Position Statement on the Promotion of Equity, Diversity and Inclusion in the MSc(PT) Program at McMaster University

The following statements are expressed to inform and guide a process of eliminating oppressive educational practices and content and maximize attention to an equitable learning experience. The MSc(PT) Program is committed to leveraging the broadest definition of inclusivity such that all individuals feel they are reflected in the content, faculty, staff, student body and environment through:

1. Encouraging self-awareness and personal growth processes, regarding values and beliefs, such that we can explore different perspectives, amplify voices of those with lived experiences of discrimination, while grounding our approaches in openness, compassion, and respect.

2. Creating and promoting spaces [within and outside the classroom] to support reflection and development of our own knowledge about local, national, and global issues through recognizing social inequity, privilege and promoting social justice.

3. Engaging in and supporting dialogue on all topics of health professional education, through active listening and respect, even when those conversations may be challenging and/or uncomfortable.

4. Establishing an environment where everyone feels they experience equitable education and opportunities to be successful.

5. Promoting a continuous process of critical reflection, learning and development for individuals and groups.

6. Facilitating processes that lead to continuous quality improvement informed by feedback from all stakeholder groups, including but not limited to the Program's admission process and curriculum renewal.

Example of a Current Strategy:

One way that all members of the McMaster Physiotherapy Community can contribute to establishing an inclusive and equitable learning environment is through the thoughtful preparation of any presentation content. To support the development of presentations which occur as part of the MSc(PT) Program, the following guidelines for staff, faculty, students and guests are recommended:

1. Always use patient first language (i.e. A person who has suffered from a stroke and not a stroke survivor).

2. Be thoughtful of all images (photos / stock art / images)
    a. If you are not sure if an image is appropriate, default to not including an image at all.
    b. If you are including images of individuals: ensure they are reflective of a diverse group of learners.

3. When making a presentation about a case scenario, do not make assumptions about the client(s) more than what has been provided (e.g. choose images to reflect the demographics that align with the description of the client in the case scenario).

4. Be open and receptive to discussions about presentation content – including dialogue about why an image may have elicited a specific response from others in attendance.

5. When conducting background research and developing your presentation, consider how patients/clients of different cultures, religions, ethnicities, genders or sexualities may present.

6. Prior to presenting your information to a large group, consider whether unconscious bias or assumptions exist. All efforts should be made to address these potential issues prior to delivering the information.

7. Where possible, include evidence and resources that includes/considers communities that are systematically excluded from current structures.

8. Always use a variety of inclusive pronouns i.e. she/he, him/her or they/them.