
COLLEGE OF HEALTH

EXECUTIVE SUMMARY

Background and Purpose

The College of Health (CoH) hosted a faculty retreat in Fall 2016 and identified diversity as an important area of focus. With support from Dean Perrin, the Diversity Council partnered with the Office for Inclusive Excellence to initiate a college-climate assessment. In their endeavor to anchor student-voices in the assessment, the Office for Inclusive Excellence used qualitative methods, focus groups specifically, to capture the ways in which the climate in the College of Health shaped students' perceptions and experiences. This descriptive executive summary offers some preliminary baseline findings from our data collection in Spring 2017.

Results

Faculty Survey

- While a majority of faculty (53%) described the overall diversity in the College of Health as *minimal, poor, low, and/or limited*, 27% described diversity as *good, supportive, or moderate*.
- Many faculty believe that the learning environment in the College is *good, excellent, and supportive*. Specifically, most faculty members believe that they cultivate classroom settings that are *welcoming, supportive, inclusive, open, and fair*.
- Every faculty member indicated that a sense of belonging was extremely important for student success.
- Finally, when asked how each department supports meaningful integration of diversity, most faculty members pointed to course development and curriculum.

Focus Groups: Student Demographics

- A total of 10 focus groups were conducted, consisting of 34 graduate students and 16 undergraduates. Of these students, 64% identified as Caucasian; 14% Latinx; 11% African American; 6% Asian American, and another 6% identified as Multiracial.
- In terms of age and gender, the mean age was 29 with 57% identifying as *Woman* and 43% identifying as *Man*.
- When asked about employment and housing, 61% of students indicated working part-time; 8% worked full-time; 19% were unemployed; and 11% indicated having an internship. Most students (53%) indicated living off-campus (renting).
- The top three offices students utilized for support services are: Financial Aid & Scholarships (29%); Student Health Center (21%); and the Center for Student Wellness (17%).
- The top five programs students have been involved in at the University of Utah are: Student Advisory Council(s) (17%), ASUU (15%), the Bennion Center (10%), Religious organizations (10%), and the U-FIT Program (10%).

Findings from Qualitative Focus Groups

- Students feel confident that diversity is highly valued in the College of Health. For many, the focus groups were symbolic of an intentional and ongoing investment of diversity.
- Overwhelmingly, students maintain a great deal of respect for faculty whose experiential knowledge and practical/clinical education in the field are integrated into the classroom; these perspectives force students to interrogate traditional assumptions of healthcare and (re)consider nuanced cultural techniques and issues that are not readily available or captured in textbooks.
- Internships, labs, volunteer opportunities, and practicums are instrumental in mediating student development and professional growth. For many students, their experiences at these sites (1)

facilitate an intimate awareness of sociopolitical issues that are relevant to their lives and the lives of their patients; (2) grant them enhanced perspectives of being white in communities of color; and (3) encourage them to critically raise questions concerning the role that identity—including race, gender & gender expression, and sexual orientation—plays in their lives as prospective and future healthcare professionals.

- Students persuasively emphasized that they benefit from their cohort experience. Student peers have become primary sources of support when they are grappling with issues of bias/microaggressions and/or navigating personal and professional tensions. *Reflexive questions: What intentional strategies are used to construct and admit diverse cohorts? How do we continue to shape these positive educational experiences?*
- Students are empowered by staff and advisors who are responsive, knowledgeable about degree requirements as well as program and institutional policies, and persistent in helping them access resources and ample opportunities for professional development and funding.
- Although some students perceived a gender imbalance, with women overrepresented in the College, others appreciated the presence of women faculty and staff, especially since men are predominantly represented in leadership positions (or positions of power) in health contexts. *Reflexive question: In what ways do we mentor women to assume leadership roles?*
- LGBTQ students were pleasantly surprised by inclusive options for self-identification on some of the program admission forms, and they would like to see this practice more consistently established as a norm in the College. *Reflexive question: How do we sustain such inclusive self-identification practices in all activities, including (but not limited to) curricula, recruitment efforts, and marketing?*
- Students expressed a desire for continued support from faculty who are able to provide accommodations without a prolonged process of ‘proving’ their disability. They are appreciative of faculty who coordinate and plan mid-term dates, finals, or large projects during different times in the semester because they felt it was helpful for them to more strategically organize their time and retain the course material.
- Some students of color expressed feeling supported and welcomed; these feelings were accentuated when faculty *initiated* contact with them to offer support, *invited* them to events or speaking engagements, or *encouraged* them to attend social gatherings hosted by the College. Other students of color did not feel welcomed, and they pointed to the absence of visible markers (or representations) of diversity. *Reflexive questions: In what ways can we probe further to support students of color? Is there a possibility of surveying alumni of color to inquire about their experiences in the College?*

Opportunities for Growth & Action

- While many students strongly believe that the College of Health values diversity, many more felt uncertain about how the strategic priorities of diversity and inclusive excellence are defined, promoted, and articulated. *Reflexive question: How does the College define, promote, and articulate diversity and inclusive excellence in the College of Health?*
- Considering the recent politically charged rhetoric and policies targeting their patients, students suggested that the administrative leadership from the College engage in a call-to-action when historically marginalized groups and individuals (whom they serve)—like, refugees and immigrants, trans women, and black community members—become targets in local, national, and global contexts; students recommended that this could manifest in the form of explicit communication and messages of support.
- Older (non-traditional) students feel alienated. Others asserted a degree of discomfort, fear, and ambivalence about reporting grievances or bias-related issues. These feelings are fueled by policies and protocols that are obscure, as well as concerns of retaliation (despite an existing anti-retaliation policy). For this reason, it is important to make established protocols and processes transparent for students to access. *Reflexive questions: How might students file grievances and*

express concerns anonymously without fear of retaliation? Is there a process external to the College of Health? Are students and their peers a part of the process?

- Students who are parents would like more consistent class schedules with stable meeting times to ensure childcare arrangements can be made. When meeting times or courses are re-scheduled without advanced notice, it can become financially constraining for them and their families.
- Some students expressed either experiencing or witnessing bias or microaggression and tokenism in the classroom when topics of privilege and intersectionality emerge. Many contend these incidents stem from the lack of exposure to diversity and difference, which make it difficult to engage in productive conversations as it exacerbates tensions that are ignored or perpetuated, creates conflict that results in hostility and sometimes produces unintended outcomes (being singled out or shamed), and lends itself to silencing certain voices. In these classroom observations, students suggested stronger facilitation skills to manage difficult conversations and classroom interactions. *Reflexive questions: How might we work with CTLE to support faculty with confronting some of these issues? How might we think more reflexively about our pedagogy?*
- In an effort to foster increased understanding and support for students who are “transitioning” in the LGBTQ community, it was proposed that faculty enhance their knowledge about this process. One recommendation put forth is to begin with free workshops offered through the LGBT Resource Center; to this, I might add bystander intervention education as a critical component to explore complementary ways to minimize the insidious effects of heterosexism. *Reflexive question: As human beings who are whole (not fractured or fragmented), when do we begin to discuss intersectionality and issues of privacy?*
- Once at their internship, labs, or practicum sites, some students recognized they were not equipped or prepared to have critical conversations about diversity-related issues with their patients or clients. That being so, how do we create opportunities within courses to strengthen our students’ cultural competencies and prepare them to work with patients at their future sites? How do we incorporate the College’s strategic priorities of diversity and inclusive excellence into the curriculum and make meaningful connections for students to apply them as healthcare practitioners? *Reflexive questions: How do we have critical conversations (merging theory and practice) normalized and transformed into interpersonal skills for students to draw on in their work with community members? Who is mentoring students at their sites? How do mentors support students?*
- To strengthen community, students suggested programming and/or other avenues, like open forums (to dialogue and enhance intergroup contact), symposiums (to share their academic work), student (affinity) groups to connect with students from other programs in the College, etc. They also voiced wanting stronger community building in classroom settings, departments (between graduate and undergraduate students), and even broadly across campus and institutions.
- Students argued that the cost of enrollment in the College is financially significant and it limits the inclusion of certain students (like those from lower socioeconomic classes) who may have considered the healthcare field. Moreover, some students questioned the value of their degree (or investment) while others alluded to structural barriers related to employment. They suggested increased communication regarding resources and funding opportunities that are potentially available to them, both within and outside the college. *Reflexive questions: Does the CoH participate in FAFSA marathons? Would a stronger partnership with Career Services be helpful to assist students in conceptualizing their investments in a degree from the College of Health? What type of outreach could we engage to attract and retain students from all socioeconomic classes?*
- Students with disabilities assert that deep-seated connotations of disability prompts subtle and overt elements of ableism. As a result, many with invisible disabilities prefer not to reveal their condition (even though they are in a healthcare-related discipline). The uncertainty of encountering prejudiced reactions makes it too risky for many of them to disclose. *Reflexive question: How do we become more educated on policies and laws related to ADA?*

FULL REPORT: ASSESSING THE CLIMATE IN THE COLLEGE OF HEALTH

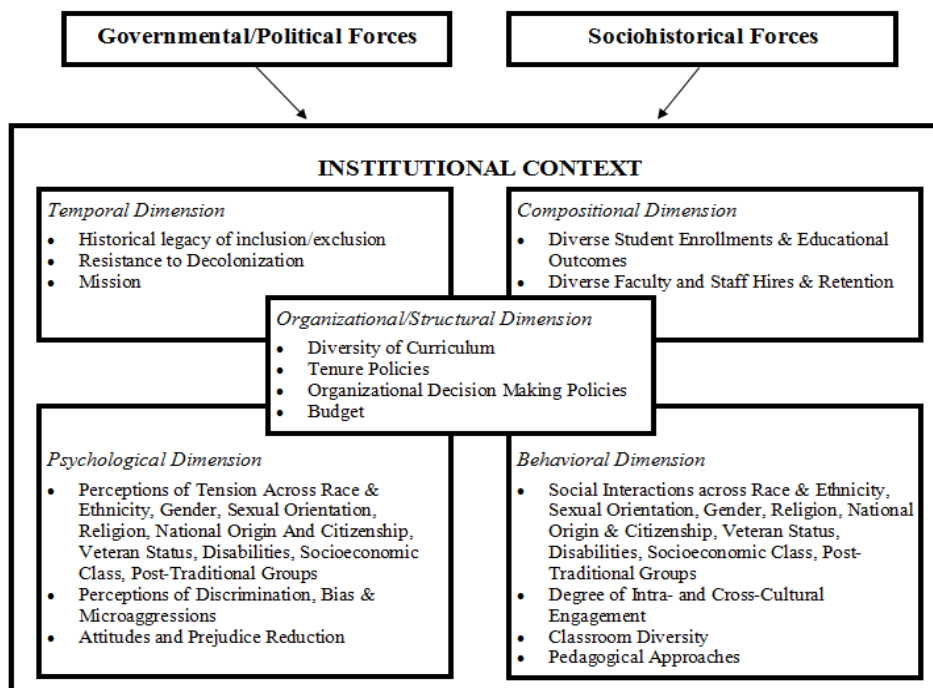
Introduction

Campus climate refers to the conditions of an institutions’ learning environment and it impacts the success and retention of its community members. Real or perceived, individuals’ perceptions of climate are shaped by (1) the quality of interactions across difference (inclusive of behaviors, attitudes, and standard practices); (2) structures, policies, and history of inclusion or exclusion; and (3) the level of respect and concern for individual and group needs, abilities, safety, and potential of its members (Hurtado; Milem, Chang & Antonio, 2005; Rankin and Reason, 2008).

Conceptual Framework

Campus climate entails multiple dimensions, as captured in the Diverse Learning Environment framework (DLE) below. The DLE framework strives to re-envision, integrate, and infuse both quality and diversity into institutional contexts. It includes (a) an organizational/structural dimension (like the curriculum, policy, and budget allocations); (b) a psychological dimension (attitudes, and perceptions of discrimination & tension associated with individual identities including race, class, gender, sexual orientation, disability, religion, etc.); (c) a behavioral dimension (social interaction across diverse identities, classroom diversity, pedagogical approaches, and degree of intra-racial campus involvements); and (d) compositional diversity (like student enrollment and diverse faculty and staff hires) that drive educational institutions away from traditional legacies of exclusion towards inclusion and equity (see Williams, Berger & McClendon, 2005; Milem, Chang & Antonio, 2005).

DIVERSE LEARNING ENVIRONMENT FRAMEWORK



Revised DLE framework by the University of Utah Campus Climate Steering Committee, adapted from: Milem, J. F., Chang, M. J., & Antonio, A. L. (2005). Making diversity work on campus: A research-based perspective. Washington D.C.: Association of American Colleges and Universities

Methodology & Method

The methodology driving our method is rooted in decolonization, “a process...concerned with having a more critical understanding of the underlying assumptions, motivations, and values which inform research practices...to claim a space in which to develop a sense of authentic humanity...to write back/speak back from the margins” (Fanon, 1990; Smith, 1999; Wilson, 2008). This methodology informs how we move forward to excavate more knowledge while enabling us to deconstruct dominant stories and reveal certain realities that might improve the current conditions experienced by students and prevent their stories from erasure, appropriation, othering, and fragmentation (Fanon, 1990; Smith, 1999; Wilson, 2008). We are reminded by researchers that “methodology is important because it frames the questions being asked, determines the set of instruments and methods to be employed and shapes the analysis” (Swadener & Mutua, 2008, p. 33). In an effort to undermine the hegemony of othering, we sought opportunities granted to historically disenfranchised students to speak directly about climate conditions in the College of Health and its impact on them. Given that the University of Utah is located on indigenous lands, a decolonizing methodology was influential in the questions asked and method employed to empower and (re)center voices that have traditionally been relegated to the margins.

The Office for Inclusive Excellence elected the method of focus groups to gather data from students in the College of Health. Focus groups are defined in this case as “group interviews that rely on interaction between participants to elicit perspectives,” and the data emerging from the individual groups became units of analyses (Mertens, 2015, p. 382). Focus group methods created a site for students to engage in a deeper conversation about the ways in which their experiences were impacted by the conditions and climate in the College of Health. Through guided discussion, the focus groups involved semi-structured questions and a high interaction of ideas.

Focus Group Demographics

Focus group participants were identified as follows:

- 50 students total, 34 graduate students and 16 undergraduate students
- 38% identified as students of color
- 57% women; 43% men
- 19% LGBTQ; 3% Pansexual
- 69% most frequently utilized the Office of Financial Aid & Scholarships
- 43% of students were first-generation college students
- 69% were at employed at least part-time
- 38% identified their spiritual affiliation as other than Christian or LDS; 22% identified affiliation as not listed or preferred not to answer

Data Generation and Collection

Data were generated in focus groups held between February and April 2017. Focus groups varied in length, based on number of participants and responses to questions, between 30 minutes and 2 hours. An open-ended questionnaire was utilized to structure and guide the conversations; however, participants were encouraged to speak freely outside of the parameters of the questions posed to them. Participants were invited to speak at length to the questions and other issues that came up during the focus group sessions, and were invited to stay after the focus group or to email researchers directly if they decided they wanted to add information. Each focus group was audio recorded. Additionally, researchers facilitating the focus groups took notes to capture body language, tone, and participant interactions. Audio file data were transcribed using an external transcription service. Written transcripts were de-identified before being analyzed.

Data Analysis

Data were analyzed in aggregate, using multi-layered analysis (Kidd & Marshall, 2013; Riessman, 2008). Due to the limited number of participants, data were not separated out by program or department. The decision was made to analyze data and present the analysis in aggregate to ensure the anonymity and confidentiality of participants.

The first layer of analysis included uploading de-identified transcripts into NVIVO qualitative analysis software. This surface-layer analysis provided key words and initial clustering into topics that came up in the focus group. The researchers who facilitated the focus groups independently and manually coded each transcript. The coding was then compared and discussed to ensure reliability (stability, equivalence, and internal consistency) and construct validity (patterns of convergent and discriminant associations between themes across focus groups) (Kidd & Marshall, 2013). Finally, the researchers reread transcripts to hone thematic precision.

A total of nine themes emerged from the qualitative focus groups: (1) Diversity and inclusive excellence; (2) Curriculum and classroom climate; (3) Experiential learning towards praxis; (4) Pedagogical approaches & learning strategies; (5) Quality of interactions and the impact of space; (6) Communication, expectations, protocols & policies; (7) Compositional diversity & representation; (8) Bias and microaggressions; and (9) Sources of support.

DATA & FINDINGS

Diversity and Inclusive Excellence in the College of Health

As a foundational dimension of its organizational culture—comprised of values, beliefs, attitudes, and norms (Tierney, 1988; Rhoads & Tierney, 1992)—diversity and inclusive excellence is publicly acknowledged¹ by the College of Health as a priority, strategic to the function of its organization. Many students articulated feeling the importance of this espoused value and explicitly mentioned that the purpose of the climate assessment and focus groups exemplified this principle:

If diversity wasn't important to the College, we wouldn't be having this focus group.

I feel like [the College] walks the talk by doing things like this. You know, holding dialogues and providing opportunities for diverse voices to be heard. Things like that...just keep letting diverse students into the programs. It would be nice.

[Our department] just highlighted how important it is to be comfortable with diversity and understanding it.

Students recognize that diversity and inclusive excellence is integral to their future careers as health care providers and they assert multiple reasons why it is important to them. In doing so, they identified a range of reasons—emerging from personal and intellectual growth—to become professionally prepared to enter the field as culturally competent healthcare practitioners:

I think getting rid of stereotypes...will be a crucial thing in everyone's life, in healthcare, in any profession.

¹ See the College of Health's website for their complete Vision of Excellence and Strategic Priorities: <http://health.utah.edu/vision-of-excellence.php>

As healthcare providers, it's important to be able to deal with diversity and [patients] who have issues where they experience bias or bullying.

I just feel like there's a lot of people who don't have any experience in diversity or have never even opened their mind to the potential that other people are not like them. You can't do that and be a health care provider because you're not going to come into contact with people who are just like you.

What changed for me to realize how important this topic was for me were my personal experiences. Diversity is dealt with at the College. We'll still deal with it in the workforce. You see it in your community...this is something that's a daily thing. Whether you don't see it right now as affecting you and you don't see it changing you or it's not something you've had to deal with yet...there's a possibility you're gonna experience it.

The diversity perspective that I find extremely helpful is knowing why and who I am, what my needs are and finding support immediately on campus.

Diversity is definitely valued because of our profession... You need to be able to expand your [understanding of] diversity.

Students underscored the reality that diversity is inevitably a part of their present and future, and it is deeply embedded in their personal and professional lives beyond their school experience. Their overwhelming responses to the value of diversity in the College of Health invoked questions on the meaning of diversity and how it is conceptualized.

Diversity: What does this mean?

While many students strongly believe that diversity is highly valued—and there was no question of its significance—it was crucial to understand how diversity was conceived. When students were asked to elaborate on the meaning of *diversity and inclusive excellence* derived from the strategic priority in the College of Health, there were some difficulties:

I'm just curious how everyone defines diversity. Is it more like a ... color or a person and what they are?

I'm not familiar with the College. Do they have a motto for diversity or a statement about diversity?

I have a general assumption on the College's meaning of diversity, but I have no idea what's written. I think diversity is an important part of the program...and social justice is part of it; it's been woven into my whole entire experience here in a really powerful way. We also had a program housed within our department so I know that within the faculty and the student there's a lot of support for people who are dealing with disabilities that might be served through our program. I think that my department is very interested in promoting, attending to, and paying attention to diversity issues. I have no idea if that's written.

I think diversity is a really complicated thing. I feel very confident that my department values it. I don't know what they're doing to promote diversity amongst the student body. Apparently there's one scholarship and that just doesn't seem sufficient...I would be interested to hear what else is being done to promote it, particularly amongst the

undergraduate population. I feel like there's somewhat more diversity at the grad level. But, somewhat.

I'm not sure where the department stands on diversity because there's not a lot of conversations about it. Maybe that's because there's a lack of classes that deal with cultural competencies and those difficult conversations with diversity and issues that we would deal with. Especially in our program, there's just not enough knowledge. We do have a class that pertains to diversity...but even in that class I don't feel like we dive enough into it to know where the department stands.

Our inquiry into the meaning of 'diversity and inclusive excellence' revealed a degree of ambiguity among students. Their responses also varied when they were asked about feeling welcomed in the College of Health:

I have definitely felt very welcomed. I have felt wanted. Initially, when I was considering another school to attend, I talked with [my professor] and he definitely talked to me about the possibility of staying here and doing everything that he could to make me feel welcome because I was initially interested in a different curriculum that offered bilingual education, which is what I was interested in. But he was very open and very willing and he definitely made it seem like he really wanted me here and wanted me to be part of the program.

I don't feel like there was a welcome or a not welcome.

I don't know if I felt like I wasn't welcomed here. I haven't really felt like a welcoming either if that makes sense. Just kind of like neutral.

In terms of creating a welcoming environment for anyone that identifies in any certain way or is a part of any minority or underrepresented group, I feel like it's welcome. But of course, I don't know if I necessarily can provide the perspective because I'm not part of one of those groups. I don't know if I would feel welcome if I weren't who I am.

I'm from [out of state]. From my experience when I got here, I talked to Dr. Williams² and we talked about the diversity in the program and what to expect and he told me that I always have somebody there if I need to talk about certain situations.

Other students—while feeling welcomed—expressed a desire for leadership in the college to publicly provide explicit messages from college leadership welcoming *all* students including prospective students and the communities they provide service to, particularly when they are impacted by broader sociopolitical policies and legal implications; most recently, the travel ban by the current political administration in the US, which extended its restrictions to refugees:

I thought it would have been nice for there...to be some sort of message, from the department or something, about how we still welcome refugees here, despite the recent political climate.³ I was expecting to get some sort of message about that because after the rape that happened on campus⁴, they sent out a whole thing about the college, or the

² Pseudonym

³ See article on travel ban here: <https://www.cbsnews.com/news/trump-travel-ban-ruling-creates-questions-for-refugees/>

⁴ See article here: <http://fox13now.com/2016/10/31/u-of-u-police-looking-for-suspect-in-aggravated-rape/>

university that doesn't condone violence against women⁵, and things like that. I thought that was really cool that they did that. I was kind of expecting for them to do something similar in terms of refugees and stuff like that, but I don't know that that happened. That would have been nice.

I do like your refugee suggestion because one of our field works is working with refugees.

I was expecting there to be something like, "despite political things, we still want them here."

As students have pointed out, campus climates are impacted by external factors, like governmental and political forces. Given this understanding, they emphasized the importance of reiterating the values of the college in supporting and welcoming all students as well as community partners to the College of Health impacted by the political terrain. Citing examples of such support, students named different memorandums of support released by the U's central administration—for undocumented students, gender pronouns and preferred names in the classroom, women who were targeted under sexual assault—which they believed could promote a more welcoming and inclusive climate, and inevitably contribute to the values of diversity and inclusive excellence in the College of Health.

Curriculum & Classroom Climate

A common finding from the study focused on the classroom climate and curriculum. The classroom climate entails multiple features including “the intellectual, social, emotional, and physical environments in which our students learn” (Ambrose et al., 2010, p. 170). Specifically, “climate is determined by a constellation of interacting factors that include faculty-student interaction, the tone instructors set, instances of stereotyping and tokenism, the course demographics... student-student interactions, and the range of perspectives represented in the course content and materials” (p. 170).

Indeed, the classroom is arguably a primary site of knowledge production and it is an influential dimension of campus climate. In the focus groups, students discussed multiple components of the classroom related to pedagogical approaches they observed; experiential learning opportunities (which were often structured into their programs); and the quality of interactions between their peers and the faculty in the College of Health.

Beginning with the recognition that diversity and inclusive excellence is crucial to the curriculum structure in their programs, students eloquently voiced a number of reasons for perpetuating and sustaining diversity and inclusive excellence in the curriculum:

In order for us—as healthcare providers or people going into specific health care fields—there needs to be more of a specific class for us [in each department] to understand these issues.

I don't really see why having a diversity class in the [College of Health] shouldn't be required. It's just kind of scary to think of people going out in the professional not really wanting to learn about diversity or taking an opportunity to do so.

I took a class called Diversity in Health and it was awesome and I feel like everyone going into any health professional would really benefit from it...If every student took it, I

⁵ See two of President Pershing's letters to the campus community: <https://attheu.utah.edu/facultystaff/regarding-campus-safety/> and <https://attheu.utah.edu/facultystaff/our-campus-community/>

feel like things may be different with people having difficulty talking about controversial subjects.

We're [reviewing] a lot of community and non-profit type of deals and take a lot into consideration different backgrounds and socioeconomic experience...the people you're providing the experience and creating it for.

In one class, we were given space to discuss homelessness and how that can affect health. We discussed controversial topics such as harm reduction approaches to prevent further spread of diseases such as needle exchange programs. Community health issues touched on so many things including maternal health and the gender gap, race, culture and socioeconomic status, food access, reframing the issue of obesity, victim blaming, and topics that changed my views on many health issues. These topics were discussed in the context of privilege and oppression.

In their accounts, students allude to topics, like the needle exchange programs, that might encourage them to re-examine institutional contexts and policies, economic constraints, and their impact on individual and communities. It also became clear that the classroom climate and curriculum prompted them to challenge their own thinking and explore fundamental aspects of the health care profession related to difficult and controversial topics; to (re)imagine their work and relationships with community members, and to think more deeply and critically about the impact of their practice with different underserved groups and communities. Based on the opportunity to reflect about their learning in the context of the classroom, students insisted on expanding the diversity course (beyond the introduction required at the beginning of enrollment) toward a specific and interdisciplinary curriculum.

I'm just throwing out ideas of different classes that we could have in the program: "A Diversity of Sports." These could be for undergrads that's still undecided. These are the things that you're interested in. This is the classes you should take that will benefit you in that field with a diverse population or with cultural competencies that you can deal with and see.

What brought [diversity] to light for more of us is the topic of sports and the health care that is specific to our field. At that point, I said, this is what I'm interested in. This is what I'm thinking about.

If the department incorporated bell hooks and all these amazing scholars from different areas and fields to health promotion, it would be so important. It's so important to have all those voices incorporated into our curriculum.

Like a holistic way of looking at health for multiple disciplines.

Characteristics of cultural competence, values, beliefs, and healthcare disparities in health care settings were implicated by students. In addition to an interdisciplinary curriculum integrating critical scholars whose discipline might be external to the Health field, students offered a different way to conceive curriculum development. In particular, they provided a coordinated and structured suggestion for collaborations across the program as an approach to consider. They referenced the example of patients who may have experienced a stroke to demonstrate their meaning. I quote them at length to illustrate their explanation:

They also organize the semesters so we have four different classes, but we're all learning about stroke in all of our classes right now. So, we're learning different aspects of how to treat, evaluate, and work with people with stroke. They timed it out.

Yeah, they line it up through all of our classes.

Line it up like that, so you really get multiple ... It's repetitive. We've been getting a ton of videos lately, which is so helpful. We get a lot of visual, as well as auditory, and written instruction.

Yeah. All the readings are relevant.

Strokes from different perspectives. The audio is about recent strokes too.

Yeah. It's just how to evaluate it.

What evaluations do you use? Then, how to actually treat it. What treatments, what interventions?

And cognition.

Yeah! Then, the cognition piece just goes into all of it.

Yeah. An evaluation class where we talk about how to evaluate, and then, we have a skills class, where we talk about how to intervene. Then, you have the cognition class, where you talk about the effects on cognition. They all tie into the same content, so all the teachers work hard to line that up.

They do really well...awesome.

The teachers are always good about providing the application piece, and providing their personal perspectives. Because the clinical piece is so crucial, and all of our teachers have experience as clinicians that they can share with us. Be like, "Here's a person that I saw with stroke. This is what happened; it was crazy."

Yeah. "This is what it can actually look like. This is what it looked like, and this is how different it could be."

In their example, students illuminated how one healthcare issue can be examined and discussed through multiple lenses. This includes a lens to identify the symptoms; another to evaluate its severity; a different angle to review treatments and interventions; and another to consider the social and cognitive impacts as well. In this approach, students believed their knowledge could be deepened as they consider the complexities of being a healthcare practitioner.

Students also offered suggestions to shape the curriculum. One proposal centered on integrating religion, whiteness, and race & ethnicity. Another student discussed the significance of addressing the lived realities of fluid and shifting identities in relation to their own (as healthcare providers) and those of their patients.

I think it would be so excellent if we did have curriculum about things other than the white...predominant culture that's here even for us who aren't from here to learn more about LDS culture, I really have taken it upon myself to talk to my friends here. I'm like, "Tell me about your faith. Tell me about your religion. What's with that?" There are definitely a lot of gaps, intense, intense gaps.

With classes, I would like to see and get more out of the inclusion of difference. It's not just saying when we do experience or it's an athlete that's dealing with gender identity or thoughts of homosexuality. How do we as athletic trainers & medical staff help or even understand that process if an athlete is injured and says something to me? I don't even feel comfortable in the workforce that I'm going into or tell my employer that I'm gay.

I think that there needs to be curriculum...a full semester of class and we're talking cycle social issues just with everybody. We're talking motivation, coaching techniques. We're talking about ways to maximize adherence and we're also talking about diverse populations. You cannot treat that person the way you treat this person. That is a bad idea. It's going to impede you.

I'm not satisfied with health care in general. There are some aspects of the faculty in the way the curriculum is designed...we need to have programming that focuses on cultural aspects and focuses on motivational techniques and that stuff. That needs to happen like now.

I've got to agree with making classes more...about how we can adapt to the diversity of the populations. That will be the only way. I just leave it for you to figure out on your own in either clinical rotations or in your future practice even if it's a basic understanding of different cultures, different gender or religious or ethnic diversity groups. Getting you your foot in that door where you can get at least comfortable in wanting to learn more about those.

I'm heterosexual and I identify as that, but I would like to see more non-traditional relationships being exposed to me during classes. Even though I identify as heterosexual, I'd like to see that because I have friends who are identifying as something different and families who are different.

In terms of the curriculum, they could work in transgender more.

Yeah. They haven't mentioned [transgender] at all. I feel like we've never had a class that has ever really discussed that.

I mean, actually, it really is like a part of health care ... [One faculty's] language pathology works a lot with trans people. I think that [our program] could definitely have a role. Not necessarily in the changing of the voices and stuff, but different things; there would definitely be a place for it especially where there's a whole paradigm shift in your life, and it can be hard to manage and would need a holistic view. I would be interested in it.

The suggestions put forth by students reflect some of the issues they have either witnessed, grappled with, or experienced in the field of healthcare. They allude to the possibility of integrating sociopolitical issues to complement their learning and students emphasized that their education and curriculum must be relevant, relational, and responsible when engaging with others in the co-construction of knowledge.

For many in the College of Health, their classroom curriculum is generally linked to experiential learning opportunities; thus making their learning align cohesively with a *praxis*-oriented education (Freire, 1993). Consistent with one overarching theme of student success, supported by campus climate scholar Daryl Smith (2009), learning experiences out of the classroom context, combined with attendance at lectures and discussions are critically important for student success” (p. 19). This idea is affirmed by one student who stated, “*Once you’ve applied [knowledge]...you’re actually learning the content and learning [how you might] apply it to your career.*”

Experiential Knowledge: Practical application toward Praxis

In the curriculum, experiential learning opportunities—in the form of internships, labs, clinicals, and service learning—was a prominent finding of meaningful education for students. Moving beyond a philosophy of education, experiential learning opportunities lends itself to advantages of cultivating dialectical relationships between students and their world (Darder, Baltona, & Torres, 2003; Freire, 1993). Analogous to the practice of community-based learning and high impact practices (Boyle-Baise & McIntyre, 2008; Kuh, 2008; Sleeter, 2008), students in the College of Health indicated that these types of structured learning opportunities (connected to the curriculum) enable them to deepen their understanding and apply the knowledge they gained in the classroom. Simultaneously, it fuels their capacity to think more critically about their roles, responsibilities, and values as they actively engage patients and clients at their assigned clinical sites⁶:

The clinicals are very helpful...I would say more than half of our learning is there.

The clinical sites have been educational...being able to get hands-on experience keeps you more alert and you actually get to see the things we talked about in class and now I get to see it there. I can say, "I don't really get it." I get asked, "What's your interpretation of this and can we do this? Can I see it?" When a patient goes down, I'll say, "hey remember when we talked about this, this is an example of what it looks like." That's a big deal!

I'm so grateful for those [experiential] opportunities to get out into the community because that is what is gonna help me feel prepared...[and] figure out what demographics we want to work because right now, we don't know. And even if we do, these opportunities are giving us chances to widen our perspective.

We interact with a lot of different people through our internship hours...working with people with disabilities. That opens up so many opportunities to speak with people who have experienced things and lived different lives.

Even though our student population isn't diverse, we interact with a lot of people outside of the student community that have had different experiences."

"In our classes, they're always talking about culture and being aware of diversity...but there's not a lot of diversity in the class. With our lab experience, we're definitely given opportunities.

As an extension of the classroom, students affirmed that their education is enriched by actively and meaningfully connecting experiential learning opportunities with abstract theoretical underpinnings in the classroom; thus promoting an authentic *praxis*-based approach to education (see Dewey, 1916; Freire, 1993). Many students explained that these valuable opportunities complement their cumulative experience, particularly in recognizing the need to be more adequately prepared to support patients who are confronted with political ideologies; navigating complexities of identity; and grappling with pernicious stereotypes:

I'm learning a lot about culture and dealing with diversity in the profession [at my internship]. Once you start your profession, it will take time to learn about people and

⁶ Due to the different way that different programs referred to "internships," the terms clinicals, internship, labs, and community or service learning opportunities are used interchangeably throughout the paper.

you're gonna make mistakes and the most you can do is learn as much as you can in your classes right now to practice applying it as much as you can.

From my perspective, the reason that we engage in practice and interact with difference during our internship...is so that we can apply what we learn when we actually become professionals...after you've learned the basics of it in the classroom and then apply it when you're actually doing it might be kind of rough. But that's part of our education...that's how you learn.

I'm the stereotype white guy from Utah. Going out to work with a different demographic and helping someone with racism, what do I know? They look at me and think, 'You're the reason I have an issue.' But I'm looking at them saying, "I'm here to help you." They'd probably say, 'no you're not.' In their defensive state, they're gonna accuse me of being rude to them when I'm the healthcare provider trying to help them understand that maybe there are healthcare providers that are racist or biased, and if so, that needs to be addressed...our job is to give the optimum healthcare to our patients. If [we] can't do that, we're no longer able to do our job.

We don't talk about how we can help as healthcare providers with certain patients, like athletes. That's something I wish there would be more [diversity] kinds of conversations and dealing with an athlete that's facing racism in a clinic. How do we deal with that? How do we overcome that? How do we, as practitioners, better ourselves to deal with that head on and treat that athlete as they are? How do staff recognize those aspects? Maybe it's because we're in Utah and we're not seeing a lot of it, but I've seen multiple things with gender stereotypes.

As emerging healthcare practitioners who are evolving to “read the world” (Freire & Macedo, 1987) in healthcare contexts, students are constituted in a dialectical relationship with patients from different backgrounds and they are constructing meaning by bridging the gap between applied practice and discursive practices concerning intersections of race, class, and gender subjectivities (among others). As a result of these interactions, they are raising thought-provoking questions.

Can we have the conversation of how can we help this [diverse] patient? What's my job as a medical professional for my patients? How can I benefit this [patient] and help [them] as best as they need, whatever their circumstance is...this is the cultural aspects that we're dealing with and seeing right now or in the medical field. What's our role?

The questions above nurture fundamental principles associated with experiential learning opportunities meant to situate what scholars posit as “education to experience, democratic community, reflective inquiry, and education for social transformation” (Saltmarsh, 1996, p. 13). These educational opportunities empower students to reflect on their personal development, including the social and political impacts (and even oppressive conditions) confronting their clients and patients. In doing so, some students believe that their roles as health care professionals are much more fluid: “*We're nutritionists, mental health counselors, parents.*”

It is commonly understood that social exchanges and frequent interactions, by themselves, do not necessarily affect student learning outcomes; however, we are reminded that purposeful and intellectual engagement do (see Kuh, 2003; Pascarella & Terenzini, 1991). Alongside their academic experiences at experiential learning sites, students expressed appreciation for their clinical faculty who, because of their knowledge obtained from practicing in the field, can offer nuanced techniques and approaches that are not always documented or captured in research articles or textbooks.

[Our professors] have so much clinical experience. They're so smart. I really respect all of the professors.

I respect all the professors, just for bringing that aspect to it. Their own, personal clinical experience. They have the best ideas and the best stories.

Because the clinical piece is so crucial, and all of our teachers have experience as clinicians they can share with us, and be like, "Here's a person that I saw with a stroke. This is what happened..."

I feel like they try to bring that personal perspective into the classroom. Instead of being an armchair professor, they can speak to their experience and say, "As a clinician, this is what I did." Or, "this was a mistake that I made...or this is how I changed something so that it would work better."

Yeah. [For example] "The technique in the book says this, but I have found, in my practice, that this works."

All of our professors have been practitioners in the past, and some still practice. I believe a lot of them are moving into research now...because the whole university is more trying to get a ton of research.

When it's a class that's taught from a textbook, I sometimes think, "this is great information," but when a professor can bring it to you on a personal level and explain it to you and show it to you the way you're gonna see it and the way it's been seen in real life, it resonates with me. I want to know certain aspects and bullet points from the text, but how can you teach me in a way that's gonna resonate with me?

I'd rather work with that guy than someone who asks, "The book says we have to do this, but what do you think?"

We need to hire teachers who are good at teaching 'cause I think a lot of times we hire because they have awesome research, which is fantastic, especially if you're going into a research focused program; you need that, but I also think you can have both, and...maybe that's too high of expectation because I know a lot of hiring has to do with salary and what can be afforded, but I really think it's possible to get a good teacher, and a good researcher.

The level of respect for faculty-practitioners cannot be understated. Students view faculty practitioners as scholarly experts whose accumulated years of experiential knowledge in the field provide highly valuable and insightful benefits to their learning.

The lab experience helped us expand our relationships with each other because everyone was assigned to an agency so you had to work with people that were with the same agency but who may not have been the person you'd normally interact or speak with in the classroom.

The internship fair is where we got to talk to different agencies in the field and the area in the country...they'll give you lists if you ask for them and it makes it really easy to look up agencies to work with people who are different and with different disabilities.

I can see that happening at my clinicals and say, "This is what I'm gonna experience and this is how I'm gonna deal with it" or this is how I would expect to deal with it and if it doesn't work, then go a different route. I think it's a hard topic, but I feel like it's definitely those different fields of diversity to show how it pertains to your experience as a college undergrad and what you're gonna see and those experiences of what you're interested in, when that professor is excited about it. They're hard conversations to have, but if you can do it in a way that's a conversation that's so open and so inviting for differences, then there's a whole amount of learning that can be done in that.

Expanded Experiential Opportunities

Due to the experiential learning opportunities afforded to students in the College of Health curricula, there is an increased interest to expand these opportunities beyond the US context. Many proposed an interconnected global vantage point to continue in strengthening their professional development, personal growth, and educational perspective:

"For me personally, I would love to work overseas [in New Zealand] with professional rugby teams. I know their medicine is a lot different than ours."

"Middle Eastern countries are predominantly amazing at wrestling. That's where I would like to be involved. Those are the kind of people that I want to be around because they know the sport. On a health side, I know what the health side does...I can learn so much from them because they've worked with the sport I want to work with...They're my ideal mentor even though I don't culturally identify. I'm born in the United States...but that's where the sport comes from."

"[Someone] in our program got to attend a sports conference and they learned how to tape differently and rehab [clients] differently from how we do it here in the US...I did this type of taping for the players here and they responded really well to it. It was just a different. Same injury, different way of treat and helping for a specific sport."

I like the clinicals that we get to do during the semester. When it was first introduced to me I was looking at it from the standpoint of, "How am I supposed to get this in my schedule?". . . The more involved I got in the program, the more I valued the clinical experiences because it made sense. It was relevant often times to what we were doing in the classroom. I'm on my fourth clinical experience. Every time it's been offered, I go. It's a nice way to make what we're learning in the classroom relative to what we're doing in the clinic.

Pedagogical Approaches & Learning Strategies

Also, related to the curriculum were discussions on pedagogy. Defined as "a deliberate attempt to influence how and what knowledge and identities are produced within and among particular sets of social relations...to influence the occurrence and qualities of experiences" (Giroux & Smion, 1988, p. 12), pedagogy attempts to incite a critical lens within the educational landscape to interrogate traditional assumptions and actively contribute to generating and co-constructing new knowledge promoting democratic principles to enact social change.

Given the definition of pedagogy, students alluded to different pedagogical approaches and instructional methods that play a role in producing knowledge. These approaches were grounded in interactive and

collaborative teaching approaches shaping both active and engaged learning experiences.⁷ Students advocated for opportunities marked by high impact practices⁸ (Kuh, 2008) and variations in teaching modalities (rather than prescriptive or universal forms of teaching), stating, “When we do a lecture for 15 minutes and then we do a discussion and then we watch a video and then we'll do whatever, a writing assignment in class. Those are my favorite classes, when we're doing different things all the time.” Another student reiterated, saying, “A good mix of all the [teaching] styles would be good.”

When probed further on what makes a professor “good” at teaching, students asserted,

Something engaging.

Not just like sitting there and watching them read off the PowerPoint. I like the discussion bits too because I like to hear what people have to say about what we read or what we're learning.

Smart.

Caring.

When you can actually, you can tell that they care... Sometimes I can tell between a teacher that cares and doesn't. A teacher that does care, to me, is one that tries to set up reviews or check-ins and has office hours.

By reflecting on the conditions, practices, and actions positively shaping their learning experience, students mentioned the following: (a) classroom environments structuring *ground rules* or expectations and arrangements of *physical space* fostering opportunities to interact with different peers; (b) different forms of *media* including newspaper articles; (c) *guest speakers, case studies, role plays, and assignments* facilitating cultural competence for a multicultural world; and (d) regular and consistent *feedback*. Among the conditions and actions were recurring themes related to class size and a relatively small program, dialogue, and “anything but lecture.” These conditions contributed to more positive relationships between students, their environments, and academic engagement.

Class size

One component that appealed to many students about the learning environment were smaller class sizes. The relationship between pedagogy and smaller class sizes, according to students, enables them to build relationships, create community, and prompt increased participation.

Much smaller classes of about 20 people works for me. I feel more intimate with the professor, and especially in my class in my cohort because we're all kind of taking the same courses. I feel like most of the students in [my program] are very understanding and I think that's why they're going into it.

⁷ In the theoretical model of engaged learning, “active learning refers mostly to in-class generated activities that involve students in the learning process. Engaged learning is not simple engagement with classroom learning tasks. It is primarily students’ out-of-class engagement with issues related to the course, reflecting on concepts after class, applying concepts related to real-life situations and talking with others outside of class” (Nagada et al., 2003, p. 172).

⁸ High impact practices generally ask more of faculty because practices are likely to involve students in collaborative instruction, academic activities that occur outside the classroom, and a more thoughtful and individualized assessment process for the work students produce.

There's only eight of us in the class, so it's a pretty close setting. We all collaborate really well. I like the smaller class sizes. You feel like you have more time with the professor as well.

I feel like I'm more likely to participate in class if the numbers are smaller. When it is, I'm more vocal. If there was ten more people in this room, I probably would have said five words.

I like when it's a small class size and I can interact with other students and ask, "What do you think about this principle? How can we apply it?"

I think that the smaller classes in the College of Health is really helpful and I like that even though my teachers lecture a lot, they also spend time to ask for questions in class. There is a little bit of discussion there too.

From a business point of view or any point of view, if there's one class and it has over 100 students, I imagine there's probably now a backlog of people waiting to get into it. That just tells me maybe we should hire someone else to teach that same course at a different time. I don't see any value in sitting with 100 different people trying to learn something... There's no educational value in that at all.

Larger classes haven't really [encouraged me to] interacted with them, closely, because most people sit in different spots every day and it's harder to get to know students or peers.

We are a smaller program, which is a benefit to us because we get help when we need it. We have close relationships with our professors and our academic advisor. Our program director is always on-call for anything we ever need.

While small classrooms and programs tend to be advantageous, students acknowledge that there are unintended consequences of being in a relatively small program.

It's a small program and a small world and I don't want to be associated with causing trouble because I think that the consequences can be long lasting.

I think there's a disconnect with the new faculty because I feel like last year, we had a lot more interaction with the faculty. I felt like I could talk to them. I didn't have to set up a meeting, and talk to the person in the front office before going back to talk to the faculty. All of that is fine, but it feels like there's nothing on the side of the faculty that they're trying to create a relationship with us [students], which is important for me, because they [classes] are small.

I don't know who any of the new faculty are, really, but even the former, the faculty that was here previously, there is definitely a disconnect that happened with this change [in administration]. Whereas, before, I felt like I could go in and talk to whomever, I could voice my concern, and now... I don't really feel comfortable going in to talk to 'you.' I'm gonna be an inconvenience to you.

I even sent an email directly to a professor, and then, I got an email from the person that runs everything at the front desk telling me that this professor is available at this time.

I have had a good experience here so I don't want to say that I haven't, but if I had problems and I've seen things that are problematic, I would have no idea where to go to talk about it. And the program is small enough that I would not feel even anonymous type things would actually be anonymous because you can determine pretty quickly who it is.

Discussions, Dialogues, and Facilitation

In the focus groups, students conveyed the value of interactive exchanges, and described aspects of intergroup dialogue⁹ as a pedagogical vehicle to wrestle with epistemic views challenging ideological assumptions and empowering a stronger formation of their voices; similar to what Henry Giroux (1987) contends as a terrain of struggle and awareness. Before initiating ongoing dialogues, however, one student noted the importance of enhancing his consciousness first, because, he poignantly states, “you have to know yourself before you treat someone else.” Another person added, “Without having those conversations of how to deal with your own identity or what are the barriers that you're gonna see and if you're identifying this way, how can I help others? What can we include in classes that help with this kind of thing? There's just not a lot of conversation.”

Other students were compelled to discuss the importance of dialogue as a driving force for cognitive development and enhanced competence when engaged in intellectual exchanges, saying:

When it's something like diversity, it needs to be an open conversation for everybody. Everyone should have a chance to say what they want to say and talk about experiences that they had. Some people might have experiences that other people haven't had. For me, what I like more of it, is that Q&A. More of a Q&A on both sides.

What I liked about this class the most that I wished were also in my other classes' curriculum is that we have conversations where we challenge ourselves safely without getting judged or shut down by white people's opinions.

In our classes...there's a lot of different perspectives coming at things. I've enjoyed it because it makes me think out of my comfort zone and box...It's kind of nice to be able to see and relate to how they do things and how I can make myself better.

I valued the traits of classes where dialogues are happening within classrooms about real issues happening in the community and ways that these social issues are affecting the health of our communities. I also value students' input whenever we have these conversations because that's what makes everyone's learning experiences better.

What I find beneficial is a class that goes, “this is your patient.” They are dealing with this as a situation... For example, let's say it is racism. How do you, as a healthcare provider, care for this patient? How do you help them overcome this? How do you educate your staff to overcome this? Focus on guiding their thought process because you're kind of thrown out there in the field to deal with these diversity-related things. These are real issues. I wasn't trained and I'm not culturally competent to deal with that. How am I thrown out there and expected to benefit people and care for people the right way? The way they need to be cared for, when I don't have a background knowledge and I don't have a cultural competency to do that.

⁹ “Intergroup dialogue is a form of democratic practice, engagement, problem solving, and education involving face-to-face focused facilitated, and confidential discussing occurring over time between two or more groups of people defined by their different social identities” (Schoem et al., 2001, p. 6).

Students recognize that tensions are inevitable in the classroom; tensions can be uncomfortable and yet transformative. In a powerful reminder by intergroup scholars, “diverse educational settings marked by novelty, disequilibrium, and dissonance in information and experiences combined with opportunities for substantive reflection and meaningful dialogue with others can have significant positive impact on participants” (Zuniga et al. 2007, p. 59-60). The challenges provoking dissonance as well as opportunities for reflection might mean navigating pedagogical terrains that include (but are not limited to) facilitating difficult conversations and encouraging equitable participation; being cognizant of historical contexts that have shaped today’s contemporary climates; feeling comfortable in discussing diversity; equipping students (particularly graduate students) with pedagogical tools to teach through difficult or controversial moments; and recognizing the consequences of our pedagogical limits for a more positive classroom experience.

I feel like there has to be an accountable and sustainable process in order for me to feel safe within that space. I have a class where we talk about community organization and a lot of the time we go over colorblindness or different types of identity which are really important as healthcare professionals. Some student can say something very problematic like, "Oh you know Latin American countries are always like that," in a very negative connotation and I look at the professor too and be like, "Hey, you need to not say that and un-package what you just said. It's problematic and there are students in here that identify with that identity aspect." I don't see the professor stepping in and calling out that student and telling them to really unpack what they just said because I feel like that continues to perpetuate within our courses and it doesn't get checked. I'm scared that those same people are going to go into my community and really do some damage that could've been stopped if the professor could've addressed it at that point.

I also teach as a student, and I don't know that I feel very equipped in perhaps either role to know how to deal with problems that arise as a consequence of [misunderstanding] diversity.

There are faculty who don't want to offend, so they'll talk too fast and don't slow the conversation down and [ask] "What are your thoughts? How can we help with this? Have you seen this?" It's kind of like—this is how it is, this is what we see, and then that's the last of it. We kind of move past it.

Last semester I had one student who was a racial minority...what is the right way to talk about diversity issues? What is the right way to say something when someone starts saying something that feels problematic? One of the things with education is...there's supposed to be freedom of thought. Where is there freedom of thought and where does the faculty member come in and say "this is not okay." How do you respond? I would love some training that goes beyond some conversation that says "oh yeah, that's important pay attention" because I don't know what it would look like what it would manage, and I know that I have missed opportunities.

When is that point where we have to say, we've gone too far with whatever?

I'm also now remembering the class I was in...one of the girls walked out, she was not pleased at all with what was being handled and the professor was great but it was the professor who was like, "Well we can process and talk about this, or we can teach the content." And it wasn't framed in that negative of a split but she was like, I'm not really sure what you guys need from me right now. And as a faculty, when I'm in my teaching role, I am very much like, I'm supposed to deliver content, here's this problematic thing. I

don't even know how to talk about it with my 20 plus students and I'm supposed to go to teach curriculum so, I'm going to dance away from this issue. I would love to know, as a student-faculty member what am I supposed to be doing in those moments.

I'd really like to echo what y'all are saying. I mean some kind of training on how to manage those types of conversations, handle that situation. How do you steer the group conversation in a more productive way without alienating anybody on either end of the interaction? I think it's talked about as "here's some problems" but there hasn't never really any training or discussion on this is what you do. This is how you should approach this as an instructor.

You want to be able to bring all of these types of perspectives in so you can examine them, right? You know the teacher has an opportunity, maybe not to change people's minds, because that's not the point, but just to be able to examine: Why do you think this way? What cultural perspectives are you bringing to the table that is making you react this way to these types of concepts?

Sometimes [faculty] like to sugar coat [history] and talk about segregation... We all know what happened, just be up front about it... One good thing was an example two weeks ago. We brought up how fans can impact the commercial franchise of sport and then the mascots of Native Americans was brought up. I thought that was pretty cool... It was nice to see that our courses were trying to look at everything within sports and how diversity is affecting it and how these factors come into play in the industry.

As pointed out by students, structured opportunities for dialogue are essential, even when it is marked by disequilibrium and tension. The intersecting identities—of race, class, gender, and orientation (to name but a few)—combined with changing demographics in the US are prompting a need for increased awareness and comfort with discomfort and dissonance in the classroom. The students' remarks are tempered by their realities and they simultaneously acknowledge historical contexts, racialization, and colonization, as well as policies and practices that may be inadvertently connected to health disparities. Their diverse positionalities, narratives, and experiences situate the conversations of health within a wider historical, social, cultural, economic, and political context.

Anything but Lecture

Finally, most students (though not all) agreed that they were not keen on classroom experiences involving lecture as the primary method of pedagogy in their learning experience:

A hard one is straight lecture. Anything but lecture. That's hard in any class.

I don't know if you ever really learn much from a lecture when it's coming in and out.

I don't know if I'd say that I like lectures, I've come to the conclusion that all my teachers are going to lecture and so I'm going to sit there and take in as much as I can and then if I have to spend time outside of class learning something, I will.

Quality of Interactions: Student-Peers, Faculty & the Impact of Physical Space

In the College of Health, we explored the quality of interactions between students and their peers as well as staff and faculty. Our findings suggest that the quality of student-interactions are positively influenced by conditions that nurture group cohesion and move us toward collectivist orientations (such as learning communities, student groups, and programming opportunities, among others), which impact stronger

student engagement, persistence, and student success (Tinto, 1988, 1993; Woodford, 2016). These assertions are consistent with scholars who posit that education is a relational process rather than an individual endeavor (Battiste, 2002; Burkhart, 2004; Deloria, 1970; Dewey, 1958; Marker, 2004; Meyer, 2001), a notion that essentially undermines assumptions of individualism and meritocracy. Our findings also coincide with previously established research suggesting, “The environmental factors that maximize attainment include a cohesive peer environment (that is, students develop close on-campus friendships), frequent participation in college-sponsored activities, and a perception that the institution has a high level of personal involvement with and concern for the individual student” (Pascarella & Terenzini, 1991, p. 37 quoting Hurtado, 1999). We begin by examining peer-to-peer interactions in the environment shaped by the College of Health.

Student-Student Interactions

Before delving into interactions with their peers, students spent time describing a few identity markers they sought after in their attempt to establish relationships with others in their program. Such markers were grounded in social and political stances, affinity groups, or people who looked like them.

When I switched over to [my program], it took me a while to find group of friends just because I select my friends in class basing on their politics and their experiences. In my first core class, I sought people who looked like me.

It's who you identify with.

It's based off of qualities and how comfortable you feel. In our class, we have groups, we have sub-groups. We have the Mormon girls, who are all married and have no kids and we have the ones who have children. Then you have the Mormon guys who have kids and you have the single Mormon guys. You have the single guys and then you have the mature women. We have a group of them, we have the mature women group, then you have the young, middle group. We have a lot of different groups but after a while the groups start to mesh. Then you have the ski group, you have the hiking group, you have a group to do this.

Who you can get along with and study.

Moreover, the quality of student interactions was positively influenced by learning communities¹⁰ in the College of Health, which were often structured through a cohort experience. They reflect on the benefits of their cohort experience:

I would say because we're a cohort, and we have every class together, pretty much every day, we're so close that the interactions are pretty meaningful.

We pretty much have all our classes together. That's why we're so close.

I am really happy. I think we have a closeness in our class, and I think that our department is small enough that I feel like I know all the professors, and I know what to expect with each one as a person. I think that's very valuable.

¹⁰ In this particular context, learning communities are defined as an organized structure within an educational institution where groups of students enroll in two or more classes to engage in intellectual exchange.

In our group we have two new moms in our class and people are like, "Oh you weren't there. I recorded the class for you. It's already uploaded. Here are the notes. I've made a bunch of quizzes, let me share it with you." It's a really awesome supportive culture.

Overwhelmingly, student-peers were sources of support for each other. Indeed, the cohort structure enriched the principles of collectivism and community (as contributing factors to a meaningful experience). Similarly, students suggested the possibility of having student groups and organizations to expand the concept of community; an idea supported by research by Chang et al. (2011) who reminds us that student organizations play an important role for retention (see also Hurtado, 1994; Museus, 2008; Smith et al., 1997). Students recognized that:

Having student groups within the major has helped... Maybe like student organizations centered around the major too.

I really would like, at least for kinds and maybe more for sports medicine, an LGBT club or resources center. I have the resource center and it is beneficial and I do reach out when I need to, but as it pertains to my career and my field, this is my thoughts. These are my actions that I'm gonna take. How can I get help? I don't feel like I have that representation. I don't have that help in my classroom, in my department, as much.

Students also suggested wanting stronger community ties outside of the college, particularly for graduate students in search of expanding their academic networks to enroll in courses and potentially find committee members. Thus, they propose increased interdepartmental and college collaboration:

There needs to be more collaboration and mix between the departments because it's easy to get caught up in your own department and not realize the resources or opportunities that another department could give.

An intermingling of everybody, [between undergrads and grads] is definitely a great idea to talk about those what we've dealt with and what we've seen and the issues we're dealt with. If you guys are having any of these problems, these are the great people to go to and these are the ways to build yourself up to be around that. There's not a lot of that.

If you're in a Ph.D. program and you're going to become a professor at some point, you're going to want collaborators across areas. The more opportunities to meet potential collaborators would be beneficial, both personally and academically.

Sometimes you have to go outside the College of Health for classes and there's a benefit when you're looking outside for committee members. There are some courses that aren't just offered in the college so you're forced to go to other places.

Higher level stats classes are usually outsourced to fields like Psychology or Educational Psychology...I've taken a lot in the psychology department which I've liked I've enjoyed. You meet other students and see a different perspective...Some things just aren't available in our own college, but there are some benefits to interacting with other professors in other departments.

It's the nature of the programs where you get siloed and placed on a certain track so you're really only with the people...in that same course of study and there's not a lot of opportunities to meet and interact with other people so it is just by chance when you meet someone outside the program.

Students highlighted the possibilities of formal and informal programming, as well as social events or activities to increase community and strengthen relationship building, saying, “It would help if the different departments in the college was more affiliated, maybe socials or events...bring [us] together so we’re more integrated. I feel like even within the department, we’re pretty separated by buildings and hallways. I feel like the professors are very collaborative, but I don’t know about the students themselves.”

Affirming this idea, other students added:

“I second that because of outside of my program, I don’t really know a whole lot of other faculty or students...It would be great to have a more sense of community within the College.”

Even something as small as a Christmas potluck like we had last year with all of the faculty, staff and students. This year, it was just faculty, and probably, no one else knew that except us because we’re a part of SAC but, we were looking forward to it, and asked, “Hey, when should we announce this?” And then, we were told “you’re not invited...oh okay.” And that would have been fine if they created some other way to create relationships, but they haven’t.

I do agree with what Casey said about building a relationship with faculty. My undergrad is in anthropology, and every Thursday from 12 to 2, we do coffee hour with professors, students can come in, and it was just casual, not related to school talk, and you could ask some questions about a new study, or any study, it just had more a bonding element, and I feel like that fits [in our program] very well, and...I mean, they do things like free food in the office, but to me, it’s not quite the same. I feel like there are elements of a relationship there with some professors, but it’s not

I think, too, being tied to food, a lot of our activities together as a cohort involve potlucks and it just opens discussion to talk about different cultures, and I’m sure that’s present in other programs as well.

“For me, a panel and an open dialogue would be so beneficial and would be a good moving point forward to take down these barriers because these are what we’re talking about. Let’s implement some of these ideas or what ideas could we talk about or what could we bring in.

“I don’t feel like they make us aware of other resources on campus because we’re in the corner of campus”

While cohorts and student groups were identified as positively shaping the ideals of community, many students believed that some of their peers embody privilege and often do not recognize when these privileges adversely affect interactive exchanges in the classroom. These interactions are thus conceived as “unproductive.” When probed further about what makes it “unproductive,” one student responded, “Trying to basically get them to open up their minds a little bit more. Not be so...I don’t know the word...’one way of doing it right.” Another asserted, “They’ve been very sheltered, or don’t have a lot of experience with diversity...To that degree, they don’t really understand things like privilege.” Our exchange in the focus group resulted in other students voicing similar concerns:

We do get a lot of classmates who have never seen a person of color or who have never interacted with a gay person or whatever, or even other religions...

I'd be talking about something controversial and some whose had experience will talk and then people disagree...will disregard it. The biggest thing in valuing diversity is looking at something from someone else's perspective and trying to understand it; some students just don't get to do that. The department does what they can to encourage students to try and do that, but some students just don't and that's frustrating.

Our class is split into two. One half of the room seems to really value and understand different perspectives. The other side of the room seems to be really closed minded and not really willing to make an effort to get it...When we do have those discussions, it comes up a lot, but they're not rude in any way, they just don't get it.

When we're specifically talking about controversial things like white privilege...those things definitely get dismissed and eyes roll a lot and it's frustrating.

I feel like any issues that I've personally had, have been because of the lack of understanding, or a lack of perspective and it was not necessarily malicious.

Most interactions I've had with other students have been good. There's definitely some people in the cohort I know that I probably can't have very productive discussions about diversity with, but I know those people. I just avoid trying to get into any sort of those types of conversations with them...I just know that they probably don't have the same perspective or necessarily the same openness that I do. I try to avoid conversations with those people. I just know that "you're not the person to talk to about diverse things."

In these reflections, students shared some of the consequences of diverging epistemologies resulting in microaggressions (like the eye roll), dismissiveness, avoidance, and stigmatizing or stereotyping. One student recalled a situation when a guest speaker was invited to share her experience in an internment camp and she remembered another student dismissing the guest speaker, saying, "The impression I got was, "That didn't even happen. She just made that up because my life is good, and I don't know anything about that. That can't be true." It was really terrible...That's what it felt like, and I was thinking, "No!" [For example], black trans women are getting murdered each day. Terrible things like this are happening, and you can't ignore it, or discount it." This recollection encouraged others to discuss parallel experiences:

A lot of those conversations came up during our diversity course, and most students wouldn't talk about those perspectives during the class, and wouldn't give us [push back] ... But, after the class was over, they'd say, "I can't believe we spent so much time on white privilege today. What's the point? To make me feel really bad?" I heard a lot of sentiments like that, but it would never come up in the course.

I just feel like not a lot of people jump on those opportunities to engage in those diversity discussions...I just don't know that a lot of people really take it into consideration, and take the opportunity to learn more and hear other perspectives.

I think people who aren't interested in diversity feel like it's crammed down their throat, you know? Not that anybody advocates for a specific perspective, but...if you're even engaging a conversation about it, people assume it must mean a political agenda or a liberal view, or something. They kind of disengage.

A lot of my classmates have different opinions about certain things; more conservative opinions, rather than liberal, I guess. They just don't want to say them, because they're afraid that liberals will jump down their throat, or something. I don't know. They just are uncomfortable in expressing their views, unless it's with their more conservative classmates.

Students expressed frustration with peers who essentially dismiss individual lived experiences because of the privileges they have or because certain struggles are removed or absent from their lived reality. This conversation forced students to think about other realities that continue to be marginalized, including those experiences involving trauma and even death.

Equally frustrating for some students was the process of selecting student-leadership members to represent student voices:

Our student-committee has been very dysfunctional and not involved. The problem is you get into the program and within the first couple weeks you elect people and you have no idea who these people are or what their responsibilities will entail.

For the next two and a half years, we've had these people and they've not really put forth the effort to get involved. We probably should've impeached them.

The hard thing is we have brought up concerns and questions and I feel like a lot of times it gets brushed aside... Whether they just haven't been vetted enough or haven't put themselves in the position to be an interpreter for us to understand what's going on and they just haven't taken the initiative...it's just kind of hidden from us about what's going on.

If we are to vote for a class president or a committee to meet with the heads to voice the concerns of that, we shouldn't vote within the first three weeks of the program, not knowing anyone or what the hell we're getting into. Rather, going into our senior year and then the seniors should have more of an impact, along with the staff, on educating and helping the younger classes coming up.

Student-Faculty Interactions

Researchers have documented a strong correlation between the frequency and quality of interactions among faculty and students, and their relationship to student learning, persistence, and social and academic integration (Astin, 1993; Ewell & Jones, 1996; Fries-Britt, 2000; Kuh, 2002; Pascarella & Terenzini, 1991; Tinto, 1993, 2000; Umbach, 2007). In the College of Health, students described positive qualities of student-faculty interactions as openness, approachability, vulnerability, and authenticity. Faculty members with whom students forged relationships with were characterized as being available, personable, and willing to help. Students appreciated being mentored, being able to drop in unannounced, and “vent” to their faculty:

[Dr. Medicine is] one of the best professors in terms of being available to students and approachable. If I'm having trouble with anything—even if it's not academic—I feel like I can get support from her.

They're open and not intimidating. They share a lot of their stories and expect us to share a lot.

If I have questions I can literally walk into any [faculty office] and just say, "Hey I don't get this. Can you walk me through it?" All of them just make themselves so available. They take the time to make sure that they understand what level you're at so they can know how to help you understand the process.

There are some faculty that are not just about the subject matter, they're just personable. You know that you can go to them and there's no, fear of repercussion for what you say.

I think they do really well as far as faculty being very personable and open and willing to help you. They want you to succeed and I think that's really important for me.

When I have a life problem or I'm stressed out I go to their office and just vent.

What makes them easy to approach is good communication. They're listening, and they can actually give you options, or can actually help...and offer solutions.

In their accounts, it became evident that relationship building and direct interactive contacts are crucial to developing trust and increasing a level of comfort to approach faculty members when issues arise:

I think it's just like the smaller interactions on a daily basis in class. If you go to them for something smaller, and the way they react to that is good, then, if something bigger comes up later, I'd feel more comfortable going to them.

These accounts are also indicative of the importance of promoting academic interactions to reduce the perception of impersonal learning environments that are often inflicted at fairly large institutions. Their voices also reveal that student success is facilitated by faculty investments in performative practices that are relational, such as being accessible, writing letters of recommendation, sending scholarship information, and demonstrating concern.

I think faculty are more invested in making us successful because this is their profession. They're responsible for us being good [health care professionals]. They're going to be our colleagues once we're out.

Our field work professor is always willing to talk with you for a minute because we're always concerned about field work all the time; she is always willing to meet, and talk about it, and hear you out.

I think that the faculty are very accessible as people, to us, in most cases. I really do value that closeness, and I do think that they are invested in the success of all of the students in the program. I think that the University of Utah has been a really good choice for me, as a parent; as a student-parent.

The faculty are good about sending scholarship opportunities to students...and in advance, and say, "This application is coming up. You should apply."

I've applied for scholarships. All of the people are really good about helping. If I have to ask for a letter of recommendation, nobody has ever given me any problems, or not been on time, or anything like that, ever. They're really good and they'll say, "Sure! I'd love to support you. I'd love to be able to do that for you!" That part's been really good.

Moreover, when faculty engage in course-related activities, it allows students to see them in a different light. Students claim that it nurtures a perception that faculty are much more dynamic, complex, and personable. They provide concrete examples of such activities related to the curricula that include biking, rafting, biking with them:

When I inquired about him outside of school and found out that there were students that were going biking with him or water rafting, it did make him a little bit more personable because he doesn't come off like that as an individual.

Put a bike in front of him and all of a sudden he's smiling. I thought, my God you have teeth. I didn't know. Even if it's not coming from a personal interaction, they all lead lives outside of school. To just learn a little bit about each of them makes them more real as an individual rather than a person that's standing on the other side of me in a grade. You know what I mean?

Given the complex and wide range of identities, appearances, and behaviors combined with the informal contexts outside of the classroom these interactions impact student-faculty more broadly than we presume. Conversely, some students expressed being subjected to a number of experiences, causing them to feel disconnected and a degree of isolation as if they were “just another number.”

Faculty wise, sometimes it feels very disconnected. Like I'm just another number for them.

We are such a small program. Just knowing who we are feels important. Knowing names goes a long way. The Chair for my project did not know me. You know when you walk past someone and they're ignoring you, or they just don't know you. It was like, I just don't know you, and she was the chair on my project. She should have recognized my face. It didn't have to be, “I know your name, 'cause she's busy and has lots of students,” but she should have at least recognized me, especially because I'm involved. I'm really involved, it's not like I'm quiet and sit in the back.

I think there's just kind of a little bit of a disconnect. I think that's the best way I can describe it between the professors and us...I just keep thinking disconnect.

Last year, I could go in and talk to whoever. I do not feel like I inconvenienced them for going in to talk to them, whereas in new this year, I feel like I can't go talk to them. They are far too busy to talk to students.

Yeah, and it's weird, because they're on my thesis committee, you know what I mean? I know they have a lot of things, but with one of my thesis committee members, my chair, I feel like I'm a priority, and she's so great at that, even when she's really busy. But with some of the other members of my committee...I definitely do not feel like I'm a priority, and I know I shouldn't be; I'm not saying I need to be number one, but at least maybe be on the radar.

Sometimes I feel uncomfortable...When I walked in there and if the door's open, I will say hi, and just the normal greetings. But this semester, I'll just talk to the front desk person and leave because I don't know whether the professors will be busy or not.

I think having that reciprocated so when we're walking through the faculty hall, if they're like, hi, you know. It's not that they have to stop and talk to us; we're busy, too, just, you know, "Hi, nice to see you" kind of a thing...Right now, I feel like the faculty's body language is saying, "we don't have time to talk to you or say hi."

You can feel when they don't want to stop when you say "hi." They just kind of walk. It feels different.

The perception of dissonance and disconnect is exacerbated for students who are physically disconnected from "main campus." Indeed, physical space and location has been challenging in undermining elements of community. Depending on the department students were enrolled in, space was either advantageous or a real concern. Student narratives implicated issues regarding access to resources, information, and events, and they simultaneously assigned a hierarchical value associated with the physical location of the departments to which they belonged.

I'm confused about being in this building. I feel like [my department] just got put in the old, smelly, ugly building because it's not a prestigious department...I definitely feel like the university doesn't take [my] department seriously. I know that's probably not the case. This is just probably the space that's available and they've been here for a long time, but it feels like they just plopped [us] in this ugly, smelly, old building.

A lot of times, we just don't have a chance to even learn about what's going on. Or, you don't learn until after it's done, or whatever. Because you're here...you have to either take the shuttle, or drive to get to anything on campus. And, we don't go because our classes are so packed...I used to get the emails for it, but I never had time. It was during lunch. It was like a 12 to 1 thing, but by the time I would get there, I have to get back and I don't have two hours for lunch. I've only got one hour and I would never be able to go.

Due in part to the different departmental locations under the purview of the College of Health which fueled feelings of alienation, students briefly discussed the implications of being physically disconnected and also offered some suggestions to enhance access and community.

There's not really an effort to make that [community] happen more often. We get together as a whole department once a year for orientation and I never see anyone else and mainly see most of the [program] folk, but even then we're even siloed farther.

As far as my classes right now, they don't really mention a lot of stuff going on campus.

Having someone come in just for a few minutes to make that connections, especially with a service like the Counseling Center is better than just an email or a flyer because it's more real...a human connection.

If something comes up in class, like statistics, they [faculty or TA] could say, Hey, go to the math tutoring center, it's in this building, and it's free for you to use.'

Throughout the semester when things actually happen and people need resources more than they did at the beginning, maybe reminding us what is out there or doing a survey of what resources we'd need or have used on campus to see what the class actually knows would be a good idea.

Faculty Advising

In addition to their role as faculty, students indicated that some faculty members also serve as advisors. As informed by Daryl Smith (2009), advising is an essential responsibility, and we are reminded, “Advising—indeed aggressive advising...from multiple sources is essential for first-generation students” (p. 222). Certainly, advising is vital for many students, although there are mixed feelings about faculty who act as both professors and advisors:

[Faculty advisors] already know me from class...They don't see me as another person in the program because they know how you've been doing. You feel a little bit judged in that way because they know you more personally and connect me more. I actually get to know them and they become a good support for me in the future.

Our advisor is usually one of the professors and you get randomly assigned in the beginning of the program, and I think some people click better with the person they're assigned with than others. It's not a perfect system, but I felt comfortable to come to her about issues that I had.

I think having an assigned advisor was clear in the first year. Then, in the second year, it was like, “Who do I talk to, when I have this issue?” But just having someone assigned would be nice.

I feel like faculty-advisors are not the best situation because when they and they know us on a different level...we're challenged a little more. I feel like there should be that separation of your advisor from the program director and the faculty.

I wish...that we had a specific staff for teaching and then another for our academic experience and then clinical lecturers to help in all these different areas.

You have a good relationship with the faculty-advisor, but if you don't do well in the class, then it can become a bad relationship. I've seen that in our class.

It'd be nice to have an advisor that wasn't also assigning us grades.

Yeah, I was gonna say, if it wasn't a professor...it would have to be somebody who was kind of neutral party...

Compositional Diversity and Representation

As a dimension of the DLE Framework, the compositional diversity is conceptualized as the “numerical and proportional representation” (Milem et al., 2005, p. 16). Building on the previous section of this report, studies indicate that increased engagements with compositionally diverse populations maintain positive effects and outcomes in the quality of interactions across difference (Chang, Denson, Saenz, & Misa, 2005; Hurtado, Milem, Allen & Clayton-Pederson, 1999; Laird, 2005; Smith, 2009). According to Antonio (2003), “Diversity in the student body helps to broaden the range of what is taught and how, and to develop opportunities for collaboration and the sharing of new ideas and pedagogies” (p. 16-17). Hurtado et al. (1999) stresses that faculty and students are interconnected, and a significant factor to increasing diversity in the student population is to diversify the faculty population. One way to enhance such impact is to examine the compositional representation, which is often argued by campus climate scholars as an “important first step.”

In our focus groups, students were asked about their observations concerning the compositional diversity in the College of Health, and they offered a series of reflections:

If the student, faculty, and staff population reflect the diversity that I am hoping for in a diversity setting, it does not.

With students, I don't really see lots of diversity, but I know it's valued. I just don't necessarily see it every day in class.

We need more diversity representation.

Yeah...I think that's a really big thing, representation.

In terms of ethnicity? Very, very little. I think there are maybe three that we have in a class of 32. I think that there's maybe three that would probably identify as, maybe, a different ethnicity.

The demographics of staff, faculty and students in the College of Health have been composed of mostly white, cisgender, straight professors, students, and staff.

I'd like to see different backgrounds, different ethnicities...I don't mean to say it like a bad thing, but they're all Caucasian and around the same age and they all have the same degree. It's important to have that degree, but it's the same background that I've noticed in a lot of the professors here but maybe that's the background you need to be a professor here.

Given the consistent responses and perceived absence of compositional diversity by students, we are reminded by scholars that greater understandings of difference are nurtured through engaging with others whose stories are different; thus affirming that, “community and democratic citizenship are strengthened when [students] understand and experience social connections with those outside of their parochial autobiographies, and when they experience the way their lives are necessarily shaped by others” (Guarasci and Cornwell, 1997, p. xiii). Some students elaborated on their experiences and the growth stemming from their interactions with diverse peers and faculty:

Diversity brings a lot of different backgrounds and experiences that help the college grow because people from different backgrounds and ethnicities have knowledge about different areas, so it just helps everybody all around; there are so many ideas instead of a one-track mind. I think diversity helps the college grow.

I think that, in Utah, I have such limited experience with people of different ethnicities and other races. It's hard...In our diversity class...our teacher does a really good job of presenting all kinds of different perspectives, but it's just different than a lived experience...

Diversity from a person who is diverse is kind of like learning a different language from a native speaker, versus somebody who learned the language. Do you know what I mean? It would be nice to be able to hear a lived experience in a situation, rather than, "This is what happened in practice." It's useful, but actually being...closer to what it's like for somebody to live in Utah as a minority...would be nice, I guess.

I'm just a stereotype of Utah being a white, blue-eyed heterosexual male...Up until this program, I didn't really have any friends or affiliations pertaining to the LGBT community. Growing up in Utah, most of my friends were Mormon whereas at the University of Utah, you have people from all over the world coming here. Being able to learn more about different cultures and different religions and different people from all over the place has been a good experience.

On Faculty Representation

Students articulated a desire for more visible markers of diversity in the faculty population. Their desire, however, did not mean that students are not satisfied with current faculty members. Instead, as previously stated, students are interested in having different types of representation. When one student challenged the idea of diversifying the faculty population—asking, “What's the purpose of that, if that's even a push?”—the query essentially initiated dialogue with peers:

People prefer to have a clinician that is like them. Having clinicians of all different kinds of people is important to be able to reach people where they are; the patients, the clients. The same goes for education. Having educators that are of all different backgrounds enables them to reach these clinicians of all these different backgrounds. I can see where they're coming from. The field needs to get more diverse. It's doing a pretty good job as far as sex parity but in every way other than I can think of, it's not. I see the point of trying to hire diverse faculty in order to be attractive to diverse students who will then go out and diversify the field.

One of my professors who taught community health and she has been my favorite professor in the department...I felt connected to despite how big the class was. Her experiences as an Asian American with the model minority myth, with the Chinese exclusion act, yellow peril, and perpetual foreigner ideologies, have been somewhat related to my experiences as well. Just having that similar identity can make my experiences in class more valuable and more cultivated.

I felt like having that diversity in the faculty was good for me because I got to see a different way of approaching with just teaching in general, and it was actually the way that I learned, and obviously, every teacher is a little bit different.

The most diverse out of faculty, students, and faculty is faculty because the staff really seems the same.

In terms of the faculty there could be more diversity, but I mean there's so many factors that go into hiring faculty and a lot of politics behind it but I agree...those that are hiring could make a better concerted effort

Students not only gave voice to their insights and experiences associated with diverse representations in the faculty population, but a few students also admitted to searching for faculty who looked like them, and with whom they might be able to identify:

It gets really difficult because you can't connect with a lot of the professors. In some sense, you can talk about research and things you find interesting, but it's just really difficult. I really want to see more people with intersecting identities from things listed here because I feel like all of those are super important, and they all have multiple identities and they should be incorporated into our curriculum.

I don't know that anybody is necessarily shut out of those types of opportunities. I hope they don't feel that way, but I do think it's a disadvantage that we don't have a more diverse faculty. I mean, I do think that if we had more diversity, it'd be easier for diverse students to be able to see themselves in the program.

The racial diversity is lacking. That's my opinion, but then I also don't want to make it seem like the department has not been supportive of me.

I do not believe that we have a very diverse faculty or student body...I think it would be awesome to see more diversity in the faculty. I think that there would be easier to shift the faculty orientation than within the student body per se given that's based within the community.

I feel like there needs to be some changes and more staff that are hired, like faculty of color, especially. I feel like because a majority of the professors are white, it's touting a very Eurocentric and a Westernized standard. The course wasn't meant for me to learn if that makes sense. It's like it was meant for a white person...Faculty reference people of color as minorities, "There is nothing minor about me."

I feel like the faculty and staff population are not reflective of the diversity I hoped for, but I feel like they're all very open...I just know that our professors are okay with diverse populations. They're not necessarily a part of them, but I feel like they have a lot of knowledge and awareness about them; they do so more than I do, and I feel like that helps with the lack of visually seeing that they're a member of a different race, or whatever. They have the knowledge, and they're okay with diversity.

I think it would be nice to see people from my background, but there's not a whole lot in our department.

In one focus group, students concluded with a critical question on the diversity of the field of Health, which unfolded into a hopeful and optimistic outlook on the future: *"I know that they're trying to push for getting a more diverse faculty. One of my questions is, how are they going to do that when the profession is not that diverse? How are they planning to do that?"* In response to this question, students (particularly graduate students) discussed their optimism in personally witnessing a critical mass of diversity in what they presumed would be "a sea of white" at a national conference on Health: *I did go to [a] conference last week... I was surprised at how much diversity there was. I thought it was just going to be a sea of white. It was refreshing to see, a more diverse population.* This students' experience narrates a promising outlook and undermines the assumption that Health fields are not diverse or that communities of color are not interested in this discipline.

Intersectionality

The complexities of diversity require a recognition that there is no single characteristic, identity, or subject position that shapes our human experience; rather, diversity is influenced by multifaceted elements, dynamics, and intersectionalities. Conceptualized by Kimberly Crenshaw (1991), intersectionality consists of different and complex ways in which conditions and identities interact to influence an individual's lens and experience. In our conversation with students, they discussed distinct intersectionalities contributing to their experience and intellectual development in the College of Health. Some of these intersections are representative axes of gender and race; gender, race, and religion; and sexual orientation and race. Ultimately, these complexities invite us to think beyond binaries, toward overlapping, contradictory and even wider repertoires of one's self.

Gender and racial or ethnic representation are among the more salient markers of identity that students tend to recognize in the College (as opposed to other identities including age, sexuality, and veteran status that might be rendered more invisible). Students acknowledged some concerns with limitations related to intersections of race and gender while also informing how such representation could enrich their experiences and how they would benefit from additional intersecting perspectives.

...in our profession and even in our academics right now, we're predominantly female...even if you look at our national board, the demographics is predominantly female...We only have a few classmates that are of a different race...The rest of us are predominantly white and more female.

I don't know if everyone's seeing that [our program] is predominantly white and women so they're not applying here because they see that. I think the question I have for our program is, how do we draw that [diverse representation] in? How do we bring in more to broaden our spectrum? If we're only staying this same way, then we're not going anywhere else. We're staying the same...not drawing in difference.

What I am looking for is for more students of color, transgender students, queer students of color, and women of color. Having this population not only will enrich my learning experiences, but also help me grow as a future health educator. Imagine if my cohort was composed of the population I just mentioned, the discussions in class would be phenomenal. We would be talking about topics such as prison industrial complex, anti-black racism, heterosexism, transphobia, topics that we never discuss in the health promotion and education department that should be discussed because we engage ourselves with people who have health problems mostly caused by systemic racism and other type of oppression.

As students raised concerns on the intersections of gender and race, they also interrogated issues of equity. They perceive an over-representation of women and underrepresentation of men in the faculty and student population, although one female student argued that it was “ok” to see more women in the classroom since the opposite is true in the actual field when we examine who holds power and who are positioned in leadership roles. She explains, “For me, I really enjoy that there’s more women...the other medical professions are male-dominated...I feel like this is the one medical place where you’re reminded that *You* are a woman...I really appreciate that our staff and faculty...have a good representation of women because so much of the medical field is dominated by white males.” The dialogue on representation led to a lively discussion on their perceptions of opportunity gaps:

Even though there's fewer males, they still get more opportunities in higher levels.

Historically, men have been hired and so I think that women just don't get the same opportunities in [higher] level positions. Not because they don't want to, but because it's male dominated.

Faculty is mostly women...even with the graduate students, it's mostly girls, but I think the gender diversity [among] faculty is really good.

It is interesting to see that the ones who are in higher positions are the white staff and faculty.

The way that I look at the faculty representation, I feel like it's very reflective of the student population...and as a cohort, we're not...racially diverse.

Students also reflected on their perceptions of representations of sexual orientation, socioeconomic background, religion, and race & ethnicity:

When it comes to students...we don't have any people of color in my class. There isn't anyone that I know of who identifies as LGBT. Most of us are women...it doesn't feel very diverse because everyone is really similar.

There's a lot of faculty members, that identify as gay. That's the most representative [identity] I've ever seen in faculty members.

With my class, there's no color. There's an LGBT student and we're close. She tells me she feels welcomed. There's a lot of students from the LDS church, I noticed.

I have seen a lot of older non-traditional students. As far as race and ethnicity, I don't think I've seen a whole of diversity; maybe a little bit, but it's not as prevalent as you might think.

In our department...we had a lot of programs and students from high income families.

In the focus groups, students implicated suggestions—namely, outreach—to diversify the student body in the College, saying:

For people my age, I was the only Hispanic person in high school that even considered a medical career...I feel like it's more outreaching to the younger generations to let them know, this is a field that is high quality. It's not just reserved for people who, just fit this particular stereotype or fit this particular identity.

Other students supported the idea of outreach, and simultaneously narrated their personal experiences to convey how they were persuaded to enter into the field of Health:

One idea is to let newer undergraduates exploring the program have seniors come to the freshman and say, "these are classes you need to take and this is why...You don't think you are going to see certain things [right now], but I guarantee you will. This is why we need to be prepared for it because you'll need it when you get out in the field...I think coming from peers provides a different learning or teaching opportunity because we hear from our professors all the time and I often wonder, "Is that what they think or is that because what the textbook tells them that they have to tell us?" It doesn't make it as personable, whereas, seniors going to the first semester class to convey why they have to or should take [diversity courses] and we can explain what we've seen and what they're going to see. It's a forewarning that may make more of an impact.

I was the same way. I was the only [student of color] in my classes. I was in smart educated classes and wanted to go to med school and do all this. I get it. If you start them young and show them, "Hey you can do this guys. You don't have to do it but it's cool and keep it going."

I found about athletic training through my high school and collegiate athletic trainers through my sport.

I spoke at a seminar to educate high schoolers on our profession, and I talked about athletic training...and they thought this was the coolest profession ever. I told them, 'we need you.'

For me it's been primarily racial or ethnic; undergraduates would say "wow you know look at Michael!"¹¹ He's Latino and look at what he's been able to accomplish or this is what he's striving to accomplish" and that instills in them a desire to say "Hmmm, I can do that too."

In their excitement about the benefits of outreach that have impacted them, students also discussed the potential of expanding outreach efforts. For many of them, expanding such efforts into more international regions, like Europe and Oceania could contribute to broadening their understanding of different cultures and contexts; it could help them gain a wider perspective from health care experts who work with diverse constituents in a different system and inform unique ideas, knowledge, and cultural ways of caring for clients. One student noted, "I would like to see more diversity from other countries that have worked as health care [practitioners] in other countries. We only work with certain populations...there's not a lot of diversity. Pulling in [international] perspectives from other places to help with [our] education would broaden us to make us more conceptually prepared."

In contrast to noting the advantages of increasing the compositional diversity, students also communicated specific challenges when representation is limited. Among them include being the only one, the absence of particular issues affecting historically disenfranchised groups, and a lack of understanding between political correctness and epistemological underpinnings in a community's lived realities:

I'm pretty sure I'm the 'only one' ...I'd like to see more Native Americans in my program.

Keeping [LGBT] hush hush isn't gonna help anybody.

I felt like we don't talk about the LGBT community because we don't want to hurt, offend, or draw attention to them.

As we think about recommendations and improvements to the College of Health, one student powerfully advocates the need to move from rhetoric to action, saying "The College of Health has good intentions, I am sure, but that is not what we need. We need actual representation, intentional programming, and constant diversity and cultural sensitivity in students, staff and faculty." In the following section, students underscore unintended consequences of fairly homogenous compositional representations that can lead to increased incidents of bias and microaggressions.

Bias & Microaggressions

The term microaggression was first coined by Harvard Psychologist, Chester Pierce, to mean "the everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, that communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership" (Sue, 2010, p. 3). More recently, scholars like Derald Wing Sue and Kevin Nadal expanded on the concept. Given students' individual and group membership(s) in various identity categories—race & ethnicity, religion, nationality, sexual orientation, gender & gender expression, veteran status, socioeconomic background, and age—they either discussed personal incidents of microaggressions against them or provided accounts as witnesses to incidents of bias, and/or ideological assumptions in the college.

¹¹ Pseudonym

Intersectional Biases Against Veterans & (Dis)Ability Status

For student-veterans in the College of Health, there is a degree of frustration with constantly challenging a pervasive assumption often held about veterans and their disability status. In particular, the pernicious ideologies linking veterans with PTSD have been frustrating for them, and although these impositions may not be intentional or malicious, students voiced concerns in allowing this to stand as “legitimate” when they are not challenged. Moreover, the tensions between being a veteran and/or having a disability reinforced binary identities as students perceived one status to be celebrated and the other as less welcoming.

I want to speak from the veteran status because I've seen this happen the entire two years I've been here. From students to directors—if someone says they're a veteran, especially if they're a general—there is a perception that there's something mentally wrong with them, and I've gone into our first major projects that I had to do here with the group. They wanted to do veteran services, and the very first thing that came up was, "Well, you know all of them that have PTSD." I can tell you right now there is very little PTSD. I noticed speaking to other veterans here, especially younger veterans, they don't want to identify as veterans for exactly for this reason.

There's these massive assumptions that is coming from an outside world and into this collegiate world, and you're like, "Really? You think just because people did this that they now have this disability?" I can give a little bit of a pass on maybe some of the younger students. Some of the instructors should be calling that stuff out. Some people do but the vast majority don't, and they perpetuate the same stereotype every time. "There must be something wrong with you." I hear it from classroom instructors, students, everywhere. When I say that it's not negative, I don't think the people that are assuming that every veteran is saying that as a negative, like, "Oh, we really want to help them because they all have PTSD." I don't think it's malicious...but it does make you want to go like, "Ugh. I just don't want to deal with that crap.

I would put that responsibility more on the faculty as opposed to the students. They should be the one driving that conversation.

From a veterans' perspective it seems like [the College of Health is] very welcoming, I had zero issues. It's even celebrated. From the disability side, I don't think they see both perspectives. You're either disabled or veteran, it's hard to be seen as both because most of the disabilities especially the psychological ones are on the surface. I can be both, but it's just not part of the conversation. So the veteran part ... yes that's great! I'll get happy veterans day, happy marine corps birthday! But I feel like they don't want to hear about the disability part.

Disability Microaggressions

Students also discussed a range of issues associated with navigating the climate of higher education with an invisible or visible disability. Their concerns centered on diagnoses & testing, accommodations, and accessing services on campus.

I have a learning disability, so I have to be careful with my class choices, so I don't overwhelm myself and so, I think it's really important when professors understand not only their classroom, but what other people are teaching in the program, and how difficult those classes are, and when they're laying out and setting the schedule. When you have three classes and you have an exam within two days, you're gonna do poorer,

compared with those exams that were spread over two weeks, and so, the more inter-department communication and inter-class communication you go through an organization's program to get a degree, the better that aligns, and the better understanding, "I'm coming with this material in these ways, and I have papers here, exams here." When those become aligned, then all these other social, economic, and time issues kind of resolve themselves, whereas, when they're not aligned and information dump on top of lots of busy work that doesn't really help you learn, then it's just terrible.

After informing his peers about taking advantage of the services available in The Center for Disability & Access, a dialogue unfolded about testing, access to services, and requesting or qualifying for accommodations:

Don't you have to actually have a learning disability to use that?

Yeah, so you have to get diagnosed. You have to have your testing. It's hard, but...I was identified and I have a history of testing. Once you pass the committee, it's that part here at the U, the Center for Learning Disabilities can come in, and give you your accommodations.

But as a grad student, I don't have time for one [testing, accommodations]. I'm already getting too far to go and get tested. It's gonna take too long, too much time, too much costs, so what do we do if we don't qualify for those things? We can't all use that resource.

It's great if you already have a diagnosis, but if you don't have a diagnosis or proof of whatever you need, then they can't give it to you.

You can talk to the teachers, individually. I feel like they can be pretty understanding about things most of the time...I have bipolar disorder, I think only one professor's ever asked me for specific like medical proof of that, so I think that if you came to them with concerns...they will work with you, I would hope.

Most of the time, they are willing to work with me, but sometimes, you can just tell that they're not happy about it, they don't want to do it, they think you're making an excuse. And then, others are very receptive and willing to work with you, so it just depends on which faculty you're going to and asking.

It's funny, 'cause all faculty on their syllabus has the ADA accommodations, so you would think that they would be okay with it, but it sounds like that's not always the case. I don't feel like that's the faculty's job to discern who deserves accommodations. You just really hope people are being honest.

And that they understand...'cause if I felt like someone was trying to give me a hard time because I was struggling with a learning disability, I probably would never go back to them, or talk to any of the teachers, so I feel like the more teachers that understand learning disabilities, the more they'll give leeway for it, within reason.

It doesn't even just apply to people with learning disabilities...some of them have the attitude, it's grad school, buck up. I understand that to a certain extent, but if they could work things out, and say, "Hey, let's look at the schedule," or, "You have a test this day, you have a test this week," maybe we can work out something to move some class

schedule around, so we're not so overwhelmed... 'cause if we're not overwhelmed, we can learn better, so if we have a whole bunch of tests we have to cram for, we're not gonna get much out of those tests, but if they space those out, like he was talking about, then, we would actually get more ... Not only would we do better on the exam, but we'd also learn better and take more away from it.

Listening to students discuss the impact of their disability on their education forced us to explore how individuals are deemed “qualified” for instructional modifications and accommodation requests. On the website for the Center of Disability & Access, it explicitly states that individuals whose physical or mental condition “substantially limits one or more major life activities”¹² are deemed qualified for services. Despite having a resource center on campus, and a number of faculty dedicated to assisting students with disabilities, there remains a reluctance to openly discuss this particular facet of their identity due in part to stigma and perceptions of potential repercussions or disadvantages from authorities in power acting on deep seated assumptions that could impact them:

I have a disability status and I don't talk about that at all because I would have no idea how that would be received so in terms of concealing stigma and things like that it seems a lot more comfortable to not ever talk about it because I don't know what support would or wouldn't be there. And it might be great to be honest, there might be a lot of support, but not knowing what would happen...let's just not go there.

As a person with disability—[most] disabilities are invisible—people just go blind to it. If you're not in a wheelchair, or bald and drooling or whatever, and I'm sorry not to be cruel, but it's just like, you're good!

And there's just this air of only bad things happen to bad people and a bad thing is also being older and having disability and sickness or whatever and then they won't say it necessarily right to my face but it is prevalent every single class. [Able-bodied peers] give the sense of “we're better than everybody else” and I just it boggles my mind how they're going to be health educators if they lack the empathy to connect with others who have suffered from a disability and that is our whole cause [in the College of Health] to help people.

Gender Bias & Sexual Orientation and Transgender Microaggressions

In this section, we explore a few examples of bias & microaggressions related to sexual orientation,¹³ gender identity,¹⁴ gender expression,¹⁵ and transgender¹⁶ identities. We begin with a quote capturing a common concern related to being misgendered:

¹² See the Center for Disability & Access <http://disability.utah.edu/students/index.php>. They adopt the definition of “major life activities” from the American with Disabilities Act as “caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, working, sitting, standing, lifting, and mental and emotional processes such as thinking, concentrating, and interacting with others.”

¹³ “Sexual orientation is multifaceted; it can involve sexual, emotional, or relational attractions toward others and is typically defined by one’s gender and the gender or genders of those to whom one is attracted” (Woodford, Joslin, & Renn, 2016, p. 58).

¹⁴ “The conscious claiming and expression of gender as related to the self” (Moradi, Mohr, Worthington, & Fassinger, 2009, p. 6).

¹⁵ “Gender expression includes the outward manifestation of one’s identity through personal characteristics and behaviors” (Woodford, Joslin, & Renn, 2016, p. 58).

¹⁶ Transgender means “anatomy, appearance, identity, beliefs, personality characteristics, demeanor or behavior that diverges from prevailing norms about gender” (Currah & Minter, 2000, p. 17).

*We have professors who do not understand gender and misgender students all the time.
We have trans exclusionary radical feminists.*

In times when students are misgendered with incorrect pronouns, some feel as though they must make a choice to correct the professor or stay silent; this is a choice that may out them as transgender and can lead to consequences that might include feelings of insecurity, embarrassment, and even physical danger. A transgender student recalled being asked if they've had gender affirming surgery, a query that inadvertently implicates their physical appearance or the status of their genitals. Analogous to the common objectification of women, questions surrounding transgender people and surgery maintain similar consequences. For example, Swim and colleagues found that college women experience one or two events each week that qualify as "everyday sexism," including gender-role stereotypes and prejudice, degrading comments, and objectification (2004). Similarly, students in the College of Health reflect on parallel issues:

There's a misunderstanding of what "transitioning" looks like for people, and it is different for everybody. I've had a faculty ask, "When are you having your next surgery?" For me I think, "Well, that's kind of personal." Also, not every trans person has surgery. You can't assume. You don't want to put it out there that they should feel uncomfortable with their body, that they still need more work... Now that I'm saying it, I can think of three occasions that they've asked me about something related to my body... One about hormones, and two other about surgery. These are things that I don't want to talk to faculty about.

I witnessed a lot of microaggressions, victim blaming, and perpetuations of rape culture. Students make comments they may not mean sometimes but have lasting triggering effects for many other students. I noticed many of my female friends have been protective of themselves and selective on events that they go to... It seems scary and unacceptable that there are places on campus where people will clearly not go to.

It is just hard all the time for me to speak up because I do not think I will get the support I need if I were to bring up or speak up about a controversial topic. One time I was talking to one of the groups in my class who was working on women's empowerment among college students at the U. I challenged one of their partnerships with ASUU's "Its on Us" an anti-sexual assault campaign and explained to them how bad it is and how it is lacking accountability towards the institution and puts the responsibility of challenging rape culture on bystanders (students). It was not the best approach to end sexual violence around campus. After challenging one of the group members about it, she was very defensive and told me that it is the best approach the university has and she is going to continue supporting it. It felt to me that she did not even value my opinion after explaining to her the limitations of the campaign. As a student of health promotion and education, I had expectations from her to understand limitations of programs and campaigns. I wish that at that time, she listened and did more reading and research on the topic because there are so many sexual justice programs that do not support it. I honestly do not like a lot of the students in my cohort and in health promotion because of stuff like this. Whenever I bring up topics that they have not been introduced before, they become very defensive and attack me as a person rather than challenging the situation.

In these accounts, students direct our attention (yet again) to issues of power. The idea of confronting someone in power by challenging biases against their gender (or any other identity) can be risky and lead to higher levels of stress, especially since there is no way to predict another person's reaction (whether it

be anger or retaliation by effecting the students' outcome or success in the form of grading distributions). We are also left to ponder the ideas of gender, language (as a system of representation), allyship, and responsibility to explicate and deconstruct as it relates to interactions that can feel dismissive (yet again) when historically disenfranchised students raise challenges.

When asked about the approaches they would like to see strengthened or happen differently, students responded:

In general, society doesn't understand transitions, transgender transitions. Maybe, pass on that understanding to faculty, and to leaders of the college, like higher-ups, just so that the trickle-down effect can begin to happen. If you see your superior being welcoming toward trans people, being knowledgeable about the differences, and the whole process including some psycho-social stuff that goes with it, [integrating these] into class material would be nice.

Even training for the professors [on the topic of transitioning]. I don't know if they have those, but that's a good idea. You had some troubles with the professors. I think that might be a good idea

I think there should still be a fill-in option. There was just "transgender", it was not more specific than that. That was the first time I encountered that, so that was cool.

Religious Tensions

In the College of Health, religious tensions were cited between LDS¹⁷ affiliated students (the predominant religious group in the state of Utah) and those whose religious beliefs differ. Some of the sources of tension emerge from ideological underpinnings of religiosity associated with religious affiliation, "Truth," and religious practices influencing interpersonal relationships and behaviors.

I'm a young mom with kids and I used to be Mormon. A lot of times, if you don't specifically say that you're not Mormon, people will come to you and say stuff, thinking that you are in the "in-group." So sometimes, people will do this to me, especially in the beginning of the program. I wasn't as vocal about it at first...and I had a couple of experiences where people have asked me during labs. Somebody started asking why I had left the [LDS] church. It got very charged. For me, it felt very uncomfortable because all three of the people in the group were really strong members of the Mormon church. He asked, "Why did you leave?" I said, "Uh, you know," I didn't want to lie, so I said something like, "Because it isn't true," and then, it just kind of devolved from there. I couldn't leave the situation. It was my class, right? One person was trying to act like they were really cool with the whole thing. The other person said, "People are very invested in their religion." It was not an appropriate thing to discuss during our class. That was probably the only time that I've ever felt like I was in a really awkward situation.

I remember talking with a group of people in our class. One of them was like, "I'm curious because I feel like I need to report this patient because it seems like they're an alcoholic." I'm looking at him like, "What do you mean an alcoholic?" They told me that they like to go and drink when they're celebrating. Things that normal people outside of Utah do when you're happy, you drink. This person was basically trying to make it seem

¹⁷ LDS stands for Latter Day Saints. These are individuals who identify or belong to The Church of Jesus Christ of Latter Day Saints. They are more commonly known as Mormons.

like it's completely wrong. They did a report to their higher social worker person about it. I was set off like, "What?" It's the little things that make you look at people.

People put the dominant culture of being LDS as a big factor here. I have had challenges, rescheduling exams that fall on really important religious holidays for me. It would be like if something gets scheduled on Christmas but I'm like, "Can I take this early? That's kind of a huge holiday, like the biggest one." I'll take the exam early. Therapy professors who are like, "No. That's not going to work in my class."

As a member of the LDS community, I am more conservative than many of my classmates. This is not to say that every LDS community member is the same as me, but in general I think many LDS community members are seen as more conservative. It was interesting that within the first couple days of class, I felt hesitant to mention that I got my undergrad at BYU, and not just because BYU is an athletic rival of the U, but because of what it implied about me and my religious beliefs. I felt hesitant to ever mention I was LDS, because of how people stereotypically think about LDS people and their view on certain issues. From the beginning I never felt overtly unwelcome, but I did not feel safe to share that I was LDS. I forced myself to share it anyway, but I was very nervous about the repercussions that would follow.

I don't feel like talking about the LDS culture or how those of the LDS faith practice their spirituality has been a welcome subject. Not that students couldn't make comments about it, but there is very clearly a climate that makes talking about being LDS or even the LDS religion unwelcome. I find it very interesting that at a university in the state of Utah, a state that has a greater concentration of LDS members than anywhere else in the world, in a field where we constantly talk about potential clients and how to be prepared to treat clients in Utah, working with LDS clients has only been mentioned twice, both in reference to the same negative experience with an LDS client.

Climate on Citizenship & National Origin

Students whose citizenship is not specific to the US were often described as resilient and as providing valuable perspectives to critical conversations in the classroom. At the same time, certain encounters by these same students have led to proliferating isolation and (unintentional) exclusionary practices that undermine language diversity and reinforce feelings of vulnerability and signifiers of boundaries.

I think that some of our foreign students learn at a different rate because English is their second language. I couldn't imagine learning what I'm learning in French or something like that. I could not, absolutely could not, but I think they do affect the way the grade curve gets distributed at the end, and in a couple of different course I've taken, I've seen it.

When I arrived here...I was assigned to teach an online class and had no problem with the content. I just relied on my expertise; however, it extremely isolated me. And as an incoming student, that just escalated throughout the first year and I found some really deep problems. I think that was part of the foundation because I did not have an opportunity from my professors or with the program I was assigned to or came in with because of teaching in an online environment. Some professionals revealed they have a lot of bias about teaching online, and whether we want it or not. How I got the class that was assigned to me was not well communicated and I was in a really vulnerable situation regarding that and it escalated throughout the year. I did not have any interaction with any other professors. I was an out of state student, also with as you can tell, I talk funny.

So, English is not my mother language, I am a first generation college student...and also I have a lot of gray hair. So all of these, like coming into academic environment over age 50 it's not that easy, and being in a completely isolated environment was extremely difficult and it founded a lot of problems escalated to a deep extent. I was assigned to teaching online. I did not even think about it...

In two of my classes we have groups that we're in. I'd say it's fairly diverse in our group together. We have someone from Sri Lanka...It's really cool to hear about his story in coming over here and in another group there's a Polynesian. This semester I've had a decent exposure to diverse backgrounds.

Even though I'm not in the conversation with them, it's not because they're not nice to me; it's because I'm not understanding. English is not my first language. It's not intentional to exclude me from the conversation or something. I don't meet a lot of people except my program friends because there's not a lot of chances to meet other people, so those are the guys who I only meet and there just nice to me, so I don't have any other experiences.

Although individuals are not intentionally excluding international students due to language differences or intersecting identities of age, the pressing issues of intense isolation may have led to a desire for stronger community support and mentorship. As implicated in previous sections, students are expressing a need for collectivism and a more cohesive & supportive community.

Intersectional Identities

As an analytic tool, intersectionality lends itself to open dialogue on multiple issues and conditions that shape individual experiences. The intersectional identities of students highlighted a few challenges that include (but are not limited to) difficulties in balancing expectations of their academic schedule with experiential opportunities embedded into the program (as a non-traditional working student with economic constraints), income potential (as a student concerned with their educational investments and 'returns'), and negotiating personal time with their families (as a non-traditional student with children).

...a lot of people have strife with the fact that we still have to do 40 hours [of community service, labs, or internship] outside of class so that's 5 hours a week and we start half way through the semester, which is too much especially for people with children. It's just a lot and doesn't make a lot of sense.

I like how you all said that big classroom and also some classes are only offered like either fall semester, spring or summer semester. That really backtracks you if you aren't able to take that class...

I've had to take a fifth year because of that... the classes were offered at different times and I did not realize that because no one really informed me. I was like, "Oh great, so I have to take next fall." I'm supposed to be graduating."

Especially with how the scale is set up just for payment with tuition where taking 4 credits is like \$2,500 and then as you add more, like each credit becomes worth less. If that happens, where you were planning on taking something in the spring, all of sudden, it's only offered in the fall and you now have to take one class in the fall. You're also going to pay more than half of the tuition that you just paid for 13, 14 credits for 4 credits... You feel like you're getting gouged."

In terms of including other non-traditional students, it is difficult to work while in this program...It would be totally unreasonable to...be able to support a family...while in this program. The men in our program that have kids [seem to have more resources]. I mean, they live with their in-laws. It's not possible to manage both [this program and work], without support for sure.

Rather than identifying a single axis of identity influencing their experience, students characterized multiple subject positions, such as race, gender, & sexual orientation as mutually influencing a perception that heterosexism¹⁸ is perpetuated and increased cultural competency is necessary to understand.

I identify as queer, Mexican-American or Latina for my race and ethnicity. I feel like there's a lot of hetero sexism that happens within many of the classes that professors constantly perpetuate. Like hetero-relationships and never choose to go or explain more non-heterosexual relationships. I feel like that's something that they're lacking in a lot of the times."

I'm frustrated just with the state of the field, but that's why I'm here. It's not anything that's happening here, in particular. It's just the way it is everywhere. It's a very conservative white world out in [my field]. A very straight world and that's changing. We just got to keep at it, keep nudging, moving things forward.

When the people in my class find out how oppressed they are because they are women, but do not consider the white privileges that comes with their identity, they think that they are the most progressive, radical activists of the world. As a result of these instances in my classes...I have not been seeking help in my program.

Racial & Ethnic Microaggressions

A pervasive type of microaggression is grounded in racial and ethnic biases, and students connected them to concerns of tokenism, being singled-out, and common racialized stereotypes from predominantly white students questioning the academic abilities of students of color. We begin with a few quotes that are indicative of such majoritarian assumptions, and conclude with accounts from either personal experience or incidents that students have witnessed:

One of our classmates falls under diversity and sometimes I think, 'What qualifications did he have to get into the program, other than he makes things more diverse?'

I identify as Latina even though I don't look it. My dad's Mexican. I know I was born here and everything, I just don't feel like I have any unique perspectives in that sense because I look White. I look Caucasian and I haven't been stereotyped unless someone knows my last name.

We have a classmate...she's like the token and we'd single her out.

I think it was last year sometime where one our classmates was doing a diversity picture. They were seeking out students for the diversity picture. I was like, "Don't take my picture." The reason beings is, "If another student is interested in the University of Utah, it should be based on the merit of the school, not what they're going to find when they get

¹⁸ Heterosexism is defined by Murray (2015) as “a form of oppression that assumes everyone is or should be heterosexual” (Friend, 1997). “It refers to acts, beliefs, or values that are maintained by power arrangements that ignore the experiences of [LGBT] individuals” (p. xiii).

here.” That’s just my whole hang up. You’re not going to use me as your token little black girl...That’s misleading because, if you are looking for that, you’re only going to see one or two.

When people talk about racism in class, and when someone is sharing their experiences, there’s always a white guy or a white person at the end who will always make it about themselves as if the oppression hit them the most and as if they experience the most violence and harassments in the streets and in the classrooms. It feels as though these self-proclaimed allies always take up space and appropriate historically marginalized individuals.

It was funny because in one student presentation, the title started with, “I Came Across an Oriental Person.” That just drives me crazy...Do I go and tell this person that that’s not appropriate? Then I go, “You’re just young. I will leave you be. You will grow out of that.”

In one focus group, after the last example was shared, a dialogue ensued on strategies concerning possible ways that they, as peers, could respond in the future: *I think it’s completely appropriate to be like, “Hey I don’t know if you knew this.”* Another student suggested, *I think it’s totally okay to say, “You know what? I don’t know if you know this but that is not the preferred nomenclature. There are different words to describe people, that have been used since 1915, 1920.*

As students who ‘fit’ into more than one category, their concerns were not confined to race, alone. Rather, the intersections of racial and economic microaggressions became clearer when students discussed derogatory messages about certain neighborhoods in the State of Utah:

Something that initially turned me off about the program and almost affected me coming in happened as an undergrad when we had an orientation for grad school and [staff administrators] handed out a map...The map was color-coded green areas and red-shaded areas, and something on the map that got my attention was its outline. They were giving people advice on where to look for housing and half of it is covered red which represented places you don’t want to live in. I can’t remember the exact wording, but I do have the poster, and I was going to bring it in because I am someone that lives in that shaded red area. I found it really offensive towards me. I didn’t know what the program was trying to say when they were advising people not to live over there. Is it somewhere bad? Bad people live over there? Is it high criminal activity? I just didn’t understand. They were giving [prospective graduate students] ideas of where to relocate if they wanted to join the graduate program. It was presented as “If you are relocating and you don’t know the city, here are some areas to avoid.”

Yeah and the way that they phrased it, too, I just thought it was really [offensive]. I come from there. I live there, and I can walk around in my neighborhood; nothing happens to me, so I don’t know where that was coming from, but I really thought that was very insensitive toward people that could potentially be coming from [these red-coded areas on the map]. That’s something I wanted to bring up, but I hadn’t had the opportunity to. I feel like [program administrators] need to be more careful about the way they’re portraying certain information and definitely think about those who come from that background, from that location, and how they’re going to be interpreting.

I remember seeing that because I lived in Rose Park too.

I live in West Valley. So all of that west, they said west of the interstate you shouldn't live there.

It was seriously like, "Avoid these places."

Yeah, and it was marked in red, and people said, "You don't want to live there." That's what I took.

It's one thing to say, "Call us if you need some suggestions based on the type of place you want to live." That's different than saying, "Just avoid these areas"... and clearly outline that as red areas you shouldn't live in... That's how I took it, and I thought, "Well, I live there. So what does that say about me?"

We have white feminists and problematic white people who go out of country to save brown kids in underprivileged countries and coming back with no efforts to sustainable healthcare in the countries they volunteered in.

In tandem with racial microaggressions is the intimate connection of the ideology of colorblindness codified in discursive practices (Bonilla-Silva, 2003; 2017). When students were asked to consider the diversity of their faculty, one individual admitted to having never thought about this throughout his four years on campus until the question was raised in this particular setting. As he unmasked what was once invisible to him, he disclosed, "After you asked the question about diverse faculty, I was thinking if I have ever had a professor that wasn't Caucasian or White? I really haven't ever noticed." After pausing for a minute, he, then said, "I wouldn't really care if I had a professor that was not white, I don't think it would stand out." His perspective was not unique, and other students in the college echoed similar sentiments undergirding not only colorblindness, but a "blindness" to diverse markers of identity in general:

I understand why diversity is important, but I honestly I just want the best teacher possible. Whatever color they are, wherever they're from, whatever background are they, I don't care. I just want whoever can teach me the best out there.

I don't really care if [faculty] are all white or they're all black or anything like that. As long as they can do their job.

I wouldn't want to sacrifice quality for a job diversity.

I honestly don't think it should be a made a big deal. I think we are all people that are wanting to get educated and so we have the requirements. That's what's important. I don't think that once we get here, there needs to be a special, sense of catering to me because there aren't more like me, right? I think that just sets me apart even further. I don't want the special attention. I just want to be treated just like the other students that are in the program.

You can look just like me but if you can't teach me, I don't care for you to be here.

If you're bringing in diverse faculty, that's going to minimize the quality, right?

What type of diversity is the College looking for? Are they looking for that racial diversity or are they looking for the diversity of knowledge and experience that the faculty brings?

I identify with several of those identity groups, and in the military you wear a uniform. It doesn't matter what color is underneath that uniform. You're all the same. I figured that if

I didn't have that as my training, then perhaps I'd be more sensitive. We tend to move around every two to three years anyway so you have to get reacclimated to the environment, reacclimated to the people so that adds to your preparation for something new.

One student confronted these perspectives by offering an alternative to think about the future and sustainability:

I think the College of Health does a really good job at acknowledging at least all these identity groups but I think we need to hire other staff that actually can identify with the different groups that we talked about.

Socioeconomic Differences

A salient imperative demanding our attention entails socioeconomic status and differences. Students argued that the cost of enrollment in the College is financially significant and it limits the inclusion of certain students (like those from lower socioeconomic classes) who may have considered the healthcare field. Also, like many other institutions of higher education, students observed rising tuition costs & fees, and expressed distress over educational debt; they noted structural constraints related to employment opportunities; and they alluded to questioning the value of their degree (or investment in their educational return).

When we do these outreach things to try and bring people in, in high schools, you can see the excitement and then as soon as you talk about the pay, you can see their faces drop. They'll say, "I can't afford that" or "That's what I have to pay extra on top of my tuition to be able to participate in that?"

You're just trying to get through and get out without too much debt without too many years...Tuition is already expensive.

We spend massive...Each semester is maybe, \$7,000? It is brutal. It'll cost us \$70,000 to do this program.

I remember the first day at orientation in almost every class, "Welcome to the program...No, you can't have a job. Yes, you have to be at your clinical site, regardless of time of morning, day or night." You're expected to do these things and if you can't then you're not in the program.

There were two students last year that said, "I have jobs. I have to work or else I can't do this" ...And [the administration] said, "Well, you're not going to be in the program."

In the [program] they're very like, "Can you support yourself without working?" They ask you things about your economic status that you have to be realistic about, which is hard. Then if you don't get in because of your economic status, that's not great. That's not a very inclusive. That takes [out] a lot of good applicants that could still apply and do a great job, but can't afford this program.

A lot of other students that could definitely diversify our program and [we could] bring in more people, but when you can't afford it, we just cut half of the population that definitely would help us and benefit us.

[I] was shocked to find out what our typical annual income is. [I] thought it was ridiculous...It's a good thing we love what we do.

Ideological Assumptions

Along the lines of microaggressions were pervasive ideologies of colorblindness¹⁹ and meritocracy that were discursively interpellated by students.

At the end of the day, you take the best applicants for the job [or program].

I'm not saying there's anything wrong with anyone else, but typically you take the best applicants [into the program]. It just turns out to be more of the same group of population.

Would another student of another race want to be welcomed into the school? Do they need that welcome?

The last question (above) started a lively dialogue where one student answered, "Some of them might." Another remarked, "This is Utah. It is not the most welcoming place for people who have minority identification. That's just the reality. Saying if you do run into some issues here's some resources for you but if not, I'm grown and I can take care of myself pretty much. I don't really need that but I didn't get any offer of that and I didn't miss it. I feel like if I hadn't been as prepared, then that would have been something I would have said, "Well, it might be nice to know."

The conversation unraveled into another issue centered on individualism and meritocracy, which ultimately assumes that individuals can achieve upward mobility on their own despite material conditions, access to opportunities, and the reality of biases and discrimination (see Bonilla-Silva, 2003).

I don't believe that the college needs to cater to me. If there is something that is lacking, I as the individual need to step up and say, "This is a problem." Then making sure that those services are available if needed, then that can be addressed. I don't find that that's lacking.

Part of the point is then developing the maturity...It would be like, if there was some sort of seminar, that an employer was sending you too. It was like, when your kids have a football game or something. You're like, "Listen I can't go this week. It's regionals. I can go the next week." "Well I'll send you the next week." Owning your own schedule and owning your own life, especially in PT, owning your schedule is huge... It's very more so you taking the accountability for your decisions.

Whether it be through teaching class whether it be through interactions have an opportunity to demonstrate that we can be successful regardless of whether it be the environment or the circumstances.

"I...Just Don't Really Care"

The emergence of colorblindness and individualism was extended by a handful of seemingly more "traditional" students who asserted that they did "not care" about issues associated with campus climate and diversity. In fact, they simply wanted to get through their program in the College of Health and work towards their ambitions of becoming a practicing physician. In doing so, they offered suggestions to better accommodate their needs:

¹⁹ According to Bonilla-Silva, color-blind racism is

I generally just don't really care. I'm here to do what I'm supposed to do in school and then get out. I don't really care about what the teacher says or what other students say, I don't really care. I'm just here for my stuff, then I take whatever they say, and I have my opinions, and I keep them away and just kind of go about my day and that's fine with me. I'm perfectly happy with it, I feel the same way like very neutral, I've never felt like there's anything that's really including but I've never felt like there's anything really pushed me away. I'm just, I don't know. I'm fine with it.

I have a minor interest in Kinesiology, but not really. I'm mostly just doing it because I need a degree.

*I'll be applying to med schools this summer and I had been told, I need a degree so this is one where I saw the prereqs align; the prereqs for med school are the same as the electives for the degrees. That's why it's very appealing, but generally if it was for Kinesiology, I like working out, but I don't really have a lot of interest in doing anything with my degree that I have, so I don't really care about the course content. I more would just like to be interesting, something that would just at least be engaging for me.”
I wish they just did like a pre-med degree or something and it would encompass medical students, nursing students, dental students. I know for myself, a lot of my friends that are also pre-med, they've done the same degree of Kinesiology, they don't really care about Kinesiology, but it's a good degree for pre-meds to have, but I wish there was a more specific degree to have more of my interests that was just like pre-med. You could throw the dental students in there, the nursing students, the PA students.*

You could have like medicine classes.

Yeah, I feel like I would appreciate it more and if like it would prepare me more for what I want to do.

As a pre-med student, you're just stuck because they're just like, "Well you're going to do this, but just get the degree because you just need a degree." Like, "Well, I guess I can do Biology," but I don't really have an interest in just Biology

Another student added to this conversation, suggesting a curriculum proposal for a new track, saying,

I wish there was just a specific degree for people that kind of, they need a degree, they're not really going to use their degree. That's also dangerous because then you'd just be stuck with the worst degree if you don't get into a school in the future. It's, I don't know. It's hard.

Maybe like a[n] [undergraduate] degree, or whatever it is with it. Emphasis in Medicine, like pre-medicine or something like that so then maybe with that emphasis, certain classes would be replaced with something more to do with medicine.

The track would be like a pre-professional type of track, where all of those students that you're talking about would come together and take the class, and then have something on your graduation degree that says.”

I think it would encompass almost a quarter of the Kinesiology department at least. It would even help promotion of education, a friend just got into med school with that degree and I feel like he just picked it because he needed a degree.

Finally, a culture of competition is, perhaps subconsciously, communicated to students in the College; a prevailing orientation in higher education that conflicts with collectivism and interdependence. As a pervasive value that institutions of higher learning inculcate, it was apparent that students grasped this message, and some have internalized it:

Sometimes the message [we receive is] "Just follow along, and you go with our changes, or else we'll put someone else in your spot" is basically how I felt.

We come in, and we are interviewed... You're competing to get this spot... "I don't want to be that student that uproots, and makes things difficult, because they could have picked someone else, and I'm lucky to be here." I really am. I'm glad I'm here, but there's still, even as I've gone through the program ... I still have that feeling of, "You better keep your grades up. You better get this stuff, because there are other people waiting for my spot."

There was a disclaimer that was out at the beginning of the semester that this is how it was going to be and there was going to be a bit of an adjustment for some. Maybe previous years, having been exposed to that type of environment might have complained...you need to be more responsible for your education. I get that. I prefer spoon feeding but I get it. I would say this year in particular there was a lot of, figure out how you manage your time. Make sure you get everything turned in. By the way be flexible.

At the end of the focus groups, students were asked about suggestions to improve the climate. They summarized their recommendations by suggesting funding opportunities, increased options of diversity courses, access to resources for students with disabilities, as well as education and training:

More diversity trainings, more privilege exercises, hiring more staff and faculty of color, queer staff and faculty, outreach to 1st generation students, giving out more scholarships to queer students of color and to underrepresented students, providing extensive diversity training monthly during their work hours, requiring more diversity classes taught by diverse faculty who have firsthand experiences of oppression, having sign language interpreters, disability related training materials, having a committed and sustained mentorship among students and professors/staff, strengthening the collegial community in the department, transparency in programming to involve more students in the decision making process, having accountability means for students to provide feedback and see action from.

I feel like the professors need to be trained better within cultural competency because they're doing the bare minimum to me.

Communication, Expectations, Protocols, and Policies

One of the most salient findings from the focus groups points to a desire for more consistent communication, expectations, protocols, and policies to enhance their knowledge about the support available to students. These necessities fundamentally echo the ideas explicated by Smith (1999) who informs us that clearly marked paths to student success is imperative for all students, particularly in equipping low-income and first-generation students with information to better navigate and negotiate decisions pertaining to their college experience. Smith maintains a need for, “constant communication, peer programs, and robust advising with messages about procedures, rules, steps, and processes that communicate the institution is committed to student success” (p. 207). Students reiterated the importance

of communication and highlighted the need for clearer markers including detailed expectations and access to resources that might assist them in their educational journey:

I don't feel like I need to be hand held or anything but there are some people that might need that kind of, "These are the resources. This is where you can go." I didn't feel like it was bad or good, that it wasn't addressed in my diversification.

Sometimes it's better just to have more information. If it's valuable to you at least you have it. At least you were given some of the tools.

I feel like a lot of us got into the program, and then, they were like, "oh, and this, and this, and this is coming up," and "you have to do this," where it would have been nice to have that laid out before hand, so that we knew what the expectations were.

I think there's a lot of hidden things that we had to find out, and I know that in our year, we've had a lot of frustrations of just finding things out that we have to do or even pay for, and finance...I thought that was really hidden, and when we got here, we didn't even know it changed to [the program]. It was weird, and we had a new chair, and all these things that were happening behind the scenes. We're like, "oh, great." These are things that could have influenced someone else's choice to come here.

From their narratives, it is apparent that students would like more consistency in established expectations prior to enrolling in the program. For many of them, particularly those whose socioeconomic backgrounds are not congruent with middle to upper classes, there are economic implications. Additionally, students expressed frustrations rising from what they perceive as inconsistent scheduling and course activities:

When people walk into class at 9 o'clock and they're looking at the clock and everybody's been sitting there for 30 minutes—that to me is a problem. It's not because that person is late, it's because there was a change to the schedule and you didn't know that you were supposed to get. Some people got the message and other people did not. I had found that that has happened, on occasion. Now I just make it a point to try to be on campus by 8:00, until next semester or so. Nothing starts before 8:00 at least in this semester. If I'm here at that time there's no chance in me being late. You have to figure out, that for yourself, whatever works.

That was the same way it was for me in [my program]. Somebody would say, "We're moving this class to earlier in the week." I'd get to campus and be surprised that we had class. I'd show up and no one would be there. I just started showing up. I just started being like, "Well, it's a 9:00 to 5:00 [class] now."

Another expectation pertains to faculty members and the distribution of student grades. A handful of students, particularly graduate students, explained that they generally lean towards being cautiously optimistic about being actively enrolled in the program, even when they are uncertain about their academic standing. In their own words, they communicate why it's important for them to receive course grades more promptly, and know where they stand in the program:

I, in my head, was like, "Okay, I think I'm fine, because my grades" ... I didn't add them up or anything, but I'm assuming I'm still okay.

I just thought, "Oh, well I guess she's just way behind, or whatever." It might be a customer service-type thing.

There is one professor who takes forever to grade, and even into the next semester. I don't even know if I passed because I never got my grade.

Everyone's really good about getting us grades back, besides that one teacher.

Protocols & Policies

For many students, particularly graduate students, there is a genuine interest to better understand departmental or college-level protocols for voicing dissent, grievances, and unfair or inequitable treatment when complex and interpersonal power dynamics are at play. They expressed feeling uneasy about their relationship with faculty and are highly concerned about retaliation.

The system seems pretty established ... if I had problems and I've seen things that are problematic, I would have no idea where to go to talk about it. And the program is small enough that I would not feel even anonymous type things would actually be anonymous because you can determine pretty quickly who it is.

I think that again it's a small program and a small world and I don't want to be associated with causing trouble because I think that the consequences of that can be long lasting.

There's always been a worry about retaliation because we have the same professors over and over. We had a problem last semester and we went to one of our professors, who wasn't...necessarily involved and we told them, and they said go talk to the other professor directly, but ... But there was a concern with retaliation.

There wasn't a really clear line of communication and we couldn't be completely honest with the other professor, too, because they are colleagues. I mean, how much information do you want to give to someone who has to work with their colleague?

There was the feeling of, "If we go all the way to the chair...Does it look like we're trying to escalate the situation?"

Despite their knowledge of the university's anti-retaliation policy, students problematized the politics of power that reinforce traditional social structures and hierarchical conditions often present in academic contexts.

I'm feeling like we're guinea pigs, and I don't like that feeling. And I don't think there's a good outlet to voice your concerns or opinions...there's nowhere to be say, "this is an issue, and this is a concern." What can we do about it?

In some cases, I have not been treated with the level of courtesy or respect that I expect in a professional environment with my former advisor primarily, so that's been difficult for me to reconcile having been in charge of many employees, dealt with all sorts of disciplinary issues with other people...It's been tough to be on the other side of that, and not really feel like I have a lot of recourse opportunity to speak up or say anything about it.

I'm just not sure what you do, you know? Folks are kind of protected by tenure, there's not really an evaluation or anything like that.

Sometimes I wish there was some way to provide anonymous feedback other than a class evaluation which goes directly back to the instructor if there was some sort of evaluation form or something.

When you already feel like you don't fit in ... I don't want to say anything because I don't want to be the problem student. I just don't want to ruffle any feathers further. I just want to fit in I just want to be a student I don't want to be stick out.

The question is, "Where do I go to?" Overall, I just kind of felt like you're just kind of powerless, in this power structure.

Sometimes it can be difficult to say things to an advisor because of the way the power structure is set up, there are repercussions...And sometimes it's super subtle, so it's hard to navigate...

I would be interested in having examples of how change occurred shared with students. In terms of things that I've heard here and in my experience I can't change anything. Faculty are tenured and they're going to do whatever they want to do anyway. I can bring things up and maybe they won't do something, but if I was convinced that I could have a meaningful impact, I would probably try to change some things. I'm not convinced that I would do anything other than stick my neck out in a way that would be beneficial. If I had seen, at some point that change happened after something was shared, like "this went on in our department." I'd imagine they'd want some degree of anonymity but this went on within the department, this is how students or a student responded, this is the changed that occurred as consequence of that therefore if you are having issues, we want to show you that actually there can be change.

The emphasis on traversing turbulent terrains and politics in higher education invoke degrees of fear, powerlessness, and ambiguity in a systemic structure (as opposed to a particular department or college) reflecting patterns of power that may or may not incite anxiety and protection from potential retaliation for individual students.

Sources of Support

Finally, students discussed one of the most important elements of retention: sources of support. Research indicates that sources of support—like family, peers, and mentors (to name a few)—are important to student persistence, educational attainment, and performance, and completion (Tinto, 2000). When students were asked about support, they signified characteristics of openness, approachability, and vulnerability. Support was conceived as a social network of people who were not intimidating and genuinely interested in student success. This included faculty, student-peers, professional staff (both within the department and outside of the College of Health) as well as family members. Since faculty were discussed in a previous section, we focus on the staff and family members in this section.

Staff

Numerous students identified staff as a key source of support, noting that they tend to have deeper connections to the campus community and institutional knowledge of resources to help them navigate the complexities and expectations of higher education. Such support manifests in their assistance with students to figure out the track(s) they are expected to fulfill, and provide resources or useful information to their education &/or career. Advisors, in particular, play a significantly important role in students' careers to better navigate the university system, find scholarships, and talk through career goals and degree completion:

My advisor—figuring out my classes, my track. She's really helpful, and you'll get something good out of meeting with her.

My advisors have been respectful of my background and where I want to be.

I've had a lot of help from advisors especially in the College and I've had really good advisors helping with scholarships, and to know how to navigate my desire, career goals, and degree goals.

[My advisor] is really awesome in terms of figuring out what your career goals are and how they can help you accomplish it.

If I had something I feel like I could mention or bring it up with my advisor...because I work with her a lot. I wouldn't want to

When students were asked what made their advisors “really good” they responded with:

Sincerity, they're very content-driven, they want to be there. They're fully committed to serving the students, and it's not just a job, but they want to be there to help the students.

They're friendly if you see them in the hallway...they're very friendly outside of the advising setting. Even outside of their job, they're still very personable and they're quick to respond to questions.

The academic counselors are very, very good. If I have a problem with an instructor, I'll just go talk to them

With the exception of one or two departments where students have either felt disconnected; have never worked with staff; or have been disappointed by a staff members' lack of response and follow-through, students have had mostly positive experiences. Supportive staff members who were not identified as advisors were portrayed in the following ways:

One time, I had to bring my daughter here, when she was ill. That sucked, but it was nice that Hannah²⁰ told me I could. I told Hannah, "I don't know what to do. I'm in a really bad spot. My husband doesn't have any more vacation time. He broke his leg this year, and all this stuff, so I'm going to have miss today." She said, "Well, just bring her." The staff here who are not our professors, they're really amazing like Daisy.²¹ Every time you walk in she has a joke or she'll say hi or just make you feel welcome. She runs the show and she'll let you know that, this is her office and we have to respect her rules. Other than that the other supporting staff.

She's always available.

She'll track down anything you need done

²⁰ Pseudonym

²¹ Pseudonym

Dana²² will have me on the ground, rolling laughing almost every time I talk to her. I love her to pieces.

I have a really positive experience with support staff they're persistent and even checking asking questions [people agreeing]...friendly. Super friendly.

The coordinators are still here. They had to work with IHC, the medical system, until I get it with their HR to figure out my situation, but I felt really supported in that.

While sources of support were mainly situated as someone who goes “above and beyond,” students were asked about anything that might improve the relationship or support from staff. They mentioned increased consistency with accessibility; different avenues of advertised opportunities and events; more explicit connections to resources and opportunities; and treating each student with respect, despite political and ideological differences between each other.

I've heard other students talk about their advisors and how much work they put into finding opportunities for them if you all are interested; take part in it, or this is coming up and I don't feel that the advisor I have is doing that. I'm not sure whether her job responsibilities fall along that category but I know that if my advisor is somebody that I have to constantly see, having them continually having those doors open, the conversation, or things like that really does help retain students because those connections are very important.

Sometimes announcements go out, and the due date is tomorrow." Sometimes I don't get an announcement at all or sometimes I'm bombarded and sometimes I would ask questions that would take maybe five minutes. I don't get a response until maybe three weeks after. It's okay to bring that out. I think anything we can do to improve is really helpful.

I do have an issue with Kali²³ a little bit. It's not just me it's other students who have said that, she's not on top of things. They've lost opportunities or feel like they've missed deadlines, just because she is not completely on top of everything.

She's handling a ton of things too. Coordinating with different internships. A lot of people have been dissatisfied with where they've ended up because of it.

It's definitely been interesting politically in the last few months. I've learned a lot of stuff about a couple people. Not bad stuff just I assume that everybody has kind of got a similar level of reasonability about their politics. It's like wow that's not reasonable at all. It's a lesson I've learned, lots of times in different contexts so I don't know why it's new again here. It's kind of interesting.

The political events that have unfolded have revealed the personal politics that are different. I don't know. I'm being as apolitical as possible in my professional career because [my field] is actually a fairly conservative field all told and I am not. There's that tension there. It's been interesting to have some conversations. I've had a couple of people, engage me and saying, "Well I'm not really happy with what's going on." It

²² Dana is a pseudonym

²³ Pseudonym

sounds like they're confessing. "I'm not really happy with what's going on. Can you validate this for me?"

Yeah my colleagues. I've been having conversations with them. It's been interesting and interesting wrinkle.

Professional Offices & Staff Outside of the College of Health

Alongside the staff and advisors in the College of Health, students are also establishing support networks with individuals in professional offices outside the college.

I have been going to Center for Ethnic Students Affairs, reaching out to Paul, Tricia and Portia, and then to the LGBT resource center with Kai, Kiko and Ella. I also highly value the space held, emotional and physical labor, and growth student groups I am in and scholars program such as beacon scholars with Emilio Camu, and Queer Students of Color as well as the Asian American Student Association which I was vice president of for one school year.

I usually either go to two spaces, either CESA or Beacon Scholars, just in the annex building. I usually, my friends are mostly there all the time because that's where we usually meet after class to relax. They're not like from our school or classes. It's really nice to have that support, we ourselves by like constantly motivating ourselves. It will be fine that person was problematic. It will all be ok. It's good to have that, especially when you don't identify as the majority on campus, to like have somebody there to be like, I don't. I may not understand, and I never would understand your identity or like we can connect because we do have those intersectional identities. It really does help me get through the day and really motivates me to keep going in the coursework.

AIRC...we're our own little community and we're all supporting each other to keep going to school, keep doing our best. It's really nice and supportive.

I find support with [staff] supervisors in my job on campus. I feel like every one of my supervisor is really approachable for support.

The university has a veteran support center, are helpful mostly logistical things. They do have meetings with the director to get voices of the student body who are veterans to try to enact change so recently veterans can now sign up for classes earlier, they don't have to wait for a specific deadline. That was a big concern, so there's a lot of support for veterans on campus.

There's someone in our program that has used Center for Disability and Access, and I know it's been helpful for her, 'cause she has a learning disability as well.

The diversity perspective that I find extremely helpful is knowing why and who I am, what my needs are and finding support immediately on campus. For instance, I found this mindfulness and the mindfulness center, you go down there and sit with other people...some of their free programs gave me the foundation to meet my challenges as well. I have physical activity needs being an athlete almost my whole life; to be able to find that through the Student Life Center here was really, really helpful for me.

Students who have been (or are currently) employed on campus articulated that they are provided with a unique and much broader support system that equips them with additional cultural (and navigational)

capital opportunities to build relationships with both staff members and faculty, and create community with others at the U.

I used to use the Center for Disability and Access (CDA), and there was a girl in my class who was having trouble reading, and I told her, “You could really benefit from what CDA offers.” And she had no idea that CDA was even something that she could take advantage of, and I thought that was really frustrating that the university doesn’t make a better effort to make students aware that they’re there because we pay a lot in student fees for them.

Working here, I’ve had welcoming experiences and dealing a lot with the staff or faculty a little bit closer, so that’s been a good experience.

Being a TA, too, there are several problems, like keep coming in...to talk to professors. There are professors that I feel more comfortable to talk to than the others...so I will go to the professors that I feel comfortable talking to, and they often provide me, at least, they listen. They don’t have to solve the problems, but at least they listen to it, and then, they just provide recommendations or suggestions, and then, it looks better, at least.

Support also means validating students’ experience; letters of recommendation written on their behalf; and being connected to potential funding opportunities in the form of scholarships. Advisors who are assisting students with navigating a complex system and connecting students to the “right” individuals to achieve their goals are particularly helpful for first-generation students who may or may not be exploring graduate school options, jobs, careers, etc. For some, it instilled ideas for opportunities and growth that they may not have been previously considering.

...Once I got the job in the department...I told [the faculty advisor] I was interested in a degree in [program], so she got me on the right path with talking to specific people in the department about potential programs and how to get into the Master’s program. Then, I went and talked to the bridge advisor who led me to the grad advisor. Once I told her my interest, she helped me to get to the other people I needed.

The advisors in the offices aforementioned have been so supportive in terms of just being there and validating me whenever I am venting and/or offering me help even if I do not need to such as connecting me to scholarships that are specifically fitting my identities. They have also provided to write letters of recommendation. My boss right now, Dr. Cameron²⁴ has been so supportive in my professional growth as a future health educator. We reached out to her and took me and another student as a research assistant where we code transcripts of physicians and exploring their identities and how their understanding of their socialized identities impact their patient centered care. She has guided me in my journey to graduate school and has offered to write me a letter of recommendation even before asking her. She also helped us get connected to presentation opportunities.

Family

Outside of the College and University of Utah, many students have a network of support systems that include their family. Specific family members served as sources of support for students:

My dog.

²⁴ Pseudonym

I have a wonderful wife that is very supportive and I'm very blessed. She deals with all my troubles.

My family and my wife are supportive kind of help through some of the tough times. I'll say that it used to be our chair and now it's our program director has been awesome and someone I look to for support on projects to try and be successful in and when I'm struggling in other areas and also kind of just working through some of the issues I had, yeah. She's been great.

I go to my sister and my husband.

I just find support from my roommate, he's the same, Korean...I feel comfortable speaking my own language in my own space.

CONCLUSION

In conclusion, students in the College of Health community are aspiring to increased feelings of community, open dialogues, educational development and training, connection to resources (mentorship and advising), increased visible diversity, equitable access to opportunities, and (more/better) resources. Thus, we summarize our recommendations to the College of Health in the following statement:

Establish a Forum for Continued Dialogue, Intellectual Exchange, & Sustained Interactions to Strengthen Community, and Relationship Building

*

Enhance Educational & Programming Opportunities and Explore Inter- and Multidisciplinary Curriculum Development

*

Empower Structural Opportunities Associated with the Cohort Experience, Experiential Learning, Pedagogy, Mentorship & Support

*

Expand Support and Mentorship for Historically Underserved Members in the College of Health

*

Diversify Communication Strategies to Increase Awareness on Policies & Processes, (Campus) Resources, Funding Opportunities, and Employment Related to Health

*

Improve Faculty, Staff, and Student Recruitment and Retention Efforts

*

Dedicate Time to Diversity Initiatives and Structural Changes to Foster Inclusive Excellence

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