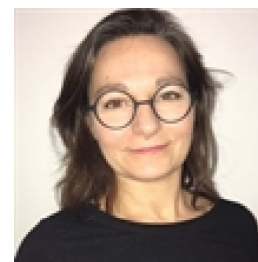


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Teaching portfolio

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Associate professor, Aarhus University 2014-2019
Professor MSO, IST – SDU & Aarhus University 2020-
Teaching course for associate professors, Aarhus University, 2012-2013
Supervision course, Health, Aarhus University, 2011

Experiences with teaching and course management

I have comprehensive and varied experiences with teaching, doing examinations and course management. Since 2010 I have taught medical students, students of public health, anthropology students and masters students as well as doctors, who have been working with their profession for many years. The content of the courses that I have lead and developed have all centered on subjects of relevance for medical anthropology, meaning that I have experience in teaching research methodology (both methodology, analysis and theory) and various theoretical themes (e.g. risk, embodiment, health systems, symptoms). In summary, there is a big variation in both the target group and the content of the teaching I have taken.

Course development and reflections on team-based teaching.

I have experience with development of course offerings from bachelor to PhD level. Since the start of my own PhD-training, I have been involved in the development of PhD courses at Graduate School of Health, at Aarhus University. At Department of Anthropology, I have been a course leader at a bachelor's course on Anthropology in practice, which I was also responsible for developing. Since 2016, I have, together with Professor, Jens Seeberg, been actively involved in the development of a Master's program in Medical Anthropology, which was a specializing master's program offered to anthropology students. This master's program counts two full-year equivalents for the students, including their thesis. Also, I have course leadership experience with the Master in Health Anthropology, a two-year master's program that Marie Louise Tørring (AU) and I continually seek to improve. Course leadership and development is a continuing part of managing this education. At SDU I currently teach courses on medical anthropology and join team-based teaching activities on the course *Fra molekyle til menneske*.

My experiences with teaching different subjects and having to differentiate the level in relation to different student groups and entering into both interdisciplinary and mono-professional teacher teams have contributed to developing my reflections on the interaction between didactics and the students' level and background. In order to present more specific reflections on didactics and teaching philosophy, Teaching philosophy – an example of the exciting challenges of teaching is finding learning styles that support the students' motivation and reflection while stimulating curiosity. I find it important that my teaching has clear learning goals that these are visible to the students, and the learning goals are logically related to both the teaching method and the examination. A good teaching situation is thus a common concern, where my task is not only to present the substance, but also to create teaching sessions where the students are motivated to actively participate. It is largely the student's level and academic background that nurtures my reflections on how a subject can be best obtained. Examples of didactic methods used:

Papers: The students present short papers on the texts they have read and they are encouraged to work with these presentations in groups. The purpose of this is to "enlarge the learning space", as the teaching consists of condensed weekend seminars. Peer feedback in connection with group work creates the basis for jointly reflecting on the learning content. The students are offered the opportunity to develop their writing skills and to learn from each other. This enhances their skills in various ways; they become familiar with applying concepts in analytical thinking, and it improves their ability to remember and apply theoretical insights.

Case-based teaching: I have experience with interdisciplinary research and in-depth knowledge of the working practices and epistemological assumptions underlying health-professional practice and knowledge understanding. I use these skills actively in teaching, where theoretical and analytical issues are often exemplified by specific cases. This increases the learning intake of the students, as it assists them in linking their own practice with the new framework of understanding.

Routinization: I work with routinization in various ways; students engage in oral presentations, many sessions are dialogue-based and students actively participate in discussing the analytical or theoretical implications of the readings. Also, routinization of key concepts and theoretical frameworks are enhanced, when we end teaching sessions with reflections on learning goals. Often, we devote ten minutes to reflection, where the students can make notes of what they have received from today's teaching. Of these, they will spend a few minutes and share reflections with a peer.