



ASPAN

American Society of PeriAnesthesia Nurses

Message from the President

Diversity Intelligence Quotient

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The time has come for perianesthesia nurses practicing in diverse settings to respond candidly to the following questions. Do you have a staff that is a representative mix of racial and ethnic groups, genders, religions, and abilities? Do you realize that diversity is gaining widespread attention on many fronts? Do you recognize the need to encourage, support, and embrace diversity? Do you agree that there is a need to break old patterns of knowing and doing that inhibit or preclude the contributions of a diverse work team? Are you aware that knowledge and acceptance of diverse colleagues and clients can positively impact the delivery of culturally competent care? What do you really know about diversity: fact versus fiction? In other words, what is your diversity intelligence quotient?

Once answered, these questions quickly give voice to another. Wouldn't it be interesting to measure and evaluate the individual diversity intelligence quotient (IQ) of ourselves and others? A practical way to proceed in this endeavor is to follow the reliable nursing process.

At the start, an assessment of cultural awareness is important. Staff can be given a self-assessment form which can function like a pretest in determining what misinformation, misconceptions, and knowledge deficits exist relative to diversity. A core group of interested staff who have attended "train the trainer" classes can act as facilitators in this beginning step; helping to formulate the pretest, compiling the data, and offering education. Behaviors, values, attitudes, and beliefs become part of the self-assessment, as well as the awareness factor. Awareness is enhanced by knowledge of early cultural experiences which either positively or negatively impact current knowledge and view of diversity. A trained diversity facilitator can also be utilized in this beginning step and may add increased credibility to the process.

The planning part of the process includes a brainstorming session at which numerous strategies are developed to move the diversity project forward and increase the diversity IQ of the perianesthesia team. Key values that drive the plan include empathy, sensitivity, and genuine commitment. Major principles include: getting out of the comfort zone, learning to communicate more effectively, respecting individual differences, refraining from making judgments until sufficient information has been obtained, accentuating the positive and keeping everyone accountable for a harmonic environment.¹

The actual implementation phase includes acquisition of cultural competence knowledge and skills through cross-cultural encounters, as well as formal in-services and informal meetings with diverse community groups. Adding written resources in the form of books, periodicals, and reference materials to the unit's "library" is a positive strategy. Accessing relevant cultural information via the Internet and sharing it with peers enhances understanding of differences. Making diversity an integral part of the perianesthesia orientation program will go a long way to raising the bar of cultural competence. Increased understanding of diversity ultimately leads to care interventions that are culturally appropriate, meaningful, and effective.

Evaluation of the plan is accomplished through an in-depth analysis of outcomes. Now is the time to reflect on the initiatives that moved the process forward. Review the patient satisfaction surveys. Look at the comments that are obtained from patient postoperative phone calls. Assess the staff satisfaction with diversity. Determine if staff communicates better and functions more effectively as a team. Are they motivated to share their knowledge and skills with students and ancillary staff? How do they score now

on a cultural awareness posttest? Observe patients of diverse cultures progress through the perianesthesia continuum. Are their needs being met with sensitivity? Do they feel welcome and accepted? Are the barriers to communication being addressed? Is access to care equal, available, and affordable?

The evaluation step is ongoing and, with each new discovery, a change is made to the diversity plan. It is, therefore, beneficial at the end of each day to ask the following question posed by nursing leader and cultural bridge builder Lorraine Steefel, "What have I done today to foster diversity and inclusiveness and to honor differences?"² To be successful, all cultures will need to learn to communicate with each other and celebrate differences. An excellent way to start is with a smile and a kind word.

Predictably, the diversity IQ will continue to rise as perianesthesia nurses everywhere accept the challenge to think globally; to acknowledge that a shrinking world needs strong, supportive connections. Bridging the gaps with minority nursing organizations and building alliances with organizations that shape international agendas will give us a voice to fashion culturally competent care for all!

REFERENCES

1. Iacono, M, Diversity in the Workplace (1995)
2. Steefel, L, Diversity Key to Global Nursing, Nursing Spectrum (6):p 9.(2002)