainty, ambiguity, and complexity inherent in their experiences. In addition, it provides opportunity to make the connection to the elements of the strengths-based approach. Furthermore, highlighting the values increase learners' awareness and understanding of the values, and opens the space for further dialogue on the significance to their practice and potential to explore the possibility of SBTL. The priority becomes the students' story, potential, and how educators are engaging and interacting with them over the information we are providing them. As learners shift the attention to a strengths-based approach in their teaching and learning they begin to embody a more authentic, intentional, and holistic approach to teaching so that students continue to achieve academic success and resilience.

The learning in the workshop is both reciprocal and collaborative. In pursuit of SBTL requires student-centered learning and active participation. Furthermore, SBTL is about *being with* not about *doing for* the learners (Gottlieb, 2013c). There is collaboration between the facilitator and the learners as well as among the learners participating in the workshop; each takes responsibility for the learning (Oermann, 2007). The partnership is built on mutual trust and respect; is non-hierarchical and lateral in structure; and the power is shared. It also recognizes that learners come to the learning environment with their own skills, knowledge and experiences and that learning from each other is integral (Gottlieb, 2013c).

The environment will be respectful, transparent, and address power imbalances so that learners feel empowered not disempowered, and there is collaboration between learners and facilitator as well as between learners. The workshop will be facilitated using a ‘power with’ position instead of ‘power over’ position with learners, where the facilitator is the position of expert who has all the answers, and knows what the challenges and solutions are for the learners (McCashen, 2010). As a facilitator, I create learning activities that demonstrate discovery and action, where learners are able to improvise and try new things. In addition, I will value learners’ diversity of knowledge and acknowledge subjectivity; acknowledge and value learners’ unique experiences and the meaning they give them; and enable processes and outcomes to be determined by the partnership (McCashen, 2010). Throughout the workshop I invite learners to be an active partner in the learning and share their perspectives and expertise with others to increase their understanding and growth as an educator using a strengths-based pedagogy (Gottlieb, 2013c). Furthermore, the expertise, knowledge and resources of all involved in the workshop will be valued, shared, and developed in a community of learners approach to change (McCashen, 2010).

In order for the learning to be meaningful as the facilitator I need to continuously engage learners in the process of exploring strengths-based perspective. In creating and establishing a relationship with participants I need to be attuned and aware of the learners thoughts and feelings as well as my own; be authentically present which fosters empathy and understanding of what the learners are experiencing; and listen attentively (Gottlieb, 2013c). According to Gottlieb (2013c), these three elements are interrelated and can impact creating a relationship with participants in the workshop. To more fully understand learners and their experiences a variety of critical inquiry skills such as senses; observations; engaging in conversation by being attentive and present; being mindful and open to my own and the learners thoughts and feelings; being an empathetic listener; and knowing how to elicit the learners stories (Gottlieb, 2013c). Taking the stance of observing provides me the opportunity as a facilitator to bring forth feelings or things that the learner may be doing that they are not aware of such as strengths and also help them become more perceptive in understanding of their situations (Gottlieb, 2013c).

Facilitation Strategies and Tools.

Being present. Strengths-based approach involves relationships and educators being present with their students. Presence requires the following: (1) being open to others and possibilities; (2) nonjudgmental; (3) respectful; (4) able to live with uncertainty and unpredictability; (5) committed, engaged and involved; (6) transparent in their intentions; and (7) genuine and authentic (Gottlieb, 2013c). Mindfulness requires individuals to pay attention to what is going on around and inside them rather than just “operating on automatic pilot” (Gottlieb, 2013c, p. 131). In addition, Gottlieb (2013c) contends that mindfulness is needed for the development of relationship and enables educator to be fully present and open to their environment.

Mindfulness is one strategy that could provide educators the skills to connect with and maintain a caring and trusting relationship with students (Gottlieb, 2013c). Therefore, in the workshop mindfulness can create the space for intentionality and presence where learners are able to be fully present in the learning and not just physically present and distracted. Specifically, assist learners being more present and open to embrace learning that may have gone unnoticed. It is hoped that introducing this mindfulness practice into the workshop will provide educators the opportunity to experience this practice and potentially embrace it for themselves but also transfer mindfulness directly into clinical education and practice to prevent burnout and vicarious trauma in students and themselves (O’Haver Day & McNelis, 2012).

Many authors have associated mindfulness practice with decrease stress and increase resilience both physically and emotionally (Baer, 2003; Grossman, Niemann, Schmidt, & Walsh, 2004; Hick, 2008). The cultivation of mindfulness begins with focusing on breathing. Awareness of breathing “interrupts habitual patterns of avoidance and longing that lead the mind away from the present moment to space and time elsewhere” (O’Haver Day & McNelis, 2012, p. 70). Being with your breath cultivates the skill of intentional presence keeping (Kabat-Zinn, 1990). Educators who embrace mindfulness in their practice can have a profound effect on their students. Students who engage with a mindful educator learn to think mindfully, reflectively, and critically; can integrate theory with practice; have deepened self-awareness; and have an increase ability to build respectful relationships with their teachers, peers and clients/patients (O’Haver Day & McNelis, 2012).

Therefore, at the beginning of the workshop I will invite participants to engage in a three-minute breathing activity and if needed will return to this activity throughout the workshop to re-

center the learners and assist them in their understanding of the teaching and learning experiences.

Use of language. A strengths-based pedagogy requires a different language to describe student's difficulties and struggles; it allows educators to see opportunities, hope and solutions (Hammond, 2013). The language is more empowering and hopeful. Furthermore, it is positive and is associated with words such as "strength, energy, challenges, opportunities, and possibilities" (Gottlieb, 2013c, p. 29). In the workshop the language and questions used will assist facilitator in eliciting the learner's stories. Both will embody the values, beliefs and attitudes of the strengths-based perspective.

Language has the power to influence thought and action. Weimer (2015) states that in teaching and learning the words we use to describe ourselves, learners, or activities can influence how we both think and act. Therefore, the language used in designing the workshop will not be directive and authoritarian but be collaborative and use language like "we" instead of "you" which is more inclusive and implies both myself and the learners come to the workshop prepared. I will make sure that the activities in the workshop will be appropriate for the learners and not so difficult and challenging that they will be frustrated and not participate. I will therefore assume that every learner coming to the workshop will be successful with his or her outcome. Zander and Zander (2000) describe that as 'giving an A' which the author describes as a more enlightening way to approach learners that promises to transform both the facilitator and the learners (p. 26). In turn, it provides the facilitator the opportunity to be authentic and free to articulate their feelings and thoughts as well as support learners in embracing a new approach such as strengths-based; and moves the relationship from one of measurement to a place of

respect to realize their potential, and a universe of possibility with strengths-based (Zander & Zander, 2000).

My role as a facilitator is to support the learner's efforts to learn new knowledge and integrate into their practice (Weimer, 2015). The language that describes the facilitator/learner relationship should convey the authenticity needed to establish a genuine relationship with them. Therefore, I will not force but invite learners to share in the workshops possibility and opportunities (Weimer, 2015). For this workshop the language I use will be positive and empowering not negative and demeaning; will avoid labeling; and be respectful (see Appendix A). Furthermore, the language will be clear, specific, and concise; acknowledge learners' knowledge, interests, and challenges; facilitate and support learners learning and development; and be meaningful and clear to the learners (Hammond, 2013; Saleebey, 1996).

Active learning. In SBTL, knowledge is constructed through experiential learning. Furthermore, learners learn best through experiencing, observing, and practicing strengths-based in the classroom and clinical setting. The core values and beliefs underpinning SBTL acknowledge both constructivism and active learning process (Gottlieb, 2013b). In constructivism knowledge is not transmitted from teacher to student but built through engaging and interacting with their environment. Constructivism is putting learners at the core of the learning (Young & Maxwell, 2007), and recognizes learners are the mediator of the learning process (Jillings, 2007).

In this workshop I will be employing strategies that promote active learning that will keep the learners involved and focused on the premise of the workshop; and allow for the interpersonal, intrapersonal and contextual elements of the learners learning experiences to emerge. The workshop is exploring the *how* of strengths-based therefore it is important to

involve the “learners in doing things and thinking about the things they are doing” (Bonwell & Eison, 1991, p. 2). Active learning goes beyond just receiving information and ideas to actually involving, doing and observing experiences and reflecting on what and how one is learning (Fink, 2013). Active learning encourages learners to “reflect on their thinking and explore their ideas with peers and the teacher, fostering development of critical thinking” (Oermann, 2007, p. 281). When learners are engaged in the learning process there is more ownership to assess their learning needs and how to meet them; and encourages learners to take responsibility of their own learning (Oermann, 2007). Learning strategies need to provide opportunity for learners to have experiences where they are doing what we want them to learn; observing and listening to others who are participating in something similar to what they are learning; and opportunities to reflect and make meaning of their learning experiences (Fink, 2013).

Active learning strategies that achieve significant learning include three components: getting information and ideas; experiences; and reflection (Fink, 2013). Fink's view of active learning is a more holistic and includes two principles that guide the choice of learning activities. First, learning is one that includes activities from each of the three components. Second, when at all possible direct forms of providing these three components are preferred (Fink, 2013). Learning activities engage learners directly and indirectly. According to Fink (2013) learners can get information indirectly from reading textbooks, and engaging in webinars and lectures series or directly by examining original sources of data not been fully analyzed. Learners will obtain knowledge on strengths-based approach through pre-reading selected articles, participating in an experiential activity using a strengths-based story and through discussions in the workshop.

The workshop provides learners rich experiences to explore the strengths-based approach. The interactive learning activities use active learning strategies such as questioning,

discussions, mind mapping, reflection, and group activities. In addition, the learning activities provide learners opportunity to obtain knowledge, participate, observe, and reflect on their exploration of the strengths-based approach.

Questioning. According to Oermann (2007) questions can be used to guide discussions or clarify learners understanding of the information and clarifying this understanding to their practice, and examining different perspectives or approaches. In addition, questions also promote critical thinking. On the other hand, Gottlieb (2013c) found educators should be good communicators to prevent miscommunication and misunderstandings. The author further infers that the common downfalls in communication are the nature of the questions such as asking why in a negative tone or asking leading questions that anticipates the individuals feeling or experience without asking them; phrasing the questions negatively or using language that is unfamiliar to the students; and method of questions such as asking too many questions, being defensive or providing false reassurance. When dialoguing with learners my questions will be exploratory, open-ended, and curious to allow learners to see opportunities, hope, solutions rather than barriers, hopelessness, and problems. Through questioning learners are invited into an exploratory process of sharing their learning experiences with other participants in small and large groups. This exploration process provides learners the opportunity to: (1) acknowledge and clarify the influences that are impacting their story; (2) help learners explore their aspirations, dreams and goals; (3) acknowledge their strengths or challenges; (4) identify resources that can help them embrace the strengths-based approach in their practice; and (5) identify concrete steps to making change in their teaching and learning (Hammond, 2013; McCashen, 2010).

Discussions. Gaberson, Oermann, and Shellenbarger (2015) state that discussions are not the teacher telling the learners what to do or not do but an exchange of ideas though the teacher

asking open-ended questions and supporting and encouraging them to reach their own decisions and outcomes. Both teacher and learners actively participate in exchanging ideas and sharing information. Discussions provide learners opportunity to interact, critique and learn from others, explore feelings associated with their practice, clarify values and learn to interact in groups (Gaberson, Oermann & Shellenbarger, 2015). On one hand, facilitating discussions requires the teacher to develop and maintain a respectful and safe environment for learners to be able to discuss their ideas, concerns or learning's and keeps the conversation on topic. In addition, discussions provide time for learners to answer questions, encourage multiple perspectives and different kinds of learning through open-ended questions, and provide verbal and nonverbal feedback to encourage participation. Learners participate in an activity that examines their own learning experiences using the three levels relational of inquiry- interpersonal, intrapersonal, and contextual, and engage in-group discussions to provide new learning and understanding of their experiences and how a strengths-based approach can enhance their practice.

Engaging in conversations with their peers about their defining learning experiences facilitates an understanding about what is important, what they understand, and what they are curious about. Furthermore, learners have opportunity for meaning making when they engage in dialogue with their peers. Engaging in dialogue with peers increases the possibility for new and richer meaning around current teaching and learning and strengths-based approach. Palmer (2007) implies listening to others describe their defining learning experience may indirectly facilitate them reflecting on their own teaching and learning and identity as an educator. On the other hand, McGrary, Deal, and Masman (2014) found that the key catalysts to change are: discovering your values; understanding yourself and others; and having a sense of curiosity. In every conversation there may be “innumerable ‘sparkling moments- illuminated by shafts of

light penetrating their cracks of light” that represent small changes (McGrary et al., 2014, p. 17). More importantly, during times when things seem overwhelming the light that shines from these small cracks should be celebrated as they provide new insights and possibilities that may otherwise be overlooked. Change does not have to be big to create momentum (McGrary et al., 2014).

Mind mapping. Mind maps and concept maps are mapping tools that are used to “help impart critical and analytical skills to students, to enable students to see the relationships between concepts...(Davies, 2011, p.279). Oermann (2007) describes a concept map/mind map as a pictorial or graphic arrangement that depicts visually the learners understanding of information learned, and demonstrates how learners have linked new concepts or facts with already learned knowledge. However, creating maps is a learning experience for learners and provides them the opportunity to structure their ideas and indicates how they are making connections (Biggs & Tang, 2007). Furthermore, maps can be used for collaborative learning, brainstorming or organizing ideas (Gaberson, Oermann, & Shellenbarger, 2015). If learners are able to represent understanding and associations in a diagram they are more likely to “understand those relationships, remember them, and be able to analyse their components parts” (Davies, 2011, p. 280). Creating maps can be done with computer software, on a computer or manually on paper or flipchart. In the workshop learners will be invited to participate in an activity to develop a mind map that captures the repository of words from the small groups discussions on their positive and challenging defining learning experiences. The activity will provide learners the opportunity to organize their ideas and understanding of interpersonal, intrapersonal, and contextual domains and the strengths impacting the positive and challenging defining learning experiences.

Reflection. Reflective practice can assist educators in making sense of their experiences and potentially build resiliency to sustain them within their practice (Sherwood & Horton-Deutsch, 2012). Specifically, reflection becomes a “transformative change process” which can improve practice and the focus of our work (Sherwood & Horton-Deutsch, 2012, p. 4). Saroyan et al. (2004) contend, “reflection is the glue that holds together knowledge, perspectives, and actions...supports and encourages the continual alignment of these components and is the mechanism for instructional decision making” (p. 25). Gottlieb (2013c) suggests that reflection is an important quality that is needed in strengths-based practice. To develop our practice to use a strengths-based approach requires moving beyond acquiring new knowledge and understanding to enquiring into our assumptions, values, and beliefs about our practice, as it requires more than learned knowledge. Reflection is a systemic way to integrate knowledge from practice and way of thinking about our experiences that maximizes the learning (Gottlieb, 2013c; Sherwood & Horton-Deutsch, 2012). Furthermore, reflection provides opportunity for educators’ to build on their knowledge including experiential and tacit knowledge (Carper, 1978; Johns, 1995; Tanner, 2006).

The workshop provides opportunity for learners to reflect. Learners are invited to examine and reflect on their own teaching and learning experiences. Through reflection there is opportunity for learners to extrapolate their current teaching and learning reality and reflect on what that means and what they want that new meaning to mean to their teaching and learning practice (Fink, 2013). It is only through reflection can learners have opportunity to become “meaning- making being rather than simply meaning-receiving beings” (Fink, 2013, p. 118). Furthermore, the author contends that becoming more adept at meaning making requires spending time reflecting on what the experiences means and the knowledge acquired. Fink

(2013) also suggests that even though a portion of meaning making is done alone it can also be done through engaging in dialogue with others. As learners engage with others the possibility of finding new and deeper meaning and understanding increases significantly. It is when learners are collaborating with others to search for meaning of their experiences, information or ideas that they form a sense of community that enhances the quality of the learning experiences (Fink, 2013).

As educators we are always growing and developing but engaging in critical reflection on our values, beliefs, experiences and actions will help us reach our potential. Our teaching and learning practice “does not need to be perfect; it just needs to sustain the change” (McLean, 2013, p. 18). In the workshop, learners are not only reflecting on their defining learning experiences but they will be invited to engage in discussions with others in the workshop through the various learning activities, and a reflection on discussing their learning experiences in the follow-up sessions using the critical reflective inquiry (CRI) process.

Group activities. The workshop provides learners’ opportunity to engage in a variety of small and large group activities. Engaging in small and large group activities learners observe and listen to their peers explain and discuss their learning experiences for what they learned about themselves, their practice and strengths-based approach. Many active learning strategies are group orientated which assist learners to develop social skills such as communication skills and interdependence, and learn how to work with and promote their ideas in groups (Baumberger-Henry, 2003). The small group sessions will provide participants the opportunity to have meaningful conversations with colleagues about strengths-based; increase their understanding of strengths -based approach in practice through facilitated peer group interactions; provide a support network to process their feelings and discuss new ideas or

strategies; and meets their needs from within that allows them to continue implementing a strengths-based approach in their practice with their students and colleagues (Cederbaum & Klusaritz, 2009; Saroyan et al., 2004a).

Experiential learning environment. There are many reasons that educators come to a faculty development workshop whether it is for personal gains or meet the needs of their university. However, to have significant learning and support uncertainty the environment needs to be comfortable so that learners can engage in meaningful and relevant conversation with their colleagues. Gottlieb (2013c) states that in strengths-based care it is important to create environments that are supportive and safe. Learners need to feel empowered so that they can take control of their experiences and feel secure enough to explore them. A supportive environment maximizes the “learners potential and capitalize on their strengths” (Gottlieb, 2013c, p. 355). Therefore, the environment of the workshop will foster the opportunity to promote a collective deep-thinking dialogue about their learning experiences that encourages educators to explore how and what they teach and how that can be enhanced or changed by strengths-based approach (Drummond-Young et al., 2010). The role of the facilitator is to create an environment that is facilitative and values the learners ability to be involved in the exploring their experiences, and provides time and space to explore (Gottlieb, 2013c). Intentionally acknowledging the learners strengths during the workshop supports learners in exploring new opportunities and possibilities and finding solutions to the experiences (McAllister, 2003).

To support the workshop design Palmer (2007) identifies six paradoxes that he builds into the teaching and learning environment. According to Palmer (2007) the environment consists of more than the space but the physical arrangement, the emotional ethos, the framework used to discuss the topic and the ground rules that guide the learning. In essence, these paradoxes

are considered tensions that keep the teaching and learning environment heightened and awake. In the workshop, these paradoxes will assist in providing an environment that is conducive to educators having the opportunity to explore in the teaching and learning environment the *how* of strengths-based approach. The six paradoxes are as followed:

1) The first paradox is bounded and open. The learning space should be open enough to allow learners to speak but have the right material and guidance by facilitator to keep focused on the topic. The space must be “open to the many paths down which discovery may take us as the surprises that always come with real learning” (Palmer, 2007, p. 77). For example within the workshop learners will be provided the necessary guidance to discuss their learning experiences within small groups.

2) The space should be hospitable and “charged” (Palmer, 2007, p. 77). An open space can be liberating but it can produce fear in the unknown. Therefore, the space needs to be inviting as well as open, safe, trustworthy, and support space for resting, eating or seeking shelter when feeling overwhelmed. In this workshop, the learners will be treated with compassion and civility and invited to share their experiences but also challenged enough with questions that creates opportunities to further engage in understanding strengths-based and how it can be embedded into their teaching and learning.

3) Encompasses both Individual and the groups’ voice. To support learning about strengths-based and *how* they can use it in their practice educators need to be able to express their ideas, emotions, confusions, ignorance and assumptions freely. There also needs to be a place for the groups voice to be “gathered and amplified, so the group can affirm, question, challenge, and correct the voice of the individual” (Palmer, 2007, p. 78). In the workshop, I will facilitate activities that provide learners opportunity to discuss their learning experiences in small

groups as well as in the large groups. This will entail actively listening and “hold[ing] all threads of the conversation in mind so that one can lift up a fabric of thought and ask, “Does this look like what you were saying” (Palmer, 2007, p. 83).

4) Both individual and discipline stories should be honored. Learners defining learning experiences will be used to examine their interpersonal and intrapersonal story but also the contextual influences that impact their understanding. There will be guiding questions to assist learners to increase their understanding of the critical incident.

5) The learning space supports solitude and community. Learners need space to reflect and absorb their thoughts and feelings and also “a dialogical exchange in which ignorance can be aired, our ideas tested, our biases challenged, and our knowledge expanded, and exchange in which we are not simply left alone to think our own thoughts” (Palmer, 2007, p. 79). To support this paradox I will invite learners to participate in the development of norms for the workshop and their smaller groups for the follow-up sessions. In addition, I will invite learners to not assume that everyone must speak but respect learners occasionally need time to reflect on their learning and feelings regarding an issue or concern. In addition, actively listening to their conversations generated during the learning activities will provide me the opportunity to recognize how and when to engage the learner in the conversation without violating their vulnerability.

6) Both silence and speech should be welcomed. Learning both occurs with exchange of words and silence. Silence will be embraced and understood for the learning that is sparked through reflecting (Palmer, 2007).

Extenuating Factors Affecting Learning Process.

In developing any faculty development workshop it is important to be aware of extenuating factors that could potentially enhance or impede its implementation. In fact, some of these factors could have an impact on participants' engagement and learning in the workshop. Jillings (2007) identifies six contexts barriers within nursing education: institutional, curricular, instructional, learner-related, faculty-related, and nursing-related. Even though the factors or issues identified pertain to student centered they are applicable to my faculty development workshop on strengths-based teaching and learning which is student centered.

However, Saroyan et al. (2004a) discuss assumptions that faculty bring to the workshop and the institutional context. One factor that Saroyan et al. (2004a) identify is the assumptions educators' have about their role as a teacher, the teaching and learning environment and the institutional context. If an educator has limited understanding of the role of the teacher or learners it may be difficult to for them to consider any other approach to their teaching and learning practice. For example, if the educator believes there role is a content specialist then they may be more comfortable with a didactic approach to teaching. Therefore, they may not be as receptive to an approach like strengths-based that requires shared knowledge and learning and possibilities (Saroyan et al., 2004a). However, there may be faculty who are naysayers and do not agree with the strengths-based approach, and consider individuals who talk about possibility as dreamers or Pollyanna in a glass half-full analogy (Zander & Zander, 2000). In turn, affecting faculty understanding or implementing a strengths-based approach in their practice.

Institutional context. Another factor identified by Saroyan et al. (2004a) is application of skills learned in skills based workshops. Faculty will not put new skills into practice if they do not see the relevance of general pedagogies to their practice and if there is no opportunity to

practice. In fact, without opportunity to practice there is no commitment to incorporate what learned in their practice. Next, the context in which faculty teaches can affect the weight these accomplishments are given by the institution when evaluating academic performance; and the recognition or reward for teaching development. Also, faculty may feel that adopting an innovative approaches to their teaching may be met with resistance or negatively from students and peers, and affect promotions and tenure (Entwistle, Entwistle, & Tait, 1993). However, in some universities an alternative approach such as strengths-based may not be synonymous with teaching at the university (Jillings, 2007). Moreover, Jillings (2007) identifies there may not be resources available and made accessible or mandatory for faculty development or opportunity to discuss or debate other “educational values, orientation and strategies” (p. 471). Without curriculum support or role modeling, and mentoring faculty may resort to traditional teaching methods instead of embracing a more innovative approach. Furthermore, time restraints or energy may prevent faculty from participating in the faculty development (Jillings, 2007).

Curricular context. The curriculum can have an impact on the implementation of a new approach such as strengths-based. The curriculum provides a blueprint for teaching and learning. Each aspect of the curriculum has the potential to dictate the strategies for promoting teaching and learning. In turn, has the potential for educators to focus more on content at the extent of excluding application, understanding, and mastery (Jillings, 2007). Furthermore, time and resources and increase enrollments due to nursing shortage may perpetuate the need to graduate students rapidly at the expense of developing and engaging students as learners. Therefore, educators need to be aware of the specific aspects of the curriculum and how it may impact implementing a strengths-based approach, so that they can develop strategies to respond. It will be important for educators to be intentional that teaching and learning are part of curriculum

discussion so that strengths-based is explored concurrently with selection content and design of learning experiences (Jillings, 2007).

Instructional and learner-related context. According to Jillings (2007) the instructional and learner context can also impact embracing a new approach. This can include content, context of practice and resources such as setting, teacher/student ratios, and teaching/learning technologies. Classroom environments that are crowded can impede small group. Technological limitations in the classroom may prevent repetition or individual searching. Increasing teacher/student ratio can impact faculty knowing the students by name, therefore impacting building a relationship and a learning community. In addition, large numbers of students challenge faculty's ability to enact teaching approaches that are more interactive and authentic. A limitation of resource within the educational setting affects the ability to introduce change and creation of an environment conducive to strengths-based approach. The uptake of a strengths-based approach may be contingent on faculty's familiarity with and ability to embrace the approach. Factors from the learner's contexts also need to be considered. This can consist of cultural diversity, learning style, and socialization into the nursing profession (Jillings, 2007). Therefore, as an educator I need to be aware and sensitive to all these factors and the complexities of learning.

Faculty-related context. The environment where the workshop is implemented can also impact implementation. Environments that are not appreciative of the time and complexity involved usually do not provide support or incentive to engage in faculty development and leave faculty feeling unappreciated (Saroyan et al., 2004a). Faculty who do engage in faculty development usually do so because of the rewards they see in their students and the opportunity to discuss teaching related issues with colleagues who are like-minded (Amundsen, Saroyan &

Frankman, 1996). Jillings (2007) found faculty's understanding and perspective on their philosophy of teaching is crucial to adopting or enhancing a strengths-based practice. In fact, often educators enter academia without previous opportunity or time to reflect on their values and beliefs in relationship to their teaching and learning practice. Faculty's ability to adopt a new approach like strengths-based might be overshadowed by their obligations to prepare students for safe practice and lack of time for learning. However, Norton (1998) found inexperience, personal attributes, and difficulty understanding students knowledge and skills as constraints to achieving outcomes. Moreover, other challenges can be feeling vulnerable to judgement from peers and students, feeling isolated, and feeling overworked (Aaronsohn, 1996; Lang, McBeath, & Hebert, 1995).

Nursing-related context. In nursing education, the nursing standards and competencies can potential drive the content delivered, the learning experiences as well as outcomes of the nursing program. In turn, educators are compelled to structure the teaching and learning around the concepts and skills which is more teacher-driven than student-centered. Professional regulatory bodies can also create barriers with criteria, standards and entry-level competencies that can dictate the core knowledge and skills and lead faculty to structure the content and learning experiences according to the imposed standards (Jillings, 2007). This could impact implementation as educators are feeling compelled to fit in the competencies and skills thereby impacting the desire to implement learner focused teaching and learning strategies.

There would be a strong awareness regarding these factors so that there impact is enhanced on implementation and potential to adopt this approach in nursing education. For example, if there is a faculty member in teaching and learning who supports this workshop their knowledge and support is critical in other words INPUT. If time and resources to participate are

a concern the workshop can be modified so it is not too long for faculty to attend. In addition, the follow-up session will be flexible enough to support learners to attend and continue the conversation on strengths-based for 11 weeks and create a community of learners. If these factors cannot change the program can be modified to enhance conversation making it applicable. Zander and Zander (2000) expressed that speaking in possibilities “springs from the appreciation that what we say is our reality; how we define things sets a framework for life to unfold” (p. 110). There will be a need to continue to expand and start from *what is* not what *should be*; acknowledge and be with my feelings and learn to take a macro view; “soar, like the far-seeing hawk, over the whole landscape”; and allow myself to be in a place of openness, where “the truth readies us for the next step, and the sky opens up” (Zander & Zander, 2000, p. 111).

Evaluation

“If you’re not learning when you’re teaching, you’re not teaching!”

--Frank McCourt

To understand whether the workshop is effective both the workshop and learners will need to be evaluated. Evaluating the workshop and the follow-up sessions is essential to ensure that it is achieving its goals, and meeting the needs of the learners, and to improve effectiveness (Young, Maxwell, Paterson & Wolff, 2007). In this section I outline potential and appropriate strategies for evaluating both the workshop and the learners. Altogether, to increase the rate of completion, the questions identified from both the learners and the workshop and follow-up sessions can be combined into one evaluation tool.

Learner Self-Assessments

Participants will engage in self-assessments (see Appendix L) at two time points that provide the learners information on their current teaching practice and strengths-based practice:

(1) prior to attending the workshop and (2) after the 11-week follow-up sessions. Prior to attending the workshop, each participant will complete two tools. One-tool measures participants' personal perspective on strengths-based practice (Hammond & Zimmerman, 2012), using a 4-point scale with responses rated from 'always like me', 'somewhat like me, rarely like me and 'not at all like me'. The second tool is some reflective self-assessment questions, including several adapted from Jacoby (2014) that ask participants about teaching practice. At the end of the 11-week follow-up sessions each participant will also be invited to redo the self-assessments done prior to attending the workshop. Revisiting the strengths-based self-survey and the reflective self-assessment will provide learners an opportunity to see if there is any change in their understanding of strengths-based and in their teaching and learning.

Workshop and Follow-Up Session Evaluations

Learners. Learners will be invited to complete a survey after the workshop and the follow-up sessions (see Appendix M). Survey questions include items that evaluate what the participants potentially learned. Furthermore, an informal evaluation can also be obtained through observing the groups during the variety of learning activities and through the discussions. Learners will also be asked to evaluate the facilitator, which provides information to assist in my growth as an educator.

Facilitator. As a co-learner in the workshop, it is important to also evaluate my own learning in the process. At the end of the workshop I will participant in a formative evaluation using self-reflection questions from Gottlieb (2013a) for my own development as an educator practicing from a strengths-based pedagogy in my teaching and learning practice.

Workshop structure. Questions will also assess whether the workshop met learners' expectations and the goals of the workshop. Finally, informal information can be obtained

through observing learners' engaging in the activities, the questions they ask, and discussions which can provided further information on whether the workshop is effective and meeting the needs of the learners. For example, if learners are consistently asking questions for clarification about the activities or discussions while engaging in them it may indicate the activities are not meeting their needs, and instructions are not clear enough and confusing thereby unable to participate effectively.

Opportunity for Research

As part of my effort to have this workshop used in the BN program with educators it will need to have an outcome-based evaluation done. I believe that this can be evaluated as a pilot that examines whether exploring a strengths-based changes faculty's teaching and learning practice to provide more opportunity for possibilities. My vision is that the pilot would be a mixed method using pre-test/post test design where faculty are asked to do a resiliency/strengths-based survey before workshop, after the 11-week follow-up sessions, and potentially at six months. This would link resiliency and strengths-based and provide information on whether the learner's resiliency was increased over time and also their level of understanding and use of strengths-based approach in their practice. Including qualitative data would enrich the results, as it would describe and give meaning to the use of strengths-based approach by faculty in their practice. This vision is beyond the scope of this project but if it were to go to fruition it would need approval by the university and a full proposal. I believe that this workshop would potentially open the door of possibilities to enhance how educators teach and learn and how students learn and succeed in nursing education.

Future Steps

I believe that with the current situation in health care and nursing education, the time is right for exploring a strengths-based approach. Both educators and students need a new template in which to look at their situation that would change their story from one of challenges and deficits to one of possibility. As an educator, working in higher education I am in a prime position to accelerate this project to fruition. There is potential for this workshop to be piloted in the university where I work. Before it can be piloted support will need to be sought from the faculty of nursing and the teaching and learning department. In addition, it would be important to plant the seed about strengths-based with colleagues within the university to gather support and stimulate interest in this approach and its potential use in nursing education. This project also has potential to expand to educating students about strengths-based approach. For example: in a beginning clinical BN course.

In designing the research project for the pilot I will keep in mind the possibility of publishing this work so that others can gain knowledge in how to use strengths-based in their practice to improve their resilience and relationship with BN students. It is only through disseminating the information can the seed be planted for the possibility of using a strengths-based approach in nursing education.

Conclusion

Educators play an important role in students learning and success in nursing education. However, if educating students is such a privilege why is it that educators do not think of it that way? Deficit thinking has dominated health care and nursing education. However, using a strengths-based approach in nursing education provides educators the opportunity to move beyond deficits to the strengths that their students and themselves possess. Using relational

inquiry tools, educators learning experiences are explored within the interpersonal, intrapersonal, and contextual domains. This opens up the possibility to explore their strengths, the influences that are impacting their relationship with students and their teaching and learning and *how* this approach can be used in their practice. Informing educators about the 5 C's or ways-of-being may provide insight into how these values can open the possibilities for enhancing the student/teacher relationship and students academic success. Understanding both the influences impacting their practice and the values can restore educators hope that things can be different; empower them to take control of their teaching and learning practice and help them discover the inner resources and strengths that may have been unknown; and increase educators confidence and belief in who they are as a educator (Gottlieb, 2014). In turn, educators have the opportunity to revise the story of their teaching and learning to one of possibility. Possibility provides educators the opportunity to consciously create spaces for conversations that talk about dreams, aspirations and being, and a life of possibility; restructures their meaning of teaching and learning from one of deficits and challenges to opportunity and potential; and creates a vision of what their teaching would look like with a strengths-based approach. Strengths-based is a powerful philosophy for practice that has the power to change the lives of students and educators for the better. This workshop is the starting point in opening the door to changing educators' perspective of students to one of privilege and possibility.

References

- Aaronsohn, E. (1996). *Going against the grain: Supporting the student-centered teacher*. Thousand Oaks, CA: Corwin.
- Ali, N., Hodson-Carlton, K., Ryan, M., 2004. Students' perceptions of online learning: implications for teaching. *Nurse Educator* 29 (3), 111–115.
- Allen, S. (2010). The revolution of nursing pedagogy: A transformational process. *Teaching and Learning in Nursing*, 5(1), 33-38. doi:10.1016/j.teln.2009.07.001
- Amundsen, C. Saroyan, A. & Frankman, M. (1996). Changing methods and metaphors: A case study of growth in university teaching. *Journal of Excellence in College Teaching*, 7 (3), 3-42.
- Amundsen, C., Winer, L., & Gandell, T. (2004). Designing teaching for student learning. In Saroyan & C. Amundsen (Eds.), *Rethinking teaching in higher education*. (pp. 71-94). Sterling, Virginia: Stylus Publishing
- Anderson, E.C. (2004). *What is strength-based education: A tentative answer by someone who strives to be a strengths-based educator*. Unpublished manuscript. Retrieved from <http://strengths.uark.edu/WhatisStrengths-BasedEducation.pdf>
- Bandura, (1986). *Social foundations of thought and action: A social cognitive theory*. Englewood Cliffs, NJ: Prentice-Hall
- Barnett, R. (2004). Learning for an unknown future. *Higher Education Research & Development*, 23(3), 247-260. doi:10.1080/0729436042000235382
- Barnett, R. (2012). Learning for an unknown future. *Higher Education Research & Development*, 31 (1), 65-77.
- Baer, R. A. (2003). Mindfulness training as a clinical intervention: A conceptual and empirical Review. *Clinical Psychology: Science and Practice*, 10 (2), 125-143

- Baumberger-Henry, M. (2003). Practicing the art of nursing through student-designed continuing case study and cooperative learning. *Nurse Educator*, 28, 191-195.
- Belenky, M. F., Clinchy, B. M., Goldberger, N. R., & Tarule, J. M. (1997). *Woman's way of Knowing: The development of self, voice, and mind*. New York, NY: Basic Books.
- Benner, P., Hooper-Kyriakidis, P., & Stannard, D. (2011). *Clinical wisdom and interventions in acute and critical care: A thinking-in-action approach*. New York, NY: Springer.
- Benner, P., Sutphen, M., Leonard, V., & Day, L. (2010). *Educating nurses: A call for radical transformation*. San Francisco, CA: Jossey-Bass.
- Bernard, B. (1997). Turning it around for all youth: From risks to resilience. *Eric Digest*. 126.
Retrieved from <http://files.eric.ed.gov/fulltext/ED412309.pdf>
- Biggs, J. B., & Tang, C. S. (2007). *Teaching for quality learning at university: What the student does* (3rd / John Biggs and Catherine Tang. ed.). Maidenhead: McGraw-Hill/Society for Research into Higher Education.
- Bonwell, C.C., & Eison, J.A. (1991). Active learning: Creating excitement in the classroom. *ASHE-ERIC Higher Education Report*, 1. Washington, D.C.: George Washington University. Retrieved from
<http://files.eric.ed.gov/fulltext/ED336049.pdf>
- Brandon, A., & All, A. (2010). Constructivism theory analysis and application to curricula. *Nursing Education Perspectives*, 31, 89-92.
- Brooks, J. & Brooks, M. (1993). *In search of understanding: The case for constructivist classrooms*. Alexandria, Virginia: ASCD.
- Brooks, J.G. & Brooks, M.G. (1999). *In search of understanding: The case for constructivist*

- classrooms*, Alexandria, Virginia: ASCD.
- Brown, D. (1996, September). Kids, computers and constructivism. *Journal of Instructional Psychology* [H.W. Wilson], 23 (3), 189- 196
- Brown, M. (2005). Learning spaces. In D.E. Oblinger & J. L. Oblinger (Eds), *Educating the net generation*. (pp.12.1-12.22). Retrieved from <https://net.educause.edu/ir/library/pdf/pub7101.pdf>
- Brown, H., & Hartrick Doane, G. (2007). From filling a bucket to lighting a fire: Aligning nursing education and nursing practice. In L. E. Young & B. Paterson (Eds.), *Teaching nursing: Developing a student-centered learning environment* (pp. 97-118). New York: Lippincott Williams & Wilkins.
- Canadian Association of Schools of Nursing (CASN). (2010). *The case for healthier Canadians: Nursing workforce education for the 21st century*. Retrieved from http://www.casn.ca/en/Whats_new_at_CASN_108/items/82.html
- Candela, L. (2011). Taxonomies and critical thinking in curriculum design. In S.B. Keating (Ed), *Curriculum Development and Evaluation in Nursing* (pp. 71-86). New York: Springer Publishing Company.
- Candy, P. (1991). *Self-direction for life-long learning*. San Francisco: Jossey-Bass.
- Caputi, L. (2005). Teaching in the classroom. In L. Caputi & L. Engelmann (Eds.), *Teaching nursing: The art and science* (pp. 38-58). Glen Ellyn, IL: College of DuPage Press.
- Carper, B. A. (1978). Fundamental patterns of knowing in nursing. *Advances in Nursing Science*, 1(1), 13-23.
- Cederbaum, J., & Klusaritz, H. A. (2009). Clinical instruction: Using the strengths-based approach with nursing students. *The Journal of Nursing Education*, 48(8), 422
- Cook, L. J. (2005). Inviting teaching behaviors of clinical faculty and nursing students' anxiety.

- The Journal of Nursing Education*, 44(4), 156.
- Dall’Alba, G. (2004). Understanding professional practice: investigations before and after an educational programme, *Studies in Higher Education*, 29(6), 679–692.
- Dall’Alba, G. (2005). Improving teaching: enhancing ways of being university teachers, *Higher Education Research and Development*, 24(4), 361–372.
- Dall’Alba, G. & Barnacle, R. (2007). An ontological turn for higher education'. *Studies in Higher Education*, 32:6, 679- 691.
- Davies, M. (2011). Concept mapping, mind mapping and argument mapping: What are the differences and do they matter? *Higher Education*, 62(3), 279-301.
doi:10.1007/s10734-010-9387-6
- DalPezzo, N. K., & Jett, K. T. (2010). Nursing faculty: A vulnerable population. *The Journal of Nursing Education*, 49(3), 132-136. doi:10.3928/01484834-20090915-04
- Del Prato, D., Bankert, E., Grust, P., & Joseph, J. (2011). Transforming nursing education: A review of stressors and strategies that support students' professional socialization. *Advances in Medical Education and Practice*, 2011, 109-116.
- Dewey, J. (1938). *Logic: The theory of inquiry*. New York: Holt Rinehart & Winston.
- Diekelmann, N.L. (2002). “Too much content...” Epistemologies’ grasp and nursing education. *Journal of Nursing Education*. 41 (11). 469-470.
- Diekelmann, N.L., Ironside, P.M., & Gunn, J. (2005). Recalling the curriculum revolution. *Nursing Education Perspectives*, 26, 70-77.
- Doane, G & Brown, H. (2011). Recontextualizing learning in nursing education: taking an ontological turn. *Journal of Nursing Education*, 50(1), 21-26.

- Drummond-Young, M., Brown, B., Noesgaard, C., Lunny-Child, O., Maich, N. M., Mines, C., & Linton, J. (2010). A comprehensive faculty development model for nursing education. *Journal of Professional Nursing*, 26(3), 152-161. doi:10.1016/j.profnurs.2009.04.004
- Educational Broadcasting Corporation (EBC). (2004). *Workshop: Constructivism as a paradigm for teaching and learning*. Retrieved from <http://www.thirteen.org/edonline/concept2class/constructivism/>
- Edwards, D., Burnard, P., Bennett, K., & Hebden, U. (2010). A longitudinal study of stress and self-esteem in student nurses. *Nurse Education Today*, 30(1), 78-84. doi:10.1016/j.nedt.2009.06.008
- Entwistle, N., Entwistle, A., & Tait, H. (1993). Academic understanding and contexts to enhance it: A perspective from research on student learning. In T.M. Duffy, J. Lowyck & D. Jonassen (Eds.), *Designing environments for constructive learning* (pp. 331-357). Berlin: Springer-Verlag.
- Feeley, N. & Gottlieb, L.N. (2000). Nursing approaches for working with family strengths and Resources. *Journal of family nursing*. 6(1), 9-24. doi:10.1177/107484070000600102
- Fink, D.L. (2003). What is significant learning. Retrieved from http://www.wcu.edu/WebFiles/PDFs/facultycenter_SignificantLearning.pdf
- Fink, D.L. (2007). The power of course design to increase student engagement and learning. *Peer Review: Emerging Trends and Key Debates In Undergraduate Education*, 9(1), 13-17.
- Fink, D. L. (2013). *Creating significant learning experiences: An integrated approach to designing college courses*. San Francisco: Jossey-Bass
- Flaming, D. (2004). Nursing theories as nursing ontologies. *Nursing Philosophy*, 5, 224-229.

- Freire, P. (2007). *Pedagogy of the oppressed*. New York: The Continuum International Publishing Group.
- Gaberson, K., Oermann, M.H. & Schellenberger, T. (2015). *Clinical teaching strategies in nursing education*. New York: Springer Publishing Company
- Gibbons, C. (2010). Stress, coping and burnout in nursing students. *International Journal of Nursing Studies*, 47 (10), 1299-1309
- Gottlieb, L. (2013a). Instructor's self-reflective questions. In Gottlieb, L.N. & Gottlieb, B. *Strengths-Based teaching and learning: An instructor's manual*. (pp. 1-3). New York: Springer Publishing Co.
- Gottlieb, L. N. (2013b). Philosophy and underlying values of strengths-based teaching and learning. In Gottlieb, L.N. & Gottlieb, B. *Strengths-Based teaching and learning: An instructor's manual*. (pp. 1-3). New York: Springer Publishing Co.
- Gottlieb, L. N. (2013c). *Strengths-Based Nursing Care: Health and Healing for Person and Family*. New York: Springer Publishing
- Gottlieb, L.N. (2013d). Values Underlying Strengths-Based Teaching and Learning. (Unpublished Manuscript)
- Gottlieb, L. N. (2014). Strengths-based nursing. *The American Journal of Nursing*, 114 (8), 24-32.
- Gottlieb, L.N. & Benner, P. (2013). *Strengths-based nursing: Moving beyond deficits in nursing practice and nursing education*. Retrieved from <http://www.educatingnurses.com/news/articles/>
- Gottlieb, L. N., & Feeley, N. (with C. Dalton) (2006). *The collaborative partnership approach to care: A delicate balance*. Toronto, Ontario: Elsevier/Mosby.

Gottlieb, L.N.& Gottlieb, B. (2013a). Introduction. In Gottlieb, L.N. & Gottlieb, B. *Strengths-Based teaching and learning: An instructor's manual*. New York: Springer Publishing Co.

Gottlieb, L.N.& Gottlieb, B. (2013b). *Strengths-Based teaching and learning: An instructor's manual*. New York: Springer Publishing Co.

Gottlieb, L.N. & Wright, D. (2013). Instructors/educators role in strengths-based teaching and learning. In Gottlieb, L.N. & Gottlieb, B. *Strengths-Based teaching and learning: An instructor's manual*. (pp. 4-5). New York: Springer Publishing Co.

Greeno, J. (2006). Learning in activity. In R. Sawyer (Ed.), *The Cambridge handbook of the learning sciences* (pp. 79-96). New York, NY: Cambridge University Press.

Gros, C. & Gottlieb, L.N. (2013). Guidelines for providing feedback. In Gottlieb, L.N. & Gottlieb, B. *Strengths-Based teaching and learning: An instructor's manual*. (pp. 6-9). New York: Springer Publishing Co.

Grossman, P., Niemann, L., Schmidt, S., & Walach, H. (2004). Mindfulness-based stress Reduction and health benefits: A meta analysis. *Journal of Psychosomatic Research*, 57 (1), 35-43.

Gynnhild , V., Holstad, A., Myrhaug, D. (2007). Teaching as coaching. A case study of awareness and learning in engineering education. *International Journal of Science Education* 29(1), 1 - 17

Hammond, W. (2013, January). *Mapping a pathway for embedding a strengths-based approach in Public Health*. Retrieved from <http://www.oxfordcounty.ca/Portals/15/Documents/Public%20Health/Partners%20and%20Professionals/Reports%20and%20Publications/Final%20Report%20Mapping%20A%20Pathway%20For%20A%20Strengths%20Based%20Approach%20In%20Public%20Health>

[h%20Practice.pdf](#)

Hammond, W., & Zimmerman (2012). A Strength's-Based Perspective. Retrieved from

[http://www.resiliencyinitiatives.ca/cms/wp-](http://www.resiliencyinitiatives.ca/cms/wp-content/uploads/2013/03/STRENGTH_BASED_PERSPECTIVE-Dec-10-2012.pdf)

[content/uploads/2013/03/STRENGTH_BASED_PERSPECTIVE-Dec-10-2012.pdf](http://www.resiliencyinitiatives.ca/cms/wp-content/uploads/2013/03/STRENGTH_BASED_PERSPECTIVE-Dec-10-2012.pdf)

Hartrick Doane, G., & Varcoe, C. (2005). *Family nursing as relational inquiry: Developing health promoting practice*. Philadelphia: Lippincott Williams & Wilkins.

Hartrick Doane, G., & Varcoe, C. (2015). *How to nurse: Relational inquiry with individuals and families in changing health and health care contexts*. Philadelphia, PA: Lippincott, Williams & Wilkins.

Hick, S. F. (2008). Cultivating therapeutic relationships: The role of mindfulness. In S.F.

Hick & T. Bien (Eds), *Mindfulness and the therapeutic relationship* (pp. 3-17). New

York, NY: Guilford Press.

Hirst, S., Lane A., & Le Navenec, C.L. (2011, March 28) Strength-based approached for mental wellness in seniors and adults with disabilities. Retrieved from

http://www.mentalhealthresearch.ca/KeyInitiatives/ResearchGrants/Seniors_PwD/Documents/A%20Strength-Based%20Approach%20Rev%20March%2028%202011.pdf

Hodges, H. F., Keeley, A. C., & Grier, E. C. (2005). Professional resilience, practice longevity, and parse's theory for baccalaureate education. *Journal of Nursing Education*, 44(12), 548-554.

Hodges, H. F., Keeley, A. C., & Troyan, P. J. (2008). Professional resilience in baccalaureate-prepared acute care nurses: First steps. *Nursing Education Perspectives*, 29(2), 80

Hoover, W.A. (1996, August). The practice implications of constructivism. *SEDL Letter*, 9(3).

Retrieved from www.sedl.org/pubs/sedletter/v09n03/practice.html

- Horton-Deutsch, S. & Drew, B. L. (2102). Mindful learners. In *Reflective practice: Transforming education and improving outcomes* (pp. 79-99). Indianapolis, IN: Sigma Theta Tau International
- Ironside, P. M. (2001). Creating a research base for nursing education: An interpretive review of conventional, critical, feminist, postmodern, and phenomenological pedagogies. *ANS. Advances in Nursing Science*, 23(3), 72
- Jacoby, B. (2014, Oct. 7). *Teaching non-traditional students: An asset-based approach*. Magna Online Seminars. Retrieved from <http://www.magnapubs.com/online-seminars/teaching-non-traditional-students-an-asset-based-approach-11963-1.html>
- Jerlock, M., Falk, K., & Severinsson, E. (2003). Academic nursing education guidelines: Tools for bridging the gap between theory, research and practice. *Nursing and Health Sciences* , 5, 219-228.
- Jillings, C. (2007). Barriers to student-centered teaching: Overcoming institutional and attitudinal obstacles. In L. E. Young & B. Paterson (Eds.), *Teaching nursing: Developing a student-centered learning environment* (pp. 467-484). New York: Lippincott Williams & Wilkins.
- Johns, C. (1995). Framing learning through reflection within Carpers fundamental ways of knowing in nursing. *Journal of Advanced Nursing*, 22 (2), 226-234.
- Jonassen, D.H. (1996). *Computers in the classroom: Mindtools for critical thinking*. New York: Merrill.
- Joyce, M.A. (2004). *The strengths perspective: Relevance and application to mental health nursing and crisis resolution work*. Unpublished master's thesis, Victoria University of Wellington, New Zealand. Retrieved from <http://researcharchive.vuw.ac.nz/xmlui/handle/10063/28>

- Kabat-Zinn, J. (1990). *Full catastrophe living: Using the wisdom of your body and mind to face Stress, pain, and illness*. New York, NY: Hyperion
- Kafai, Y. (2006). Constructionism. In R. Sawyer (Ed.), *The Cambridge handbook of the learning sciences* (pp. 35-46). New York, NY: Cambridge University Press.
- Kala, S., Isaramalai, S., & Pohthong, A. (2010). Electronic learning and constructivism: A model for nursing education. *Nurse Education Today*, 30(1), 61-66.
doi:10.1016/j.nedt.2009.06.002
- Kalkbrenner, A. C., & Brandt, P. A. (2012). Coaching strategies for clinical learning: A strengths-based approach to student development. *Nurse Educator*, 37(5), 185-186.
doi:10.1097/NNE.0b013e318262ab8a
- Kelsey, K., 2007. Constructivism: strength and weakness. Retrieved from <http://adulthoodeducation.wikibook.us/index.php?title=Constructivism>
- Kim, H.S. (1999). Critical reflective inquiry for knowledge development in nursing Practice. *Journal of Advanced Nursing*, 29 (5), p. 1205-1212.
- Kitchie, S. (2014). Determinants of learning. In *Nurse as educator: Principles of teaching and learning for nursing practice*. (pp. 113-163). Burlington, MA: Jones & Bartlett Learning
- Koerner, J. G. (2003). The virtues of the virtual world: Enhancing the technology/knowledge professional interface for life-long learning. *Nursing Administration Quarterly*, 27, 9-17.
- Lang, H. R., McBeath, A., & Hebert, J. (1995). *The learner-centered classroom and school: Strategies for increasing student motivation and achievement*. San Francisco: Jossey-Bass.
- Lepp, M., Zorn, C. R., Duffy, P. R., & Dickson, R. J. (2003). International education and

- reflection: Transition of Swedish and American nursing students to authenticity. *Journal of Professional Nursing*. 19, 164-172.
- Lindop, E., 1999. A comparative study of stress between pre- and post-Project 2000 students. *Journal of Advanced Nursing*. 29 (4), 907-973.
- Lombard, K. & Horton-Deutsch, S. (2102). Creating spaces for reflection: The importance of presence in the teaching and learning process. In *Reflective practice: Transforming education and improving outcomes* (pp. 43-61). Indianapolis, IN: Sigma Theta Tau International
- Lopez, S. J., & Louis, M. C. (2009). The principles of strengths-based education. *Journal of College and Character*, 10 (4). DOI: 10.2202/1940-1639.1041. Retrieved from <http://www.tandfonline.com/doi/abs/10.2202/1940-1639.1041>
- Louis, M. C. (2008). *A comparative analysis of the effectiveness of strengths-based curricula in promoting first-year college student success*. Dissertation abstract International 69(06A). (UMI No. AAT 3321378).
- Lowe, R. & Deal, R. (2014). *A vision for supervision*. BENDIGO, Victoria: St Luke's Innovative resources.
- MacIntosh, J., MacKay, E., Mallet-Boucher, M., & Wiggins, (2002). Discovering co-learning with students in distance education sites. *Nurse Educator*, 27, 182-186.
- Marchiondo, K., Marchiondo, L., & Lasiter, S. (2010). Faculty incivility: Effects on program satisfaction. *Journal of Nursing Education*. 49 (11), 608-614.
- Madsen, W. C. (1999). Collaborative therapy with multi-stressed families: From old problems to new futures. Guilford Press, USA.
- Maor, D. (1999, August). Teachers-as-learners: The role of a multimedia professional development program in changing classroom practice. *Australian Science Teachers*

- Journal*, 45 (3), 45- 51.
- McAllister, M. (2003). Doing practice differently: Solution focused nursing. *Journal of Advance Nursing*, 41(6), 528-535. doi:10.1046/j.1365-2648.2003.02564.x
- McAllister, M. (2013). Resilience: A personal attribute, social process and key professional resource for the enhancement of nursing role. *Professional Infermeiristiche*. 66: 55-62.
- McCashen, W. (2010) *The Strengths Approach*. Victoria: St. Luke's Innovative Resources
- McGrary, D., Deal, R., & Masman, K. (2014). Life Tweaking: Questions for coaching, mentoring and inviting change. BENDIGO, Victoria: St Luke's Innovative Resources
- McLean, G. (2013). Reminders to self: Note to self. BENDIGO, Victoria: St Luke's Innovative Resources
- Morris D., & Turnbull, P. (2004). Using student nurses as teachers in inquiry based Learning. *Journal of Advanced Nursing*. 45, 136-144
- Mueller, C.M., & Dweck, c. S. (1998). Intelligence praise can undermine motivation and performance. *Journal of Personality and Social Psychology*, 75, 33-52.m
- Muirhead, B. (2006). Creating concepts maps: Integrating constructivism principles into online classes. *International Journal of Instructional Technology& Distance learning*, 3(1), 17-30. Retrieved from http://www.itdl.org/Journal/jan_06/article02.htm
- Nissen, L. B., Mackin, J. R., Weller, J. M. & Tarte, J. M. (2005). Identifying strengths as fuel for change: A conceptual and theoretical framework for the youth competency assessment. *Juvenile and Family Court Journal*, 1-15.
- Norton, B. (1998). Selecting learning experiences to achieve curriculum outcomes. In D. M. Billings & J. A. Halstead, *Teaching in nursing: A guide for faculty*. (pp. 151-169). Toronto: Saunders.

- Nyback, M. (2013). *A constructivist approach to teaching and learning at the Degree Programme in Nursing at Novia University of Applied Sciences*. Yrkeshögskolan Novia. Retrieved from <https://www.novia.fi/dmsdocument/29>
- Oermann, M.H. (2007). Lectures for active learning in nursing education. In *Teaching nursing developing a student-centered learning environment* (pp.279-294). Philadelphia, PA:Lippincott Williams & Wilkins.
- O'Donnell, A. M. (1997). Constructivism by design and in practice: a review. *Issues in Education*, 3 (2), 285-294.
- O'Haver Day, P. & McNelis, A. M. (2102). The mindful educator. In *Reflective practice: Transforming education and improving outcomes* (pp. 63-77). Indianapolis, IN: SigmaTheta Tau International
- O'Shea, E. (2003). Self-directed learning in nursing education: A review of the literature. *Journal of Advanced Nursing*. 42, 62-70.
- Palmer, P. J. (2007). *The courage to teach: Exploring the inner landscape of a teacher's life* (10th anniversary ed.). San Francisco, Calif: Jossey-Bass.
- Rapp, C. & Goscha, R. J. (2006). *The Strengths Model: Case Management with People Suffering Severe and Persistent Mental Illness* (2nd ed.). New York: Oxford Press.
- Reeve, K. L., Shumaker, C. J., Yearwood, E. L., Crowell, N. A., & Riley, J. B. (2013). Perceived stress and social support in undergraduate nursing students' educational experiences. *Nurse Education Today*, 33(4), 419. doi:10.1016/j.nedt.2012.11.009
- Richardson, V. (1997). Constructivist teaching and teacher education. In V. Richardson (Ed). *Constructivist teacher education* (pp. 3-14). London: Routledge Falmer
- Rodgers, B. (2005). *Developing nursing knowledge: Philosophical traditions and Influences*. Philadelphia: Lippincott Williams & Wilkins

- Saleebey, D. (1996). The strengths perspective in social work practice: Extensions and cautions. *Social Work*, 42 (3), 296-305.
- Saleebey, D. (2002). *The strengths perspective in social work practice* (3rd ed). Boston: Allyn & Bacon.
- Saroyan, A., Amundsen, C., McAlpine, L., Weston, C. Winer, L. & Gandell, L. (2004a). Assumptions underlying workshop activities. In A. Saroyan & C. Amundsen (Eds.), *Rethinking teaching in higher education*. (pp.15- 32). Sterling, Virginia: Stylus Publishing
- Saroyan, A., Weston, C., McAlpine, L., & Cowan, S. (2004b). The final step: Evaluation of teaching. In A. Saroyan & C. Amundsen (Eds.), *Rethinking teaching in higher education*. (pp. 115-130). Sterling, Virginia: Stylus Publishing
- Savery, J. & Duffy, T. (1995). Problem –based learning: An instructional model and its constructivist frame work. *Educational Technology*, 35, 31-38.
- Sherwood, G. D. & Horton-Deustch, S. (2012). Turning vision into action: Reflection to build a spirit of inquiry. In *Reflective practice: Transforming education and improving outcomes* (pp. 3-19). Indianapolis, IN: Sigma Theta Tau International
- Shirey, M. R. (2006). Stress and burnout in nursing faculty. *Nurse Educator*, 31(3), 95-97.
doi:10.1097/00006223-200605000-00002
- Splitter, L. (2009). Authenticity and Constructivism in Education. *Studies in Philosophy and Education*. 28 (2), 135-151.
- Strommen, E. F., & Lincoln, B. (1992, August). Constructivism, technology and the future of classroom learning. *Education & Urban Society*, 24 (4), 466-477.
- Tanner, C. (2006). Thinking like a nurse: A research-based model of clinical judgment in nursing. *Journal of Nursing Education*, 45(6), 204-211.

- Thomson, I. (2001). Heidegger ontological education, or: How we become what we are. *Inquiry*, 44, 243-268.
- Trungpa, C. (2008). *True perceptions: The path of dharma art*. Boston, MA: Shambhala
- Weimer, M. (2002). Lessons on learning. In *Learner-centered teaching*. (pp. 1-10). San Francisco: Jossey-Bass
- Weimer, M. (2015, June 24). The power of language to influence thought and action. *Faculty Focus*. Retrieved from <http://www.facultyfocus.com/articles/teaching-professor-blog/the-power-of-language-to-influence-thought-and-action/>
- Whitehead, A. N. (1929). *The aims of education*. New York, NY: MacMillan.
- Williams, B & Day, R. A. (2007). Context-based learning. In *Teaching nursing developing a student-centered learning environment* (pp.221- 241). Philadelphia: Lippincott Williams & Wilkins.
- Wilson, B. G. (1995). Metaphors for instruction: why we talk about learning environments. *Educational Technology*, 35 (5), 25-30. Retrieved from <http://carbon.ucdenver.edu/~bwilson/wils95>
- Young, L.E. & Maxwell, B. (2007). Student-centered teaching in nursing: From rote to active learning. In *Teaching nursing developing a student-centered learning environment* (pp.3-25). Philadelphia: Lippincott Williams & Wilkins.
- Young, L., Maxwell, B., Paterson, B.L., & Wolff, A. (2007). Decision making in nursing education: A model to support student-centered learning. In L. Young & B. Paterson (Eds.), *Teaching nursing: Developing a student-centered learning environment* (pp. 26-56). Philadelphia: Lippincott Williams & Wilkins.

Zander, R, & Zander, B. (2000). *The art of possibility: Transforming professional and personal life*. New York: Penguin Group.

Appendix A

Strength-Based and Deficit-Based Concepts: A Comparison

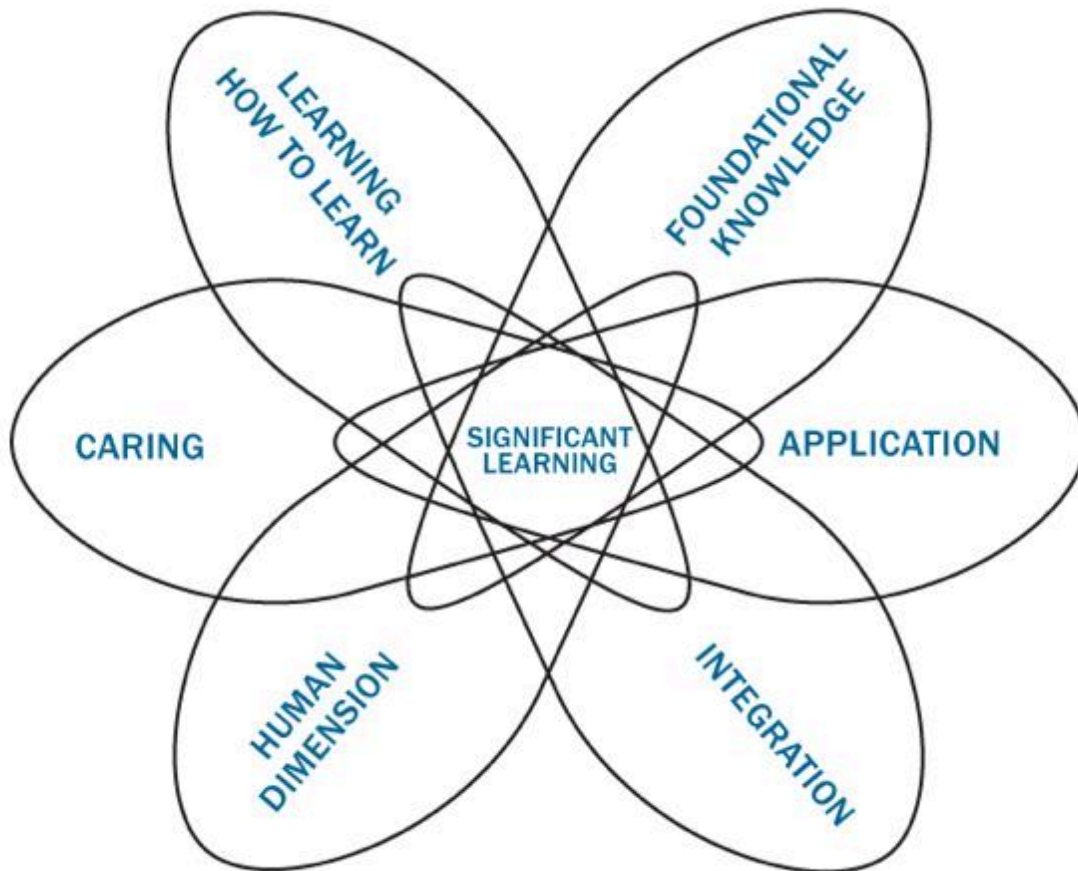
Strength-Based Concepts	Deficit-Based Concepts
At-Potential	At-Risk
Strengths	Problems
Engage	Intervene
Persistent	Resistant
Understand	Diagnose
Opportunity	Crisis
Celebrate (i.e. successes)	Punish (i.e. non-compliance)
Time-in	Time-out
Adapt to	Reform
Empower	Control
Process-focused	Behaviour-focused
Dynamic	Static
Movement	Epidemic
Unique	Deviant
Avoids imposition	Dominant knowledge
Validates people's experience	Diagnoses based on norms
People's context is primary	Professional's context is primary
Identifies and builds on strengths	Minimizes people's strengths
Client-centred	Mandate-focused
Professionals adapt to clients	Clients expected to adapt
Meet clients in their environment	Clients always go to professionals
Flexible	Rigid
Focus on potential	Focus on problems
People are inherently social/good	People are inherently selfish/bad
People do the best they can	People do as little as possible
Support	Fix
Client-determined	Expert oriented
Inclusive	Exclusive



(Hammond, 2013, p. 85)

Appendix B

Fink's Taxonomy of Significant Learning



(Fink, 2013, p. 37)

Appendix C

Workshop Outline

Title: Beyond Deficit Thinking to a Universe of Possibility			
<p>Pre assignments</p> <ul style="list-style-type: none"> • Reflective self- assessment & Strengths-based self-survey • Draft Two brief defining learning experiences from their experiences- one positive and one challenging <p>Pre –readings</p> <p>Cederbaum, J., & Klusaritz, H. A. (2009). Clinical instruction: Using the strengths-based approach with nursing students. <i>The Journal of Nursing Education</i>, 48(8), 422</p> <p>Gottlieb, L. N. (2014). Strengths-based nursing: An holistic approach to care, grounded in eight core values. <i>The American Journal of Nursing</i>, 114(8), 24-32</p>			
Workshop			
Topic	Activities	Materials	Time
1. Introduction	<p>1.1 Welcome and Checking in Introductions (<i>10minutes</i>)</p> <ul style="list-style-type: none"> • Workshop facilitator • Learners <p>Housekeeping Items</p> <ul style="list-style-type: none"> • Location of washrooms • Classroom and workshop guidelines <p>1.2 Brief introduction of mindfulness (<i>10minutes</i>)</p> <ul style="list-style-type: none"> • Mindful exercise (<i>3 minutes</i>) • Brief Discussion of experience (<i>7 minutes</i>) 	<ul style="list-style-type: none"> ✓ Name tags ✓ Pens 	20 minutes
2. Understanding strengths-based approach	<p>2.1 Exploring a strengths-based story</p> <ul style="list-style-type: none"> • Creation of a poem • Debrief poems (<i>10 minutes</i>) <p>2.2 What is strengths-based approach?</p> <ul style="list-style-type: none"> • Brainstorming • Creation of a word bank • Introduction to strengths-based principles and values (<i>30 minutes</i>) 	<ul style="list-style-type: none"> ✓ Strengths-based story ✓ Strips of Paper & pens ✓ Paper bag ✓ Flip chart & markers ✓ Glue or tape 	40 minutes

3. Understanding the influences	3.1 Examining the defining learning experiences <ul style="list-style-type: none"> • Positive learning experience • Develop word bank/repository of words or wordle <i>(30 minutes)</i>	<ul style="list-style-type: none"> ✓ Participants positive defining learning activity– ✓ Paper & pens 	30 minutes
Break (20 Minutes)			
	3.2 Examining the defining learning experiences <ul style="list-style-type: none"> • Challenging learning experience • Develop word bank/repository of words or wordle <i>(30 minutes)</i>	<ul style="list-style-type: none"> ✓ Participants Challenging defining learning experience ✓ Pen and paper 	30 minutes
4. Comparing and contrasting the learning experiences	Envisioning new learning experiences <ul style="list-style-type: none"> • Creation of a mind map <i>(20 minutes)</i> • Compare and contrast the similarities and differences of the two defining learning experiences <i>(25 minutes)</i> 	<ul style="list-style-type: none"> ✓ Flip chart and/or white board & markers ✓ Word banks from both defining learning experiences In 3.1 & 3.2 	45 minutes
5. Bringing a Strengths-Based Approach to Practice	5.1 Understanding our learning experiences <i>(15 minutes)</i> 5.2 Envisioning a strengths-based approach in practice <i>(25 minutes)</i> 5.3 Developing a learning plan <i>(10 minutes)</i> 5.4 Evaluation & Closing <i>(5 minutes)</i>	<ul style="list-style-type: none"> ✓ Self assessments – reflective self assessment and strengths-based self survey ✓ Principles and values of strengths-based approach from session 2 ✓ Mind map from session 4 ✓ Flipchart or whiteboard & markers ✓ Evaluations ✓ Paper & pens 	55 minutes

Facilitator Evaluation: (Self reflective questions)	Total time
<ul style="list-style-type: none">• How did I create a strengths-based environment for learning?• How did I recognize and work with students' strengths?• How did I facilitate students to create an open space in which they feel comfortable, make choices, as well as help them take charge or be in control of their own learning?• Did I do anything that was not in keeping with SBTL? What could I have done differently?• What did I learn about myself as an educator today? (Gottlieb, 2013a)	240 minutes

Appendix D

Session 1 Learning Plan Introduction

Approximate time 20 minutes

By the end of the session learners will be able to:

- Indicate guidelines and norms to guide the workshop (*foundational knowledge)
- Promote a community of learning that is safe, collaborative, respectful, social just and reciprocal in which to explore and come to understand the strengths-based approach in the teaching and learning environment (*human dimensions)
- Give an example of a existing strength (*foundational knowledge)
- Associate mindfulness with their practice working in nursing education (*foundational knowledge)

Materials

- ✓ Flip chart or white board & markers
- ✓ Name tags
- ✓ Three minute breathing exercise

Learning Activity 1.1 Welcome

Time: approximately 10 minutes

Step 1: Introduce and situate myself as the workshop facilitator and co-learner with the group. This is the time to get to know the community of learners and engage them in a respectful, collaborative, social just and reciprocal learning environment. Discuss the agenda for the four-hour workshop, housekeeping items (washrooms, emergency exits, etc.).

Step 2: Invite learners to introduce themselves and share and explain a strength they have. This breaks the ice and begins to uncover each learner's uniqueness. Make note of the collective group of strengths noted in the community of learners on a flip chart and post in the room for grounding throughout the workshop. You can use this list to inform the sessions throughout the workshop.

Step 3: Invite the community of learners to collaborate on some workshop guidelines and norms for their time together (e.g. cell phones; no side conversations; etc.)

Learning Activity 1.2 Introduction to Mindfulness

Time: approximately 10 minutes

Step 1: Ask learners if what they use to center themselves when they are stressed or overwhelmed?

Step 2: Ask learners if they have used or heard of mindfulness? Explain to learners that sometimes in workshop to honor an appreciative way with students there are two strategies I use

mindfulness and affirmations. Inform learners that today I am using mindfulness. Briefly discuss mindfulness and its relationship to the workshop on possibility

Step 3: Invite participants to participate in a 3-minute breathing activity. Guide learners through a 3-minute breathing exercise. It can be read or use a YouTube meditation track.

Step43: Briefly debrief the experience. Ask learners what they experienced during the mindfulness activity. Explain to learners that this mediation can be used later in the workshop if learners want. Invite learners to ask any questions at this time regarding mindfulness.

Appendix E

Session 2 Learning Plan Understanding Strengths-Based Approach

Approximate time 40 minutes

At the end of the sessions, learners will be able to:

- Recognizing what is a strengths-based perspective (*foundational knowledge)
- Identify the principles and values of strengths-based approach (*foundational knowledge)
- Take responsibility and respond sensitively to the principles and values of strengths-based approach (*human dimension)

Materials

- ✓ Flip chart or white board & markers
- ✓ Strengths- based experience (story, video, poem)
- ✓ Pieces of paper
- ✓ Paper bag
- ✓ Tape

Learning Activity 2.1 Exploring a strengths-based Story

Time: approximately 20 minutes

Step 1: Divide the community of learners into groups of five to eight learners depending on the numbers in the groups

Step 2: Share a strengths-based story. This may be a written story, an audio recording, or a video recording, and even a poem. Whatever using it should be rich with detail about the experience, intentions, and thoughts and feelings experienced if possible. Intentionally, use a story that learners have a clear enough understanding of the strengths-based experience to be able to write some words to describe the narrative.

Step 2: After reading the story invite learners to write the first thing/thought or phase that comes to their mind about the story on a piece of paper. During this time facilitator will provide each group with a paper bag. In each paper bag there are two pieces of paper with strengths- based words/phases on them that the facilitator has added. Once the learners are finished writing their thoughts on the piece of paper they fold it and put it in the paper bag. Then, learners one at a time pick a piece of paper from the paper bag. The first person will pick from the bag, read the thought then put it on a piece of paper with tape or glue whichever is available. Then the next person picks and put it underneath the first one until all the pieces of paper are picked.

Step 2: Invite learner as a group to decide how they are going to read the story to the larger group. They will decide when to pause, what words or phases they will emphasize and how they will tell the story...

Step 3: Bring the community of learners together as a larger group and invite each group to share their poem to the larger group.

Learning Activity 2.2 What is a Strengths-Based Approach?

Time: approximately 20 minutes

Step 1: After each group has read their poems invite the community of learners to collaborate on a bank of words to describe their understanding of the poems and strengths-based. Explore the words that come to their mind when they think of strengths-based? What are the beliefs? What are the values? What are the assumptions? What are the principles? Capture these ideas as a grouping on flip chart.

Step 2: Invite learners to consider those things that are common that may not have been represented from the strengths-based story or the poems so they may be included in the word bank.

Step 3: Once the repository of words is finished the principles and values of strengths-based approach will be introduced using the identified words from the word bank. Learners are invited to consider other concepts or words/phases that represent principles or values of strengths-based that were not represented in the word banks. This explanation is important for learners understanding of a strengths-based approach in nursing education. Invite any questions they may have regarding these principles and values.

This strengths-based principles and values is a reference point for the group. Post it so it can be seen and referred to throughout the workshop.

Appendix F

Session 3 Learning Plan Understanding the Influences Approximate time 60 minutes

Participating in this session, learners will be able to:

- Share their individual defining learning experiences with peers in their groups (*human Dimensions)
- Analyze their defining learning experiences for potential intrapersonal, interpersonal, and contextual influences on their teaching and learning and the students (*application)
- Determine potential strengths of the defining learning experience (*application)
- Collaborate with their peers to identify the collective influences and strengths (*human Dimensions)

Materials

- ✓ Learners defining learning experiences
- ✓ Learners challenging defining learning experience
- ✓ Flip chart or white board & markers

Learning Activity 3.1: Understanding Learners Positive Defining Learning Experience

Time: approximately 30 minutes

Step 1: Divide the community of learners into groups of four. Each group will explore their positive defining learning experiences. Each learner will have about 5 minutes to describe his or her positive learning experience. (20 minutes)

Step 3: Once every learner has described their defining learning experience learners are invited to develop a word bank or repository of words and if technology allows draft a wordle relating to the positive defining learning experiences. Explore the positive defining learning experiences for what may be going on for the students intrapersonally and capture these ideas in a word bank, repository of words or wordle. Then invite learners to capture potential outside influences and relationships that may be bearing on the student/teachers relationship and capture these ideas.

Step 3: Invite learners to explore their reactions to the student's experiences at the same time capture their own potential intrapersonal influences. Then explore the potential outside influences that may be bearing influence on them being able to support the student and engage in a relationship. Capture these ideas as a grouping in a word bank, repository of words or wordle

Step 4: Learners will also explore the strengths used in the experiences and capture them in the word bank/repository of words/wordle. Some guiding questions are:

- What personal, professional or cultural strengths did I bring to the defining learning experiences

Learning Activity 3.2: Understanding Learners Challenging Defining Learning Experience

Time: approximately 30 minutes

Step 1: Each learner has 5 minutes to describe their challenging defining learning experience (20 minutes)

Step 2: Explore the challenging defining learning experiences for those things that maybe going on for the students intrapersonally and capture these ideas in a word bank, repository of words or wordle. Then invite learners to capture potential outside influences and relationships that may be bearing on the student/teachers relationship and capture theses ideas as

Step 3: Invite learners to explore their reactions to student's experiences at the same time capture their own potential intrapersonal influences. Then explore the potential outside influences that may be bearing influence on them being able to support the student and engage in a relationship. Capture these ideas as a grouping in a word bank, repository of words or wordle.

Step 4: Invite learners to also explore the strengths used in the challenging defining learning experiences and capture them in the word bank/repository of words or wordle.

Appendix G

Session 4 Learning Plan Comparing and Contrasting – Envisioning new Learning Experiences

Approximate time 45 minutes

At the end of the session, learners will be able to:

- Compare and contrast the similarities and differences between the two defining learning experiences (*application & integration)
- Mind map the influences and strengths from the positive and challenging defining learning experiences (* integration & application)

Materials

- ✓ Flip chart or white board & markers
- ✓ Word /concept bank activity from session 3.1 & 3.2

Learning activity 4.1 Mind Mapping the Student/ Teacher relationship and experience

Time: approximately 20 minutes

Step 1: Learners maintain their small groups from previous activity. Invite learners to collaborate on a mind map.

Step 2: Each group is invited to share their word bank/repository of words or wordle from the positive defining learning experiences with the community of learners. Capture the ideas on the mind map in the three grouping (intrapersonal, interpersonal and contextual elements)

Step 3: Each group is invited to share their word bank/repository of words or wordle from the challenging defining learning experiences with the community of learners. Capture these ideas on the mind map in the three groupings (intrapersonal, interpersonal and contextual elements)

Step 4: Invite learners to share their word bank/repository of words or wordle for the strengths that they exhibited in both the positive and challenging defining learning experiences. Capture these ideas as a grouping under strengths in the positive or challenging section on the mind map.

Step 5: Once each group has debriefed their findings from the two defining learning experiences introduce, through use of the mind map or concept map groupings of influences, the contextual, interpersonal, and the intrapersonal domains within which educators and students are situated. The explanation of the three domains is crucial to the understanding the *how* of a strengths-based approach. Invite any questions they may have regarding these three domains.

Learning Activity 4.2 Comparing and Contrasting the Experiences

Time: approximately 25 minutes

Step 1: Continue the conversation and invite the community of learners to examine the similarities between the positive and challenging defining learning experiences. Where identified, draw relationship between on the mind map.

Step 2: Invite learners to examine the differences between the positive and challenging defining learning experiences. Where identified, draw relationship between on the mind map

Step 3: Invite learners to examine the strengths used in the positive and challenging defining learning experiences. Where identified, draw a relationship between on the mind map. Make a list of all the strengths used on a separate flip chart. Post it so that learners are reminded of the repository of strengths in the community of learners.

Step 4: Invite learners into a discussion of what this means to their practice, what have they learned. What does this tell them about learning? Do these new learning's impact their teaching and learning practice?

Step 5: Post the mind map as a reference for the community of learners. Learners can refer to the mind map throughout the workshop. Invite any questions that learners may have regarding the activity on comparing and contrasting.

Appendix H

Session 5 Learning Plan Bringing Strengths-based Approach to Practice

Approximate time 55 minutes

Participating in this session, learners will be able to:

- Assess how their strengths may facilitate or impede their practice (*application)
- Critically reflect on their own practice using a strengths-based approach (*human dimensions)
- Commit to positively influencing their colleagues and themselves around strengths based practice through on exploration of strengths-based in the follow-up (*caring)
- Reconcile their current practice to the values, beliefs and principles of strengths-based practice (*human dimensions)
- Develop an individualized learning plan that outlines how they will utilize a strengths-based approach in their practice (*learning to learn)

Materials

- ✓ Flip chart or white board & markers
- ✓ Principles and values of strengths-based from session 2
- ✓ Mind map from session 4
- ✓ List of strengths from session 4
- ✓ Previous self – assessments- reflective self assessment and strengths-based self-survey
- ✓ Evaluation

Learning Activity 5.1 Understanding our Learning Experiences

Time: approximately 15 minutes

Step 1: Invite the community of learners to revisit the mind map and the list of strengths and share their thoughts and feelings regarding what learned about their learning experiences. Identify what is different, similar or needs to change in their teaching and learning.

Step 2: Invite learners into a discussion on these thoughts and feelings to gain a deeper understanding. It is important before the conversation to mention that each learner is unique in his or her story and experience with strengths-based; we all learn in different ways; we can be at different points in unpacking the learning about strengths-based approach; and there is no right or wrong answers. Also, remind learners of the agreed upon workshop guidelines and norms that promote a supportive, respectful environment. Capture the ideas on a flip chart.

Here are some guiding questions to assist the discussion

- What values, beliefs or assumptions are facilitating or impeding you using these three elements in your practice working with students? What might you need to change or enhance?
- In your defining learning experiences what values were shaping your decisions?
- How do these elements influence your practice?

- How do strengths make a difference to your teaching and learning practice and you personally? How do the strengths facilitate or impede your practice?
- What experiences have helped to develop these strengths?
- How do you acknowledge or enhance our own strengths as an educator?
- How do we help students discover their strengths and capacities?

Learning Activity 5.2 Envisioning a strengths-based approach in practice

Time: approximately 25 minutes

Step 1: Learners are invited to revisit the list of principles and values of strengths-based, as well as the pre- assessments to discuss this experience and what it means to their practice.

Step 2: Invite the community of learners to engage in a discussion on how they can apply the information in their practice. Capture the ideas to the questions on a flip chart.

Here are some guiding questions.

- How can we use the interpersonal, interpersonal and contextual elements in our teaching and learning with students?
- What role do values play in teaching and learning? How can the strengths-based values facilitate or impede your practice? What needs to change, remain the same or be deleted in the teaching and learning to support these values?
- How can the strengths-based principles and values be used in our relationship with students? How do we embrace these elements? What will need to change, stay the same or be deleted?
- What role does being curious, compassionate, committed, competent and corresponding to ‘what if’ play in the teaching and learning environment? Do they facilitate or impede you using a strengths-based approach in your practice? How can we use these ways-of-being in our practice to embrace a strengths-based approach?
- What is potential? How can we enhance the potential of our students? What would need to change, stay the same or be deleted?
- How do we enhance or develop collaborative relationships with our students? How do we build authentic relationships with students?
- How do we engage students in the teaching and learning environment that is strengths-based?

Step 3: As the discussion is coming to a close. Introduce the 5 C’s using the discussion to provide opportunity for learners to explore the *how* of a strengths-based approach. Invite any questions from learners regarding these 5 C’s or ways-of-being.

Learning Activity 5.3 Developing a learning plan

Time: Approximately 10 minutes

Step 1: Invite learners to revisit and reflect on their pre assessments and the learning’s from the workshop and develop a learning plan. The learning plan is a guide to assist learners in shifting to a world of possibility and adopting or enhancing a strengths-based approach in their practice

working with BN students. Learners are invited to use the CRI process and be as honest as possible in the reflection and the development of their learning plan. Here some guiding questions from Kim (1999):

- What do I know?
- What are the gaps in my knowledge?
- What did I learn?
- What additional information do I need in order to make any changes? How would I learn that? For example take a course, read a book,
- How do I want to act with my students? As an educator?

Step 2: Learners are invited to develop a learning plan that outlines goals and strategies to adopting a strengths-based approach in practice

Learning Activity 5.4 Evaluation & Closing

Time: approximately 5 minutes

Thank the community of learners for being open to engaging in the workshop that was looking at shifting their practice from one of deficit to possibility using a strengths-based approach. Learners will be encourage to continue to unpack their learning of strengths-based approach in the 11-week follow-up sessions and in their practice.

A formative evaluation will be provided at the end of the workshop. However, I will also be engaging in informal formative evaluation throughout the workshop to increase their experience with understanding strengths-based and how they can use it in their practice.

Learners will be asked to anonymously participate in a formative evaluation of the workshop and the facilitator.

As a facilitator I too will engage in a formative evaluation of my experience in facilitating the workshop.

I will ask myself 5 reflective questions after the workshop.

- How did I create a strengths-based environment for learning?
- How did I recognize and work with students' strengths?
- How did I facilitate students to create an open space in which they feel comfortable, make choices, as well as help them take charge or be in control of their own learning?
- Did I do anything that was not in keeping with SBTL? What could I have done differently?
- What did I learn about myself as an educator today?

(Gottlieb, 2013a)

Appendix I

Follow-up Sessions Outline

Title: Beyond Deficit Thinking to a Universe of Possibility			
Follow-up sessions			
Topic	Activities	Materials	Time
Week 1. Introduction to the follow-up sessions	Envisioning the session <ul style="list-style-type: none"> • What are the guidelines • How will it be structured • What does it entail Discuss the roles and responsibilities document Divide into groups of four	<ul style="list-style-type: none"> ✓ Flip chart & pens ✓ Copy of Gottlieb's three step activity ✓ Guideline for roles and responsibilities 	60 minutes
Week 2-10 Continuing the conversation	Meet each week for <i>9 weeks</i> Each week discuss one defining learning experience <ul style="list-style-type: none"> • Debrief defining learning experience 	<ul style="list-style-type: none"> ✓ Participants stories ✓ Ground rules ✓ Paper & pens ✓ Affirmations or mindfulness activity 	60 minutes for 9 weeks
Week 6 Midway <i>check in</i>	Facilitator will meet with each group individually <ul style="list-style-type: none"> • Debrief the last four weeks 	<ul style="list-style-type: none"> ✓ Pens and paper ✓ Any questions 	60 minutes
Week 11 Reflecting on the strengths-based experience	Debrief the last 11-weeks Redo the two pre –assigned self-evaluations Revisit learning plan from <i>session 5</i> of workshop Participate in an evaluation of follow-up session	<ul style="list-style-type: none"> ✓ Evaluation ✓ Self- evaluations – reflective self-assessment & strengths-based self survey ✓ Pens ✓ Learning plan from session 5 	60 minutes

Appendix J

Follow-up Sessions Learning Plan **Developing a Community of Strengths-based Learners** Approximately 60 minutes per session

Upon completion of the sessions, learners will be able to:

- Associate when they and their peers are or are not using a strengths-based approach in their practice (*foundational knowledge)
- Apply and use the principles and values of strengths-based in their practice with BN students (*application)
- Connect with other educators who are using a strengths-based approach and build a community of learners (*Integration)
- Positively influence other colleagues about the strengths-based approach (*human dimensions)
- Develop confidence in their ability to implement a strengths-based approach in their practice (*caring)
- Identify and acknowledge their strengths and how they can use them in their practice (*learning to learn)

Week 1: Introduction to Follow-up- up sessions

Time: approximately 60 minutes

Materials

- ✓ Flip chart or white board & markers
- ✓ Roles and responsibility document (see Appendix K)

Step 1: Explain to the community of learners that the sessions are flexible enough for them to be meaningful and specific to their needs. The sessions will consist of smaller groups of four. Each group is unique; therefore each group will have opportunity to customize their one-hour session. The community of learners is invited to engage in a discussion about their vision of these sessions. Ideas and comments will be captured on a flip chart.

Some potential guiding questions for the discussion:

- What are your hopes for the follow-up sessions?
- How would you like the follow-up session to run?
- What do you think is the best way to contribute?
- What do you think your peers would value most about your contribution in the group?
- What do you think you would value most about your peers contribution in the group?
- How will you prepare for the follow-up session?
- What sparks your curiosity?
- How will you know if the follow-up sessions are going well?
- How will you know if the sessions have been helpful?
- How and when will you review your group functioning?
- What signs would suggests we need to change the way the group is running?
- How do you hope that the follow-up sessions might help enhance your practice?
- If continuing the conversation of strengths-based approach with the follow-up sessions could result in one significant or surprising change, what might it be?
- What do you think will be the best use of the time in the follow-up sessions?
(Lowe & Deal, 2014)

Step 2: The role and responsibility document will be handed out to the community of learners (see Appendix J). Learners are invited to review the document. Once document is reviewed the community of learners will be invited to participate in a discussion on the document. Ideas generated will be documented on flip chart. Any time during the workshop learners are invited to ask questions that may not of been addressed or need clarification about the sessions.

Step 3: The community of learners will be randomly divided into smaller groups of four.

Step3: Invite any questions or concerns form the community of learners. Also learners will be informed that if at any time during the nine weeks they have any concerns or questions I am available. They can connect with me by email, phone or in person. Learners will also be informed that I will be meeting with each group midway through the nine weeks at week 6 for a check-in to see how things are going.

Week 2 to 10: Continuing the Conversation

Time: each weekly session is approximately 60 minutes

Materials

- ✓ Roles and responsibilities document (see Appendix K)
- ✓ Defining learning experience
- ✓ Guideline and norms
- ✓ Three minute breathing activity or affirmations

Each group of four will meet for one hour a week for nine weeks. Each group is invited to determine the when, where and time they meet, and the guidelines and norms for their meetings so that the environment is inclusive, respectful, encouraging, honest, socially just, and supportive of collaborate learning and embracing a strengths-based approach in practice.

Some guiding questions to clarify the roles and responsibility:

- Are we clear about your roles and responsibilities?
 - How will you individually balance self-care with your professional responsibility?
 - Who else outside the group, will we draw on for support and feedback?
- (Lowe & Deal, 2014)

Step 1: Learners are invited to start the session off with a mindfulness activity, an affirmation or reflection or any other activity that helps focus the group.

Step 2: Each week one learner will be the storyteller and bring a defining learning activity to discuss with their peers in the group. Learners will have opportunity to discuss their defining learning experiences two times within the nine weeks. Learners are invited to develop the schedule of when individuals will be the storytellers. The role and responsibility document discussed in the “introduction to follow-up sessions” will guide each session.

Step 3: Once the learner describes their story the other members of the group take on the role of peer mentors and ask open ended and exploratory questions to invite a dialogue and promote discussion on gaining a deeper understanding of the story. For example: what went well, what they can appreciate about their handling of the situation, what did not, what opportunities were missed, and what strengths they acknowledged the peer using in their experience.

Step 4: After the session the storyteller will reflect on the experience. The reflection will use the critical reflective inquiry (CRI)- process to describe the experience and the learning. For example, what they learned, thoughts and feelings, what went well, what was challenging and what it means to their practice. The written reflection will be sent to the facilitator as soon as possible after the session (approximately within 24 hours). The facilitator will provide strengths-based feedback to the learner.

Week 6: Check in
Approximately 60 minutes

Materials

- ✓ Flip chart and markers

As a facilitator I will meet with each group individually in week 6 to check in and see how things are going. Participants are invited to bring any questions they may have so far.

Some guiding questions to facilitate the discussion:

- What has been going well so far? How have you contributed to this? How has the group contributed to this?
- What has been the most difficult challenge you have faced in your relationship as a group so far? What can you appreciate about the way it was handled as a group? Any other challenges that would be useful to discuss?
- What has been the most difficult challenge you have faced in working from a strengths-based approach so far?
- How do you decide whether to ask for assistance in a particular situation?
- How can the group help you continue developing the strengths-based approach?
- What changes have you noticed so far in how you respond to your students?
- Over the past four weeks what observations and insights have you gained?
- What changes have you noticed in the ways you contribute in the group?
- What particular experiences over the past four weeks stand out the most important for you?
- What new skills, strategies and strengths have you used to address your defining learning experiences? Does one example stand out?
- What can you appreciate most about how you have worked together so far?
- On a scale of 1 to 10 where would you place yourself in terms of confidence, optimism, readiness, determination, or other desired change so far?
- Is there a symbol or metaphor that describes your experience of working together as a group and with a strengths-based approach so far?
(Lowe & Deal, 2014)

Reiterate to learners that if at any time during the remaining sessions they have any questions or concerns I am available for consultation. They can connect with me via email, phone or in person.

Week 11: Reflecting on the follow-up sessions experience

Time: approximately 60 minutes

Materials

- ✓ Previous self – assessments- reflective self assessment and strengths-based self-survey
- ✓ Evaluation
- ✓ Learning Plans from session 5 of the workshop

Learning Activity 1: Debriefing the 11-weeks

Step 1: Learners will be invited into a discussion of their 9-week experience exploring a strengths-based approach in small groups. Important points will be captured on flip charts. Learners are also invited to take notes. (35 minutes)

Some potential guiding questions to facilitate the discussion:

- What went well? What has been the most challenging?
 - How has this helped you facilitate a strengths-based approach into your practice?
 - What changes have you noticed in your practice since participating in the following up sessions?
 - Are there areas in your practice where you feel more competent and confident?
 - On a scale of 1 to 10 where would you place yourself in terms of confidence, optimism, readiness, determination, or other desired change?
 - Have you noticed any changes in the ways you respond to challenging situations?
 - What factors within or outside the group have contributed to the change?
 - What will you take from this experience into your own practice?
 - What do you think has been the most valuable for your work with BN students?
 - How would you describe yourself as an educator now since experiencing strengths-based approach?
 - How have you changed since this experience?
 - Is there a symbol or metaphor that describes your experience of working together as a group and with a strengths-based approach?
 - If your peers were here right now what would they say they appreciate about your practice now? What would your students appreciate in you now?
 - What will you take away from the session?
- (Lowe & Deal, 2014)

Learning Activity 2: Revisiting the self-assessments

Time: approximately 10 minutes

Step 1: Learners will revisit the two self- assessments done prior to attending the workshop. Learners will be invited to participate in redoing these two self-assessments (reflective self-assessment questions and the strengths-based self- survey).

Learning Activity 3: Revisiting Learning Plan

Time: approximately 10 minutes

Step 1: Revisit the learning plan developed in session 5.3. Learners will be invited to reflect on their learning plan to see if they achieved their goals or if any change is needed to the plan to continue unfolding their learning and utilization of strengths-based approach in their practice. Learners are encouraged to update their learning plan as needed in order to assist them in continuing the journey of using a strengths-based approach in their practice with BN students.

Learning Activity 4: Evaluation

Time: approximately 5 minutes

Step 1: Learners will be thanked for their participation in the follow-up session and the courage to take the stance of “not knowing” and collaborate with their peers to facilitate finding their strengths and solutions to their particular defining experiences. Also facilitate their peers being able to use a strengths-based approach in their practice. Learners are also encouraged to continue on the journey of possibility using a strengths-based approach in nursing education.

Learners are invited to participate in a formative evaluation of their experience of the follow-up sessions as well as an evaluation of the facilitator throughout the

Appendix K

Role and Responsibilities for Follow-up Sessions

1. Story teller is the person telling the story

Responsibilities

- Come to the meeting with a defining learning experience
- Describe the experience to your peers.
- Be open to exploring the story further with their peers
- Be open to seeking feedback from their peers
- After the session the storyteller will engage in a reflection on the process of the experience using the critical reflective inquiry (CRI) process, which consists of three phases- descriptive, reflective, and critical
- From the reflection they will write a written summary of the reflection and send to the facilitator within 24 hours.

2. Peers mentors are the members who are listening to the story from the storyteller

Responsibilities

- Attentively listen to the story from their peer
- Be authentically present in the moment
- Provide a safe, respectful, encouraging, honest, and socially just environment for exploring the experiences
- Communicate in a way that is respectful and reciprocal
- Use language that is positive, and contains no labeling or demeaning words
- Provide feedback that is detailed and specific
- Ask open-ended and exploratory questions to invite discussion and promote conversation and dialogue, and help the storyteller unpack the learning and describe their feelings, thoughts and understanding of their defining learning experience. Also uncover the positives and challenges, vulnerabilities and incapacities that maybe present.
- Focus on uncovering and discovering the strengths
- Use the three domains – interpersonal, intrapersonal and contextual domains to help the storyteller understand the elements impacting the experience.
- Follow the principles and values of strengths-based approach

Appendix L

Potential Learner Self-Assessment Questions

Strengths-based Practice

- I have an absolute belief that every person has the potential to be successful and do well?
- I believe that all people can change- given the right conditions and resources; a person's capacity to learn and grow can be harnessed and mobilized?
- I believe that what we focus on becomes our/other's reality so I chose to focus on strengths, not labels?
- I work from the belief that positive change occurs in the context of authentic relationships and therefore make it a priority to engage the people I work with in respectful and meaningful ways?

(Hammond & Zimmerman, 2012)

Reflection on Teaching

- How do you describe students in the teaching and learning environment? For example what are their characteristics, role, your relationship.
- Do you believe that students have potential and experiences that they bring to the learning environment?
- Do you intentionally get to know who your students are?
- What makes you a good teacher?
- What do you do to foster learning?
- Students learn by what they see you do and not do. In the teaching and learning environment what do students see you do and not do?
- Are you intentional in teaching in ways other than the ways you learn best?
- Do you inform your students that they are responsible for their own learning?
- Do you ask your students to relate their course or clinical material to outside events and experiences?
- When something works well, do you reflect on why and how you can build on it?
- When something does not work, do you reflect on what went wrong and what you can do to change it?

Appendix M

Potential Questions for Evaluating the Workshop

Workshop

Learners

- Name one thing that you would like to remember about today's workshop?
- Name three things that you would do differently in your practice as a result of participating in the workshop?
- What did you learn today?
- What did you learn that you use in your teaching? (Saroyan, Weston, McAlpine & Cowan, 2004b).
- Did the facilitator listen to your perspectives? Invite questions?
- Did the workshop provide opportunity for you to practice what you learned?

Facilitator

- How did I create a strengths-based environment for learning?
- How did I recognize and work with students' strengths?
- How did I facilitate students to create an open space in which they feel comfortable, make choices, as well as help them take charge or be in control of their own learning?
- Did I do anything that was not in keeping with SBTL? What could I have done differently?
- What did I learn about myself as an educator today? (Gottlieb, 2013a)

Workshop structure

- What did you like most about today's workshop?
- What did you like least about today's workshop?
- What would be one suggestion to make the workshop better?
- Was the environment respectful?

Follow-Up

Learners

- Have you changed the way you do things, the way you engage with your students as a result of the follow-up sessions? Why or Why not?
- Do you feel you need further skills, experiences or support resources to continue using a strengths-based approach in nursing education?
- What has changed in you as a result of using a strengths-based approach?
- Have the follow-up sessions facilitated you using a strengths-based approach in your practice? Why or why not?
- Have peer support facilitated you using a strengths-based approach in your practice? Why or why not?

Workshop structure.

- Did the structure of the follow-up sessions meet your needs?
- Was the environment respectful? Did you feel respected and heard by your peers in the group?
- Did you feel supported by your peers? By your facilitator?
- What did you like most about the follow-up sessions?
- What did you least like about the follow-up sessions?