

Should You Care? Cultural Sensitivity, Access & Community in Care at Post-Secondary Institutions.

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Terminology and Language Use

Cultural Sensitivity/Cultural Competence:

Being aware that cultural differences and similarities between people exist without assigning any positive or negative value to them.[1]

Ethnocentrism:

Ethnocentrism is a nearly universal syndrome of discriminatory attitudes and behaviors. The attitudes include seeing one's own group (also referred to as the in-group) as virtuous and superior, while viewing those outside of their group as contemptible and inferior.[2]

Ethnorelativism/Cultural Relativism:

A belief or framework of thinking that is rooted in respect and understanding of other cultures on the basis of equality[3]

Developmental Model of Intercultural Sensitivity:

A model describing how individuals develop a deeper understanding and appreciation of cross-cultural differences.[4]

Cross-Cultural Evaluation Tool:

A tool that is used to assess an individual's cultural competence.[5]

Marginalized Student Population:

Students who are systematically denied equitable access to the same opportunities theoretically available to all students. In a Canadian context, marginalized students may typically refer to racialized students, LGBTQA+, disabled, or students who identify with a low socio-economic status.

[1] Dabbah, Mariela. "What Is Cultural Sensitivity? Discover Definition & Theory." RED SHOE MOVEMENT. The Red Shoe Movement, February 14, 2020. <https://redshoemovement.com/what-is-cultural-sensitivity/>.

[2] Hammond, Ross A., and Robert Axelrod. "The Evolution of Ethnocentrism - JSTOR." The Evolution of Ethnocentrism. Sage Publications, Inc., December 2006. <https://www.jstor.org/stable/27638531>.

[3] Victor, Wang C. Handbook of Research on Learning Outcomes and Opportunities in the Digital Age. Information Science Reference, an imprint of IGI Global, 2016.

[4] Milton J. Bennett, "Developmental Model of Intercultural Sensitivity," The International Encyclopedia of Intercultural Communication, 2017, pp. 1-10, <https://doi.org/10.1002/9781118783665.ieicc0182>, 1.

[5] Van de Vijver, Fons, and Norbert K. Tanzer. "Bias and equivalence in cross-cultural assessment: An overview." European Review of Applied Psychology 54, no. 2 (2004): 119.

Foreword

I strongly believe that students should feel safe, welcome, and included at post-secondary institutions, allowing them to thrive to the best of their ability. A significant barrier many marginalized students face is being “othered” by their peers. Othering is a process wherein an individual or a group of people is made to feel — or is viewed as — fundamentally different, even to the point of making that person or group seem less than human[6]. This process can trigger instinctive emotional reactions towards members of that group. In many instances, othering has led to marginalized communities being degraded, isolated, and discriminated against [7]. In the case of racialized and religious students, othering is often a byproduct of ethnocultural differences. One’s ethnicity, culture, and heritage should be a point of pride and joy, yet oftentimes these facets of one’s being are not represented in post-secondary spaces, leaving marginalized students with feelings of isolation and exclusivity[8]. It is the responsibility of a post-secondary institution to ensure that these students feel embraced in their educational environment. This can be accomplished through many routes, but I believe that fostering relationships with these students to understand, acknowledge, and support their unique experiences is key.

The post-secondary experience does not only concern academics, but a collective of various other aspects including one’s social, health, and recreation experiences. Students often rely on post-secondary institutions to provide a much-needed sense of community as they embark on a new chapter in their lives. Thus, it is critical that this community-building integrates various cultural considerations so that racialized and religious students can truly flourish and embrace their post-secondary experience in a safe and validating way.

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[6] Mary K. Canales, “Othering: Toward an Understanding of Difference,” *Advances in Nursing Science* 22, no. 4 (June 2000): pp. 16-31, <https://doi.org/10.1097/00012272-200006000-00003>, 16.

[7] Ibid.

[8] Sheila Cote-Meek, *Colonized Classrooms: Racism, Trauma and Resistance in Post-Secondary Education* (Halifax: Fernwood Publishing, 2014).

Introduction

One of Canada's greatest points of pride is the country's diversity. The cultural mosaic of the Canadian population is seldom found in any other location in the world. The first Canadian census in 1871 saw a population that was predominantly distributed between those who had origins in the British Isles, France, and Indigenous Peoples.[9] The results of the 2016 Canadian census show over 250 ethnic origins were reported and where four in ten Canadians reported more than one ethnic origin.[10] In turn, the increasing ethnocultural diversity of Canadians calls for a shift from society's ethnocentric perspective to a more ethnorelative perspective where there is wider recognition, acceptance, and inclusion of the various ethnic, religious, and cultural groups that call this country home. A specific sector where an ethnorelative perspective is clearly needed is provision of care services. There are apparent disparities that marginalized populations face with regards to the access and delivery of care which will be further discussed throughout the report.

Furthermore, while being accepting and inclusive of a diverse population is to act in good conscience, embracing diversity and inclusion has proven to enhance and encourage innovation, creativity, and a stronger sense of community. [11] A 2003 study conducted by the University of Texas illustrated that racial diversity increases innovation and financial performance within several national banks. [12] Moreover, in another study conducted at the University of Illinois, racial diversity was a significant requirement for success in a decision-making experiment for small groups. Finally, a longitudinal study conducted by Johns Hopkins University which followed students' moral development after taking a first-year diversity class revealed that students who understood the concept of diversity earlier on in the post-secondary experience showed greater worldly moral reasoning at the time of their graduation. This relationship was stronger among students that exhibited lower academic abilities at the start of their post-secondary experience.[13]

[9] "Ethnic and Cultural Origins of Canadians: Portrait of a Rich Heritage," Census in Brief: Ethnic and cultural origins of Canadians: Portrait of a rich heritage (Government of Canada, Statistics Canada, October 25, 2017), <https://www12.statcan.gc.ca/census-recensement/2016/as-sa/98-200-x/2016016/98-200-x2016016-eng.cfm?wbdisable=true>.

[10] Ibid.

[11] Phillips, Katherine W. W., "How Diversity Makes Us Smarter." Greater Good Magazine. University of California, Berkeley, September 18, 2017.

https://greatergood.berkeley.edu/article/item/how_diversity_makes_us_smarter#:~:text=Diversity%20enhances%20creativity,unfettered%20discoveries%20and%20breakthrough%20innovations.

[12] Ibid.

[13] Mitchell J. Chang, "Perservation or Transformation: Where's the Real Educational Discourse on Diversity?," The Review of Higher Education 25, no. 2 (2002): pp. 125-140, <https://doi.org/10.1353/rhe.2002.0003>, 126.

The inclusion and consideration of diverse populations must also occur in various social and economic settings, with a crucial setting being healthcare. Evidence from the McCourt School of Public Policy suggests a lack of cultural competence leads to an overall lower quality of patient dissatisfaction. Another study found that racialized people, including African Americans, Latinos, and Asian Americans, are more likely than Whites to report that they believe they would have received better care if they had been of a different race or ethnicity.[14] Furthermore, the study specifically found that Asian-Americans were least likely to feel that their physician understood their cultural background and values, and are most likely to report that their doctor looked down on them thereby hindering their overall care.[15] When applied to the post-secondary context, although diversity has been proven to be a strength for post-secondary institutions, there is no denying that students who identify with marginalized populations also face significant barriers in access to care. A study conducted by the University of Roehampton found that Black students who seek mental health support experience overt discrimination and a lack of access to culturally competent services.[16]

There are clear discrepancies in the access and delivery of care to marginalized populations, especially marginalized student populations based on race, ethnicity, and culture. While the benefits of diversity remain, those who contribute to the diversity of post-secondary environments are often left behind when it comes to their care. For example, many sources referenced throughout this report are not within the scope of the Canadian context. Much of the research came from the United States as there is a lack of research in a Canadian context, more specifically within the context of Ontario. This lack of research is concerning as it makes it difficult to identify the exact causes behind the barriers that marginalized students face, where these student groups have unique care needs based on their individual cultural identities. Thus, cultural sensitivity must be an integral condition of the care experience marginalized students receive within a post-secondary institution to ensure equitable, efficient, and effective care.

[14] "Cultural Competence in Health Care: Is It Important for People with Chronic Conditions?," Health Policy Institute (Georgetown University - McCourt School of Public Policy, February 13, 2019), <https://hpi.georgetown.edu/cultural/>.

[15] Ibid.

[16] Jason Arday, "Understanding Mental Health: What Are the Issues for Black and Ethnic Minority Students at University?," Social Sciences 7, no. 10 (2018): p. 196, <https://doi.org/10.3390/socsci7100196>, 196.

Methodology

This paper was guided by and aims to answer three key interrelated questions about the concept of cultural diversity:

1. What is cultural sensitivity within a post-secondary setting?
2. How accessible are culturally sensitive services and spaces to post-secondary students in Canada, and more specifically, Ontario?
3. What are ways that universities can improve practices and services to make them more accessible and culturally sensitive?

The research was conducted in three phases. The first phase focused on primary and secondary literature that was geographically relevant to Canada, specifically in the context of Ontario. This phase included a review of the Ontario Undergraduate Student Alliance's (OUSA) resources including policy papers and survey results from the Ontario Undergraduate Student Survey (OUSS). However, there was insubstantial research regarding the current landscape of culturally sensitive care in Canada, let alone in Ontario. Thus, the parameters of the research were expanded in phase 2 to primary literature with a larger geographic range including countries like the United States, the United Kingdom, China, Australia, and various European countries. The primary literature was reviewed and collected through databases such as ResearchGate, JSTOR, Google Scholar, and Education Resources Information Center. The research from these databases was sourced through the following combination of search terms illustrated in the table below:

Terms Used

- 'Cultural Sensitivity + University + Ontario'
- 'Cultural Competency + Ontario + University'
- 'Cultural Sensitivity + Care + University'
- 'Cultural Competency + Care + University'
- 'Ethnocentrism + University + Canada'
- 'Ethnorelativism + University + Canada'
- 'Cultural Sensitivity + Care + Model'
- 'Cultural Competency + Care + Model'

Once there was substantial information gathered from the primary literature, the third phase entailed a review of gray literature through university resources such as the University of Calgary, the University of British Columbia, and several American post-secondary institutions. To attempt to answer the guiding questions, the research required for this report relied heavily on literature from the United States, which shows a clear need to expand research regarding this topic on a global as well as a national scale. Consequently, this will ensure that a diverse and intersectional group is represented with regard to the topic of cultural competence in healthcare.

There were several hurdles faced while the general framework for the methodology was developed and carried out, with the primary challenge being the limitations regarding the research. The first limitation was geographical relevance as most primary research came from the United States and there was limited research with a Canadian context. As a byproduct of this, another limitation was the minimal research regarding the implications of cultural sensitivity among ethnocultural differences as most of the American literature focused on racial groups as opposed to ethnocultural groups, which is more relevant to pre-existing Canadian data. Overall, the lack of and relevance of research in a Canadian institutional context made it difficult to extrapolate findings from the US where the systems of categorizations are different.

Findings

Question 1: What is cultural sensitivity within a post-secondary setting?

By definition, cultural sensitivity (also known as cultural competence) is the awareness that cultural differences and similarities between people exist without assigning any positive or negative value to them.[17] Common examples of culturally sensitive practices can be using inclusive language that is respectful of multiculturalism within a society, or displaying multiple languages used in public settings. With regard to healthcare, cultural sensitivity could apply to the development of systems that exhibit culturally consistent care to combat disparities that marginalized populations endure. However, within a post-secondary setting, cultural sensitivity encompasses much more than just the awareness of different cultures; it also reflects the understanding and integration of different cultures by the institutions and its members, both students and staff. In the context of this report, cultural sensitivity within a post-secondary setting is essentially an ever-changing framework of thinking that aims to understand and integrate unique and dynamic cultural differences to deliver the best student experience possible. This definition was developed on different definitions from various organizations which will be elucidated upon further below.

According to the National Association of Community Health Centers in the United States, cultural sensitivity “embodies the knowledge, understanding, skills, and protocols that allow an individual or system to provide services across cultural lines in the best possible way.”[18] Additionally, the National Education Association in the United States defines cultural competence as “having an awareness of one's own cultural identity and views about difference, and the ability to learn and build on the varying cultural and community norms of students and their families,”[19] adding that acquiring cultural competence indicates “the ability to understand the in-group differences that make each student unique, while celebrating the between-group variations that make our country a tapestry.” [20]

[18] Daniel Dell'Oso, “Cultural Sensitivity in Healthcare: The New Modern Day Medicine,” *Cultural Sensitivity in Healthcare: The New Modern Day Medicine*, January 2016, <https://doi.org/10.33015/dominican.edu/2016.hcs.st.02>.

[19] Substance Abuse and Mental Health Services Administration. *Improving Cultural Competence*. Treatment Improvement Protocol (TIP) Series No. 59. HHS Publication No. (SMA) 14-4849. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

[20] Ibid.

While several organizations have their own definition of cultural sensitivity and competence, it is widely agreed based on findings from previous literature that there are 5 elements that contribute and are crucial to any organization or system's ability to improve their cultural competency.[21] These 5 elements are:

1. Valuing diversity [22]

- Meaning to accept and respect differences

2. Possessing the capacity for cultural-self assessment

- The ability to better be able to see how one's actions affect people from other cultures [23]

3. Being aware of the dynamics of cultural interactions

- Recognizing that there are many factors that impact cross-cultural differences and current attitudes such as biases based on societal stereotypes, historical and/or personal cultural experiences [24]

4. Having institutionalized cultural knowledge

- Knowledge about culture, cultural differences, and dynamics that are learnt through one of the following facets: school, organizations, or an agency[25]

5. Adopting servicing delivery such that it reflects an understanding of cultural diversity

- Recognizing and understanding cultural dynamics and how they affect service delivery followed by the implementation of changes to service provisions that address disparities faced by marginalized populations[26]

Thus, based on the former definitions and the five essential elements, cultural competence allows communities like post-secondary institutions to respond with respect and understanding to those of different cultural, racial, and religious backgrounds through an intersectional lens that affirms and acknowledges everyone's diverse lived experiences. As a framework of thinking in the post-secondary space, cultural sensitivity ensures that systems and structures within a community or organization benefit not only the majority, but minority populations as well, ultimately minimizing disparities brought upon by cultural, ethnic, and/or racial differences. Overall, cultural competence within a post-secondary setting is a developing framework of thinking that seeks to not only acknowledge cultural diversity but understand and integrate changing and different cultural dynamics to deliver the best student experience possible.

[21] Terry L. Cross and And Others, "Towards a Culturally Competent System of Care: A Monograph on Effective Services for Minority Children Who Are Severely Emotionally Disturbed.," ERIC (Georgetown University Child Development Center, February 28, 1989), <https://eric.ed.gov/?id=ED330171>.

[22] Ibid.

[23] Ibid.

[24] Ibid.

[25] Ibid.

[26] Ibid.

Question 2: How accessible are culturally sensitive services and spaces to post-secondary students in Canada, and more specifically, Ontario?

The current landscape of culturally sensitive services and practices in Canada is seldom documented within Canadian post-secondary institutions and supporting organizations. However, the 2020 Ontario Undergraduate Student Survey (OUSS) conducted by OUSA reveals that students want culturally relevant, affirming, and inclusive care that takes into account the systemic barriers that influence their worldview and exacerbate their lived experiences within the healthcare system.[27] One of the respondents from the survey stated that their “friend benefited from [having] a counsellor who had experience [in] spiritual/naturopathic practices, [with whom they shared the] same cultural background.”[28] Additionally, the survey found that students called for “culturally-sensitive, student-focused models and creating population-specific services for specialized groups...” to allow students to have easier access to services.[29] Furthermore, OUSA’s Addressing Racism and Religious Discrimination policy paper found that racialized and religious students face difficulties obtaining a standardized level of mental health care due to non-racialized and untrained counselors’ lack of understanding of cultural or religious factors that influence their lived experiences.[30] This further relates to other concerns students have with regards to the limited proactive constitution of racial, religious, and cultural equity within these institutions.[31] These examples are all a huge source of frustration for many Canadian students regarding the poor service of care marginalized student populations feel they receive. Additionally, it points to the onus that students take on to bring awareness on their own accord due to a lack of institutional accountability. Thus, these examples showcase that while marginalized students face incidents of racism and religious discrimination, they simultaneously do not have access to culturally sensitive care that would effectively walk them through the discrimination they face. Overall, there is a clear need for culturally sensitive care within the post-secondary landscape in Ontario and by improving cultural sensitivity, these institutions can address underlying systemic issues as opposed to surface-level concerns.

Aside from student accounts of the need for culturally competent care, literature also suggests that there is a dire need to prioritize culturally sensitive care within post-secondary institutions. In Ontario, post-secondary institutions have reported a struggle in dealing with the increased demand for student mental health care, as there continues to be a greater social willingness to acknowledge and seek treatment for mental health issues.[32]

[27] De Costa, Britney, Malika Dhanani, and Shemar Hackett. *Quality: Results from the 2020 Ontario Undergraduate Student Survey*. Research Report. Toronto: Ontario Undergraduate Student Alliance, 2022.

[28] Ibid.

[29] Ibid.

[30] Njonjo, Muriuki, Megan Town, Ryan Tse, and Brittany Williams. *Addressing Racism & Religious Discrimination*. Toronto: Ontario Undergraduate Student Alliance, 2021.

[31] Ibid.

[32] Pearlyn Ng and Marija Padjen, “An Overview of Post-Secondary Mental Health on Campuses in Ontario: Challenges and Successes,” *International Journal of Mental Health and Addiction* 17, no. 3 (2018): pp. 531-541, <https://doi.org/10.1007/s11469-018-0015-5>, 535.

A part of the struggle institutions are facing can be attributed to an “increased number of non-traditional groups on campus,” including racialized and religious students.[33] The increased diversity of students coming from various ethno- and socio-cultural backgrounds creates a greater need and importance for maintaining “culturally sensitive, student-focused models,” and creating population-specific services for marginalized student groups.[34] In a Canadian context, while there is palpable evidence suggesting the need for culturally sensitive care in Ontario post-secondary institutions, reports show there is minimal understanding on the formation and maintenance of these models, and the creation of population-specific services for marginalized student groups.

Pre-Existing Models of Approaches to Culturally Sensitivity

While not designed for post-secondary environments, findings from current literature reviews reveal there are generally two approaches in creating interventions to address cultural competence. The first approach operates through programs that apply generic or universal models of cultural competence, while the second approach aims to improve group-specific cultural competency.[35] Upon further inspection, there are two models that represent these general approaches in program development, implementation, and evaluation of cultural competency in care. These models are described below, and may be applicable when considering the integration of culturally sensitive care in Ontario post-secondary.

To begin, the first of the aforementioned approaches, programs that apply generic or universal models of cultural competency, can be seen through the Developmental Model Intercultural Sensitivity (DMIS) also known as the Bennett Scale. The model proposes a “developmental continuum along which people can progress toward a deeper understanding and appreciation of cultural variance.”[36] Essentially, it is the transition of an ethnocentric framework of thinking to an ethnorelative one, and can be applied to cross-cultural dissimilarity in social settings. The table below illustrates the six stages of the continuum with a description and examples within a post-secondary institution.

[32] Pearlyn Ng and Marija Padjen, “An Overview of Post-Secondary Mental Health on Campuses in Ontario: Challenges and Successes,” *International Journal of Mental Health and Addiction* 17, no. 3 (2018): pp. 531-541, <https://doi.org/10.1007/s11469-018-0015-5>, 535.

[33] Justin Hunt and Daniel Eisenberg, “Mental Health Problems and Help-Seeking Behavior among College Students,” *Journal of Adolescent Health* 46, no. 1 (2010): pp. 3-10, <https://doi.org/10.1016/j.jadohealth.2009.08.008>, 4.

[34] *Ibid.*

[35] Butler M, McCreedy E, Schwer N, et al. Improving Cultural Competence to Reduce Health Disparities. Agency for Healthcare Research and Quality (US), Rockville (MD); 2016. PMID: 27148614.

Stage	Description	Example
Denial	<p>The stage at which cultural differences are not recognized. Individuals in this stage often do not recognize cultural differences and experiences.</p> <p>They have an ethnocentric perspective and interact in homogenous groups while othering different groups.</p>	<p>“We are all the same and I don’t understand why we have to learn about the different groups in the university. Why don’t they just learn how we do things in Canada?”</p>
Defense	<p>The stage where individuals begin to recognize some differences but view the differences as negative since it deviates from their ethnocentric perspective.</p>	<p>“Asian international students all just love to flaunt their designer clothes. They are just rich and arrogant, they don’t understand how people carry themselves here.”</p>
Minimization	<p>The stage where individuals are aware of cultural differences, however, believe that their ethnocentric perspective is still superior. They believe that the awareness of cultural differences is merely enough to be culturally sensitive.</p>	<p>“In the end, even though students of colour are different, we are all still students at the end of the day.”</p>

Acceptance	The stage where individuals begin to shift towards ethnorelativism with the understanding that culture impacts experiences which accounts for differences. They may not agree with the observed differences but take initiative if discovering more about another culture.	“What pressures does your family put on you as a first-generation student?”
Adaptation	The stage where individuals can competently communicate with other cultures and use their understanding of other cultures to assess other behaviours.	This stage tends to be action based, with an example being bowing as a sign of respect when meeting someone from Japan where that is a cultural symbol of respect.
Integration	The stage where individuals can shift from one cultural framework to another and have developed empathy for other cultures.	This stage tends to be action based, with an example being able to verbally and physically communicate with people of various cultures.

The above steps highlight the movement towards ethnorelativism from ethnocentrism, whilst also developing the key skills required for cultural sensitivity including self-esteem, self-monitoring, open-mindedness, empathy, non-judgement, and interaction involvement. This model has been particularly effective in improving the aforementioned skills. A study conducted by the University of Edinburgh implemented the DMIS model as a method of developing intercultural competence between domestic and international undergraduate students who were studying hospitality and tourism management, which resulted in both student groups streaming away from the ethnocentric stages of the DMIS model towards the ethnorelative ones. A similar study conducted in South Korea found that the same two student groups reported a better cultural understanding and appreciation for one another. Overall, implementation of the DMIS through academic and social settings has been proven to be effective in improving cultural sensitivity between student groups.

In addition to the DMIS model, the latter approach which includes a group-specific framework used to facilitate cultural sensitivity, is the cross-cultural evaluation tool which is commonly used by the nursing profession in their day-to-day practice and in their training processes for nursing students and personal support workers. A key historical challenge that exists in the nursing profession is that of educating and assisting nurses with skills to provide culturally competent care. To combat these issues, cross-cultural teaching strategies have been developed and evaluated with a cross-cultural interaction score. There are several cross-cultural models applied in these teaching strategies to develop cultural sensitivity with the primary models being: The Process of Cultural Competence Model,[40] The Giger and Davidhizar Transcultural Assessment Model,[41] and the Papadopoulos, Tilki and Taylor Model. [42] The aforementioned models are described in the table below.

Model	Description
The Process of Cultural Competence Model	A model that views cultural competency as a continuing process that a healthcare provider takes on to be able to work within the cultural context of their patient and/or patient's community through the integration of cultural awareness, cultural knowledge, cultural skill, and cultural encounters, and cultural desire.

40 Jacqui Allen, "Improving Cross-Cultural Care and Antiracism in Nursing Education: A Literature Review," *Nurse Education Today* 30, no. 4 (2010): pp. 314-320, <https://doi.org/10.1016/j.nedt.2009.08.007>, 316.

41 Ibid.

42 Ibid.

The Giger and Davidhizar Transcultural Assessment Model	A model that views cultural competency as a process of patient assessment that is based on the integration of communication, time, space, social organization, environmental control, and biological variations through which cultural sensitive care can be designed.
The Papadopoulos, Tilki and Taylor Model	A model that views cultural competency as a development process undergone by a healthcare provider in four stages: cultural awareness, cultural knowledge, cultural sensitivity, and finally cultural competency.

These three models of cross-cultural tools have been used widely in the nursing profession for decades.[46] However, many argue that the Process of Cultural Competence Model and the Giger and Davidhizar Transcultural Assessment Model is prone to cultural stereotypes and risk discrimination as they fail to account for individual and community differences within cultural groups which goes against what a culturally sensitive lens requires.[47] Thus, the Papadopoulos, Tilki, and Taylor Model is crucial to nursing education as it provides a developmental model that incorporates cultural sensitivity specifically in an approach towards culturally competent care.

In addition to the cross-cultural models, another critical component of cross-cultural teaching within the nursing profession is evaluation through the cross-cultural evaluation tool. Several models employ varying cross-cultural evaluation tools, however, the most common is a tool that yields cross-cultural interaction scores based on psychometric properties of nurses which are based on the models above.[48] These tools allow one to evaluate cross-cultural interaction and how successful teaching strategies based on cross-cultural models are. There are several studies where cross-cultural models and evaluation tools have been applied to teachers and have shown successful development of cultural sensitivity.[49] Overall, cross-cultural models of care have been applied to nursing practice for many years with the aim of improving cultural competence within the profession in a group-specific approach.

43 Ibid.

44 Ibid.

45 Ibid.

46 Katherine Lancelloti, "Culture Care Theory: A Framework for Expanding Awareness of Diversity and Racism in Nursing Education," *Journal of Professional Nursing* (Elsevier, 2008), <https://doi.org/10.1016/j.profnurs.2007.10.007>.

47 Allen, Improving Cross-Cultural Care and Antiracism

48 Kathleen H. Hughes and Lucy J. Hood, "Teaching Methods and an Outcome Tool for Measuring Cultural Sensitivity in Undergraduate Nursing Students," *Journal of Transcultural Nursing* 18, no. 1 (2007): pp. 57-62, <https://doi.org/10.1177/1043659606294196>, 60.

49 Ibid.

Discussion and Recommendations

Question 3: What are ways that universities can improve care practices and services to make them more accessible and culturally sensitive?

Throughout the report, we have addressed what cultural sensitivity is, the need for culturally sensitive care, and the current landscape of culturally competent care in Canada. Building on the findings of this report, there are several methods that post-secondary institutions can adopt and implement to improve cultural competency such that cultural differences between and within marginalized student groups are not only acknowledged but understood to provide competent physical and mental care and support for post-secondary students.

Recall the five elements essential to improving cultural competency within an organization:

1. Valuing diversity
2. Possessing the capacity for cultural-self assessment
3. Being aware of dynamics of cultural interactions
4. Having institutionalized cultural knowledge
5. Adopting service delivery such that it reflects an understanding of cultural diversity

These elements act as the basis for the following recommendations on how post-secondary institutions can provide care practices and services to make them more accessible and culturally sensitive.

Recommendation 1:

To begin, the first recommendation is that post-secondary integrate initiatives and programs to advance and value diversity programs and initiative and advance value diversity and inclusion. As mentioned earlier, post-secondary institutions are facing new challenges with the increased enrollment of diverse student populations, who often identify with marginalized student groups like racialized and religious students.

With the rise of diverse student enrollment, there is a clear need for programs that create an inclusive campus culture and support the unique needs of these students which often, if not always, require a culturally sensitive lens. One of the methods toward creating an inclusive campus culture where students are not afraid to ask for appropriate care is by creating a dialogue surrounding cultural diversity in higher education through the curriculum.[50] One example of an institutional commitment to creating an inclusive campus climate is having an Office of Diversity and Inclusion which several Ontario universities, such as McMaster University and Western University, currently have in place.

In addition, in the US, several institutions require first-year students to take a course on diversity and inclusion such as the Southern Methodist University (SMU). At SMU, following the implementation of mandatory diversity courses, the graduation rate for several minority student groups increased from 64% to 83% between 2001 and 2014.[51] Therefore, compulsory courses on diversity/inclusion translate into an increased graduation rate for marginalized student populations. Additionally, students report greater cultural sensitivity and competency as well as a broader ethnorelative perspective that allows for an increased sense of accountability towards their care and their peers' care as well.[52] Thus, incorporating diversity in institutional curricula allows for the development of institutionalized knowledge regarding culture and diversity, which then leads to a greater awareness of cultural dynamics, and in turn, allows students to feel more culturally competent in their approach to their care as well as others.

Furthermore, while valuing diversity within student populations is critical, it is not enough to create a system that allows access to culturally competent care. Thus, post-secondary institutions must value diversity at all levels including faculty and staff. Student perspectives and previous findings suggest that students find it important to be represented to create a sense of belonging and inclusiveness. Thus, hiring strategies that prioritize diverse leadership, especially within care-provider roles such as counsellors is crucial.[53] Several American post-secondary institutions have to hire initiatives that are focused on valuing diversity in their hiring process. Institutions such as Columbia University, the University of Illinois at Chicago, and the University of Texas at Austin have implemented a faculty hiring initiative that was designed to develop diverse academic leadership to create an inclusive environment.[54]

[50] "Advancing Diversity and Inclusion in Higher Education," n.d., pp. 44

[51] "Advancing Diversity and Inclusion in Higher Education," n.d., pp. 42

[52] Ibid.

[53] Ibid.

[54] Ibid.

According to Statistics Canada from 2020 data, only 22% of university professors, instructors, teachers or researchers identified as a visible minority.[55] Thus, in a Canadian context, programs such as these can be applied when hiring care providers and staff that work in care services for students, and staff at large to create a culturally competent setting for students. Overall, the main recommendation regarding improving cultural competency at large within post-secondary intention to create an environment where students feel comfortable both asking for and receiving care is only made possible through valuing diversity. Valuing diversity at all institutional levels allows marginalized student populations to see themselves reflected and in turn create awareness around the dynamics of cultural interactions and develop a capacity for cultural self-assessment.

Recommendation 2:

The second recommendation relates to the final element that is essential to improving cultural sensitivity within organizations: Adopting service delivery such that it reflects an understanding of cultural diversity. In order to modify service delivery to have a cultural understanding, accessibility gaps in these services must be understood. According to the findings, the current landscape of culturally sensitive services and spaces to post-secondary students possess several barriers to access, with the student perspective calling for culturally sensitive, student-focused models and population-specific services. This is where the previously described models of cultural sensitivity become critical. The DMIS and the cross-cultural evaluation tool are pliant models that can be applied to many aspects of service, including care for post-secondary students. The DMIS has been proven effective in developing cultural sensitivity between groups, and the cross-cultural evaluation models have been proven to be effective within groups.[56] The combined use of both models towards the student population and staff allows for care services to be culturally competent through the aforementioned approaches.

[55] Government of Canada, Statistics Canada, "Selected Population Characteristics of Postsecondary Faculty and Researchers by Region, Role, and Employment Status," Selected population characteristics of postsecondary faculty and researchers by region, role, and employment status (Government of Canada, Statistics Canada, September 22, 2020), <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=3710016501&pickMembers%5B0%5D=1.4>.

[56] Barron and Dasli, Towards an Understanding of Integration, 87

Conclusion

With Canada being renowned for its cultural diversity the need for improvements to cultural competency within systems and organizations is crucial. Marginalized student populations are often left out of the conversation and face significant barriers to access to critical care services and spaces due to ethnocentric perspectives. Thus, it is critical that these students are not viewed as others, but whose differences are acknowledged through understanding the value of diversity and taking initiative towards developing ethnorelative perspectives. This report has outlined what cultural sensitivity should be within a post-secondary setting, the current landscape of culturally sensitive services and spaces in Canada and elsewhere in the world, and how institutions can work towards improving their cultural competency through programs and previous models of care. The discourse regarding the importance of developing cultural competency in post-secondary institutions has been long overdue, but as the student population in Canada becomes increasingly diverse, the demands for these culturally sensitive practices are on the rise. Canadian institutions should rise to the challenge and not only acknowledge growing demands, but seek to be proactive and implement initiatives that eliminate the barriers to access students face regarding cultural differences through continued research and evaluation.



About the Author

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