CRITICAL INCIDENTS
FOR INTERCULTURAL
COMMUNICATION IN

HEALTH CARE

NorQuest
COLLEGE

CENTRE FOR EXCELLENCE IN
INTERCULTURAL
EDUCATION

ACKNOWLEDGEMENTS

The Critical Incidents for Intercultural Communication in Health Care project, undertaken by the Centre for Excellence in Intercultural Education at NorQuest College, has benefitted from the support and commitment of a number of individuals and organizations. Their dedication to this project has resulted in providing trainers and facilitators in the Alberta health care system with a resource that will guide them in exploring, understanding, and enhancing the effectiveness of multicultural, multidisciplinary medical teams in the province.
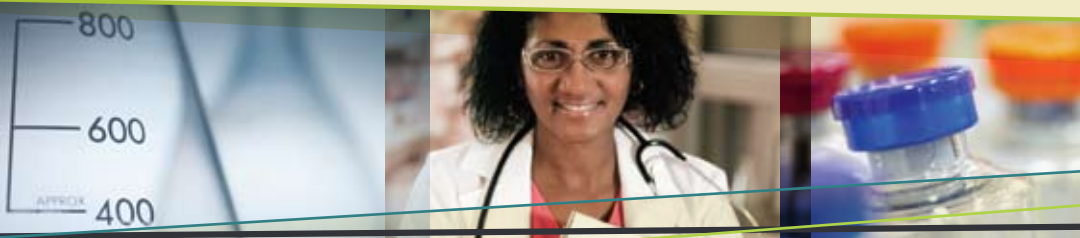
PROJECT CONTRIBUTORS

During the research and information gathering phase of the Critical Incidents for Intercultural Communication in Health Care project, many individuals shared their personal

experiences of the challenges and rewards of working on diverse, multidisciplinary teams. We'd like to express our appreciation to everyone who shared their stories with our team for the purpose of fostering productive teamwork, intercultural understanding and rewarding intercultural relationships. Your involvement has made this resource possible and is a tribute to your commitment to making diverse communities stronger and more innovative through awareness raising, and effective and inclusive engagement.

PROJECT SUPPORT

First and foremost, we'd like to thank Sarah Apedaile, whose invaluable work in prior projects at the Centre has laid much of the foundation for this resource. Thanks also to Anna DeLuca, Patti Lefebvre, Todd Odgers, Cheryl Whitelaw, Darcy McDonald, Erin Waugh, Kerry Louw and Jaimy Miller – the team at the Centre for Excellence in Intercultural Education at NorQuest College – for all their support and insights through sharing ideas and providing feedback. Without you this resource would not be possible.

For more information, please contact the Centre for Excellence in Intercultural Education at 780-644-6770 or icinfo@norquest.ca.

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WHAT'S GOING ON?
THE CONTEXT

Immigration, global economics and skilled nursing shortages have made the demographic profiles of hospital patients and staff in Alberta increasingly diverse, creating complex work and care environments. The cultural diversity of patients and staff challenges professionals in the field, both Canadian-born and foreign-born, to develop more multifaceted communication skills than may have been necessary in the past. As such, intercultural competence is becoming an increasingly essential skill for health care practitioners and providers.

PURPOSE OF THIS RESOURCE

This resource aims to enhance effective communication in culturally diverse health care contexts for Canadian-born health care professionals, as well as for newcomer health care professionals recently recruited to work and live in Alberta. Intercultural relations and cross-cultural exchanges are complex, and this resource seeks to provide opportunities to reflect on this complexity while at the same time facilitating participants' ability to make distinctions and develop higher degrees of intercultural sensitivity. It looks to help users develop a shared understanding as well as the knowledge, skills and awareness required to communicate effectively in a culturally diverse workplace. The critical incidents will provide access to real experiences without cultural markers and support the development of intercultural competence by developing more complex interpretations and responses to situations.

USING THIS RESOURCE:
OUTCOMES[1]

This resource assumes some experience and comfort in facilitating groups of people through activities and discussions of somewhat challenging content. With that in mind, the Critical Incidents for Intercultural Communication in Health Care (CIICHC) resource can be used to achieve the following outcomes:

> increase participants' awareness of their own idiosyncratic, or culturally determined interpretations and explanations of other individuals' or groups' behaviour

> increase participants' awareness of their attitudes about and responses to situations such as those described in the critical incidents

> draw out, compare, and analyze the various interpretations and perceptions of participants.

> identify cultural differences that identify cultural differences that can contribute to particular problems, misunderstandings, or conflicts, or influence the various interpretations and explanations of the participants.

> assist participants in comprehending the diversity that exists among members of each culture, as well as the normative differences between cultures.

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[1] *We recognize that participants will be in different stages of the Developmental Model of Intercultural Sensitivity (DMIS) developed by Milton Bennett (1986, 1993), and therefore one or more of these outcomes may be unrealistic for certain groups of participants. The DMIS will be discussed in the next section of the guide.*
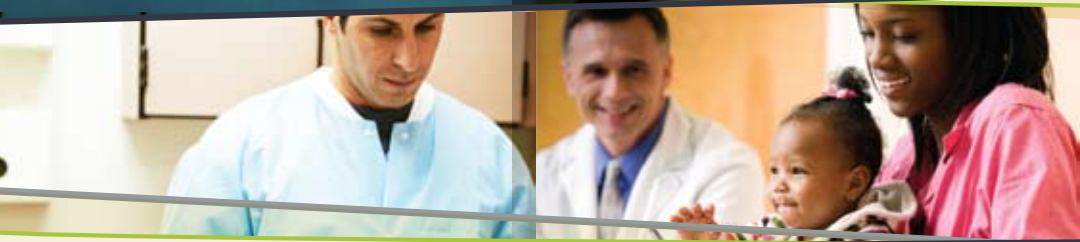
> support participants in achieving the necessary understanding to behave in a culturally appropriate and effective manner in similar situations

> expand participants' awareness of the nature of characteristics and behaviours necessary for intercultural competence, and motivate them to continue learning

> provide a supportive framework for working through misunderstandings and handling problematic and everyday intercultural situations

UNDERLYING FRAMEWORK

WHAT IS INTERCULTURAL COMPETENCE

"Intercultural Competence is the ability to interact effectively and appropriately in intercultural situations; it is supported by specific attitudes and affective features, (inter)cultural knowledge, skills, and reflection.[2]"

This definition is but one of many, and what exactly comprises intercultural competence is still debated by scholars. Generally speaking intercultural competence can be broken down into three dimensions[3]: A mindset, a heartset, and a skillset.

1. The mindset is **intercultural awareness** and refers to a person's ability to understand similarities and differences of

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[2] *Stiftlung, B. and Cariplo, F. (2008). "Intercultural Competence – The key competence in the 21st century?"; (last accessed Sept 22, 2010); www.bertelsmann-stiftung.de/bst/de/media/xcms_bst_dms_30238_30239_2.pdf*

others' cultures. The dimension includes two components: self-awareness and cultural awareness.

2. The heartset is **intercultural sensitivity** and refers to the emotional desire of a person to acknowledge, appreciate, and accept cultural differences. The dimension includes six components: self-esteem, self-monitoring, empathy, open-mindedness, reserved judgment, and social relaxation.

3. The skillset is **intercultural adroitness** and refers to an individual's ability to reach communication goals while interacting with people from other cultures. The dimension contains four components: message skills, appropriate self-disclosure, behavioral flexibility, and interaction management.
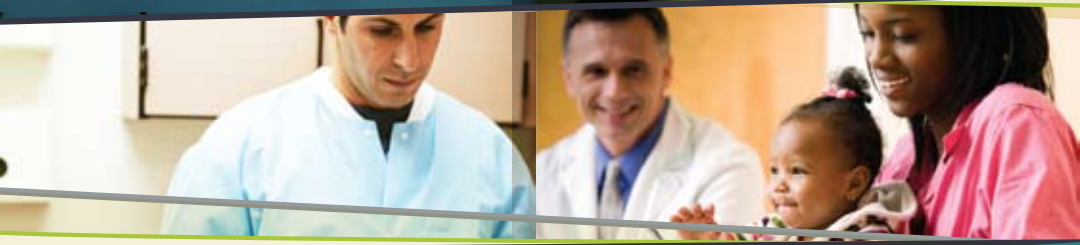
Intercultural competence relies on all of these capacities in an increasing complex capability to understand, appreciate, and adapt in intercultural interactions and situations.

HOW DOES ONE DEVELOP INTERCULTURAL COMPETENCE? THE DMIS

Intercultural competence training is a developmental process that uses current research to move learners along

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[3] *Fritz, W., Möllenberg, A. and Chen, G.M. (2000). Measuring Intercultural Sensitivity in Different Cultural Context. Braunschweig: Technical University of Braunschweig. pp.1-16.*

[3] Bennett, J.M. (2003). "Turning frogs into interculturalists: A student-centered development approach to teaching intercultural communication", in: R. Goodman, M. Phillips, & N. Boyacigiller (Eds.), Crossing cultures: Insights from master teachers (pp. 157–170). London: Routledge.

a developmental continuum; a process that builds capacity for increasingly complex responses and competencies when working with cultural differences.

The theoretical model that underlies the approach in this guide is the *Developmental Model of Intercultural Sensitivity* (DMIS) developed by Milton Bennett. Bennett explained that the core of this sensitivity is an ability to understand subtle differences between cultures. "It is an indication of increased cognitive sophistication, a deeper ability to discriminate, therefore, it is considered a more interculturally developed, or sensitive perspective."[4]

In the DMIS, the Intercultural Development Continuum is marked by three ethnocentric stages or a monocultural mindset and two ethnorelative stages or an intercultural mindset (Figure 1).

The three ethnocentric stages are denial, polarization, and minimization. They range from an inability in denial to make distinctions and/or disinterest, to a polarized 'us' and 'them' position in polarization, to a tendency to minimize perceivable differences, and a belief that people are all the same, i.e. "just like me."

The two ethnorelative stages are acceptance and adaptation. In these stages there is a paradigm shift in which individuals are able to let go of absolutes and recognize that cultures must be understood in relation to one another, and in the context

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[4] Bennett, M.J. (1993). Towards ethnorelativism: A developmental model of intercultural sensitivity. In M. Paige (Ed.), Education for the intercultural experience. Yarmouth, ME: Intercultural Press.
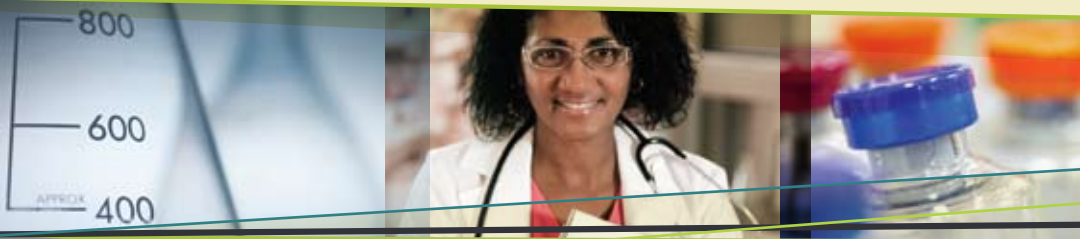
that these cultures have developed. Acceptance is the stage where one's culture is understood as one of many valid cultures; adaptation takes this one step further, where individuals are able to behave accordingly in situations where other norms and values are needed. Moving to the end of this stage is suggestive of an individual's ability to identify and move with facility in multiple cultures (i.e. the bicultural person).

Intercultural Development Continuum
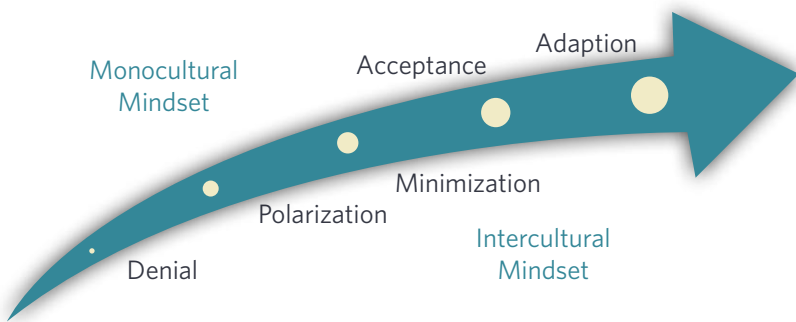
FIGURE 1. THE DMIS INTERCULTURAL DEVELOPMENT CONTINUUM.[5]

For individuals in the ethnocentric stages of denial and polarization, facilitators should use activities to draw out similarities. Exercises where participants are paired together to share their stories and to identify similarities in their experience and feel a common connection. From these similarities participants can then move to how they are different but they

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[5] *Hammer, M.R. (2008).* "The Intercultural Development Inventory (IDI): An Approach for assessing and building intercultural competence", in: M.A. Moodian *(Ed.), Contemporary leadership and intercultural competence: Exploring the Cross-Cultural Dynamics Within Organizations. London: Sage Publications.*
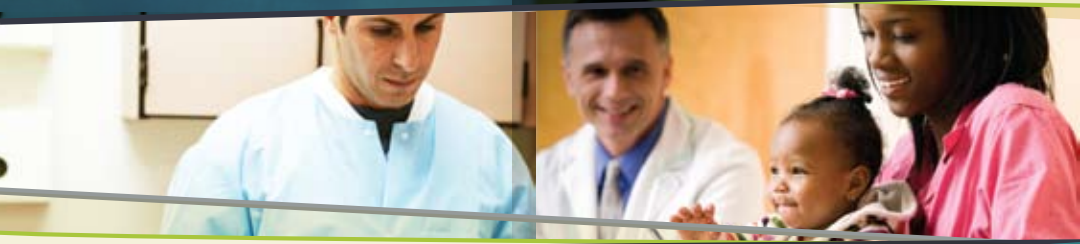
need to begin with commonalities because difference can be perceived as a threat in these stages. For example two very different people may discover that they are both mothers of teenaged daughters which will enable them to connect with each other through this experience. With the establishment of this connection it is then possible to move to the next step toward understanding the cultural differences in this experience. For example exploring how their pregnancy, childbirth, and child rearing experiences were similar and different.

When participants are in the minimization stage then their developmental tasks need to focus on how cultures differ. This is the beginning of the development of ethnorelativity. With the ethnorelative stages participants will be able to discuss the complexity of the cultural influences in the incidents, further developing their ability to identify cultural influences on behaviour, values, norms, and attitudes.

The activities in this guide must be presented with an awareness of these stages in mind. Depending on an individual's stage they may be more or less willing/able to recognize the cultural differences illustrated or may be unable to see them except in a polarized way of right/wrong, good/bad. Facilitators must also keep in mind the level of trust required in a group to be able to explore issues and allow people to participate according to their comfort level.
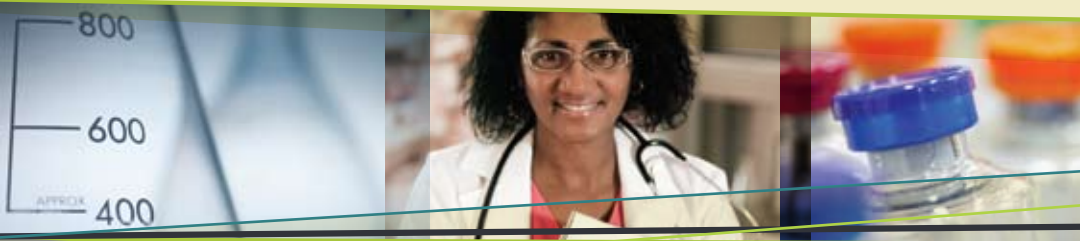
WHAT ARE CRITICAL INCIDENTS?
ONE APPROACH

Critical Incidents are tools for increasing understanding of human attitudes, expectations, behaviours, and interactions. They are intended to engage participants at a meaningful, personal level as they examine attitudes and behaviours that might be critical to their effectiveness in the roles they are preparing for or already performing. Harry Triandis first used critical incidents to develop cross-cultural competence in his work with culture in the 1960s.[6]

In intercultural training, critical incidents are brief descriptions of situations in which a misunderstanding, problem, or conflict arises due to the cultural differences – in addition to other differences – of interacting parties or where there is a problem of cross-cultural adaptation and communication. Each incident gives only enough information to set the stage, describe what happened, and possibly reflect the feelings and reactions of the people involved. It does not explain the cultural differences that they bring to the situation; these are meant to be discovered or revealed as part of the different activities outlined in this guide.

The critical incidents in this collection were gathered from interviews with a diverse cross-section of medical professionals in Edmonton, Alberta, Canada.

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[6] *Triandis, H.C. (1994).* Culture and Social Behavior. *New York: McGraw-Hill.*
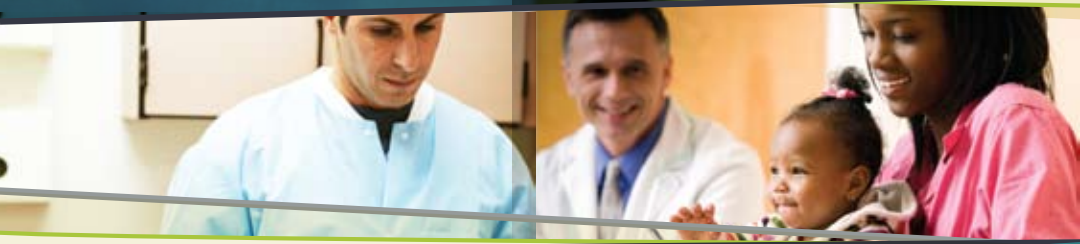
THE FACILITATOR BACKSTAGE:
ESSENTIAL UNDERSTANDINGS FOR FACILITATING CRITICAL INCIDENTS

In this section, you will find a discussion of background or "backstage" knowledge that will be useful for a facilitator to understand for achieving the outcomes above and contributing to a positive experience for participants. The following models and metaphors have been provided to help you explore the concepts of culture and identity. These, along with discussions of stereotypes and generalizations, cultural orientations, and cultural norms, will help you encourage an open environment in which meaningful discussions about the critical incidents can take place.

> *Contact Hypothesis: Groups from different cultures must be adequately prepared to interact. If they are not, then a reinforcement of stereotypes and prejudice is likely to occur.*
>
> *G.W. Allport; T. F. Pettigrew and L. R. Tropp[7]*

A Definition of Culture

A good place to start is with a common understanding of the notion of culture. The Canadian government's *Centre for Intercultural Learning* explains culture in the following way:

"Culture rules virtually every aspect of your life and like most people, you are completely unaware of this. If asked, you

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[7] Pettigrew, T. F. and Tropp, L. R. (2008) "Allport's Intergroup Contact Hypothesis: Its History and Influence", in: J. F. Dovidio, P. Glick and L. A. Rudman (Eds), On the Nature of Prejudice: Fifty Years after Allport. *Oxford, UK: Blackwell Publishing Ltd.*

would likely define culture as music, literature, visual arts, architecture or language, and you wouldn't be wrong. But you wouldn't be entirely right either. In effect, the things produced by a culture which we perceive with our five senses are simply manifestations of the deeper meaning of culture – what we do, think and feel. Culture is taught and learned and shared – there is no culture of one. And yet, culture is not monolithic – individuals exist within a culture. Finally, culture is symbolic. Meaning is ascribed to behaviour, words and objects and this meaning is objectively arbitrary, subjectively logical and rational. For example, a "home", is a physical structure, a familial construct and a moral reference point – which is distinct from one culture to another.

Culture is vital because it enables its members to function one with another without the need to negotiate meaning at every moment. Culture is learned and forgotten, so despite its importance we are generally unconscious of its influence on the manner in which we perceive the world and interact within it. Culture is significant because as we work with others it both enables us and impedes us in our ability to understand and work effectively together."[8]

An activity to help define culture can be found with a discussion of the Iceberg Model later in this section.

Culture is, very simply, the way we do things around here.

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[8] Government of Canada. (2009). "What is Culture?" Centre for Intercultural Learning: www.international.gc.ca/cfsi-icse/cil-cai/whatisculture-questlaculture-eng.asp

Stereotypes and Generalizations

No two individuals are alike. People have different personalities and backgrounds; and also a number of cultural identities. People from different cultures are likely to experience more profound differences when adapting to a new learning, working, or living environment. Part of becoming interculturally competent means increasing our knowledge and awareness of the underlying sets of beliefs and meanings (and the values attached to them) that ground culture. We can use this knowledge and awareness about a culture, known as generalizations (or observable tendencies), to be proactive in predicting outcomes and behaviour or in interpreting situations in the moment or after the fact. However, even though we are often obliged to make a number of generalizations to attach meaning to particular behaviours, we must keep in mind that such generalizations are only clues and are neither entirely representative of, nor true, for every individual in a group, nor even for the group as a whole. Therefore, cultural generalizations are statements of likelihood and potential—not statements of certainty. Remembering that, we can then make use of generalizations and prevent ourselves from falling into the trap of stereotyping.

Stereotypes are...

> Inflexible – do not change

> Restrictive – do not allow for differences

> Prescriptive – make assumptions first

The behaviour of an individual applied absolutely to all members of a group.

Generalizations (observable tendencies) are...

> Flexible – can change

> Inclusive – can accommodate differences

> Descriptive – make generalizations from observations

The observable behaviours of a group applied for possible understanding of individuals.

> *"Culture hides much more than it reveals, and strangely enough what it hides, it hides most effectively from its own participants. Years of study have convinced me that the real job is not to understand foreign culture but to understand our own."*
>
> *-Edward T. Hall, "The Silent Language"[9]*

Dimensions of Diversity

There are many dimensions to every individual, and many factors contribute to an individual's cultural identity. Gardenswartz and Rowe outline a 4-layer model which helps to understand the many different dimensions that help comprise a person's identity.[10] Their Four Layers of Diversity are:

1. Personality

2. Internal Dimensions

3. External Dimensions

4. Organizational Dimensions

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[9] *Hall, E.T. (1973).* The Silent Language. *Toronto: Anchor Books.*

[10] *Gardenswartz, L. and Rowe, A. (2003). Diverse Teams at Work: Capitalizing on the Power of Diversity. New York: Society For Human Resource Management.*
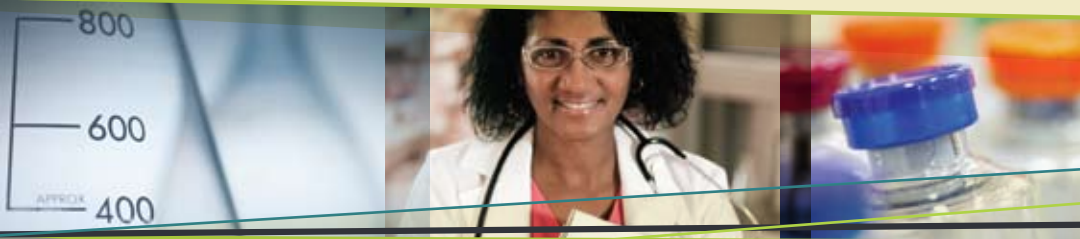
This resultant dimension wheel looks like:

Four Layers of Diversity
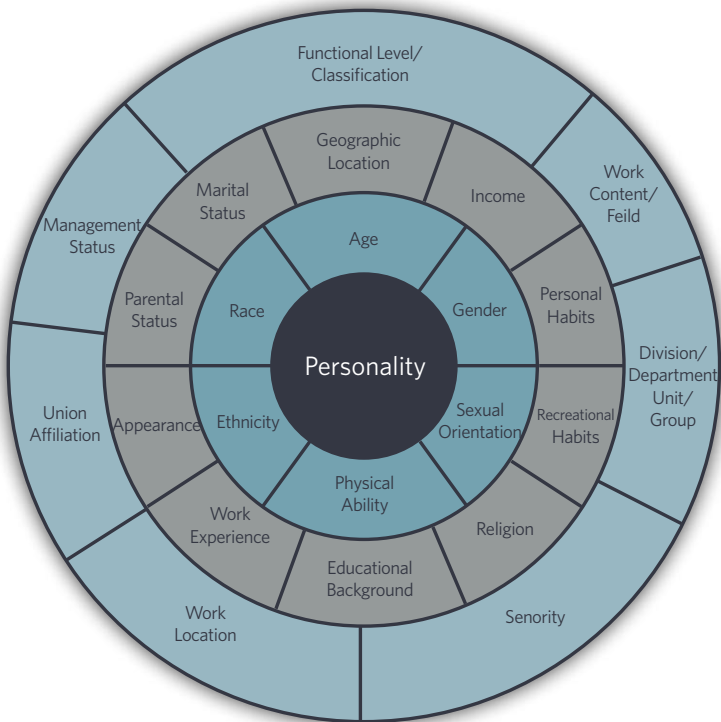
Organizational Dimensions   External Dimensions   Internal Dimensions

In every critical incident, any number of these factors might be at play. Facilitators should be prepared to engage discussion around any one of these dimensions – and as a trainer in the health care field this is likely already the case. This of course does not mean you need to be an expert in every part of this

wheel; rather it means you should be prepared to ask the right questions and guide the discussion such that participants can explore their own sense of "normal" and begin to see the complexity more clearly. In addition, remember that the critical incidents are utilized to examine the cultural dimension and to develop intercultural competence. Of course personality and any number of these dimensions might actually be the reason why the people in the stories behave as they do, but with a focus on examining the cultural factors that might be at play, the discussion necessarily turns to talking about values, attitudes and behaviours at the group level, rather than the individual level. This explanation can often help participants move beyond the "it's just personality" explanation that sometimes seems very reasonable.

ACTIVITY:

The "Identity Wheel" is a useful tool for reflecting on personal values and beliefs.

Use the Identity Wheel to help participants explore similarities and differences about themselves in their own group, an issue or topic that arises as a result of the critical incidents, or even to try to better understand the perspectives of the people involved in the critical incidents.

1. Have participants use the categories in the sample identity wheel or those listed above when creating their identity wheel. You can also add others that are important and relevant to the issue being explored.

2. Add details in the circles.
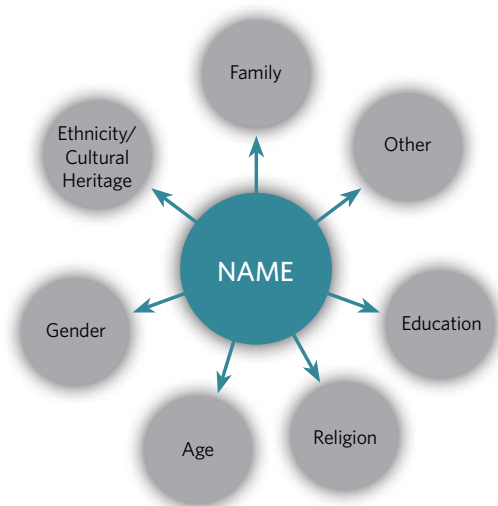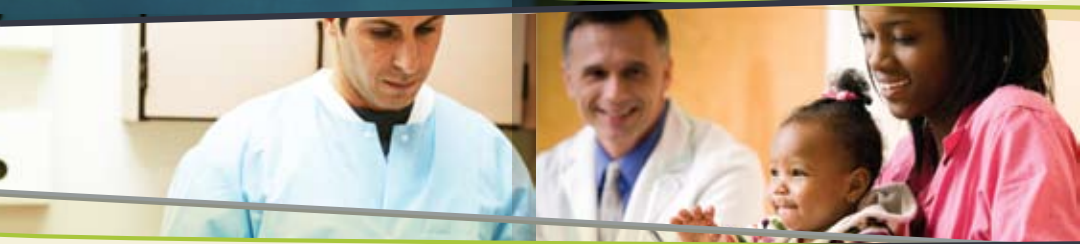
3. If doing the identity wheel for themselves, have participants consider the values and beliefs they have about a topic or issue. Which aspects of their identities have influenced these values and beliefs?

Culture as an Iceberg[11]

Ask people what culture is and they will no doubt begin to describe things like what kind of dress one wears, or traditions one follows around holidays, or whether one uses chopsticks or a fork to eat. These are great and very concrete examples. But isn't there more to culture?

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[11] *Storti, C., Bennhold-Samaan, L., and U.S. Peace Corps. (1997).* Culture Matters: The Peace Corps Cross Cultural Workbook. *Washington, DC: Peace Corps Information Collection and Exchange.*

One of the most commonly used models to represent the notion of culture is the **"Iceberg Model."** The iceberg shows us essentially two things. First, it shows us that culture can be divided into the parts that lie above the waterline (often called "objective culture") and the parts that lie below the waterline (often called "subjective culture"). Above the waterline are the parts that we can see or otherwise use our five senses to uncover. Below the waterline are the parts of culture that we cannot see, but rather intuit or interpret from the visible parts.

Above the waterline are things like: facial expressions, religious rituals, paintings, literature, gestures, holiday customs, foods, eating habits, music, styles of dress, etc. Essentially these are **behaviours** or the products thereof.

Below the waterline we find things like: religious beliefs, importance of time, values, child raising beliefs, concept of leadership, concept of fairness, nature of friendship, notions of modesty, understanding of the natural world, concept of self, general world view, concept of personal space, rules of social etiquette, etc. Essentially these things are **values, attitudes, and beliefs.**

Second, the iceberg model also shows us that there is a proportional relationship between above the waterline and below the waterline parts: as with an iceberg floating in the water, the part we can see is proportionally smaller than the part we cannot. Or essentially, all those things people can see and usually consider part of culture are only the tip of the iceberg and comparatively small to the vast amount of culture we cannot see. This is useful to keep in mind as you are facilitating.
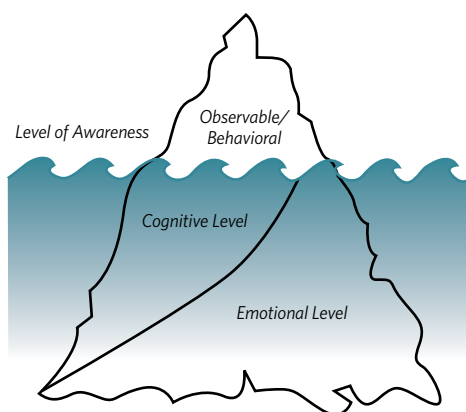
Above the Waterline
"Objective Culture"

Below the Waterline
"Subjective Culture"

Level of Awareness

Observable/
Behavioral

Cognitive Level

Emotional Level

ACTIVITY:

First, ask participants about the kinds of things they think about when they think of the word "culture". Compile a list of the participants' suggestions, preferably on a large, visible space such as a whiteboard. Then, draw an iceberg on the board and ask participants to brainstorm about which of their ideas about culture are visible above the waterline and those that are hidden below. In cases such as "religion" for example, where participants might say "both above and below" see if they can be more specific as to what specifically about religion fits above and below the waterline. To go deeper into the model and the discussion, ask about the connections between the behaviours we can see and the underlying values: Why do people behave in that way? What do they value?
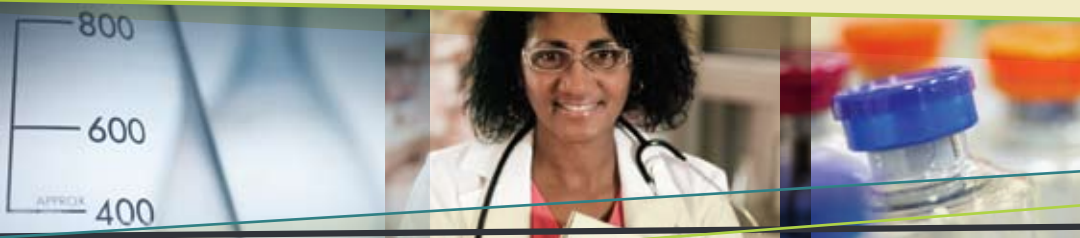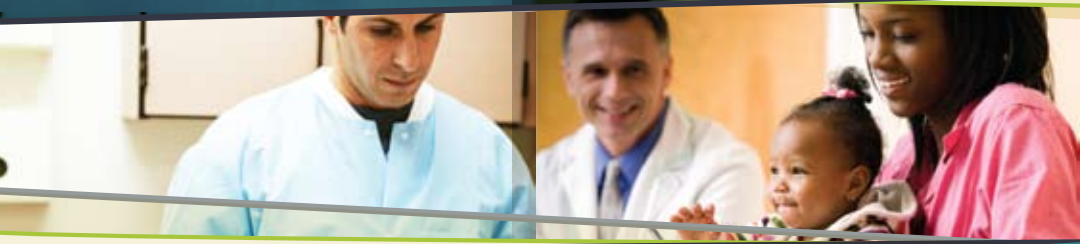
Cultural Orientations[12]

Cultural orientations serve as general observational categories which provide clues to better understand the motivations and values that influence peoples' behaviours, and to recognize cultural differences that exist at a group, rather than individual, level. They are a type of culture-general framework, and are categories that can be used to deepen one's cultural awareness, and understand any culture. See the following table for a list of those cultural orientations that can be explored with the critical incidents.

Culture-specific information, on the other hand, comes from applying these general categories to a specific culture. In your facilitation, you may choose to attach **culture-specific** information to these orientations (ex. Canadians tend to be more monochronic; Americans tend to be more direct). If you do, it is useful to again reiterate the distinction between stereotypes and generalizations here, as it's a crucial one to make: Cultural orientations are observable tendencies that can help us understand "how people from a particular culture *may* behave in a given situation, but not necessarily how they will behave, nor how they *will always* behave."[13] If they are used in the latter sense – often a concern when used with culture-specific information – they become just another way of stereotyping and hence lose their efficacy. It will largely depend on your group, so keep your target audience in mind. This guide does not attach any culture specific information to these orientations for essentially four reasons:

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[12] *Adapted from Storti, C. (1999); Bennet, J. and Pusch, M.D. (1993).*

[13] *Storti, C. (1999). Figuring Foreigners Out: A Practical Guide. Boston: Intercultural Press.*

> The critical incidents themselves are intentionally devoid of culture-specific information

> The critical incidents can be successfully examined, understood, and debriefed without using any culture-specific information

> It is often more fruitful to have participants examine where they feel their own culture lies on each continuum and then talk about these perspectives in relation to one another

> The DMIS stage of participants will mean they'll tend to utilize culture-specific information in very different ways, based on their perception of difference

Each cultural orientation is a continuum with the two perspectives on the opposite ends of the spectrum. While cultures may exhibit preferences which lean heavily to one or the other end of the spectrum, it's important to note that no culture exists at the absolute terminus of either end. There is always variability in preferences, due to factors which vary within and between contexts.

This facilitator guide highlights and describes ten different cultural orientations which can be used to help make sense of the stories outlined in the critical incidents:

1. Adherence to Rules
2. Concept of Self
3. Confrontation Style
4. Degree of Directness
5. Emotional Attachment
6. Power distance
7. Prioritizing
8. Risk Tolerance
9. Source of Status
10. Time Orientation

Adherence to Rules	
UNIVERSALISM	**PARTICULARISM**
What's right is always right	What's right depends on circumstances
There are absolutes	There are no absolutes
Rules are rules and cannot be broken	Rules can be bent or broken
There should be no exceptions	There are always exceptions
Consistency is important	Consistency is not always best
Fair means treating everyone the same	Fair means treating everyone uniquely
Concept of Self	
INDIVIDUALISM	**COLLECTIVISM**
Individual is the smallest unit	Group (usu. Family) is smallest unit
Personal fulfillment is the greatest good	Group harmony is the greatest good
Children are taught to stand on own	Children are taught to depend on others
Individual recognition	Prefer team/group recognition
Identity personal and individual	Identity function of group membership
"If I'm ok, my group is ok"	"If my group is ok, I'm ok"
Confrontation Style	
IDEAS CONFRONTATION	**RELATIONAL CONFRONTATION**
Disagreement with ideas stated directly	Disagreement with ideas more subtle
Assumption: only idea being challenged	Assumption: relationship must come first
Ideas are open for attack	Ideas are attached to feelings
"It's just arguing, don't take it personally"	"Be respectful of others' ideas and feelings"
Degree of Directness	
DIRECT	**INDIRECT**
People say what they mean	People don't always say what they mean
People mean what they say	People don't always mean what they say
No need to read between the lines	Have to read between the lines
Tell it like it is	Can't always tell it like it is
People say what they think	People suggest and imply
Yes means yes	Yes can mean maybe or even no

Emotional Attachment	
EMOTIONALLY ATTACHED	**EMOTIONALLY DETACHED**
Discuss issues with feeling and emotions	Discuss issues with calmness and objectivity
Personal stake in outcome is emphasized	Ability to weigh all factors emphasized
Emotion conveys you care	Detachment conveys non-bias
Intensity shows it's important	Impersonality shows it's important
Often tolerance for higher speech volume	Often intolerance for higher speech volume
Gestures often pronounced and emphatic	Gestures often reserved and discreet

Power Distance	
LOW POWER DISTANCE	**HIGH POWER DISTANCE**
Democratic management style	Authoritarian management style
Power usually shared	Power is centralized
Delegation to subordinates	Not much delegation
Subordinates dislike micro-managing	Subordinates wait for instructions
Initiative highly valued	Initiative not necessary
Consultative decision making	Top-down decision making
Ok to disagree with boss	No open disagreement with boss
Boss-Subordinate relations informal	Boss-Subordinate relations formal
Rank has few privileges	Rank has many privileges

Prioritizing	
TASK ORIENTED	**RELATIONSHIP ORIENTED**
Top priority: getting down to business	Top priority: building relationships
Emphasis on work to be done	Emphasis on people to get work done
Important info is related to the task	Important info is what supports people
Success measured by tasks completed	Success measured by peoples' reactions
Small-talk cursory and limited	Small-talk more personal and essential

Risk Tolerance	
RISK TOLERANT	**RISK AVERSE**
Taking risks/failing inherent to processes	Negative consequences to risks/failing
Trial and error to learn and improve	Don't try until success guaranteed
Different can be interesting	Different can be dangerous
Change is positive	Change is threatening
New ideas pursued to make better	Traditions are a good guide to future
A better way can come with change	Traditions have developed the better way
Source of Status	
ACHIEVED	**ASCRIBED**
Meritocracy	Autocracy
Respect and status must be earned	Age/title confer respect and status
Promotion based on performance	Promotion based on age/seniority
Achievements highly valued	Achievements weighed with age/title
Position doesn't dictate relationships	Position dictates relationships
Relatively easy to change status	Difficult to change status
Time Orientation	
MONOCHRONIC	**POLYCHRONIC**
Time is limited commodity	Time is bent to meet peoples' needs
Deadlines and schedules are sacred	Deadlines and schedules are easily changed
Plans are not easily changed	Plans are fluid
People may be to too busy to see you	People always have time to see you
People live by external clock	People live by internal clock

ACTIVITY:

This activity can be done either before or after a critical incident debrief.

Choose a critical incident and examine the cultural orientations that can be used to make sense of the interaction. On several sheets of poster paper, draw these orientations as series of continua down the page – don't worry about the descriptions as those you can teach to the group – just put the lines of the
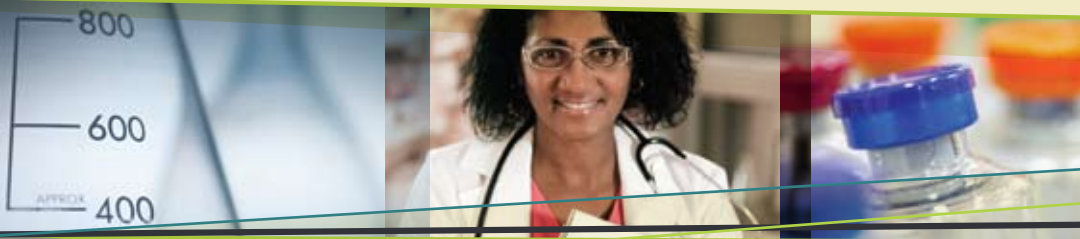
continua and the names, eg. mono/poly. Introduce and teach each of the cultural orientations to your facilitation group and then divide your participants up into groups of 4-5 people – one group per poster sheet. Give each participant in the groups a different coloured marker and ask them to mark with an X on each continua where they feel they personally fit on the line. Once done, have each person in the group draw a line vertically through all their Xs on all of the continua like a "connect the Xs". Once each participant has done so, the resultant paper usually shows a map of their crisscrossing, intersecting lines. This is their team profile. Have participants discuss what might be the advantages of their profile and what might be the challenges for them working together on a team. What are the upsides of each way of doing things? What are the downsides?

Workplace Values

In addition to the cultural orientations which can be drawn from each critical incident, there are a number of other workplace values which, though connected to the cultural orientations, can be spoken about and debriefed in more detail as distinct issues.
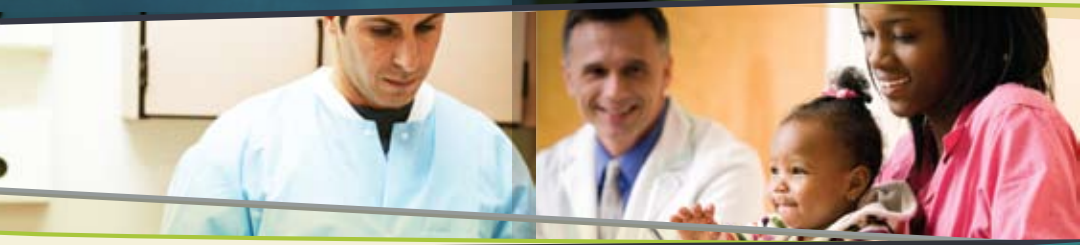
People generally go about their day-to-day behaviours with a sense of purpose and sense of meaning, ie. their acts are both **intentional**, and **make sense to them** (their 'normal'). The challenge of course in working cross-culturally is that often the behaviours we see in people of other cultures either don't make sense to us, or we attribute the incorrect meaning to them because of the interference of our own cultural lenses (our 'normal'). This highlights the often-seen differences between someone's **intention** vs. someone else's **perception.** In other

words, our perception is informed by our cultural background, and both help us interpret the intentions of others. This is natural and part of the purpose culture serves to us all as human beings, yet it can be misleading without enough self- and other-awareness. The *Facilitator Onstage* section will show how it can be useful to address these points before working with specific critical incidents.

As you move through the following workplace values, especially with a group you're facilitating, keep in mind this difference between intention and perception. Also consider the roles and responsibilities of the people involved, their expectations, their senses of what's 'normal,' and the way their values are informing their behaviours.

For newcomers, the discussions of critical incidents and the following topics are often about learning how to describe the ways in which their normal is different, and understanding the unwritten rules and expectations of the new normal of this Canadian cultural context. For Canadian-born folks, it's often about seeing different senses of normal, understanding what their own sense of normal is, and being able to describe their unwritten rules and expectations more specifically. The aim here is twofold. First, (following the *Iceberg Model* of culture) facilitators want to help participants dig deeper into the connections between values/beliefs and behaviours and really identify what those behaviours are – always asking "what does it look like?" And second, they want to help participants' move towards increased recognition, understanding, and adaptation to the complexity inherent in intercultural interactions.

Each subsection that follows will outline a number of questions that can be asked to bring this out in the discussion. These questions are just a starting point. Augment each section as necessary either before or during a debrief and then see where the discussion goes.

Building Rapport
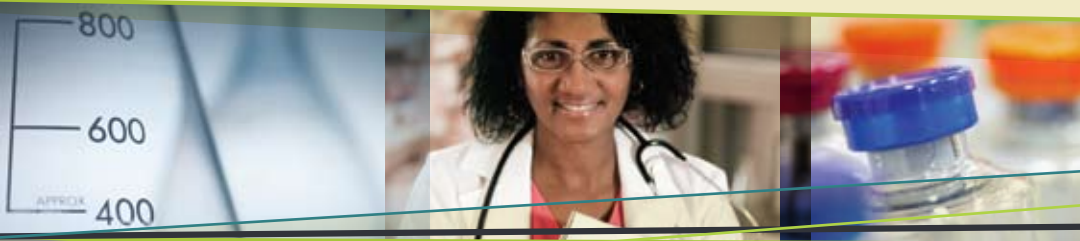
By rapport we mean the sense of connection we have with others that is part of the basis of relationships.

> What are the ways rapport is built?

> How is rapport established and maintained?

> Whose responsibility is it?

> Do you have rapport with everyone? Why or why not? How can you tell?

> How are groups composed and formed in the organization?

> How are social groups formed?

> What are the rules for group membership?

Building Trust

By trust we mean the firm reliance on the integrity, ability or character of a person.

> Is trust important for teamwork? Why or why not?

> What are the ways trust is established?

> What are the ways it's maintained?

> What are the ways in which it can be lost? What are the implications?

> Once lost, can it be regained? How?

> Whose responsibility is it?

> Are there any differences in the levels of trust between groups in the organization?

Delegating Responsibilities

By delegating, we mean the allocation of different tasks to different people on the team.

> How are responsibilities divided on your teams?

> How then are they delegated? How are the decisions made?

> Who does the delegating? What are the criteria for this role? Always?

> How do you delegate a task to someone? What do you say?

> What is the expected response?

> What are the expectations of someone who has been delegated a task?

Demonstrating Accountability

By accountability we mean an openness or willingness to accept responsibility or to account for one's actions.

> How important is accountability in medicine? What purpose does it serve?

> Who is accountable? Who is not? What are the criteria?

> How is accountability demonstrated? What are the behaviours?
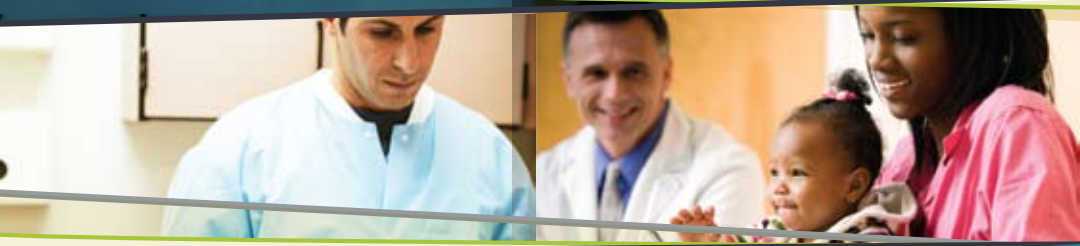
> What happens if you're not accountable?
  What are the consequences?

> Who monitors and verifies accountability of employees
  in your organization?

Demonstrating Credibility

By credibility we mean the quality or power of inspiring belief in
one's capacity and abilities.

> How important is credibility in your profession?
  What purpose does it serve?

> What are the ways credibility is established?

> What are the ways it's maintained?

> What are the ways in which it can be lost? What are
  the implications?

> Once lost, can it be regained? How?

> Are there any differences in the levels of credibility between
  groups in the organization?

Demonstrating Critical Thinking

By critical thinking, we mean "that mode of thinking — about
any subject, content, or problem — in which the thinker
improves the quality of his or her thinking by skillfully analyzing,
assessing, and reconstructing it." [14]

> How important is critical thinking in your profession?
  What purpose does it serve?

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[14] *The Critical Thinking Community. www.criticalthinking.org/aboutCT/ourConceptCT.cfm*
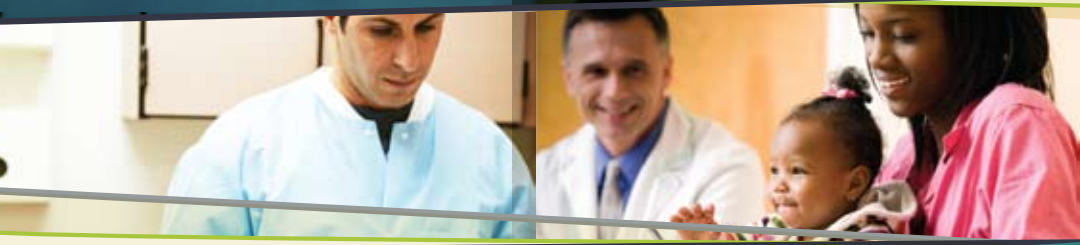
> Who needs to think critically? Who does not? In what situations?

> How do you show you think critically? What are the behaviours? What kinds of things do you say?

> Are there situations where it's not required? Where it's not advisable?

> What happens if you don't demonstrate critical thinking? What are the consequences?

Demonstrating Respect

By respect we mean holding someone or something in high or special regard, esteem, or deference.

> How important is respect in your profession? What purpose does it serve?

> What are the ways respect is established? Is it distributed equally?

> How is respect demonstrated? What are the behaviours? What kinds of things do you say to show it?

> What are the ways it's maintained?

> What are the ways in which it can be lost? What are the implications?

> Once lost, can it be regained? How?

> Are there any differences in the levels of respect between groups in the organization?

Fitting In

By fitting in we mean functioning, participating, and being regarded as a valued, fluid, and constructive member of a group.

> How important is it for people to fit in, in your organization?

> What does it take to fit in on your team?

> What things get in the way of someone fitting in? What are deal-breakers?

> How are groups composed and formed in the organization?

> How are social groups formed?

> What are the rules for group membership?

> Who helps people to fit into those groups in your organization?

Gender Roles

By gender roles we mean the roles and responsibilities given to a traditional dualistic distinction between men and women in one's worldview.

> What are some of the differences between men and women in your workplace?

> What are the roles and responsibilities of each?

> What is considered appropriate behaviour for the genders?

> Are there any prevailing attitudes which are particular to genders?

> Does your profession or organization hold advantages for different genders? Limitations?
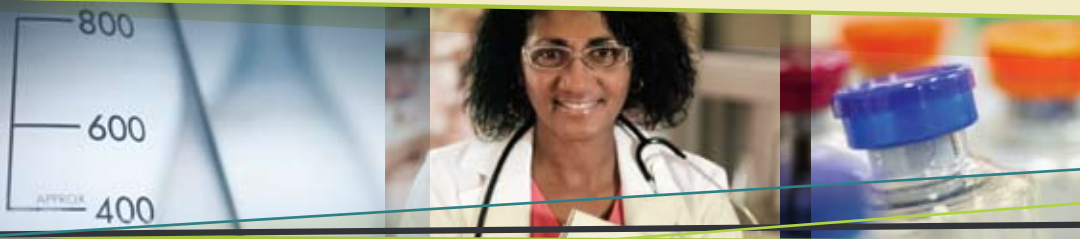
Giving and Receiving Feedback

By feedback we mean the giving and receiving of evaluative or corrective information about behaviours, actions, events, or processes.

> How important is giving and receiving feedback on your team?

> When and where does it take place? In front of others? Privately?

> Is feedback given formally, informally, or both?

> Who gives feedback to whom?

> What does giving feedback well look like? What kinds of things do you say?

> What does receiving feedback well look like? What kinds of things do you say?

Language

Communicating with words has many components besides just vocabulary and grammar: tone, intonation, pauses, word-stress, and volume can all be meaningful in spoken communication. Accents and first language (L1) interference in these areas can alter perceptions from what second-language (L2) speakers of a language intend to convey. In addition, the processes informing the word choices we make are often very complex and can change depending on the context, who's present, and our goals in the situation. Word choices are also very culturally influenced.
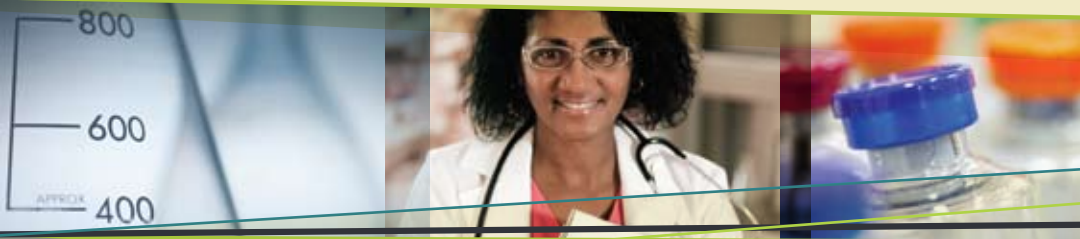
> What are some of the experiences you've had learning other languages? What are some of the challenges? What are some of the rewards?

> What are the connections between language and culture?

> How do we use language to impact our relationships? influence outcomes?

> Are there distinct ways medical professionals use language? What about specifically in your organization?

Non-verbal Communication

Communicating without words has many components: how we look, how we move, how we sound, how we smell, eye contact, the use of time and space, facial expression, body posture, touching, and smiling can all be significant in interactions.[15]

> How important is Non-verbal communication in your profession? What purposes does it serve?

> What kinds of messages are sent through Non-verbal communication?

> What are acceptable Non-verbal behaviours from a Canadian perspective? For your profession?

> When people exhibit these behaviours, how are they perceived? When they don't, how are they perceived?

> What are some of the Non-verbal behaviours you have seen that differ from your norms?

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[15] *Samovar, L.A., and Porter, R. E. (2004).* Communication Between Cultures. *(5th ed.). Toronto, ON: Thompson Wadsworth.*

> What do you consider unacceptable Non-verbal behaviours?
  What are the impacts on you when you experience them?

Personal vs. Professional Relationships

By personal vs. professional relationships we mean the differences between those relationships of your life as a whole, as opposed to those relationships which are maintained purely as a function of work.

> What defines a professional relationship? A personal one?

> What is considered appropriate behaviour for each?
  Inappropriate behaviour? How is this decided?

> When does a professional relationship become a personal one and vice-versa? What are the criteria?
  And who decides? Who initiates?

Professionalism

By professionalism we mean the values, attitudes, and behaviours associated with appropriate standing, practice, or methods of a profession.

> How is professionalism defined in your organization?
  Who defines it?

> What does professionalism look like? What kinds of things do you do or say?

> What is considered unprofessional? What kinds of things are not done or said?

> What are the ways professionalism is established? Maintained?

> What are the ways in which it can be lost? What are the implications?

> Once lost, can it be regained? How?

> Is there a code for your profession that helps define these things?

Safe/Legal Practice Implications

By safe/legal practice implications, we mean values, attitudes, and behaviours related to practices, policies, and procedures that are regulated by the profession as part of law-bound responsibility or for the purpose of keeping people safe.

> What does "safe practice" mean to you? What does it look like? To whom does it apply?

> What kinds of behaviours are typically included in safe practice? How are they regulated? Whose responsibility is it?

> What kinds of behaviours would be typical of unsafe practice? How are they regulated? How are they corrected? What are the repercussions?

> Does everything always happen according to the rules? When are rules bent?

> What are the non-negotiable law-bound responsibilities of your profession? Of your organization?

> Where can this information be found? How easy is it to access? Understand?

Socializing at Work

By socializing we mean actively participating in conversations, and relationship-building activities that are considered meaningful and important for group membership.

> How important is socializing among the members of your team? In your organization?

> When and where does it take place? What are appropriate times and situations?

> How much time spent socializing is appropriate?

> Who socializes with whom? Who initiates?

> What does that socializing typically look like? What kinds of things do you say? What Non-verbal cues do you give?

> What kinds of topics are appropriate? Which are inappropriate?

> What constitutes an enjoyable conversation? What constitutes a tedious one?

Taking Initiative

By initiative we mean an openness and willingness to start various actions or interactions.

> How important is taking initiative in medicine? What purpose does it serve?

> Who needs to show initiative? Who does not? What are the criteria?

> How is initiative demonstrated? What are the behaviours? What kinds of things do you say to show it?

> What happens if you don't demonstrate critical thinking in these ways? What are the consequences?

Theory vs. Clinical Practice

By theory vs. clinical practice we mean the kinds of distinctions and differences that might be found between what one learns as a part of formal study of the profession as opposed to real-world practice rich with experience.

> Are there things you learned in your studies that you've modified with more experience? If so, what are they? If not, why not?

> Does theory relate to practice? Or is there a gap between them?

> Which is given more value, academic credentials or experience? What are the reasons for this?

> How do both relate to ideas of credibility, trust, accountability, etc?

> How long does it take to become technically competent?

> How long does it take to develop a good body of experience?

ACTIVITY:

This activity can be done either before or after a critical incident debrief.

Choose a critical incident and examine the Workplace values that can be used to make sense of the interaction among the people involved. Divide your participants up into groups and give each group one of the topics for discussion. Have them outline their responses as specifically as they can: this might include a presentation, a poster, or even a role-play demonstrating the results of their group discussion – or a combination of all three of these.
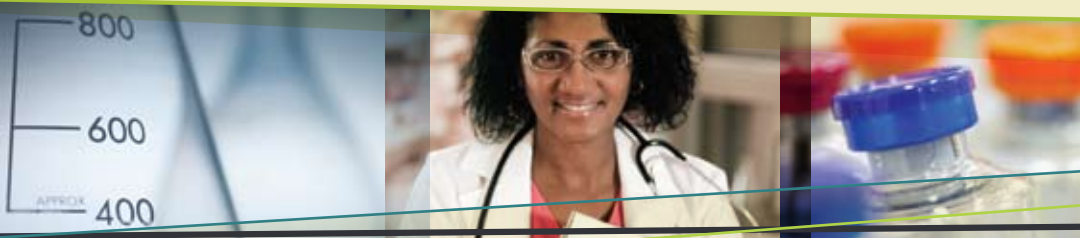
THE FACILITATOR ONSTAGE:
PUTTING THE RESOURCE INTO ACTION

In this section, you will find a discussion of an effective method which, when combined with the backstage knowledge of the previous sections, provides a thorough breakdown of the critical incidents for your participants. The Reflective Intercultural Learning Cycle (RILC) described in this section can be adapted to suit the DMIS stage and needs of your participants, either for probing quite deeply into differences in culture, values and behaviours, or for highlighting similarities and placing less emphasis on what might be perceived as challenging differences. The RILC is by no means the only way to look at critical incidents, but if you lack experience with critical incidents or as an intercultural facilitator, it can be a very simple, straightforward framework to start building expertise.

THE REFLECTIVE INTERCULTURAL LEARNING CYCLE

The Reflective Intercultural Learning Cycle[16] provides a 4-step framework for examining misunderstandings that are culture-based, and a template for working through the critical incidents and digging deeper into the complexity of issues inherent in each. When used consistently as a strategy for understanding difference, the RILC helps participants develop intercultural

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[16] *This strategy is inspired by the "Personal Leadership" methodology described in* Making a World of Difference: Personal Leadership: A methodology of two principles and six practices *by Schetti, Watanabe, and Gordon (2008).*
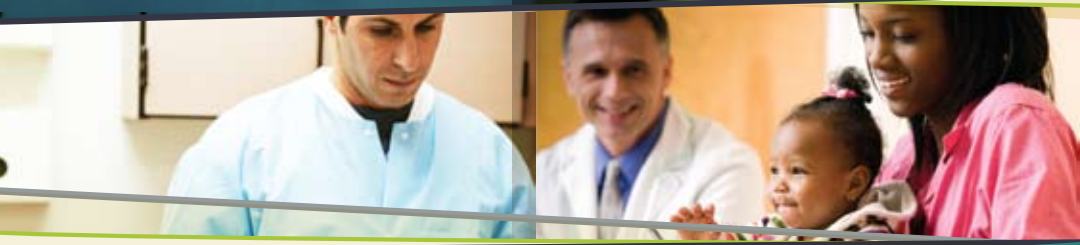
skills and to more effectively manage cross-cultural issues that arise as a result of working together on increasingly diverse teams. As a tool that moves beyond the critical incidents themselves, it can be used individually to reflect on situations, or it can even lay the framework for discussing issues with another person or as a team – exactly the kind of ongoing reflection that can lead to increased intercultural competence, enhanced team cohesion, and more effective team performance.

The RILC has four stages.

Stage 1: Something's Up

Stage 2: Suspend Judgment

Stage 3: Make Sense

Stage 4: Informed Action
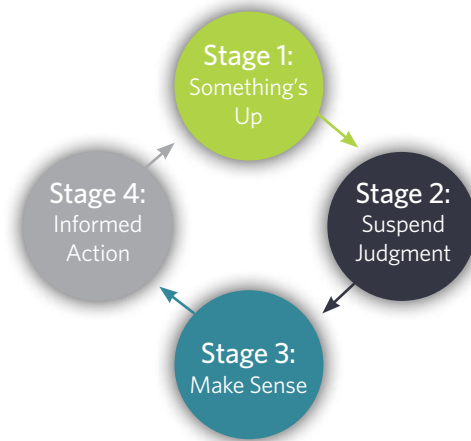
STAGE 1: SOMETHING'S UP

This first stage of the cycle is about noticing differences and usually occurs when a person's behavior does not meet with the expectations of their team-members. It is also about describing as accurately as possible, the facts of the situation.
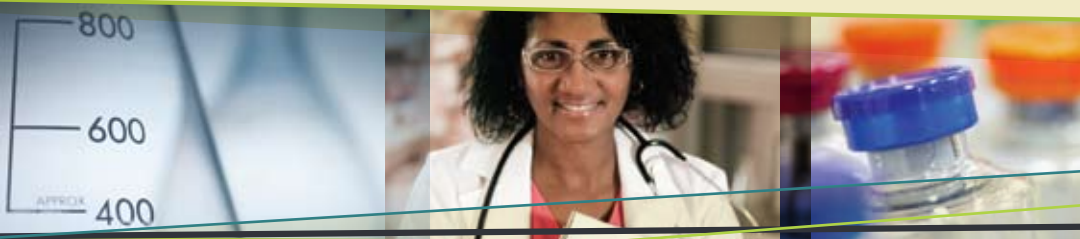
Signs that "something is up" include:

> Feeling threatened, overwhelmed, disapproving, or exhilarated
> Feeling the need to hang on to something familiar
> Withdrawing without explanation
> Different understandings of an agreement
> Thinking everything is fine when another team member is distressed, upset, or frustrated
> Feeling confused

At this stage of the cycle, the questions to ask are:

> What happened?
> How did (might) each of the people involved feel?

Or if this is being used to examine a personal experience, the questions are:

> What happened?
> How did I feel?
> How did (might) others involved feel?

STAGE 2: IDENTIFY AND SUSPEND JUDGMENT

Judgment involves all the ways of coming to conclusions about what has been perceived. Judging something as right or wrong or good or bad is a normal, often automatic, response to many situations. In many ways, this reaction is a natural display of cultural values. Our culture gives structure and meaning to

our experiences and enables us to make sense of the vast amounts of information we receive every day. In cross-cultural interactions, however, these types of judgments can get in the way of mutual understanding and innovation.

When we take the time to reflect on a situation—in other words, when we identify judgment—we can gain valuable insights into what is happening and increase our cultural self-awareness. When you try to identify a judgment, consider these categories of conclusions we may be coming to:

> Credibility: That person does not seem credible, how can I trust them?

> Leadership ability: That person is not a good leader.

> Fairness: That's not fair.

> Professional: That person is not professional.

> Competence: That person just doesn't seem competent.

> Trust: I'm not sure I can trust this person.

At this stage of the cycle, the questions to ask are:

> What are the judgments of the people involved?

> What are each person's conclusions or perceptions of the other?

Or if this is being used to examine a personal experience, the questions are:

> What are my judgments?

> What are my conclusions or perceptions of the other?

STAGE 3: MAKE SENSE

In stage 3 of the RILC, we attempt to make sense of a situation by observing general patterns of behavior and expression and then using these observations to figure out (or anticipate) a misunderstanding.

It is at this stage where we start to employ some of the cultural orientations and also examine some of the topics discussed in the *Workplace Values* section and begin to ask those questions. In either case, these useful categories can help us make sense of or predict important differences in "the way things are done" as well as understand the relationship between these and judgments or conclusions that come about when expectations are not met. If expectations are not met in any of these areas, misunderstandings can arise and influence the way people interact and perceive one another.

A Two-Step Process

As already noted, at this stage of the RILC (stage 3), participants observe and reflect on general patterns of behavior and expression to make sense of a situation. When undertaking these activities, a two-step approach is used that contributes to developing intercultural sensitivity and self-awareness. The insights gained in the Workplace Values discussion are of particular importance in this stage, as are cultural-general frameworks.
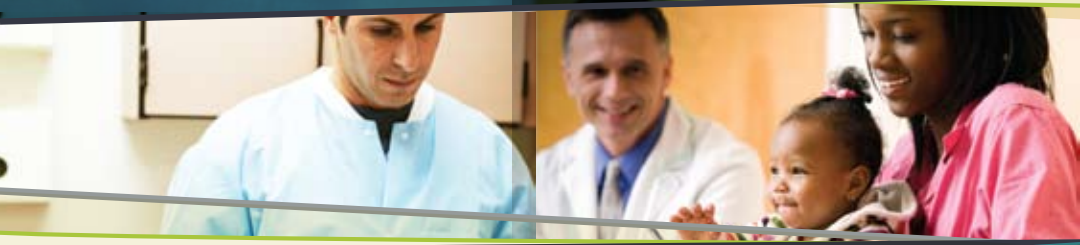
Step 1:

At this stage of the cycle, the questions to ask are:

> What is this situation/misunderstanding about?
> What did each person expect? (What is each person's normal?)

Or if this is being used to examine a personal experience, the questions are:

> What is the situation/misunderstanding about?
> What did I expect? (What is my normal?)
> What did the other person expect? (What is his/her normal?)

Step 2:

This stage engages a deeper level of understanding by seeking commonality and acknowledging the value in different perspectives. This approach to developing intercultural competence is not afraid to seek out and acknowledge, rather than ignore or minimize, differences. Intercultural competence improves as team-members practice empathy and develop the ability to recognize multiple perspectives.

At this stage of the cycle, we can also ask:

> How are the expectations of the people involved similar and/or different?

Or if this is being used to examine a personal experience:

> How are our expectations similar and/or different?

* For another making-sense piece (DMIS-stage dependent) that can be added to this stage of the RILC, see Appendix A - Making Sense Step 3: Upside/Downside.

STAGE 4: INFORMED ACTION

In the fourth and final stage of the RILC, participants are prepared to respond to the situation. Informed action implies that different perspectives have been considered and the best response possible has emerged.

At this stage of the RILC, the questions to be asked are:

> What can be done to move forward?

> What are the short term actions?

> What are the long term considerations?

Or if this is being used to examine a personal experience, the questions are:

> What can I/we do to move forward?

> What are the short term actions?

> What are the long term considerations?

Some possible actions that may be decided upon include:

> Review goals to determine if the misunderstanding is getting in the way of important goals. *Example goals: Be a high-performance team, be an inclusive team, learn, build a welcoming organization, build partnerships, build trust, establish credibility, ensure safety for all, etc.*

> Use the cultural orientations and workplace values categories to have a meaningful conversation about cultural differences to seek mutual understanding.

> Change or adapt to meet goals based on clearer understanding. *Example changes: Behaviour (i.e. Behaviour: using silence to express disagreement change to: establish shared understanding of alternate ways to communicate disagreement and maintain harmony goals), perception, goals, attitude, expectations, etc.*
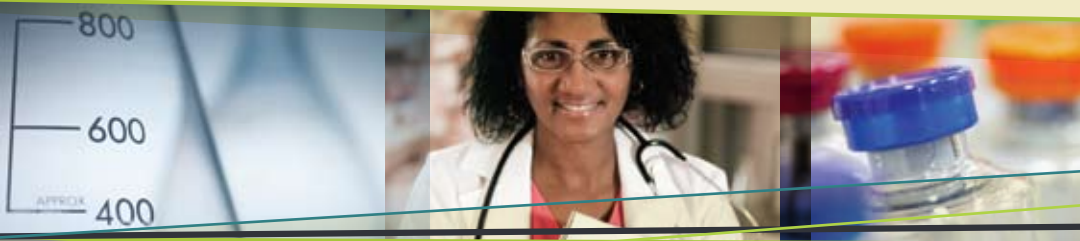
> Explore culturally inclusive strategies (see Appendix B)

> Explore the upsides and downsides of each perspective as a means toward innovation and creative alternatives. (see Appendix A)

> Discuss opportunities and implications for change or adjustment on organizational or personal/ interpersonal levels

> Review and adapt the orientation process for new team-members

> Be purposeful about building relationships and getting to know one another

In most health care contexts leadership not only plays an important role in decision making processes, but also as the driver for change and the implementation of new practices. Often critical incidents can serve as a mirror for looking at our own relationships, teams and organizations. If you/your team are interested in taking the issues raised in the critical incidents, lessons learned, or short-term and long-term action plans further, Appendix B provides some suggestions for being more proactively and intentionally inclusive in multicultural workplaces. Along with the RILC, these practices can reduce the number of misunderstandings, and promote better team-cohesion and a more open space for innovation.

HOW DO I USE THE RILC
WITH THE CRITICAL INCIDENTS?

This section will walk through one of the critical incidents utilizing the RILC to show how the cycle can be used to break down the incident into manageable pieces, to dig deeper into the issues at hand, and promote meaningful discussion around the differences of the people involved.

APPLYING THE RILC	
Stage	**Questions to Guide Understanding**
Something's Up!	Describe the Something's Up What happened? How does each person feel?
Suspend Judgement	Identify and Suspend Judgment What are the judgments and conclusions?
Make Sense	Step 1: What is this about? What did each person expect? (What is their "normal?") Step 2: How are the expectations of each similar and/or different?
Informed Action	Informed Action What can be done to move forward? > Short term > Long term

APPLYING THE REFLECTIVE INTERCULTURAL LEARNING CYCLE:
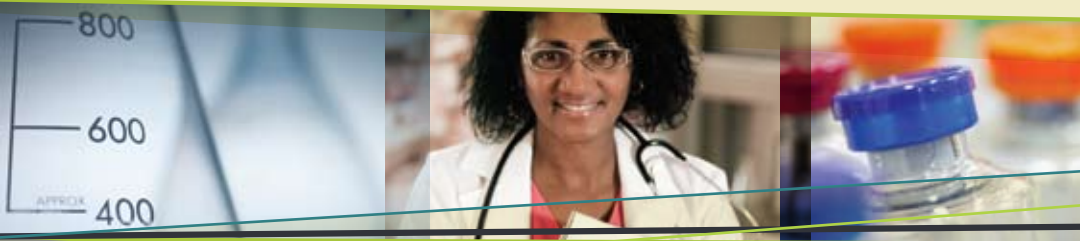
Let's Examine....

Critical Incident #4

We had one fellow, around 40yrs old, who was a very technically qualified pharmacist. He had a couple of Masters degrees. He didn't agree with coworkers' lifestyles and how they lived outside of work, and told them so. And he couldn't handle feedback from other, younger colleagues; it didn't matter that some of them had worked there for a very long time.

Something's Up! What happened?	An older, very technically qualified pharmacist and some younger colleagues have had difficulty getting along. The younger colleagues talk about their personal lives at work; their older colleague doesn't appreciate this. They've given him feedback on more than one occasion and it hasn't been received well.
How does each person feel?	The older pharmacist likely feels angry, frustrated, disrespected, entitled, alone (not part of the group). The younger colleagues likely feel confused, upset, disrespected, supported (in their group).
Identify and Suspend Judgment What are the judgments and conclusions?	**Older pharmacist** **Judgments:** His colleagues are undisciplined, less-experienced, lazy, disrespectful, and non-deferential. **Conclusions:** They need to spend less time socializing and more time becoming better pharmacists. They need to be educated on appropriate work-place behaviour and listen to the voice of experience and education. They don't appreciate the expertise he brings to the team. **Younger pharmacists** **Judgments:** Their older colleague is inflexible, rude, antisocial, and thinks he's better than everyone. **Conclusions:** He has a superiority complex, and needs to learn social-skills and how to accept feedback. He's stuck in old-ways of doing things which don't apply in this context. He's not a team-player and is a bad fit for the team.

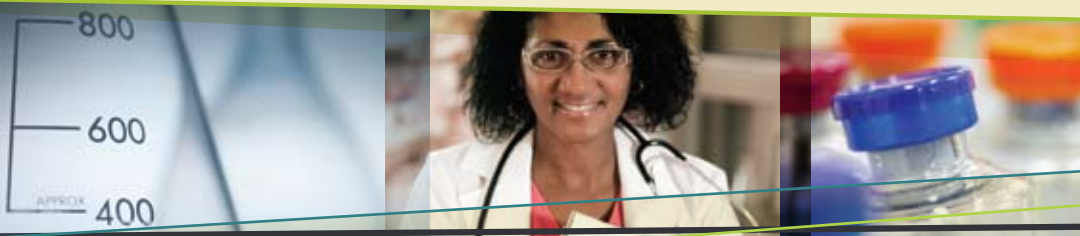|	
Make Sense **Step 1:** What is this about?	**What is this about?** > Power distance and Source of status (age does or doesn't automatically confer power and status). > Communication style (How to express disagreement, how to give and receive feedback, what is professional communication). > Personal vs. professional relationships; rapport and trust building (what's appropriate to talk about at work, how do we build connections and trust in groups).
What did each person expect? (What is their "normal?")	**Older pharmacist's "normal":** The older pharmacist likely sees himself, with his experience and qualifications, in a leadership/mentoring role on the team. He expects a certain amount of deference from his younger colleagues and expects them to come to him and accept his feedback when given. He sees it as part of his role to correct behaviours that are not professional (such as sharing personal, non-work related information) so that they can be as successful as possible. This is how he builds relationships with them and how he shows respect for them, their careers, and their professionalism. Although he recognizes that they have some expertise as well, he expects them to recognize that he has more and to want to learn from his experience. **Younger colleagues' "normal":** The younger team members have worked together for a long time in this particular setting, and have built very good working relationships. Work is very enjoyable because the relationships on the team are very open and sociable. It makes the hours pass by more quickly. They help one another with feedback and see it as their collective responsibility to help one another grow and learn professionally. No one takes the lead in this, it's always a collaborative effort. It doesn't matter who has more education or experience: you can always learn something from everybody. They are very open to new team-members, but are also very protective of the dynamic they have built. It's very important the new folks fit in.
Step 2: How are the expectations of the older pharmacist and his younger colleagues similar and/or different?	**Similar:** The older pharmacist and his younger colleagues all want the team to grow professionally. They all think that relationships and also the exchange of information among team members is important. **Different:** The definition of "professional" and the ways it ought to be achieved. The dynamics of relationships and the ways they should be built in the workplace. The direction of communication (unidirectional vs. multidirectional) and the style of that communication (ideas vs. relational confrontation).

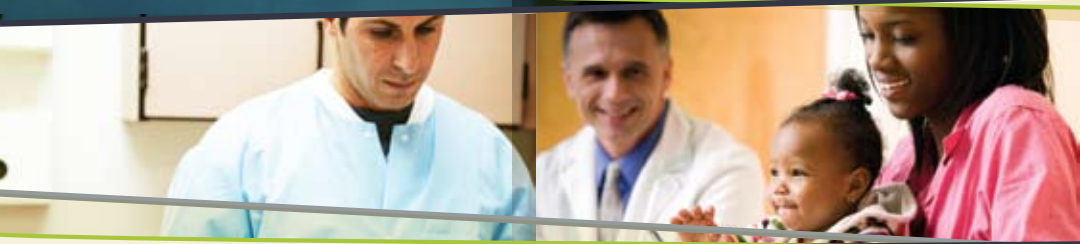| Informed Action	To improve the relationships and dynamics of this team, team members could…
What can be done to move forward? Short term Long term	**Short term** > Work together on clarifying their priorities and goals. > Get to know one another better and ask more questions. > Clarify each other's "normal" of what concepts such as professionalism, credibility, rapport, workplace relationships mean to everyone (would help to increase understanding), and emphasize similarities and differences. > They should also try discussing what behaviours demonstrate these values, and talk about the different perceptions of the different behaviours (talk about similarities and differences). **Long term** > Come to some consensus on expectations for the team's relationship dynamics and communication strategies. > Try to recognize and work constructively with different ways of building relationships and communication styles. > Create an orientation process process for new employees that better highlights the team expectations and norms.

CRITICAL INCIDENT AND
WORKPLACE VALUES GUIDE

In the following table you will find each of the critical incidents identified by their card-number, as well as a suggestion of not only the cultural orientations that can be highlighted in the incident, but also the workplace values that can be debriefed as well. This is by no means a definitive or exhaustive list of the debrief possibilities in each of the critical incidents. If other culture-general frameworks, or other debrief points either make sense to you or fit your context better, then facilitate the critical incident highlighting those instead.

CRITICAL INCIDENT	CULTURAL ORIENTATIONS	WORKPLACE VALUES
1	Concept of Self Emotional Attachment Prioritizing Time Orientation	Building Rapport Demonstrating Credibility Personal vs. Professional Relationships Professionalism
2	Concept of Self Prioritizing Time Orientation	Non-verbal Communication Delegating Responsibilities Demonstrating Accountability Demonstrating Credibility Safety/Legal Practice Implications Socializing at Work
3	Confrontation Style Degree of Directness Emotional Attachment Power Distance Risk Tolerance Source of Status	Building Trust Delegating Responsibilities Demonstrating Accountability Demonstrating Credibility Demonstrating Critical Thinking Gender Roles

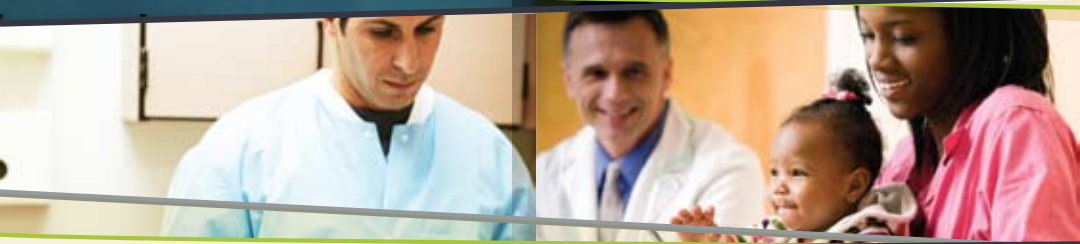| 4	Concept of Self Confrontation Style Power Distance Risk Tolerance Source of Status	Demonstrating Respect Gender Roles Giving and Receiving Feedback Personal vs. Professional Relationships Socializing at Work
5	Adherence to Rules Degree of Directness Power Distance Risk Tolerance	Safety/Legal Practice Implications Textbook vs. Clinical Practice
6	Concept of Self Degree of Directness Source of Status	Building Rapport Demonstrating Credibility Fitting In Language Socializing at Work
7	Confrontation Style Emotional Attachment Power Distance Addressing Differences	Building Rapport Demonstrating Credibility Giving and Receiving Feedback Professionalism
8	Power Distance Prioritizing Risk Tolerance Time Orientation	Building Rapport Building Trust Delegating Responsibilities Demonstrating Accountability Demonstrating Credibility Gender Roles Giving and Receiving Feedback Taking Initiative Textbook vs. Clinical Practice
9	Power Distance Risk Tolerance Source Of Status	Building Rapport Building Trust Delegating Responsibilities Demonstrating Credibility Taking Initiative Textbook vs. Clinical Practice

10	Emotional Attachment Power Distance Prioritizing Source of Status Risk Tolerance	Building Rapport Demonstrating Credibility Taking Initiative Fitting In Non-verbal Communication Language Socializing At Work
11	Adherence to Rules Power Distance Risk Tolerance	Building Rapport Delegating Responsibilities Demonstrating Accountability Demonstrating Credibility Demonstrating Critical Thinking Taking Initiative Fitting In Textbook vs. Clinical Practice
12	Adherence to Rules Concept of Self Confrontation Style Power Distance Prioritizing Risk Tolerance Source of Status	Building Rapport Building Trust Demonstrating Accountability Demonstrating Credibility Demonstrating Critical Thinking Gender Roles Giving and Receiving Feedback Safety/Legal Practice Implications Textbook vs. Clinical Practice
13	Adherence to Rules Confrontation Style Power Distance Prioritizing Risk Tolerance Source of Status	Building Rapport Building Trust Demonstrating Accountability Demonstrating Credibility Gender Roles Safety/Legal Practice Implications
14	Adherence to Rules Power Distance Risk Tolerance Source of Status	Building Trust Delegating Responsibilities Demonstrating Accountability Demonstrating Credibility Demonstrating Critical Thinking Personal vs. Professional Relationships Safety/Legal Practice Implications Textbook vs. Clinical Practice

15	Concept of Self Degree of Directness Prioritizing Risk Tolerance	Building Rapport Building Trust Demonstrating Credibility Demonstrating Critical Thinking Demonstrating Respect Fitting In Gender Roles Personal vs. Professional Relationships Socializing At Work
16	Adherence to Rules Power Distance Risk Tolerance Source of Status	Delegating Responsibilities Demonstrating Accountability Demonstrating Credibility Demonstrating Critical Thinking Fitting In Gender Roles Taking Initiative
17	Adherence to Rules Concept of Self Degree of Directness Power Distance Prioritizing Risk Tolerance Source of Status Time Orientation	Delegating Responsibilities Demonstrating Accountability Demonstrating Credibility Demonstrating Critical Thinking Gender Roles Language Non-verbal Communication Personal vs. Professional Relationships Safety/Legal Practice Implications Textbook vs. Clinical Practice
18	Concept of Self Degree of Directness Source of Status	Building Rapport Building Trust Gender Roles Language Non-verbal Communication Personal vs. Professional Relationships

APPENDIX A -
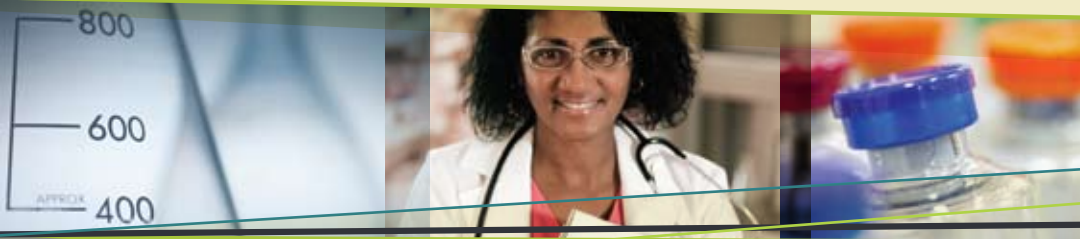## MAKING SENSE STEP 3: UPSIDE/DOWNSIDE

The Upside/Downside strategy is based on the assumption that no culture/perspective is perfect—all views have both strengths and limitations. It also assumes that diversity is essential for an organization to be sustainable. As such, this practice, when added to the third stage of the RILC, could be potentially quite challenging for folks in the DMIS stages of denial or polarization. It is therefore not recommended for groups who are either entirely or largely made up of participants in this stage.[17]

When people consciously focus on the advantages and disadvantages of different cultural perspectives, often they can then use that information to come up with hybrid approaches/solutions to an issue that include the strongest aspects of each point of view. This strategy reduces ethnocentrism, enhances intercultural competence, and ensures that all perspectives are considered in a balanced way.[18]

To see how Upside/Downside works, let's apply this strategy to the critical incident examined previously and examine the older pharmacist's approach to expressing his disagreement.

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[17] *For more information about the DMIS stages and the differences between them, see Bennett (1986, 1993).*

[18] *Some groups use a SWOT analysis (Strengths, Weaknesses, Opportunities, and Threats) to determine the upsides and downsides of an issue or idea. To learn more about this popular tool, conduct an online search using the acronym SWOT.*
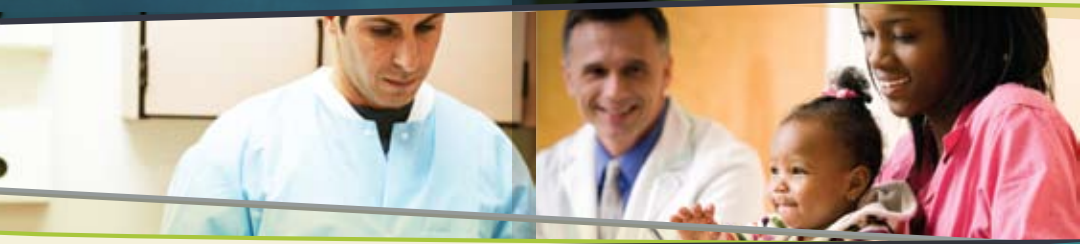
When an individual deals with conflict in a straightforward (blunt) and direct manner, this behavior has both advantages and disadvantages. The same could be said about a more relational or indirect approach to disagreeing with an idea.

Upsides (advantages/benefits) to being blunt:

> clear, no need for post-analysis of meaning

> efficient, without wasting time on things that won't work

> relationship building if shared/understood by all team members

Downsides (disadvantages/detriments) to being blunt:

> can cause discomfort and damage relationships if not shared by all team members

> May devalue the usefulness of dialogue

> may devalue the importance of relationships or creating harmony

APPENDIX B -
INFORMED ACTION: CULTURALLY INCLUSIVE LEADERSHIP PRACTICES

Organization and team leaders can use culturally inclusive leadership practices to support an inclusive working environment. Culturally inclusive leadership practices involve setting aside time to think purposefully about:

> How to ensure culturally diverse perspectives are considered

> How to design/set up working guidelines that are culturally inclusive

> How to ensure new team members or employees are familiar with the organization or team's commitment to intercultural competence

Some actions to create a culturally inclusive working environment which can be taken and considered as the last stage of the RILC, "Informed Action," involve:

1. Clarifying roles and expectations for each employee.

2. Articulating challenges:

   "Part of our challenge as a diverse team will be to find a balance between developing a shared, multi-perspective focus (unity), and working within the parameters set for us by the organization and outlined for our profession."

3. Setting intentions for working together:

   "I would like to maximize the opportunities that can arise from our diversity."
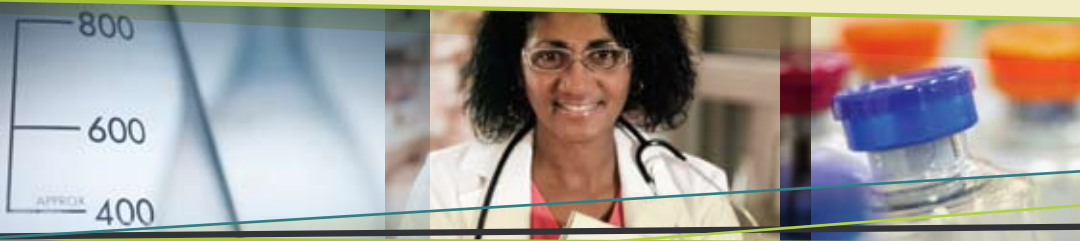
4. Setting expectations:

"As a team, we value the contributions of each member. It does not matter how long you have been on the team or what your background is. Each person has a valuable perspective and we expect each person to contribute."

5. Set ground rules for communication:

"With the diversity on our team, misunderstandings will likely arise. If you do not understand something, please ask for clarification; if language is unclear, please ask for clarification. Please be aware of possible differences in cultural norms. Assume good intentions, check your perceptions, listen actively, and speak clearly. Try to avoid using slang and sarcasm."

6. Post ground rules that have been agreed upon by the group so that they are visible and easily referenced.
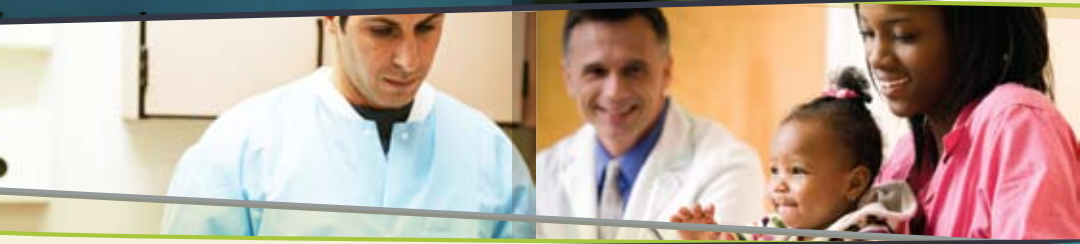
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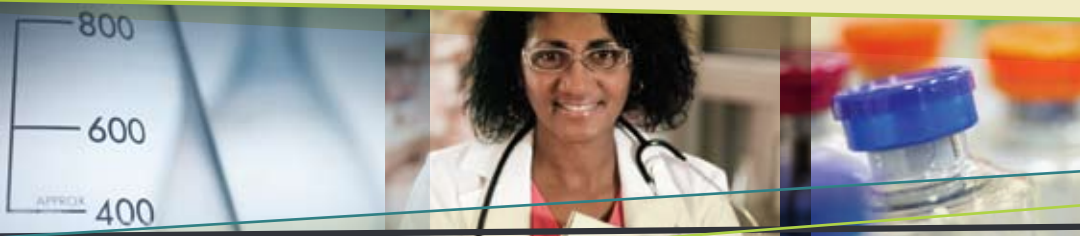
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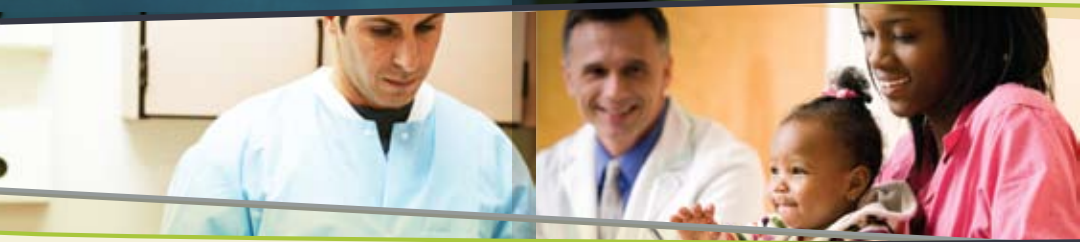
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[A] *This strategy is described in* Emotional intelligence for diversity: Intercultural literacy *by Cherbosque, Gardenswartz, and Rowe (2005). It is a strategy for exploring the benefits and limitations of all norms and is part of the Emotional Intelligence for Diversity training program. For more information about this program contact the Centre for Excellence in Intercultural Education at NorQuest College. icinfo@norquest.ca*
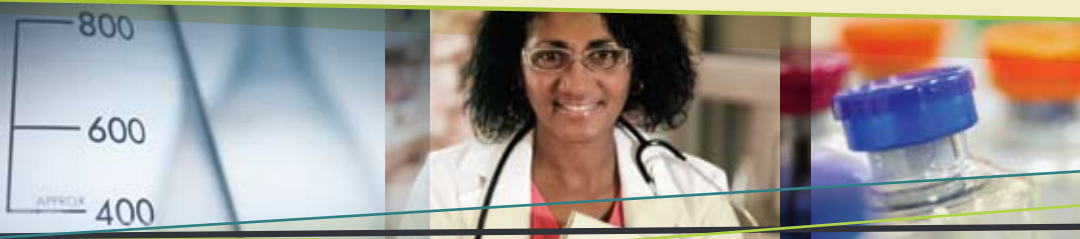
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