DIVERSITY AT THE SCHOOL OF NURSING
UNIVERSITY OF OTTAWA

Office of the Ombudsperson

December 2013
Creating a culture that embraces diversity requires effective communication, ongoing dialogue, leadership, engagement, an appreciation for the interests each person brings to the table and training.

Background

At the request of the School of Nursing (the School), the Centre for Equity and Human Rights and the Student Appeal Centre, the Office of the Ombudsperson undertook to conduct a review of the issues around diversity within the School. The overall goal was to identify the significant areas requiring attention, increase awareness and understanding, and promote respect and celebration of diversity and human rights.

For the purpose of this consultation, diversity was defined as a broader concept than that of multiculturalism and it referred to the inclusion of all different types of individuals as well as the respect of cultural differences. Among other aspects, diversity includes official and non-official languages, cultures, gender, life styles, religious affiliations and beliefs, disabilities and sexual orientations. Mutual respect is the key instrument in fostering openness to diversity. It is a fact that diversity is a reality in Canada: more than 20% of Canadians are born abroad, a percentage exceeded only by Australia. The expression of our diversity is reflected in all aspects of life, our religious practices, our life styles, our sexual orientation, our political affiliation, etc...  

Introduction

We did not find any benchmark studies of this nature at the University, and we will not propose any comparisons of the situation of the School, nor will we provide a quantitative or qualitative assessment of their «standing» with respect to how well they are responding to diversity, this was not the purpose of the review. We expect that the School is a reflection of the university community, of the nursing academic and workplace settings and perhaps of our society in general.

We propose some paths for consideration to assist the School in reaching its goal of building an academic community that respects human rights and embraces diversity.

While the response rate to the in-house survey was very low and we do not draw any firm conclusions from the data, nevertheless we think that the recommendations merit serious consideration in order to help create a milieu where diversity is accepted, respected and embraced. This is a challenge requiring leadership, commitment and time.

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Process

We designed an in-house survey to collect information about students and staff perceptions and experiences with diversity as well as conducted some individual interviews with some students and staff to deepen the understanding of the issues. We conducted a brief review of the literature on diversity and inventoried some of the best practices we found in the review. We summarize below the findings from these reviews and include a more complete report as annexes; first in Annex A, Brief Review of the Literature on diversity: Key findings and then in Annex B, Best Practices in Diversity: A brief presentation.

We reviewed material provided by the Centre for Equity and Human Rights and the Student Appeal Centre, as well as our own files of complaints from students from the School, mostly following failures in clinical settings.

Summary of the Review of Literature on diversity and Best Practices in diversity

More and more we hear and read about diversity in our society. It is being studied by academics from different disciplines. The literature points to a shift from a concern for equity and human rights to a need to embrace diversity in order to attract the best talents. There seems to be a consensus that organisational performance is connected to a positive perception of diversity.

We looked at two articles published in the last few years by two School of Nursing Ottawa University professors; one article by Professor Josephine Etowa on the underrepresentation of Indigenous Peoples in the health professions and a second article published by Professor Hélène Laperrière looking at challenges in the training of francophone students from racial minority groups in Ottawa.

With respect to the underrepresentation of Aboriginal students in the nursing profession, the School put in place a strategy and recruitment focus in January 2012, resulting in 5 priority places reserved for Aboriginal students starting in September 2012.

We quote below Professor’s Laperrière’s conclusion which captures in our view the challenges the School, likely similar challenges faced by other Schools of Nursing in Canada, needs to address. Although her study focused on racial minority groups, we think the conclusions can apply to the other dimensions of diversity defined above.

“La formation infirmière, comme celle d’autres professionnels de la santé et du social, exige la standardisation des pratiques de ses membres, Ceci présuppose une homogénéité “culturelle” des pratiques et de l’enseignement. Le dépassement de ce postulat est une tâche complexe, mais incontournable dans la société canadienne actuelle. Cela demande un regard neuf sur la vision de notre société. Cela fait appel à l’ouverture pour regarder les réalités des
It is interesting to note that diversity issues have been studied in the nursing profession since the 1970’s, particularly from the race and racism angle; some studies suggest that urgent actions were needed to dismantle systemic racism in nursing in Canada. As well, some authors have studied the role that linguistic accents can play in discrimination, a basis for complaints from some students from the School. The School would be well advised to keep abreast of these studies and monitor the situation within the university and clinical placement settings. Please refer to annexes A and B for further information on best practices and studies that we reviewed.

Survey results

An in house questionnaire was designed and sent electronically to all registered students as well as to administrative staff, and faculty. You will find the questionnaire at Annex D.

As we indicated earlier, the response rate was low. We can draw no firm conclusions on trends nor report definitively on findings. It is also possible that in this type of survey, those that decided to answer may have been motivated by a negative personal experience.

The overall breakdown of respondents is as follows:
- 32 students
- 18 professors
- 2 Placement supervisors
- 4 administrative personnel

Breakdown by racial/ethnic groups:
- 42 Caucasian/European
- 13 other (5 Afro-Caribbean Black, 4 African Black, 2 Arab, 1 Aboriginal, 1 other)

Breakdown by gender:
- 49 women
- 6 men

Breakdown by sexual orientation:
- 48 heterosexual
- 6 other

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Breakdown by religion:
- 34 Christians
- 4 Muslims
- 12 atheists
- 2 other

Breakdown by disabilities:
- 51 non-disabled
- 4 disabled

The survey was conducted to obtain information from respondents on their perception of the climate at the School in academic and clinical placements settings, the kinds of interaction between students, faculty and staff; their own awareness and experience with diversity. You will find in Annex E the PowerPoint presentation.

From the responses of students, we found that

1. A majority of students believe that diversity factors influence how well they are accepted and respected and that the factors of sexual orientation and disability have the greatest impact. (slide 3)
2. Clinical placement settings are more problematic than university classroom settings for the diversity factors: sexual orientation, disability, religion and linguistic background. (slide 4)
3. Sexual orientation is the factor that was identified most often by students as influencing acceptance. (slide 4)
4. Students generally identify difficulties in interactions among students less often than with other groups. (slides 5 and 6)
5. Overall general experience with acceptance and respect of diversity at the School: 40% poor, 26% fair, 9% neither good nor back and 25% excellent. (slide 7)

From the responses of professors

1. The majority of professors disagreed that students were accepted and respected regardless of diversity factors, mostly for factors: gender, disability and linguistic background. (slide 8)
2. Professors identified that the factor of sexual orientation was more problematic in clinical placement settings while the reverse was reported for every other factors i.e. more problematic in university classroom settings. (slide 9)
3. Professors that disagreed students were accepted and respected regardless of diversity, identified disability as the factor most often resulting in lack of acceptance by faculty members. (slide 10)
4. When all factors of diversity are combined, professors did not identify any significant difference of acceptance and respect by faculty members, practice coordinators, administrative staff or students. (slide 11)

5. Overall general experience of professors with acceptance and respect of diversity at the School: 32% poor, 31% fair, 14% neither good nor bad, and 23% excellent. (slide 12)

From the combined responses from all respondents

1. 52% of the respondents disagreed professors react openly to discrimination, 44% disagreed that the School is committed to diversity and 34% disagreed that the School prepares students to deal with diversity. (slide 17)
2. A majority of professors (61%) disagree that the School is committed to respecting diversity while 34% of the students disagreed that the School is committed (slides 13 and 15)
3. 34% of all respondents disagree that the School prepares student to deal with diversity, 36%, agree. Professors and students share a similar perception. (slide 17)
4. About 18% of all respondents report that they feel positive about diversity in the School, 27% that they feel included in their group, 31% that they can talk openly about diversity within the School, 14% that they can talk openly among students, 35% know where to ask for assistance (slide 20)
5. When comparing some responses between respondents from the primary racial groups to those from ethnic groups, respondents from primary racial groups identified gender and sexual orientation as the primary factors that resulted in less acceptance and respect, while respondents from ethnic groups identified disability and sexual orientation as the main factors. (slide 21)

**Individual interviews**

We conducted individual interviews with professors and students who had asked to meet us. Again this approach invited people who either have a strong opinion about the question of diversity or have a personal experience to share. The information collected cannot be used to draw conclusions on the overall percentage within the School. All students whom we met had filed complaints of discrimination or indicated they had witnessed discrimination. Their experiences were painful. Students reported receiving or witnessing derogatory or inappropriate comments as well as non-verbal signs about linguistic accents, physical size, ethnic origin, family condition and disability which they perceived as discriminatory.

*What the students said.*

The students identified the following behaviors or situations that contributed to the perception of discrimination:

- clinical professors having access to prior clinical placements assessments leading to the foregone conclusion that they were weak students
• instances where the procedures taught in the laboratory were different than what was expected on the floor by the clinical professor who assumed student was wrong without verifying with the lab professor
• Inappropriate or irrelevant comments made to students about their personality, their future, their family situation; ex. Wouldn’t you prefer to be looking after your son? What will we do with you? You are useless.
• verbal and non-verbal signs of impatience and frustration from professors causing a sentiment of humiliation (ex. rolling eyes, sigh)
• ignoring a student’s complaint when they reported being “badly treated”, not being taken seriously
• failure to explain the learning goal of a request, ex. during a clinical placement, a student is asked to research a disease and the next morning reports the result of her research, but professor barely acknowledges the research and moves on, doesn’t use this as a teaching moment, student is left feeling confused

The students all reported very positive experiences and the presence of excellent professors dedicated to helping them succeed. By and large, their experiences were very positive. While the negative experiences they reported were rare, they did have a significant impact on them. The students particularly appreciated the following behaviors from professors:

• Provide constructive feedback and refrain from generalized judgement on the student’s personality or competence
• Positive tone, helpful suggestions
• Opportunity to correct errors in a positive learning environment
• Put student at ease as much as possible
• Calm and supportive verbal and non-verbal communication
• Efforts to include all students in a group even those experiencing difficulties, ex waiting for all students from a group to be present before starting a meeting
• Willingness to protect student from discrimination or harassment type behaviors
• Take their complaints of discrimination or harassment or bad treatment seriously
• Demonstrate patience
• Share the purpose of a request

We met a few professors who asked to be interviewed to share their perspectives and their experiences. Following are some of their thoughts regrouped under themes.

*Communication skills: verbal and non verbal*

In the nursing profession, communication skills are considered essential and very important skills, both verbal and non-verbal. It is expected that students from different cultures will need to make the effort to learn and adapt.

French speaking students must be bilingual to complete the program; it is now a criterion for admission but it is not assessed at the time of admission. Professors recognize that language capabilities are an important factor for success. Should the French-speaking applicants for admission
be tested in English as a condition of admission? Should the School provide English language courses?

Need for cross-cultural training and learning social norms.

Some professors believe that they have a responsibility to inquire and take into account cultural differences in assessing performance or intervening with a student. The following example illustrates this need: a student leaves a meeting without excusing himself and is judged as impolite by members of the primary culture but in his culture, the behavior was in fact the polite way to leave the meeting without bringing attention to oneself and disturbing others. The School needs to encourage professors to verify their assumption about observed behaviors, particularly cross culturally, before making a judgment.

It was suggested that it would be beneficial for students from different cultures and for faculty to receive cross-cultural training. It was considered a shared responsibility of students and faculty. Suggestions included a workshop for staff on how to prepare for supervision of students from different cultures and diverse backgrounds and similar type of orientation sessions for students.

It was also suggested that diversity be woven in the regular curriculum; the School has informed us that this change will formally start in September 2014.

Professors observe that students from similar backgrounds hang out together, and see little intermixing between cultures and gender.

It was felt that the School should play a role to encourage more integration of diversity and that perhaps an inter-cultural-diversity mentorship program could contribute to breaking down these clusters and encourage a better integration of diversity.

Importance of an on-going dialogue about diversity within the School

It is felt that not enough time is dedicated to diversity in the training of personnel and that on-going dialogue on diversity is essential. The School is thought to be sensitive to diversity, but not taking sufficient actions to embrace it.

The importance of self-reflection skills and feedback in clinical placements

Professors recognize that clinical placements are stressful and that the quality of the feedback provided contributes significantly to the experience of students. How feedback is delivered can make a big difference in the capacity of the students to receive it. Professors agreed with students that feedback should not include generalized judgments about the student’s personalities or future and
should be provided constructively and patiently. Professors also pointed to the fact that the students must also be receptive to feedback and must develop self-reflection skills.

It was suggested that students be required to keep a Learning log to track their learning throughout their program and particularly in their clinical placements.

It was also suggested that training in how to provide feedback is necessary and should be mandatory.

The role of the School in diversity

The School is sensitive to diversity issues but hasn’t developed any strategies or plans to raise awareness and integrate diversity. More needs to be done in a systematic, organised way. The School has informed us that a plan of action is currently being developed and that two initiatives will be put in place in January and September 2014.

The role of a professional school such as the School of Nursing includes preparing students for the workplace. Orientation to the workplace including the culture and diversity dimensions is part of the responsibility of the School.

Learning styles

Professors have observed that some students who come from countries that emphasize learning by memorization and who place less emphasis on developing critical thinking skills, may be at a disadvantage and must learn those skills to be successful in the program. Can the School do more to encourage students to acquire better critical thinking skills?

Breakdown of Senate Appeals Cases between July 2, 2010 and July 1, 2012

We reviewed data from the Senate Appeals Committee, but we drew no conclusions as the numbers are very small. Following is the data we considered.
A total of 13 cases were heard by the Senate Appeals Committee during this two year period. The majority (9) were related to grade review, 2 cases to mandatory withdrawal, 1 case to permission to re-take clinical placement, and 1 to academic fraud. Overall 3 appeals were granted, 6 were dismissed, 3 were withdrawn by the students and one resulted in the student accepting the Faculty recommendation. The University does not collect demographic data on student appellants; the number of appeals is relatively small and no conclusions are drawn from these numbers.

The challenge of foreign accents

We consulted with Blagovesta Maneva-Sleiman, a linguist and management consultant who is interested in the question of diversity in the workplace and in academic settings, and asked her to do a
brief overview of some recent research on the influence of foreign accents on discrimination. We include as annex C the summary of the overview she prepared for us.

In our own practice, we have received complaints from students in the Nursing program that included allegations of discrimination on the grounds of foreign accents. Although this issue was not investigated or identified in the survey, we think that it would be very wise for the School of Nursing to consider this dimension of diversity in its strategy. To overlook it would constitute a mistake in our opinion based on the research available, some of which addresses this issue within the nursing profession. According to some studies, noticeable accents are sometimes considered to be one of the last acceptable areas of discrimination.

Because nursing is amongst the professions relying significantly on communication skills, verbal and non-verbal, this challenge should not be ignored and the stigma association with foreign accents should not be underestimated.
**Recommendations**

From our perspective, first it is critical that the top leadership be committed to diversity while being informed and responsible to people who have felt marginalized in the past as well as to the larger community. There are a number of different initiatives from the best practices review that could be considered: developing diversity strategic plans, diversity framework, diversity branding initiatives; appointing a Diversity Advisory Committee (which the School has already done), conducting annual diversity climate survey, establishing annual Diversity Leadership awards, training initiatives as well as revising the current curriculum to include diversity issues. These are some of the interesting initiatives that other organizations have taken. All these initiatives require key elements in place to effect cultural changes of this importance: to be proactive, to plan, to take actions with the community and to exercise change leadership over a long period of time.

**Establish, enforce and disseminate a comprehensive policy and strategy for diversity**

As we mentioned at the beginning of the report, diversity is a multidimensional reality which includes cultural and racial differences. While addressing these two dimensions is certainly important, the study also points to the need to also attend to the dimensions of sexual orientation, not often openly discussed, and to disabilities. To achieve the goal of embracing diversity within the School, leaving it to time alone and individual initiatives will not be sufficient. A public statement, supported by specific strategies and actions and sustained efforts over a period of time are necessary. Since July 2011, the School has in place a diversity committee that could take the lead. The process of engaging its staff, faculty and students in the process of developing strategies and action plans will also contribute to building awareness and engagement. The School has informed us that it has started addressing some of the issues, for example it has included a 3 hour session on health and sexual orientation in the Introductory course in Nursing. Other initiatives are planned, as well as forums of discussion. We support the creation of these different opportunities sustained over a long period of time.

In developing policy and strategies, the School’s Diversity Committee should consider the findings from the Laperrière study and from the Vukic, Jesty, Mathews and Etowa study as well as consult other research on this same issue. We think that while the question of the impact of diverse language accents on discrimination was not identified in the survey, it would be in the best interest of the School to include this aspect in its action plan.

**Provide ongoing training and education and public forum for discussion and conversation**

The School should put in place as part of its strategy, a training program to build awareness about diversity as well as examine its curriculum to integrate the diversity dimensions (the School reports that this has already started). As well it should take existing opportunities to carry the message of its commitment to diversity in existing initiatives such as orientation weeks.
Because of the importance of the feedback process, it is suggested that skills training in how to effectively provide feedback be mandatory for clinical placement supervisors. An approach, such as the non-violent communication approach from Marshall Rosenberg, should be promoted. In addition, students should be encouraged to develop self-reflection skills by using a learning log to track the development of their competencies throughout the program.

Ongoing dialogue and conversations about diversity should be encouraged for instance by using round table discussions, monthly staff, faculty and students meetings. Other suggestions include, holding a Diversity Week, giving awards for leadership in diversity.

A diversity mentorship program that would support better integration and mixing of the student population should be considered.

**Language training for some students in the French program**

Because communication skills are crucial and all students must be able to communicate in English to complete the program, it is suggested that the School consider assessing the English language skills either before their admission or during the first year of their program and consider offering English language courses. The School has informed us that they are consulting on this issue with the proper authorities.

**Some questions that merit a closer look**

Should the School provide training or tools to assist students learn critical thinking skills?

Could conflict resolution skills and communication skills be part of the curriculum or taught in special workshops in order to support the pursuit of the diversity goals?

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3 Marshall B. Rosenberg, Nonviolent Communication: A Language of Life
List of annexes

Annex A Brief Review of the Literature on diversity: Key findings, Blagovesta Maneva-Sleiman
Annex B Best Practices in Diversity: A Brief presentation, Blagoveta Maneva-Sleiman
Annex C Survey questionnaire in French and in English, Office of the Ombudsperson, University of Ottawa
Annex D Language diversity and foreign accents challenges in school and workplace, Blagovesta Maneva-Sleiman
Annex E PowerPoint presentation of results of survey, Office of the Ombudsperson, University of Ottawa

Bibliography


http://fernwoodpublishing.ca/real-nurses-and-others-Tania-das-Gupta/ (accédé le 21 octobre 2013)


Annex A
BRIEF REVIEW OF THE LITERATURE ON DIVERSITY: KEY FINDINGS,
By Blagovesta Maneva-Sleiman

The concept of diversity has become key for leading global organizations and for all organizations impacted by global economy and mobility. The private and the public sectors often face many similar diversity issues although they may choose different ways of dealing with. The complexity of the diversity issues and the impact it has on workplaces and educational settings has generated an impressive amount of studies and literature on diversity and its numerous expressions. Various academic and professional disciplines are now interested in the issues engendered by the diversity - psychology, cognitive sciences, economy, behavioural sciences, social sciences, sociology, to name few - and different approaches bring new lights on ‘old’ issues.

There are many diverse standpoints of looking at diversity and they generate various definitions. At their beginnings the studies of diversity were mainly associated with human rights. Since there the definition of diversity is growing ever broader to include new dimensions. There has been a shift from seeking equity to exploring diversity and to embracing inclusion. Diversity has progressed from being something organizations had to do because it was mandated, to something they wanted to do to attract and keep the best talent.

For example, the definitions of diversity found in OECD⁴ countries fall into three main groups:

- Diversity as equal opportunities, which mainly refers to prevent discrimination in terms of gender, age, ethnicity, religion or belief, sexual orientation, political views, disability, and physical appearance guaranteeing the neutrality of human resources management processes and that of public employers.
- Diversity as a resource, which aims to understand, appreciate, and realize the benefits different life experiences, competencies, and socio-economic and cultural backgrounds may bring to performance regardless of their ethnicity, cultural background, sexual orientation, disability or age.
- Diversity as inclusiveness, which alludes to working in a strategic, long-term and joint manner to ensure changing structures and systems to make use of the relevant competencies people have.

The diversity of definitions is motivated not only by different disciplines' approaches and methodologies but also by the fact that social dominance affects the construals of diversity. Some authors⁵ argue in favour of a specific delineation of what the concept means in particular contexts in order to limit biases of construals of diversity reflecting the social motivations of those studying it or dealing with.

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⁴ Organisation for Economic Co-operation and Development (2009)
⁵ Unzueta, M., E. Knowles and G. Ho (2012)
The malleability of the concept of diversity also permits biases, for example, those imposed by the group majority or minority status. A recent study\(^6\) results revealed that when a group constituted the majority, its members generally preferred assimilationist policies, and when a group constituted the minority, its members generally preferred pluralistic policies.

Cognitive abilities also play important, even critical role in perceptions of diversity and prejudice. This underappreciated role of cognitive abilities has been highlighted in a recent study, which found that lower cognitive ability predicts greater prejudice and that lower general intelligence in childhood predicts greater racism in adulthood, and this effect was largely mediated via conservative ideology\(^7\).

The perception of diversity plays an important role in organizational culture and performance. A study\(^8\) exploring perceived diversity and organizational performance found that employee perceptions of diversity at the non-manager level were positively related to perceptions of organizational performance.

The diversity issues in nursing profession have received longstanding attention. Nursing research on race and racism began in the 1970s\(^9\) and research on race and racism has grown in the 1980s and 1990s. Yet there is still an urgent need for more high-quality research on this subject and that in educational and practice settings\(^10\).

A report issued by the Centre for Equity in Health and Society (CEHS)\(^11\) states that “Nursing, like a cappuccino – white on top, brown on the bottom – requires stirring up.” The report calls for a prompt accountability and urgent action to dismantle ‘systemic racism’ in nursing in Canada.

The race is not the only factor for discrimination in nursing education and workplace. When analyzing cultural diversity in nursing education, the authors of an article\(^12\) published in 2010 conclude: “Some of the most frequently cited pitfalls and greatest frustrations for students and faculty relate to language and communication”.

The linguistic accent strength is another important yet underestimated reason for discrimination and prejudice of people regardless of their colour, education level and background, etc. Nonnative accents could be a serious impediment to acceptance and inclusion in workplace as well in schools and other settings and differ from other stigma\(^13\).

Furthermore, a recent study\(^14\) found that heavy accents make nonnative speakers sounding less credible. That finding has an insidious impact on the life of the people who routinely orally communicate in a language, which is not their native tongue.

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\(^{6}\) Hehman, E. et al (2012)
\(^{7}\) Hodson, G. & M. Busseri (2012)
\(^{8}\) Allen et al (2007)
\(^{9}\) Porter, CP & E. Barbee (2004)
\(^{10}\) idem
\(^{11}\) Centre for Equity in Health and Society (CEHS) (2005)
\(^{12}\) Bednarz, H., S. Schim & A. Doorenbos (2010)
\(^{13}\) Gloszek, A. & J. Dovidio (2010)
An adjacent document presents some best practices in promoting and managing diversity.
References


*Prepared by Blagovesta Maneva-Sleyman
for the Office of the Ombudsperson, University of Ottawa, in support of her project on promoting diversity at the School of Nursing
September 2012*
Annex B
BEST PRACTICES IN DIVERSITY:
A BRIEF PRESENTATION
By Blagovesta Maneva-Sleiman

Diversity best practices inventory:

- Before engaging in diversity initiatives, determine the underlying philosophy that informs those initiatives.
- Develop a Diversity Framework to capture all important elements for diversity in the organization.
- Develop a Business Case for Diversity (see Annex).
- Position diversity as a business imperative and a moral duty (2008 Framework for Action: diverse Ontario diverse Ontario Public Service OPS)

«Our differences are part of what makes us human, and the diversity of Ontario is part of what makes this province an exciting and dynamic place to live and work. Being inclusive of diversity makes us stronger as an organization – by giving us a business advantage and giving reality to our public service values…. As a public service organization, we can’t afford to waste the potential of anyone because of his or her race, ethnicity, sexual orientation, ability or any other dimension of diversity. Diversity is a business advantage, and we have to seize it or be left behind” (Ontario, 2008).

- Develop Diversity Strategic Plan
- Diversity Branding – promote the institution as an organization valuing and promoting diversity.
- The critical importance of top leadership commitment to diversity:
  - Initiatives being championed from the top while also being informed by, and responsive to, people who have felt marginalized, and the communities they represent.
  - Designate a well-respected leader a Diversity Champion.
- Critical importance of data (workforce and student population demographics and perceptions), collected regularly (annually would be best in the case of educational institutions).
- Annual diversity climate surveys to measure evolving perceptions and trends.
- Establish appropriate measures of diversity to account for targets and outcomes.
• Create a diversity scorecard with performance measures and expected outcomes to assess progress.

• At the longer-term explore possibilities of benchmarking with similar organizations:
  o E.g., the use of benchmarks in Finland (Diversity Barometer) and the Netherlands (Diversity Index) have allowed authorities to examine attitudes towards diversity.

• Launch diversity mentorship program, including reciprocal mentorship.

• Explore the creation of a Diversity Advisory Committee.

• Ongoing consultation and discussion on diversity-related topics with employees, faculty, students, unions, student associations and other stakeholders.

• Explore instituting a position of Chief Diversity Officer and an Office of Diversity.

• Establish a diversity employee and/or student network/s.

• Explore the need of creating an Advisory Taskforce for Diversity and Cultural Competence (see University of Pennsylvania School of Nursing experience)

• Consider revision of current curriculum to include and enhance awareness and knowledge of diversity issues and promote culture of respect and inclusiveness:
  o Possible development of a specific diversity awareness/education program.

• Increase outreach, recruitment, and retention of diverse members of the associated faculty and academic support staff.

• Establish Diversity Leadership Award.
Some sources of information:

Business Case for Diversity

As organizations have realized the benefits of diversity, the case for diversity and equality programs has gone far beyond the quotas of affirmative action and targets of employment equity. The move to inclusive programs has been influenced by:

- **Changing demographics**
  - By 2015, 48 percent of the workforce will be aged 45-64. Roughly one in five Canadians will be a visible minority by 2017. In cities such as Toronto and Vancouver, minorities already represent nearly half the population;

- **The growth in minority communities as markets**
  - “Diverse customers are more complex and differ in their needs, tastes, and desires. To understand and respond properly to a diverse customer base, businesses need to make their own workforce more diverse…by having employees who represent the diverse marketplace, organizations can communicate and serve diverse customers more effectively.” (Wentling and Palma-Rivas, 1997, in Wrench 2007);

- **The importance of the service sector (including the health sector)**
  - Cultural and interpersonal skills are very important when companies provide services to their clients and employees need to understand the ethnic and cultural differences of their clients;

- **Globalization and the increasing spread of organizations into other countries**
  - Organizations need to be able to manage their diversity and become more cosmopolitan within the company if they ever hope to interact successfully with their global partners;

- **External image and legal obligations**
  - Organizations want to meet legal obligations and be seen as inclusive and cosmopolitan. It helps their bottom line and assists them with recruitment if they are seen as inclusive.

*Prepared by Blagovesta Maneva-Sleyman
for the Office of the Ombudsperson, University of Ottawa, in support of her project on promoting diversity at the School of Nursing
September 2012*
Annex C

**DIVERSITY CLIMATE SURVEY**

of all students and employees of the School of Nursing University of Ottawa

Diversity refers to any significant difference between people in an organization, including gender, sexual orientation, age, race, ethnicity, language, disability (physical or mental), and status/occupation.

Diversity Climate Survey Notes

- This is an anonymous survey. You do not have to write your name.
- You do not have to answer every question if you do not want to.
- The comments you provide will be summarized, not repeated the way you write them.
- If you wish to be considered for an individual interview with the Office of the Ombudsperson, please provide contact information in the appropriate section at the end of the survey questionnaire.
- Should you have any questions or need further information, please contact Lucie Allaire, Ombudsperson, University of Ottawa, by phone at 613-562-5342 or by email: Ombudsperson@uottawa.ca.

You must complete the questionnaire in one session as the system does not save your info until submitted.

Please allow 30 minutes to complete.

Thank you!

### SECTION 1: EXPERIENCE WITH DIVERSITY

#### SECTION 1.1 Organizational

1.1.1 The series of statements below are about the climate at the School of Nursing in academic and clinical placement settings and the kinds of interactions between students, faculty and staff. Please indicate how strongly you agree or disagree with each statement.

**A - Students at the School of Nursing are accepted and respected regardless of their racial or ethnic background:**

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<td>e) by administrative staff</td>
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<td>f) by other students</td>
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</table>
### B - Students are accepted and respected regardless of their sex:

<table>
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<tr>
<th></th>
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<th>Disagree</th>
<th>Neither disagree or agree</th>
<th>Agree</th>
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<th>Do not know</th>
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<tbody>
<tr>
<td>a) in university settings</td>
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<tr>
<td>b) in clinical placement settings</td>
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<tr>
<td>c) by faculty members</td>
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<tr>
<td>d) by practice supervisors</td>
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<tr>
<td>e) by administrative staff</td>
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<tr>
<td>f) by other students</td>
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</tbody>
</table>

### C - Students with different sexual orientation are accepted and respected:

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither disagree or agree</th>
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<th>Do not know</th>
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<tr>
<td>a) in university settings</td>
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<td>b) in clinical placement settings</td>
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<tr>
<td>c) by faculty members</td>
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<td>d) by practice supervisors</td>
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<td>e) by administrative staff</td>
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<tr>
<td>f) by other students</td>
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</table>

### D - Student's with disabilities are accepted and respected:

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither disagree or agree</th>
<th>Agree</th>
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<th>Do not know</th>
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</thead>
<tbody>
<tr>
<td>a) in university settings</td>
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<tr>
<td>b) in clinical placement settings</td>
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<tr>
<td>c) by faculty members</td>
<td></td>
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</tr>
</tbody>
</table>
d) by practice supervisors

e) by administrative staff

f) by other students

**E - Students from different linguistic backgrounds (language and accents) are accepted and respected:**

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither disagree or agree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Do not know</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) in university settings</td>
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<tr>
<td>b) in clinical placement settings</td>
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<tr>
<td>c) by faculty members</td>
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<tr>
<td>d) by practice supervisors</td>
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<tr>
<td>e) by administrative staff</td>
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<tr>
<td>f) by other students</td>
<td></td>
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</tbody>
</table>

**F - Students from different religious backgrounds are accepted and respected:**

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither disagree or agree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Do not know</th>
</tr>
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<tbody>
<tr>
<td>a) in university settings</td>
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<tr>
<td>b) in clinical placement settings</td>
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<tr>
<td>c) by faculty members</td>
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<tr>
<td>d) by practice supervisors</td>
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<tr>
<td>e) by administrative staff</td>
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<tr>
<td>f) by other students</td>
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</tr>
</tbody>
</table>

**G - Staff/Professors/Supervisors openly react to any incidents of racism, sexism or other forms of discrimination.**

<table>
<thead>
<tr>
<th></th>
<th>Strongly</th>
<th>Disagree</th>
<th>Neither</th>
<th>Agree</th>
<th>Strongly</th>
<th>Do not</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
The School of Nursing is committed to supporting and respecting diversity.

The School prepares students to deal with diversity and issues related to diversity.

1.1.2 The series of statements below relate your appreciation of diversity in the School of Nursing. Please indicate how strongly you agree or disagree with each statement.

A - I feel positive about diversity in the School of Nursing.

B - I feel included in my large group.

C - I can talk openly about issues related to diversity with:

a) staff/professors

b) supervisors

c) students

D - I know where to go and ask for assistance if I face issues related to diversity.
### SECTION 1.2 Individual

1.2.1. The series of statements below relate to your dealing with diversity. Please indicate, for each question, the number that best reflects your feelings/views. Select the number that represents where you fit along the scale for each continuum below:

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither disagree or agree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Do not know</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>I am not</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>knowledgeable</td>
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<td>knowledgeable</td>
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<td></td>
<td>about different</td>
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<td></td>
<td>groups' cultures</td>
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<tr>
<td>B</td>
<td>I do not hold</td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>stereotypes about</td>
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<td></td>
<td>other groups</td>
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<tr>
<td>C</td>
<td>I feel partial to,</td>
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<td>and more</td>
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<td></td>
<td>comfortable with,</td>
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<td></td>
<td>some groups than</td>
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<td>others</td>
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<tr>
<td>D</td>
<td>I find it more</td>
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<td>satisfying to</td>
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<td>work with</td>
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<td>individuals</td>
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<td>similar to myself</td>
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<td>E</td>
<td>I am puzzled by</td>
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<td>the culturally</td>
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<td>different</td>
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<td>behaviors I see</td>
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<td></td>
<td>among people</td>
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<tr>
<td>F</td>
<td>I get annoyed</td>
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<td>when confronted</td>
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<td>with people</td>
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<td>who speak little</td>
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<td>English or have</td>
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<td></td>
<td>a heavy accent</td>
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</tr>
</tbody>
</table>
G - I get annoyed when confronted with people who speak little French or have a heavy accent.

1 2 3 4 5

G - I show patience and understanding with people who speak little French or have a heavy accent.

H - I feel that minorities should adapt to the majority's rules.

1 2 3 4 5

H - I feel that both minorities and organization should learn to work together.

1.2.2. How would you describe your overall experience with acceptance and respect of diversity at the School of Nursing?

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Neither bad or good</th>
<th>Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

With staff

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Neither bad or good</th>
<th>Good</th>
<th>Excellent</th>
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</thead>
<tbody>
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<td></td>
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</tbody>
</table>

With faculty

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Neither bad or good</th>
<th>Good</th>
<th>Excellent</th>
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</thead>
<tbody>
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<td></td>
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</tbody>
</table>

With clinical placements supervisors

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Neither bad or good</th>
<th>Good</th>
<th>Excellent</th>
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<tbody>
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<td></td>
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</tbody>
</table>

With students

<table>
<thead>
<tr>
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<th>Fair</th>
<th>Neither bad or good</th>
<th>Good</th>
<th>Excellent</th>
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<tbody>
<tr>
<td></td>
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</table>

Other (please specify)

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Neither bad or good</th>
<th>Good</th>
<th>Excellent</th>
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</thead>
<tbody>
<tr>
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</tbody>
</table>

1.2.3 Have you personally experienced prejudice or discrimination at the School of Nursing settings (excluding clinical placements) with respect to any of the following?

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Very little</th>
<th>Somewhat</th>
<th>Quite a lot</th>
<th>Very much</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Age

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Very little</th>
<th>Somewhat</th>
<th>Quite a lot</th>
<th>Very much</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Category</td>
<td>Not at all</td>
<td>Very little</td>
<td>Somewhat</td>
<td>Quite a lot</td>
</tr>
<tr>
<td>--------------------------------</td>
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<td>----------</td>
<td>-------------</td>
</tr>
<tr>
<td>Disability</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Ethnic/Racial background</td>
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<td></td>
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<tr>
<td>Gender</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Language or Accent</td>
<td></td>
<td></td>
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<tr>
<td>Sexual orientation</td>
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<td></td>
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<tr>
<td>Other (please specify)</td>
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</tbody>
</table>

1.2.4 Have you personally experienced prejudice discrimination in clinical placement settings with respect to any of the following?

<table>
<thead>
<tr>
<th>Category</th>
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<th>Very little</th>
<th>Somewhat</th>
<th>Quite a lot</th>
<th>Very much</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability</td>
<td></td>
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<td></td>
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<tr>
<td>Ethnic/Racial background</td>
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<tr>
<td>Other (please specify)</td>
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</tbody>
</table>
1.2.5 Please use the space below to share any comments you may have about the previous questions.

SECTION 2: DEMOGRAPHICS

Question 1: What is your status at University of Ottawa? (Please mark only one answer)

☐ Administrative Staff (If you marked this response, skip to question 6)

☐ Faculty (If you marked this response, skip to question 6)

☐ Practice supervisor (If you marked this response, skip to question 6)

☐ Student (If you marked this response, please answer all questions below)

Question 1a: In what type of program are you registered?
Question 1b: What language program are you enrolled in?

☑ English (If you marked response, please skip to question 6)

☑ French (If you marked response, please skip to question 6)

☐ Bilingual (If you marked this response, please answer all the questions below)

Question 2: How would you rate English language skills?

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understanding</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>spoken English</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Speaking</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Writing</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Reading</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
</tbody>
</table>

Question 3: How would you rate your French language skills?

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understanding</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>spoken French</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Speaking</td>
<td>☐</td>
<td>☐</td>
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<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Writing</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
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<tr>
<td>Reading</td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
</tbody>
</table>

Question 4: Do you think you have a heavy accent when speaking English?

☐ Yes
Question 5: Do you think you have a heavy accent when speaking French?
- No
- Yes
- No
- Do not know

Question 6: What language(s) did you first learn at home or in childhood and you still understand and use?
- English
- French
- English and French
- Other (please specify)
- Other (please specify)

Question 7: Age
- Under 18
- 18-22
- 23-26
- 27-30
- 31-35
- 36-40
- Over 40

Question 8: Gender
- Female
- Male
- Other

Question 9: What do you consider your sexual orientation to be?
- Heterosexual
- Homosexual
Question 10: Do you have disability (physical or mental) condition(s) that requires accommodation by the School of Nursing?

- [ ] Yes
- [ ] No
- [ ] Do not know

Question 11: What is the primary racial/ethnic group you identify with?

- [ ] Arab
- [ ] Black/African
- [ ] Black/African Caribbean
- [ ] Chinese
- [ ] Filipino
- [ ] Latin American/Hispanic
- [ ] North American Aboriginal/First Nations/Inuit/Metis
- [ ] South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
- [ ] Southeast Asian (e.g., Vietnamese, Cambodian, Malaysian, Laotian, etc.)
- [ ] Korean
- [ ] Japanese
- [ ] White/Caucasian/of European descent
- [ ] Mixed ethnic/cultural backgrounds (please specify)
- [ ] Other (please specify)

Question 12: With what religion (if any) do you identify?

- [ ] Aboriginal spirituality
- [ ] Buddhism
- [ ] Christianity
- [ ] Confucianism
- [ ] Hindu
DO YOU WANT TO BE CONSIDERED FOR A FOLLOW UP INDIVIDUAL INTERVIEW WITH THE OMBUDSPERSON OF THE UNIVERSITY OF OTTAWA?
(THE OFFICE OF THE OMBUDSPERSON IS INDEPENDENT OF THE SCHOOL OF NURSING.)

☐ No
☐ Yes (If you marked this response, please provide your name and contact information below.

Contact information:
Name :
Email :
Phone number :

Thank you for taking the time to complete this survey.
Annex D
Language diversity and foreign accents challenges in school and workplace,
By Blagovesta Maneva-Sleiman

Language and more specifically accents diversity has received a more prominent attention in last years as economy globalization, human migration and communications increase in the world.

The linguistic accent is an important yet underestimated reason for prejudice and discrimination of people regardless of their race, ethnicity, gender, education level and background, etc. Non-native accents could be a serious impediment to acceptance and inclusion in workplace as well in schools and other settings and differ from other stigma. Noticeable accents are sometimes seen as one of the “last acceptable areas for discrimination”\(^1\).\(^5\)

Understanding the role of accents in the workplace diversity is important because accents can be salient in the same way as ethnicity, age, gender, and color and may be a source of employment discrimination\(^1\).\(^6\)

In the USA, workplace discrimination complaints based on national origin -- which often involve language ability -- rose by 76 percent from 1997 to 2011, when more than 11,800 complaints were lodged with the U.S. Equal Employment Opportunity Commission\(^1\).\(^7\). This fact seems to confirm the growing concerns about workplace and education settings prejudice and discrimination based on language ability and the so-called foreign accents. Women seem to be more negatively affected by men, as a recent study shows: female candidates with international accents are less likely to be hired than female candidates with an American accent; but this difference does not occur for male candidates\(^1\).\(^8\).

Foreign accents related issues in school and workplace could represent significant challenges not only for the people speaking with those accents, but also for their colleagues, supervisors or the clients they serve. The more and stronger communications skills, especially verbal, needed for the exercise of a profession, the bigger are the challenges encountered. In addition, the lack of confidence because of English (French) weak skills may result in a challenging behaviour amongst the student or the employee.

The nursing is amongst the professions relying most on communication skills. Communication, verbal and non-verbal, is a large part of nursing and the growing cohorts of foreign-born nurses in the developed world, test the intelligence, the adaptability and values of the health systems and the schools preparing the human resources for those systems. In bilingual places where more than one language is used and required in workplace, the challenges are even bigger, as the people speaking two languages with native phonological proficiency (without noticeable accent) are an extremely small minority.

\(^1\)\(^5\) http://www.joe.org/joe/2009february/comm1.php
\(^1\)\(^6\) Deprez-Sims, A.S. and Morris, S.B. (2010)
\(^1\)\(^7\) http://jobs.aol.com/articles/2012/11/30/discriminated-against-for-an-accent/
\(^1\)\(^8\) Chuqiao Yang (2012)
Changing demographics in nursing schools and health institutions, where now non-traditional students and practitioners predominate, bring significant opportunities and challenges for the organizations. The American Association of Colleges of Nursing (AACN) estimates that, in 2005, approximately 73% of all undergraduate nursing students were non-traditional. According to Jeffreys (2004), the term non-traditional refers to any student who meets one or more of the following criteria: aged 25 or older, commutes to school, enrolled part time, is male, is a member of an ethnic or racial minority group, speaks English as a second or additional language, has dependent children, and holds a general equivalency diploma or has required remedial classes. Traditional students generally have been young unmarried women entering nursing programs as first-time students soon after completion of their secondary education (AACN, 2005).

According to Bednarz et al. (2010), “language issues become even more complex when faculty members and students have different backgrounds and speak different languages or dialects. Language also can be a major issue for local students from different communities, educational systems, and social strata. In addition, because nursing and medicine have their own unique cultures, professional languages, and jargon, cross-cultural communication among faculty, students, and other members of the health care team can become even more difficult.”

“Heavy” accents are not only associated with possible burden of efforts to understand them. A recent study has confirmed that heavy accents make non-native speakers sounding less credible. That finding has an “insidious impact on the life of the people who routinely orally communicate in a language, which is not their native tongue”. In the case of nursing, it also impacts the relationship between the health professional and the patients, in which relationship trust is a critical component.

Language diversity reflects cultural diversity, which is of infinite complexity and with far-reaching consequences for communications and relationships. “Different cultural and linguistic conventions lead to perceive behaviours with own conventions. Differences in ways of speaking and in cultural conventions are perceived as differences in behaviour and attitudes, then negative stereotyping ethnic-minority speakers. Cultural and social differences in assumptions, interpretations, and attitudes may lead to misunderstanding and power. There is limited power to negotiation from speakers with limited English.”

Those findings allow sketching a basic picture of the challenges encountered in regards to language and accent diversity in nursing workplaces and schools. Language and accents diversity is part of the diversity challenges faced by individuals and organisations but the stigma associated with them is often underestimated or simply ignored. Particular attention and action are required to understand and overcome those challenges. Incorporating cultural knowledge and competences in nursing schools curriculum is an important step to increase cultural skills but is not the only way. Because beyond the challenges, there are plenty of opportunities to improve not only nursing schools’

19 Bednarz, H., S. Schim, and A. Doorenbos (2010)
20 Ibid.
21 Ibid.
23 http://www.education.wisc.edu/wle/WLE/discrimination.asp
and workplaces’ environment, but also the health system’s performance and outcomes, for the patients, the health practitioners and the entire communities.

References:


