

GENERAL EDUCATION COMMITTEE
DIVERSITY REQUIREMENT

Loma Linda University intends that its graduates relate to all people with the same caring, compassion, and competence without regard to origin, religion, gender, or any other differences seen among individuals. The General Education Committee believes that this goal can be best accomplished by recognizing both the diversity and the commonality of individuals. It is the recommendation of the General Education Committee that these differences and similarities among people be addressed in a variety of didactic and practicum experiences throughout the undergraduate curriculum. Purposeful efforts to incorporate such knowledge within a program's curriculum may be documented in lieu of a single cultural diversity course.

AIM: To produce graduates who value and provide competent, compassionate care to individuals with diverse capabilities from varied cultural, ethnic, gender, generational, socioeconomic, and workplace perspectives while recognizing the commonality of all people.

IMPLEMENTATION: To facilitate the implementation of the study of bias-free interactions within the healthcare setting, three means may be pursued: 1) documentation of the study of diversity throughout a program's curriculum, often mandated by the specific accrediting body, 2) a course in cultural diversity, or, 3) incorporation of the study of diversity within a curriculum that equips a health sciences graduate to provide care for a diverse population.

I. THREE MEANS FOR IMPLEMENTATION

- A. Submit documentation that a program has met accreditation standards for inclusion of diversity within the curriculum. Attach self-study section that addresses diversity and completed Table 1; or
- B. Verify that individual student transcripts include pre-requisite cultural diversity course. (Four courses on campus will meet the diversity requirement: ANTH 304 Biocultural Anthropology, ANTH 306 Language and Culture, ANTH 315 Cultural Anthropology, ANTH 448 Medical Anthropology); or
- C. Describe the incorporation of the study of diversity throughout a curriculum; i.e., the implications of individual differences observed in the clients/patients of the health sciences practitioner as those differences apply to the care provided. (Submit Table 1 with course titles, laboratory experiences, and/or extracurricular activities offering such learning opportunities and student learning outcomes. Table 1 lists examples of learning opportunities).

Table 1. LEARNING OPPORTUNITIES WITHIN A CURRICULUM FRAMEWORK

Learning Objective	Course Number and Name	Lecture/lab/extracurricular and/or volunteer activities	Learning outcomes
1) Identify diversity differences: age, gender, ethnicity/race, physical ability, learning disability, education, geo-graphical location, prison, income, marital status, military, workplace, degree of acculturation			
2) Describe relevance of cultural competency to profession/discipline			
3) State culturally-driven health beliefs			
4) Give examples of culturally-driven interpersonal behaviors			
5) Summarize guidelines for providing care to diverse people and practice			
6) Identify situations in which students participate in using strategies dealing with diversity			
7) Seek individual student's reflection regarding role in care of diverse people			

See Table 2. in Appendix for measurement tool to approve curriculum as meeting the diversity requirement.

- II. Review methods for all three means of implementation
 - A. Each bachelors program or School will validate student outcomes from the means of studying diversity chosen; see Appendix, Table 2.
 - B. Each bachelors program or School will submit a five-year report reviewing methods used to produce graduates who value diversity while providing competent, compassionate care to individuals of varied perspectives. See Appendix, Table 3.

- III. Examples of outcome measures of student practices regarding diversity
 - A. Course grade
 - B. Care plans reflect attention to diversity
 - C. Student practicum/clinical evaluations include assessment of sensitivity to diversity
 - D. Critical analysis of views of diversity by written report of behavior depicting valuing others
 - E. Student portfolio responses to diversity and universality
 - F. Wholeness inventory measurement of changes in responses to diversity
 - G. Evaluation of students' ability to function in a healthcare environment serving diverse populations
 - 1) Document lab/practicum outcome/grades
 - 2) Measure cultural impact on care plan, its implementation, and outcome; where applicable
 - 3) Recognize common, universal needs of all people

GLOSSARY

- Diverse capabilities: individuals who fall within a wide-spectrum of abilities in such areas as intellectual, physical, social, economic realms
- Cultural perspectives: understanding as influenced by language, music, arts, dress, beliefs, community/family of origin
- Ethnic perspectives: views of the world as influenced by the race into which one is born
- Gender perspectives: male/female differences in understanding of issues
- Generational perspectives: discernment changes throughout the life cycle
- Acculturation: process of intercultural borrowing between diverse peoples resulting in new and blended patterns; as opposed to assimilation, which is absorption into the cultural tradition of a population or group.

APPENDIX

Table 2. CURRICULUM RUBRIC FOR DIVERSITY: To be used for an analytic review of curriculum for understanding diversity.

Learning Objectives of Curriculum will allow student to:	Below expectation	Good	Exceptional
1) Identify diversity differences: age, gender, ethnicity/race, physical ability, learning disability, education, geo-graphical location, prison, income, marital status, military, workplace, degree of acculturation	Simplistic explanation	4 to 5 factor explanation	5+ factors, such as acculturation
2) Describe relevance of cultural competency to profession/discipline	Stereotypical views	Able to apply to profession simplistically	Applies to care of individuals in several parameters
3) State culturally driven health beliefs	Able to identify 0 to 2 health belief(s) peculiar to a culture	Able to identify 3 to 4 culturally driven health beliefs	Able to identify 5+ culturally driven health beliefs
4) Give examples of culturally driven interpersonal behaviors	Able to identify 0 to 2 culturally driven interpersonal behavior	Able to identify 3-4 interpersonal behaviors	Able to identify 5 or more interpersonal behaviors
5) Summarize guidelines for providing care to diverse people and praxis	Fails to recognize that customer satisfaction is related to customer expectations	Able to list 3 guidelines for providing care for diverse patients	Able to list 7 of 9 guidelines for providing care for diverse patients
6) Identify situations in which student participated using strategies for dealing with diversity	Unable to recognize where strategies for diversity were used	Recognized diversity played a role in 2-3 situations	Described 4-5 situations where diversity was a factor in implementation
7) Seek individual student's reflection regarding role in care of diverse people	Unable to identify the role the student played in a situation impacted by diversity	Discusses own role in embracing diversity in 2-3 situations	Demonstrates depth of understanding in working with diverse individuals in 4-5 situations

If the curriculum demonstrates that the opportunities for a student's understanding, acceptance, and ability to work with diverse individuals are below expected, the curriculum will not be approved to waive the pre-requisite course in cultural diversity. The intent of the pre-requisite course is to enhance the student's ability to provide healthcare to a diverse population.

Table 3. FIVE-YEAR REPORT ON DIVERSITY

Identify where in the curriculum each of the following occurs:

Learning objectives	Learning experience	Evaluation method
Diverse capabilities - Physical, socio/economic		
Cultural Perspectives		
Ethnic Perspectives		
Gender Perspectives		
Generational Perspectives		