

E C 17th Annual Physical Therapy Education Leadership Conference October 28-30 | Milwaukee, WI



a collaborative effort by:





CREATING A CULTURE OF BELONGING IN HEALTHCARE EDUCATION:

LONG TERM TARGETED DEI DEVELOPMENT FOR ALL

Dr. Heidi Eigsti PT, DPT, PhD, PCS she/her/hers Dr. Lisa VanHoose PT, PhD, MPH, FAPTA, FAAPT she/her/hers



SESSION KEY POINTS

- Developing Intercultural competence is an individual and organizational responsibility
- Culturally competent organizations foster a sense of belonging and promote life-long learning and development for all stakeholders.
- Culturally competent academic healthcare institutions develop educators who use culturally responsive teaching strategies and graduate healthcare providers who are equipped to...
 - 1) meet the health care needs of a culturally diverse society
 - 2) advocate for health equity and access in systems and communities



Learning Activities

- Land Acknowledgement
- Centering Activity
- The Why?
- Discussion of Bennett's Developmental Model of Intercultural Sensitivity
- Building a Culture of Belonging
- DPT Student Intercultural Development Inventory Changes
- Faculty Development & Culturally Responsive Teaching
- Becoming a Culturally Responsive Academic Institution

We acknowledge in Milwaukee that we are on traditional Potawatomi, Ho-Chunk and Menominee homeland along the southwest shores of Michigami, North America's largest system of freshwater lakes, where the Milwaukee, Menominee and Kinnickinnic rivers meet and the people of Wisconsin's sovereign Anishinaabe, Ho-Chunk, Menominee, Oneida and Mohican nations remain present.

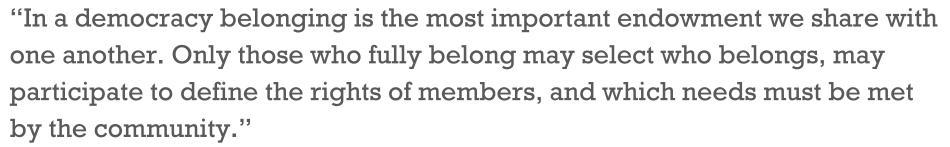
LAND ACKNOWLEDGEMENT





Exploration: Who Belongs?

- Identify who needs to be engaged
- Identify how to value and enable engagement

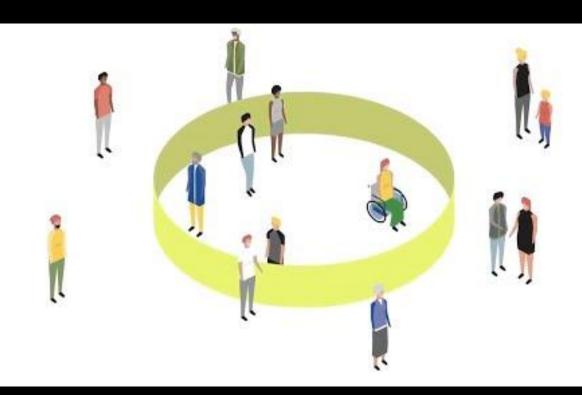


John A. Powell, Director, Other & Belonging Institute, Professor of Law, UC Berkeley

The Circle of Human Concern:

https://www.youtube.com/watch?v=Q9UaVaKtr7c





The Why: Education & training may not prepare health care professionals for real-world demands (Sheikh)



Inefficiencies

Misalignment
with the needs of
populations or
market demand



Underserved & Under-resourced populations

Aggregation
of professionals in
geographical regions or
specialties



Expensive Care

Curative care is incentivized over preventative care





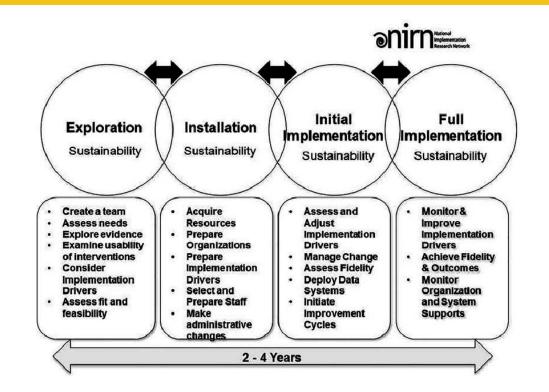


Creating a Culture A Belonging

Steps to Institutional Change

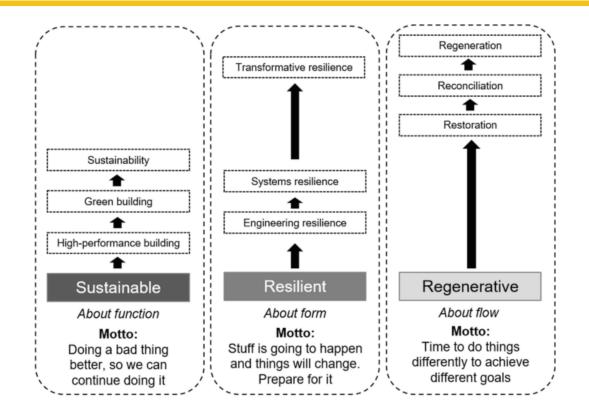


Implementation Science Framework



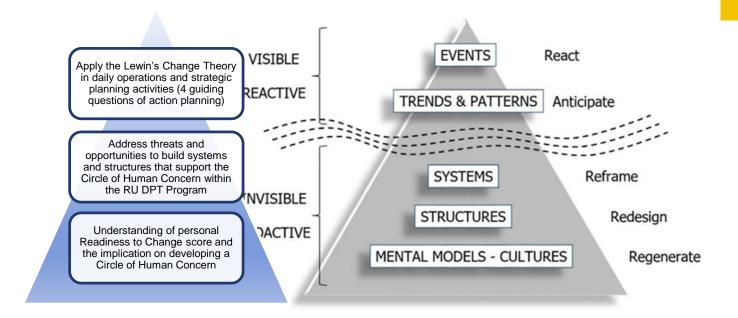


Regenerative Risk





SYSTEMS THINKING



University Mission

Regis seeks to build a more just and humane world through transformative education at the frontiers of faith, reason and culture.



School of Physical Therapy Strategic Planning Committees May 2021



Climate Community of Belonging

Safety

Diversity representation

Inclusive excellence



Curriculum Substantive Change

Culturally Responsive Teaching

Population Health

Social Justice

Intercultural leadership & advocacy





Community Partnerships & Social Responsibility

Clinical Experiences

Community Outreach

Intra & Inter Professional Engagement

Health Systems



APTA 2017 House of Delegates



https://sites.google.com/site/cross culturalcomptence/

CDC definition of Cultural competence:

" a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations."

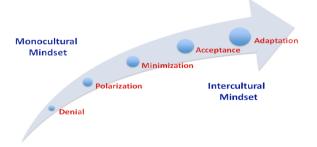


Cultural competence requires that organizations

have the capacity to...

- a. value diversity
- b. conduct self-assessment
- c. manage the dynamics of difference
- d. acquire and institutionalize cultural knowledge
- e. adapt to diversity and the cultural contexts of the communities they serve.
- f. incorporate the above in all aspects of policy making, administration, practice, service delivery, and involve consumers and communities.

Intercultural Development Continuum







social-identity dimension

encounters intercultural

intersection acceptaance development

skills

adaptation

defense

tegration

diversity competence

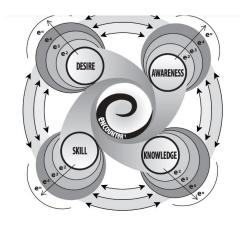
awareness

intelligenc

desire

Cultural Humility







incompetent

competent

competent



Campinha-Bacote (2002)



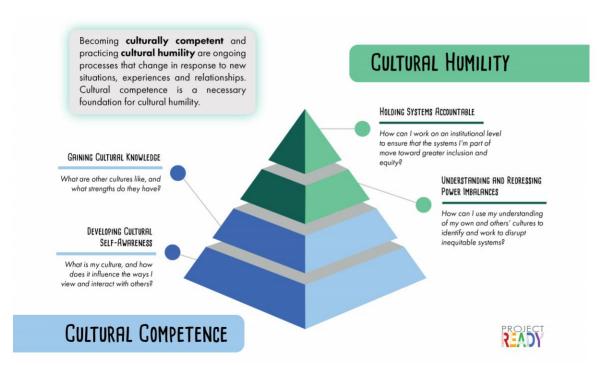
Expanded Cultural Groups beyond race/ethnicity/culture to include...

- Multiple Diversity Dimensions
 - Sexual orientation
 - Age
 - Dis-ability
 - Gender
 - Religion
 - Language
 - Political orientation
 - SES
- Commitment to Social Justice in Healthcare

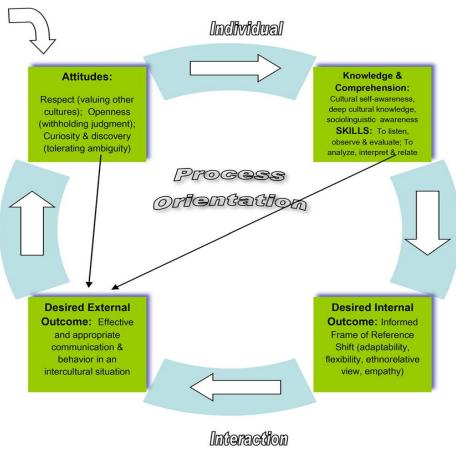
https://doi.org/10.3912/OJIN.Vol8No01Man02



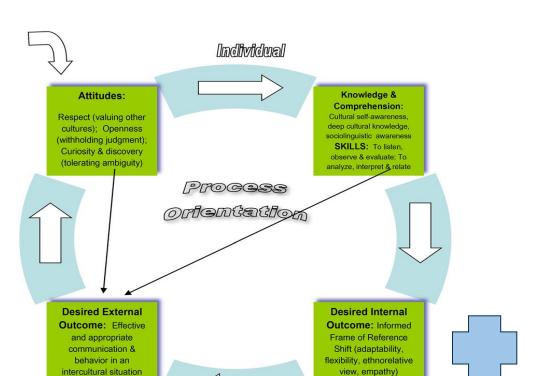
Bangs (2022) *JOPTE*



Process Model of Intercultural Competence



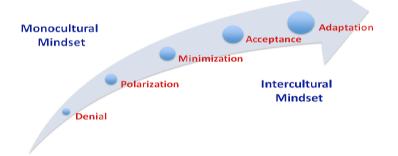






Intercultural Development Inventory (IDI)

Intercultural Development Continuum







Intercultural Development



The capability to shift cultural perspective and adapt—or bridge--behavior to cultural commonality & difference

- 1. Deep cultural self-awareness
- Deep understanding of the experiences of people from different cultural communities—in perceptions, values, beliefs, behavior and practices
- 3. Perspective shifts and behavior adaptation across these various cultural differences Copyright, 1998-2014, Mitchell R. Hammer, Ph.D., IDI, LLC, used with permission

Development of the (IDI®)

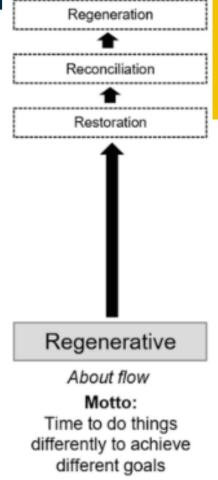


The(IDI®) was developed using rigorous psychometric protocols with over 10,000 respondents from a wide range of cultures.

- -Demonstrated content, construct and predictive validity in organizations and in educational institutions
- -Used for guided advisement by 2400 qualified administrators in 45 countries in health, business, spiritual care, community development and education
- -Generates individualized development plans based on identified mindset
- -Sensitive to change over time

+ Installation and Initial Implementation

- Pre-Consultation: Post CAPTE 10 yr re-accreditation ERA
 - Intercultural Leadership Development Curricular Thread (Established Model)
 - May 2021
 - Strategic Plan incorporating DEI
 - Faculty & Staff Intercultural Self-Assessment
- 1. Consultation: Dr. VanHoose (January & May 2022)
 - Reflection on past success
 - Assess readiness for change
 - Create sense of urgency
 - Align DEI goals with Strategic Plan
 - Identification of Resources



+ Installation and Initial Implementation



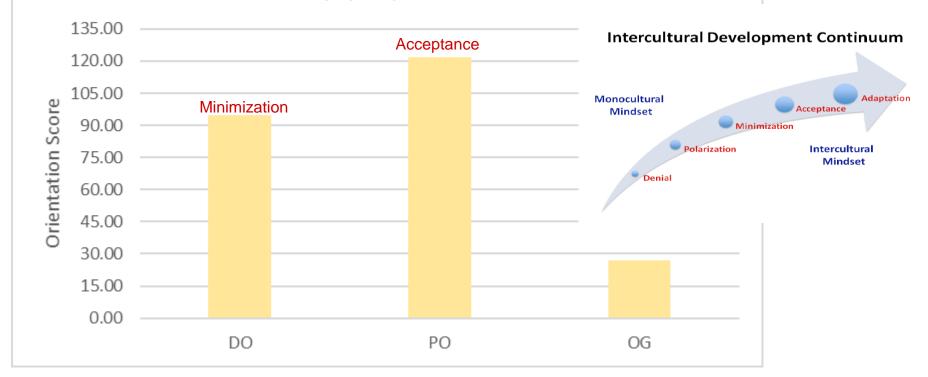
Community & Healthcare systems

Student Intercultural Development

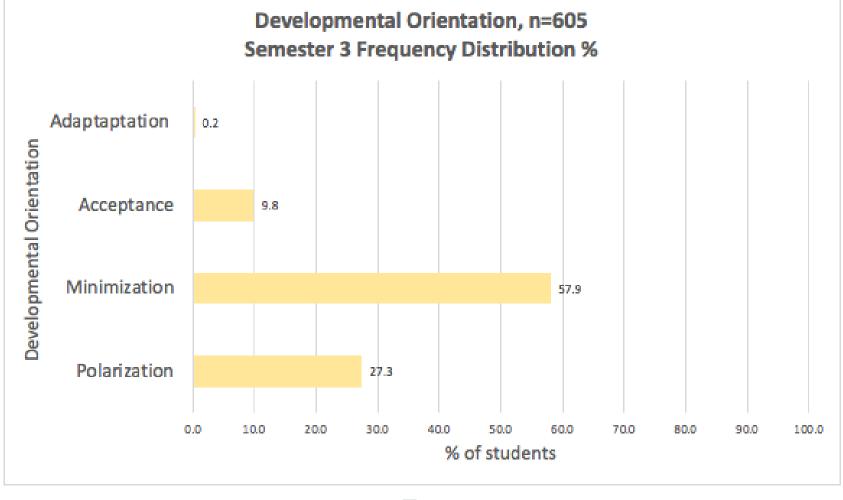
Curriculum & Clinical Experience



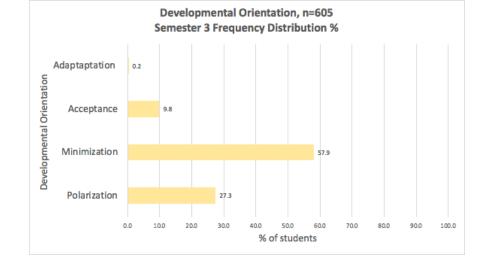
Developmental (DO) & Perceived (PO) & Orientation Gap (OG) Semester 3 n=605







Ethnocentric Orientations



<u>Polarization</u>: (27%) Views cultural differences in terms of "us" and "them". (Diversity feels "uncomfortable")

<u>Defense</u>: An uncritical view toward one's own cultural values and practices and an overly critical view toward other cultural values and practices.

Reversal: An overly critical orientation toward one's own cultural values and practices and an uncritical view toward other cultural values and practices.

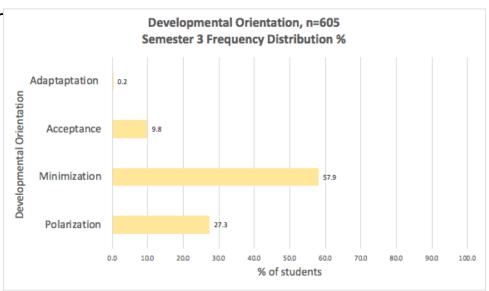
Transitional Orientation



Minimization: (58%) Highlights cultural commonality and universal values that

may also mask deeper recognition

(Diversity feels "unheard")



Ethnorelative Orientations



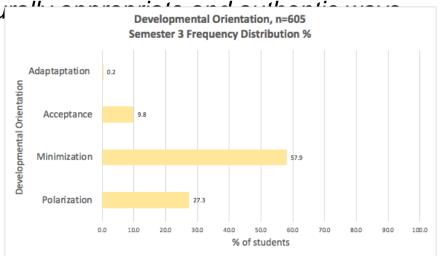
Acceptance: **(10%)** Recognizes and appreciates patterns of cultural difference and commonality in one's own and other cultures.

(Diversity feels "understood")

Adaptation: (.2%, n=1) An orientation that is capable of shifting cultural

perspective and changing behavior in culture

(Diversity feels "valued and involved")





Implications of operating in a Minimization orientation

- Providers who are functioning from a Minimization orientation, may be tempted to enter into an intercultural exchange by over simplifying the obvious similarities of people's physical biology
- Generalizations may be transferred to a subconscious assumption of similarities in healthcare needs, desires, behaviors and motivations.
- A Minimization mindset in healthcare providers has the potential to result in a healthcare system that insists on correcting an individual's healthcare values, beliefs and lifestyle choices to fit with the dominant culture expectations

Interventions & Assessment based on Student IDI-Learning Needs





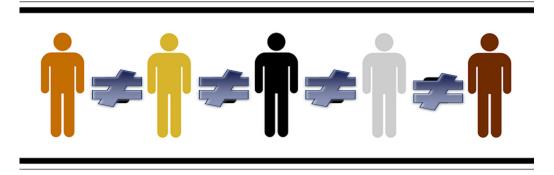
Building Culturally Safe Environments n=150

How comfortable do you feel discussing the following diversity dimensions relative to health outcomes, movement habits, or access to medical services from your personal experience? (1= Not very comfortable, 4=Very Comfortable)

Diversity Dimension	2025 avg	Diversity Dimension	2024 avg
Politics	2.84	Politics	2.65
Religion/Spirituality	3.11	Trauma	3.08
Trauma	3.12	Sexuality	3.12
Income	3.32	Religion/Spirituality	3.15
Sexuality	3.39	Gender	3.24
Physical Safety	3.42	Race	3.33
Race	3.43	Income	3.37
Gender	3.49	Mental or Physical Ability	3.41
Mental or Physical Ability	3.53	Physical Safety	3.48
Mental Health	3.55	Mental Health	3.49



From Polarization & Minimization to Acceptance







https://regis365-

my.sharepoint.com/personal/tmcgee001_regis_edu/_layouts/15/stream.aspx?id=% 2Fpersonal%2Ftmcgee001%5Fregis%5Fedu%2FDocuments%2FAttachments%2 FMcGee%5FIDI%20vid%2Emov&ga=1



Individual IDI Development Plan

- 1. Describe your culture. (4 sentences max)
- 2. Describe how your family's beliefs and behaviors around health, education, spirituality, community and relationships have influenced your cultural identity and your health and wellness beliefs and behaviors?
- 3. What is your overall IDI Developmental Orientation?
- 4. What new information from the IDI was most meaningful to you and why?
- 5. Compose 2 intercultural knowledge goals and 1 intercultural experience goal
 - a. (Relate goals to specific populations of interest, recognized bias, and a population you will likely work with in your upcoming clinical experiences)
 - b. Describe one strategy to address each of the above goals

Intercultural Development Plan Learning Opportunities

- Guided Advisement & IDI Plan: IDI
 - Zipcode analysis: Clinical Sites
 - Qualified Administrator
- Educational Websites
 - Culture of Health Panel
- Book Club
- Simulations & Case Studies
 - Motivational Interviewing: CARE measure
 - Tutorial Case
 - Interprofessional Cases
 - Implicit Bias

- University & Community DEI events
 - Attend a community support group
 - Campus Events, speakers and Dialogs
 - Service Learning
- Aesthetic Expression
- Theatre, Film Arts
 - Student Diversity sponsored
 Film nights
- Clinical Experiences & Intercultural Immersions
 - Domestic and International
 - Global Health Pathway
- Capstone Reflection





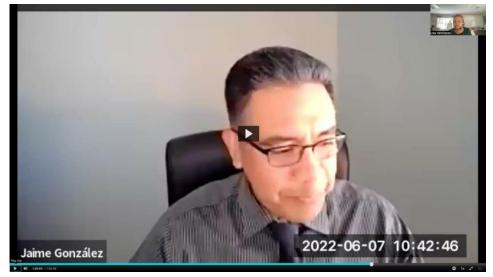


Culture of Health Panel



Jaime González: For the very kind invitation, it really is my pleasure to be here, I I happened to be Catholic that has definitely informed my worldview quite a bit.





Aesthetic Expression: Student Example





Called to Care (www.caremeasure.org)

Student CARE score =43.46, Physiotherapist CARE score=47.5 Normative values for all Physiotherapists

Varir Davaantila

This table compares your score for each of the ten CARE Measure questionss to those of other Physiotherapists. It tells you your average score for each question, the baseline (the average across all Physiotherapists) and where your average falls as a percentile compared to all other Physiotherapists.

Vaur Caara Dagalina

	Measure	tour Score	Baseline	Your Percentile	
	Making you feel at ease	4.2625	4.7751	Below the 5th percentile.	
	Letting you tell your story	4.2000	4.7245	Below the 5th percentile.	
	Really listening	4.4000	4.7597	Below the 5th percentile.	
	Being interested in you as a whole person	4.5000	4.7044	Between the 10th and 25th percentiles.	
Strengths	Fully understanding your concerns	4.3625	4.7325	Between the 5th and 10th percentiles.	
	Showing care and compassion	4.6125	4.7554	Between the 10th and 25th percentiles.	
	Being positive	4.5125	4.7632	Between the 5th and 10th percentiles.	
	Explaining things clearly	4.2405	4.7899	Below the 5th percentile.	
	Helping you to take control	4.2250	4.7373	Below the 5th percentile.	
	Making a plan of action with you	4.1392	4.7595	Below the 5th percentile.	
	Score	43.4625	47.4993	Below the 5th percentile.	

Manaura

Clinical Education & Intercultural Immersion

1. Share Clinical stories of intercultural encounters where you learned something about yourself or others that will impact your future practice?

1. Were safety, comfort and needs of patients from diverse populations considered in planning your patient services?

NOTE: Consider all diversity dimensions: generational, SES, political, spirituality, ethnic, racial, mental health, abilities, shelter...)



Student Intercultural Clinical Reflection

As I reflect on CE I and look ahead to my next clinical experience, I have noted some of the stress points that I, at times, struggle to appropriately navigate.

•managing conflict around conversations that include differing views from different cultural communities, effectively voicing concerns I have that are needed to support my own cultural identity in workplace environments

ensuring all perspectives and communities are heard when making team decisions.



Student goals for upcoming clinical experience

- increase the advocacy for my own cultural community, especially in the professional light.
- 2. identify 1-3 actionable steps that I have taken to increase awareness of Black and Brown voices, especially in the physical therapy profession.
- 3. use my leadership skills in the clinical environment to challenge the process of diversity, equity, and inclusion efforts
- 4. engage in conversations with colleagues about the structure, support, and resources the clinical environment provides (or does not) for those who are a part of marginalized communities.

I look forward to seeing how my upcoming inpatient clinical in Denver supports my goals and enables me to challenge the process in a way that supports underserved populations.

Capstone Intercultural Journey

A dónde vas?

Self assessment & Reflection





Practice Recognizes difference in values Leads others in exploring Expresses personal values, and beliefs and analyzes the values, and beliefs and recognizes biases and requests L1. Model the

by articulating the merits developing a shared vision of alternative ideas and within a group. works collaboratively

a developmental model of intercultural sensitivity. In: Education for the Intercultural Experience. Intercultural Press; 2001.

origins of diversity.

The Leadership Advocacy Diversity Inclusion and Equity Rubric

Adapted from works of Kouzes JM, Posner BZ. Learning Leadership: The Five Fundamentals of Becoming an Exemplary Leader. 1 edition. Wiley; 2016. And Bennett M. Toward

REGIS WUNIVERSITY

Leading Teams (10)

Explores opportunities to learn Explores opportunities for about others and seeks personal growth and develops feedback on how personal personal mission statement.

Leading Others (9)

alternative perspectives from

others.

Shared Vision behavior impacts team towards a common goal. function.

Helps team move forward Works with others toward

Leading Self (8)

Identifies personal and

professional values/ethics

contributions

Exemplary Leader

(12.5)

affirming individual

L2. Inspire a

Way

Exemplary

The Leadership Advocacy Diversity Inclusion and Equity Rubric						
		Exemplary Leader (12.5)	Leading Teams (10)	Leading Others (9)	Leading Self (8)	
Exemplary Practice						
L3. Challenge the Process		Demonstrates commitment to advocacy efforts at an individual and societal level in the professional organization, community and clinical setting.	Engages others in an advocacy activity related to professional practice, social justice, health equity		Identifies advocacy issues related to professional practice, social justice and health equity	
		Integrates alternative, divergent or contradictory perspectives to create a new solution or new knowledge.	•	_	Identifies a problem and seeks a solution.	

1.



The Leadership Advocacy Diversity Inclusion and Equity Rubric						
Exemplary Leader (12.5)		Leading Teams (10)	Leading Others (9)	Leading Self (8)		
Exemplary Practice						
	Addresses destructive conflict directly and helps to manage/resolve it in a way that strengthens relational cohesiveness and effectiveness	Identifies and acknowledges conflict and stays engaged with it.	Identifies conflict and redirects focus toward common ground, toward task at hand (away from conflict)	Privately accepts alternate viewpoints/ideas/opinions		
L4. Enable Others to Act	Engages team members in a way that facilitates their contributions by constructively building upon or synthesizing the contributions and noticing when someone is not participating and inviting them to engage	facilitate their contributions by	Engages team members by taking turns and listening to others.	Share own ideas and offers feedback to others.		

Exemplary **Practice**

Exemplary Leader (12.5)

Motivates teammates by expressing confidence in

the team's ability to

understanding.

members contributions and

skillfully negotiate a shared

the importance of the task to

accomplish goals L5. Encourage Identifies cultural differences Articultates a complex Recognizes and participates in the Heart understanding of cultural cultural difference and begins to and seeks understanding of differences & is able to explore behaviors to negotiate a the complexity of another

beliefs and practices and perspective. health outcomes.

The Leadership Advocacy Diversity Inclusion and Equity Rubric

Leading Teams (10)

the importance of the task and

the team members ability to

shared understanding.

accomplish it.

Leading Self (8)

Seeks to understand the

and evolution. Views the

so through own cultural

complexity and emergence of

their own cultural orientation

experience of others but does

Leading Others (9)

Motivates most team members | Motivates one member of the | Contributes to the team by

by expressing confidence about team by expressing confidence completing a component of

culture in relation to its

history, SSDOH, values,

communication, economics,

la task.

in their ability to contribute to the task.

Student Directed DEI Initiatives: Creating a Culture of Belonging



Affinity groups Mentor junior high and highschool students from under-resourced communities

Medical Spanish lunch
Book clubs, movie nights, community events.

DEI blog https://regisdpt.org/diversity-and-inclusion/

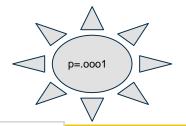


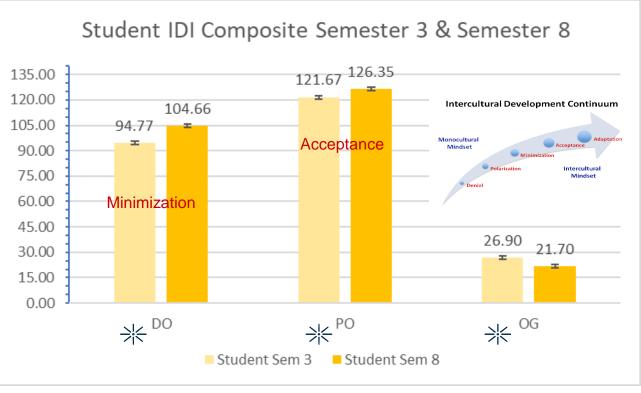
Graduate Exit Survey

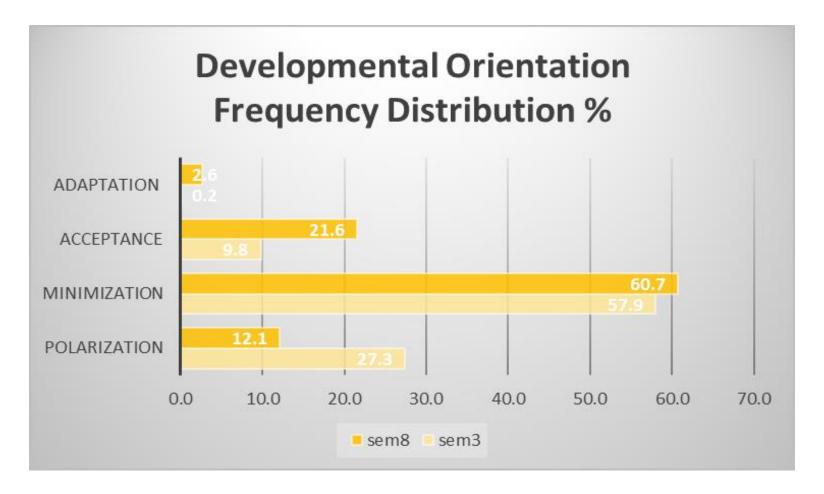
#	Field	Well Prepared	Adequat Prepare		Inadequat Prepare		Total
1	I am aware of the complex nature of my own culture and how it influences my worldview	70.83% 51	29.17%	21	0.00%	0	72
2	I can Identify patterns of cultural similarity and cultural difference during a patient encounter.	62.50% 45	36.11%	26	1.39%	1	72
3	I seek to understand the complexity of another person's culture as it relates to history, values, beliefs, lifestyle choices, communication and resources.	77.46% 55	21.13%	15	1.41%	1	71
4	 I am capable of navigating most intercultural encounters in order to build a therapeutic alliance. 	63.89% 46	34.72%	25	1.39%	1	72
5	I actively acknowledge values, perspectives and victories in diverse groups by creating a spirit of community.	66.67% 48	33.33%	24	0.00%	0	72



Student Composites n=605 (class 2015-2022)







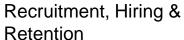


Questions and Answers



Faculty & Staff Intercultural Development

Curriculum & Clinical Development



Circle of Human Concern



Scholarly Activity & Continual Improvement



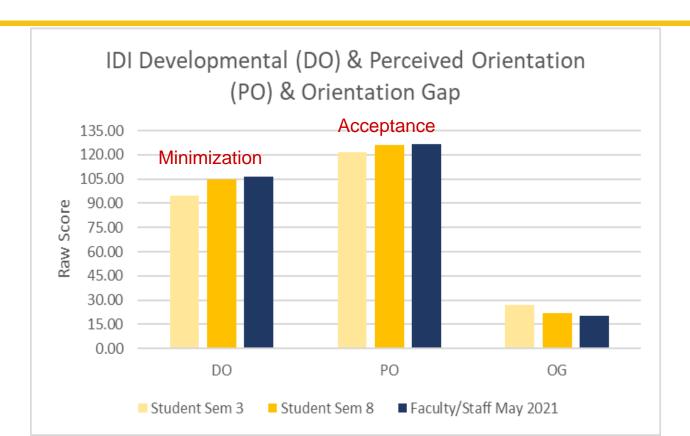


A cultural competent educator/trainer should...

- be familiar with literature.
- model application in life-long learning and practice.
- demonstrate use a wide variety of teaching methods and evaluative techniques and be able to flexibly adapt them to the learning situation and level of the trainees.
- skilled in facilitation and management of diverse opinions.
- recognize the limits of his/her knowledge and be ready to enrich the training with contributions from community members, traditional healers and educators from various disciplines.

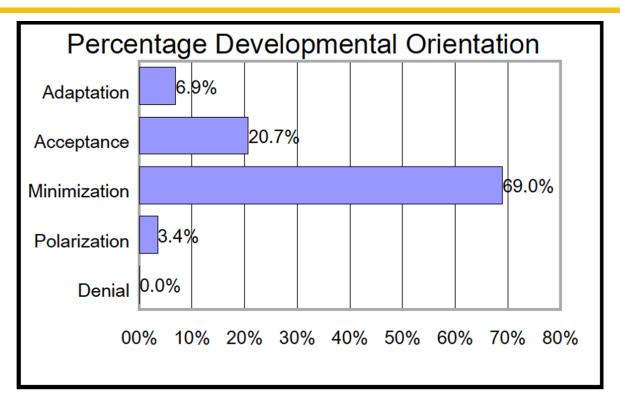


IDI Composites Student (605), Faculty (21) & Staff (5)





Faculty & Staff





Minimization Orientation

"The group's level of intercultural competence suggests they will likely be challenged to identify cross-culturally adaptive policies and practices that can guide common efforts across differences."

"It is likely that the group will struggle with making decisions and solving problems when cultural differences arise that demand creative solutions in ways that value the differences."

Moving from Minimization & Acceptance



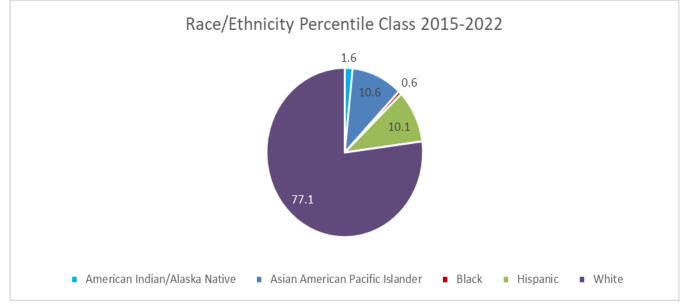


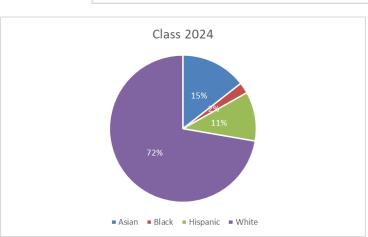
Admissions Task Force: Implications of a Minimization Orientation

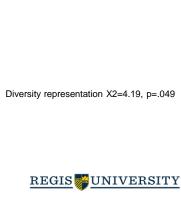
- **Short term:** Investigate resources for implementing an interview process that would be more equitable and accessible for students of diversity
 - Class 2025: changed interview questions/scoring
 - Class 2025: enhanced message of inclusion throughout admissions experience.
 - Class 2025: Four evening events highlighting program/student and alumni stories
 - DEI, leadership, global health/service, clinical education and research

Long term:

- Develop a Holistic Admissions Process for Admissions Cycle beginning July 1, 2022.
 - Create a proposal for a holistic admissions process and present to DPT faculty at RLM in January, 2022
- Work with the Outcomes committee and Office of Admissions in developing an ongoing assessment plan to assess if the new Admissions Process is meeting the needs of the School and Program Outcomes by May 1, 2022.
- Propose Student Success Model and Committee workload for AY 22-23 by April, 2022











- Develop a Comprehensive DEI assessment and development plan to address all four strategic planning team DEI goals Dec, 15, 2023.
 - a. Framework for Case Studies
 - b. Framework for Presenting Evidence
 - c. Presentation Aggregate outcomes associated with PT diagnosis and SSDOH
- 1. DEI committee members will participate in Ujima Institute's Community of Practice for Inclusive Excellence AY 22-23 program and bring resources to SOPT to support DEI goals and objectives. (September 2022-May 2022)
- 1. Compose a DEI statement, mission and vision with input and feedback from community partners by December 1, 2022.
- 1. Create a DEI SOPT advisory council composed of members from the university faculty and student body, community, and healthcare systems, who can bring diverse perspectives and recommendations to the committee (diversity dimensions include but not limited to sexual orientation, gender ID, generation, ability, race/ethnicity, spirituality, political, SES, mental health) August 1, 2023
- Communicate DEI goals, objectives, implementation and assessment plan to extended community members via SOPT DEI webpage by February 28, 2023

Curriculum Committee Course Reviews

VI. Curricular Structure & Central Concepts

Curricular Framework	Comment on integration within the Course
Foundation/Application/Management	
Lifespan	
Motor Theory	
HOAC	
ICF	
The APTA Guide Terminology	
Biopsychosocial Model	
Diversity, Equity and Inclusion	

Professional Development Plan: Annual Assessment

PURPOSE

The purpose of this document is to guide faculty in setting short-term and long-term faculty development goals and annually assessing their progress toward these goals. This plan develops from a process of self-assessment through the reflections of the faculty member and dialogue with their assigned administrator(s). Using this collaborative approach, faculty members set professional goals that address both personal and unit needs, review progress towards goals and identify the resources that are needed to achieve these goals. The process is intended to appropriate preparation for promotion in rank.

The Faculty Self-Assessment and Professional Development Plan includes the following areas:

- 1. Teaching assessment
- 2. Service assessment
- 3. Scholarship assessment
- 4. Personal development assessment
- 5. Professional development plan

Professional Development Plan: Annual Assessment

Leading with Cultural Sensitivity

- a. Fosters an inclusive work climate
- b. Affirms diverse contributions to a shared vision
- c. Uses emotional intelligence & awareness of personal biases to effectively navigate personal and professional interactions
- d. Demonstrates commitment to being a part of the solution to dismantle disparities in health access and equity at an individual and societal level
- e. Addresses destructive conflict and helps to manage it in a way that strengthens relational cohesiveness and an inclusive climate.
- f. Establishes mentor/mentee relationships to support the development of inclusive leadership practices
- g. Uses culturally responsive teaching strategies
- h. Promotes inclusivity when conducting scholarly work and presenting evidence
- Seeks to understand disparities in educational preparation and outcomes in persons from minoritized populations and uses resources to support the academic success of all students
- j. Integrates knowledge of structural and societal determinants of health when teaching in content area of expertise.
- k. Recognizes leadership strengths/challenges and formulates a plan for leadership development

Added a Question to Student Evaluation of Affiliate Faculty

The faculty member...

	Strongly disagree	Disagree	Agree	Strongly Agree
1	ı	2	3	4
promoted an inclusive learning environment. (if selected disagree or strongly disagree, please comment in text box provided)				

Questions and Answers



Community Intercultural Development

Interprofessional Collaborative Practice



Needs Assessment



Building a Larger Ecosystem of Education

Students' education or professional development is bigger than our one program

We have to collectively develop and care for our students

- External programs
- External mentors
- External learning activities

Although it is external, it is part of the educational ecosystems



Ujima Institute Community of Practice: Regis Interdisciplinary team of 12

University: ODEIE

University: World Languages, Arts, Humanities

College of Health Professions: Diversity Committee

School of Physical Therapy: DEI Committee

Clinical Partners: Expanding Diversity & Training

Community Partners & Service Learning

Highschool and Junior Highschool Campus/School Outreach Programs

Global Health Pathway: Domestic & Intn'l immersions

Professional Engagement & Advocacy

Health System Collaboration

Q&A



"It is my permanent openness to life that I give myself entirely, my critical thought, my feeling, my curiosity, my desire, all that I am. It is thus that I travel the road, knowing that I am learning to be who I am by relating to what is my opposite. And the more I give myself to the experience of living with what is different without fear and without prejudice, the more I come to know the self I am shaping and that is being shaped as I travel the road of life." – Paulo Freire



THANK YOU TO





for sponsoring ELC 2022 Educational and Platform presentations!



Join us for ELC 2023 in Philadelphia!

Save the date:

October 13-15, 2023

pteducationleadershipconference.org





Appendix



Related-Samples Wilcoxon Signed Rank Test Positive Differences 300 Negative Differences Number of Ties = 292 Frequency 200 100

PostIDIDO - PreIDIDO

2.00

3.00

4.00

1.00

-1.00

.00

Class 2015 -Class 2022 Demographics n=616

cids 2015 cids 2022 beinographics ii-010			
Ethnicity/Race	percentile		
American Indian/Alaska Native	1.6		
Asian American Pacific Islander	10.6		
Black	0.6		
Hispanic	10.1		
White	77.1		
Gender ID			
Male	41.88		
Female	57.95		
Non-Binary	0.16		
Age (years) Semester 1	years		
	25.5		
mean (SD)	(3.73)		
range	21.1-43.5		