10. Norwegian Enough? The Significance of The Body in Recruitment of Immigrants in Physiotherapy Education

TONE DAHL-MICHELSEN

ABSTRACT Why are immigrants underrepresented in physiotherapy education? Based on fieldwork in a physiotherapy education, I explore how immigrants' understanding of body can affect their study choices. The study indicates that physiotherapy education expects a 'Norwegian' understanding of the body and that student's experience of mastering depends on whether they succeed in adapting to this expectation. Other reasons for the underrepresentation of immigrants in the physiotherapy program are also discussed.

KEYWORDS: BME students | physiotherapy education | body | recruitment

10.1 INTRODUCTION

Norway is home to more than five million people and currently, ethnic minorities comprise 13, 8 % of the population, which is becoming increasingly more ethnically pluralistic, especially in larger cities (Statistics Norway, 2017). However, higher education does not mirror this increased ethnic plurality – and some studies have an underrepresentation of immigrants, of which physiotherapy is an example. Politically, enhanced diversity among the professionals, is considered an answer to how professionals are to give equal services to an increasingly diverse population in Norway (Drange & Helland, 2017; Leseth & Solbrække, 2011). Yet, at the same time, free choice of higher education is highly valued and politically there is a wish that the diversity in the student population regulates itself. For example, there is resistance towards allocated quotas as a way of counterbalancing the lack of minority students in studies where they are underrepresented. Thus, in Norway, students' educational choice in general and that of minority students in

particular, is of political concern. Concerning representation, minority groups are overrepresented both among those who drop out early and among those who are most successful in completing their educations (Drange & Helland, 2017, p. 155). Whereas non-western immigrants are overrepresented in medicine, odontology and natural sciences and mathematics (master's level), they are underrepresented among preschool teachers, teachers and in social welfare education (Drange & Helland, 2017, p. 156). In nursing, the minority and the majority populations are almost similar, however there are significantly fewer minority students among the descendant (Drange & Helland, 2017, p. 157). Physiotherapy, being the third largest health profession, after nursing and medicine (Nicholls, 2018), differs from both medicine and nursing when it comes to recruitment of minority students, which makes it interesting to study the case of physiotherapy education more closely.

The undergraduate program in physiotherapy in Norway comprises a three-year bachelor's degree. To become an authorized physiotherapist, the students in addition need to do a one-year internship, half a year in hospital and half a year in municipality. There are five bachelor programs in physiotherapy, located in the cities of Oslo, Bergen, Trondheim and Tromsø; four are public and one is private. In the private program, the students' first year is in Oslo (at Bjørknes – a private school) and then the second and third years are in the Netherlands (Bjørknes høyskole, 2018). Data from Statistics Norway (SSB) discloses that 4, 9% (43 of 884) of physiotherapy students in the public bachelor programs in Norway have immigrant backgrounds¹ (data count by 1.10.2017). In comparison the proportion of immigrant students among all students in Norway is 13,41% (Tønnessen, Larsen and Fimland, 2017) and thereby similar to the representation of immigrants in Norway. At Oslo Metropolitan University, which is located in Oslo, the capital of Norway, where most of the immigrants in Norway live, there were 7, 6 % students with immigrant backgrounds in the bachelor program in physiotherapy (26 of the 43 immigrants were studying here). In the private bachelor's degree program, where the first year is located in Oslo, there were 9 % students who had immigrant backgrounds (4 of 44) (Nygård, 2018).

There might be several reasons explaining the low recruitment of students with minority backgrounds in the physiotherapy programs in Norway. First, immigrants might be less familiar with physiotherapy education, which was the situation among immigrants among UK school and college students (Greenwood & Bithell, 2005). In their study, white participants were significantly more likely to

^{1.} Immigrants and Norwegian-born with immigrant parents.

consider physiotherapy as a career compared to participants from minority ethnic groups. In contrast, awareness of medicine and nursing as degree courses was greater and a career in medicine was more popular among participants from minority ethnic groups (Greenwood & Bithell, 2005; Yeowell, 2013 a and b). Second, and related to the first reason, is the low proportion of physiotherapists with immigrant backgrounds. Consequently, immigrants have fewer role models to relate to regarding their educational choice. Previous research has demonstrated that physiotherapists are important role models for physiotherapy students (Öhman, 2001) and students enrolled in the physiotherapy education tell that experiences with own treatment by physiotherapists were important for their own choice of physiotherapy as a career (Dahl-Michelsen, 2015). Lack of role models for BME (Black Minority Ethnic) students in physiotherapy are revealed in studies from UK (Yeowell, 2013 a and b). Third, it might be that many immigrants for several reasons do not share and cannot easily adapt to the bodily notions presupposed in physiotherapy programs. The overall plan, which regulates the content of all the physiotherapy programs at bachelor level, states that students are to experience both the 'patient role' and the 'therapeutic role' through close collaboration, including exchange of experiences, with other students during skills training (National Curriculum for Physiotherapy Education, UFD, 2004, p 11). Thus, in skills training classes, students serve as bodily models for other students' learning. In the role as therapist, students are most often dressed in uniform, whereas in the role as patient they are often undressed to the level of their underwear (Dahl-Michelsen & Nyheim Solbrække, 2014). In other words, being comfortable with or at least able to undress in front of others is an implicit requirement in the education of those becoming physiotherapists. Furthermore, the ability to transcend traditional gender norms is important to be seen as a successful physiotherapy student in the Norwegian physiotherapy education (Dahl-Michelsen, 2015). Hence, for many students, and maybe in particular for some young female students with immigrant backgrounds, the education presumes a notion of the body that might make it difficult to become a physiotherapist. Summing up, there is a lack of knowledge regarding why immigrants are underrepresented in physiotherapy education. Furthermore, we do not know what cultural notions are important in physiotherapy students' professional training. Thus, in this paper, I explore the significance of the body in recruitment of immigrants in physiotherapy education by addressing the following two research questions:

1. What kind of cultural notions of the body are significant in physiotherapy students' professional training? 2. In what ways are majority and minority students' cultural notions of the body similar and different?

Whereas I will explore and discuss these research questions in the result section, I will address how those cultural notions of the body, being significant in the professional training of physiotherapy students, might influence recruitment of minority students to the physiotherapy program, in the discussion section. Here I also will discuss what we can do to increase the proportion of immigrants into physiotherapy education. Taken together, the result section and the discussion, address some aspects regarding the lack of diversity in physiotherapy education and what might possibly contribute to change in this regard.

10.2 METHODOLOGY

This chapter derives from a qualitative study (PhD), which focused on students' processes of becoming physiotherapists in a broad sense (Dahl-Michelsen, 2015). The empirical material is based on participant observation and qualitative interviews. The participant observation was conducted in two different courses and includes 165 students and 8 teachers attending skills training in the first year of a bachelor's degree programme in Norway. The interviews comprise 16 students (out of 55) who were attending one of the two courses observed.

Regarding selection criteria for the interviews, the interviewees were selected to ensure appropriate representation of the variations observed among the students in the classes. Gender, age and social orientation were emphasized. Eight female and eight male students were interviewed. The student respondents were selected to represent the age range observed; the interviewees were between 19 and 35 years old. Regarding social orientation, both women and men who were viewed as 'active' or 'passive' were included. The students categorized as active were those who spoke louder, more frequently and more animatedly than those characterized as passive. Among the 55 students who participated in the course from which the interviewees were recruited, there were three students with minority backgrounds. One female student with a non-western background and two male students with western-backgrounds. The female student had not lived very long in Norway, which was the same situation for one of the two male immigrant students with a western background. The female student with a non-western background and the male student with a western background who had lived in Norway for a long time, were included in the interviews. The study was authorized by the Norwegian Social Sciences Data Service. All the students and teachers in the classes as well as the interviewees provided written consent. The names referred to in this chapter are pseudonyms.

10.3 ANALYSIS

The analysis is empirically inspired, being an inductive and bottom-up analysis (Patton, 2002). In the analysis, the original empirical material is re-analysed for the purpose of this study. First, I conducted a thematic analysis where the data set including the majority students was coded for issues of the body. Second, the codes were developed into themes identifying cultural notions of the body. Third, similarities and differences concerning how the majority students dealt with the different cultural notions of the body were analysed (Creswell, 2007). The analysis identified three themes, which represented the case of the majority students. Fourth, based on the empirical data from the observation and interviews with the two immigrant students, I developed two cases. In this analysis, the case of Adya and the case of Florin involved detailed descriptions of their individual story (Creswell, 2007). Fifth, these stories were then compared for similarities and differences between their individual story and the case of majority students, and between the stories of the two minority students

Notably, the sample of the minority students lacks diversity, which is a concern of this study. Put differently, as there were few students with minority backgrounds in the present cohort, there might be variations that a broader material including more minority students would have brought to the fore. However, the strength of the cases is that they allow for enriched data and the ability to go deeper into the material. Moreover, the results can be considered analytically generalizable, that is they can apply to situations and cases that are similar to the ones in the present study (Kvale & Brinkmann, 2009). Nevertheless, there is a need for more studies in this area.

10.3.1 CULTURAL NOTIONS OF THE MAJORITY STUDENTS

The significant cultural notions of the body among majority students were found to be the *sporty body, the scientific body and the social body*.

First, working towards the goal of a healthy population by helping individuals with their somehow troubled bodies and teaching them to enjoy physical activity and movement was in students' view the overall aim for physiotherapists. In order to do so, students believed that the *sporty body* was very important, both in terms of students themselves having a sporty body and in aiming to make people sportier

(and thereby healthier). Being sporty themselves displays a necessary trustworthiness in motivating people to become sportier. Students viewed a well-trained and sporty body as a marker of such trustworthiness. As all students somehow related themselves to a sporty body, being sporty acted as an inclusive practice in terms of being a marker for sodality among students in physiotherapy education. The necessity of being sporty for being seen as a suitable physiotherapy student was however stronger for male students than for female students. Male students who were considered as 'ordinary sporty' and not 'hyper-sporty' somehow strove to be seen as trustworthy physiotherapy students (see Dahl-Michelsen, 2014a).

Second, during its history, the physiotherapy profession has been closely allied to medicine, and physiotherapy strategically used the significance of the natural science to become a recognised and well-acknowledged profession (Nicholls, 2018). The significance of the scientific body was in this study found as tacitly embedded in the contextual framing of the skills training classrooms. In example, the classrooms had many benches, which stood in lines and rows connoting the biomedical and scientific body by virtue of their mechanical and medical design. Anatomical images of the body along with pictures of living humans being decorated the walls in the classroom. Models of skeletons and anatomical models of different body parts and body joints (e.g. shoulder, knee, and ankle) in glass cases also evidenced the significance of the biomedical and natural scientific body (see Dahl-Michelsen, 2014b). In the interviews, the majority students emphasized the scientific aspects of physiotherapy education when reasoning why they choose to apply for physiotherapy. For example, several of the students had a bachelor's degree in sport or in physical activity; they emphasized the public view of physiotherapy as scientific as important for why they choose to continue with physiotherapy education. They believed the scientific trust of the public provided the physiotherapist trustworthiness. The interviews show that before embarking on the formal program the majority students associated science largely with natural sciences and believed the physiotherapy education should teach much anatomy and biomechanics.

Third, in order to fulfil the overall aim of physiotherapy: making patients enjoy physical activity and movement, students also emphasized a need for physiotherapists to be social. In the interviews, the majority students positioned themselves as someone suited to become a physiotherapist in terms of their social skills. These skills related to being good in communication and in general having relational competence. In the skills training classes, students worked in pairs alternating in the roles as patient and therapist. In the role as patient, the students wore underwear and short shorts; most of them used sport shorts, however some female students wore thick, tight and short cotton shorts. Thus, in these classes, students' bodies are accessible as objects to other students' learning (see Dahl-Michelsen & Solbrække, 2014). Coping relatively unaffected with undressing to the level of underwear and being an object of teachers' demonstrations and co-students' practicing was revealed as an informal competence requirement in these classes. Put differently, the social body here implies both skills in communication, sociability with patients and handling undressing and almost naked bodies as somehow natural.

10.3.2 CULTURAL NOTIONS OF ADYA

Adya is 35 years old and has lived in Norway for about five years. She moved to Norway because of her husband's work (he is not Norwegian; however, he has a western background). They have two young children. Adya lived the 30 first years of her life in India and Nepal and has a bachelor's degree from India. She also has studied and lived in other places in Europe as well.

In a similar manner as the majority students, Adya, viewed the goal of physiotherapy to be to make the population healthier by making people enjoy movement, help those with troubled bodies to relieve pain, and increase their level of function. In the interview, we talked about what kind of physiotherapy she wanted to work with after graduation, and here her non-western background came up as a topic. She said:

I do not need to be in a permanent tenure. I like to change, to move around and try different things. In our culture in India and Nepal, and particular in Nepal, there are huge amounts of people having problems with joint and muscles and so on. But there it is not common to go and see a physiotherapist because we do not have so many physiotherapists. Thus, I really think I can use my physiotherapy education there... but it is not so usual in Nepal and India. Here [in Norway] everybody knows and understand what it is... and it is a bit of luxury to go to a physiotherapist in India. But I have not thought that much yet on where to work.

In this extract, Adya points to how physiotherapy has a different position in India and Nepal compared to Norway. On the one hand, she thinks that people living in India and Nepal have a need for physiotherapy, and thus believes there is a market for her as a physiotherapist. However, at the same time she notes that as the population in India and Nepal is unfamiliar with physiotherapy, this might also be a challenge in terms of access to a market. She also points to how physiotherapy is seen as a luxury, which is in line with physiotherapy being a white privilege in many non-western countries (Dahl-Michelsen, 2015; Mason & Sparkes, 2002; Yeowell 2013 a and b).

In terms of being sporty, Adya positions herself in the group of 'ordinary sporty' students. She tells that she previously has done a bit of running, and she has done a lot of yoga and is educated as a yoga instructor. Now she mostly is active in playing with her two kids. Notably, not being 'hyper-sporty' is not a problem in being seen as someone suited to become a physiotherapist for female physiotherapy students. As most of the female majority students were not 'hyper-sporty' either, Adya is here similar to most of the female majority students. Furthermore, in a similar manner as the majority students, she emphasized the scientific and social profile of the education as important for choosing physiotherapy. In the interview, she said:

I liked teaching yoga and being together with people. You help people and also get so much back from them. But I experienced that after class people came to ask me about their different bodily pain and conditions and I could not help so much.... Yoga is not acknowledged in the same way [as physiotherapy]. I thought that I wanted that kind of education [physiotherapy].... I know that minority students do not so often chose physiotherapy, but nursing or medicine instead. I considered nursing but thought that nursing is not something for me. The surroundings at hospital with the sterile [equipment] and it is a bit heavy and I thought I would like more to work with muscles and pain, and in physiotherapy, I do not need to work with blood [laughs]. In addition, I think that physiotherapy is more autonomous and also you carry it with you all the time, you are not so dependent on the equipment.

Adya's reasoning for choosing physiotherapy is similar to that of majority students who also emphasize that they chose physiotherapy because it is an autonomous profession. Furthermore, her experience with undressing is quite similar to the majority of the female students:

Being undressed... I think that in the start, we are a bit sceptical and you know shy... But it gets into being very practical and very different, our thinking gets different, it is clinical, focused on what we are going to do.... However, if I am to work with physiotherapy in India and Nepal, I have to change many things. They are not familiar with undressing in front of others and moving [undressed] in front of others. So instead of wearing shorts and bras I have to find, yes other thinner clothes so that it is better for them so that they do not feel completely [lost]... Yes, it has to be within their own limits. It is cultural differences....

Adya positions herself as someone who is able to fit in with the easiness of getting undressed in front of others, however she emphasizes that this is different from her background. This indicates that she has noticed that in order to be seen as a suitable physiotherapy student she has to transfer herself into a majority position where undressing with easiness is seen as a marker for fitting in. It is interesting that Adya finds herself coping easily with the undressing although it might be taken for granted that non-western students somehow encounter problems here. Also, it can be interpreted as an indication of how strong the need to cope easily with undressing is in this educational context. Indeed, this informal requirement probably causes (silent) tensions also among ethnic majority students.

10.3.3 CULTURAL NOTIONS OF FLORIN

Florin is 25 years old, and he came to Norway from Yugoslavia together with his family when he was 6 years old. Although, Norwegian was not his first language he, in contrast to Adya, has always been part of the Norwegian school system. Florin has no children, which also is the situation of the majority students. As Adya, Florin also had a previous bachelor's degree before he applied for physio-therapy.

Florin thought of the goal of physiotherapy as making people enjoy physical activity and movement and thereby contributing to a healthier population. In other words, he did not differ from Adya or from the majority students. In the student milieu there was a hierarchy of sportiness. The hyper-sporty male students were at the top of this hierarchy, followed by the 'hyper-sporty' female students, the 'ordinary sporty' female students and then at the bottom the 'ordinary sporty' male students. Most of the male students were 'hyper-sporty', and the ones who were 'ordinary-sporty' strove to see themselves and be seen by the others as someone suited to be physiotherapists. Florin was one of the 'hyper-sporty' students, and the 'minority' in terms of sportiness consisted of majority male students (see Dahl-Michelsen, 2014a). Some of the 'hyper-sporty' male students, prior to their enrolment in physiotherapy education, had fulfilled a bachelor's degree in sports science, Florin was one of those, and as the other hyper-sporty male students he described his childhood and years of youth as dominated by sports activities.

Regarding his choice of physiotherapy education, Florin in a similar manner as Adya and as the majority students, emphasized the importance of physiotherapy as scientific. However, as Florin already had a bachelor's degree in sports sciences, he emphasized his choice of physiotherapy education as related to physiotherapy being a profession, educating him for specific jobs.

Although the *scientific body* was of great importance to physiotherapy students, they also paid attention to *the social body* by emphasizing caring aspects of their reasoning to what was important in physiotherapy and to why they wanted to become physiotherapists. Notably the ability to combine the (natural) scientific body and the social body was regarded as most important and indicates equality ideals as important to the students in this context (see Dahl-Michelsen, 2014b). In short, as a male student you could not be only hyper-sporty in order to be seen as a suitable physiotherapy student, you needed to be social as well. When asked to describe a good physiotherapist, Florin said:

He [the physiotherapist] needs to be good at communicating and at interacting with people. The human aspect is important, I think. However, of course he needs to be good at it practically, the curing, that he actually knows that and is able to pass it on.

Florin speaks of the physiotherapist as a person who needs to be social in terms of having skills in communication, as well as the ability to cure which implies scientific knowledge as well. Given that Florin is a man with minority background and that by tradition social and relational skills culturally and historically are associated with women and with ethnicity, his statement embodies contesting of traditional gender norms and in particular for men from minority backgrounds. In other words, this example demonstrates both how ethnic background is a difference that makes no difference, and that the ability to transcend traditional gendered and ethnical norms might be of great importance as to be included in this context.

10.4 DISCUSSION

The findings indicate that the physiotherapy education expects a 'Norwegian' understanding of the body, and that minority students' experience of mastering the study depend on their ability to adopt this norm. Adya and Florin appear as 'Norwegian enough' to be successful students. Notably, they were assimilated into a Norwegian culture before they were enrolled in the physiotherapy program. Moreover, there seems to be a hierarchy of bodies among students regarding who is seen as suitable to become a physiotherapist. This hierarchy and the cultural notions of the body in the physiotherapy education probably forces unintended exclusion among ethnic majority students as well. For example, based on the relative narrow bodily ideals which are significant among the physiotherapy students, one can ask how students with overweight would fit into this study. In other words, in this field, there are many aspects in need of further scrutiny. In order to enhance the discussion of the findings in this study, I will now pay attention to how those cultural notions of the body, which are significant in the professional training of physiotherapy students, might influence recruitment of minority students to the physiotherapy program. I also will discuss what we can do to increase the proportion of immigrants in physiotherapy education. Notably, traditionally physiotherapy has been seen as a white, female, middle class profession (Dahl-Michelsen, 2015; Mason & Sparkes, 2002; Yeowell 2013 a and b), and historically physiotherapy is regarded a white privilege concerning patients' access to physiotherapy (Yeowell, 2013 a). Whereas there have been changes in the profession's profile on gender and social class, physiotherapists from minority backgrounds are still underrepresented in physiotherapy (Yeowell 2013 a and b). In 2005 the proportion of student with BME background accepted in physiotherapy programs in UK was 5 % (Greenwood & Bithell, 2005), whereas the intake had increased to 10% in 2010/2011. In 2010/2011 the UK average of BME students is in comparison 18% (Yeowell, 2013 b). As presented in the introduction these numbers are even lower in Norway.

Previous research on physiotherapy education in Norway has not addressed how the notions of the body among immigrants affect their choice or lack of choice of physiotherapy education. However, a study from UK reveals that the bodily notions within the physiotherapy program were of concern for some BME physiotherapists as they were in the process of applying for physiotherapy education (Yeowell, 2013 b). In example, one of the participants (South Asian background) told that she was very sceptical about becoming a physiotherapist when she realized that she would have to undress. Similar, another physiotherapist (South Asian background) told that she was terrified about having to be in her undergarment and she was very ambivalent about accepting the study seat she was offered (Yeowell, 2013 b, p. 329). The study underscores the importance that the school catered to their needs as BME students. Examples of this is that the education provided them with same sex staff and screens in the skills training classes. Furthermore, to meet their requirements of religious dress codes, adaption of dress was done where possible as well as planning of examinations in cognizance of holy days (Yeowell, 2013 b, p. 326). Contrastingly, similar issues of touch, gender and undressing were not found in the study by Greenwood and Bithell (2005) who found that culture and religion did not seem to create a conflict for most participants in relation to physiotherapy. Greenwood and Bithell argue this finding to relate to time changes, whereas Yeowell noted that their study was carried out in London, whereas Yeowell's study was conducted in the North-West. However, both studies point to physiotherapy as a quite unfamiliar profession to BME students, and in particular their parents, which is seen as the main reason for the under-recruitment of these students, in physiotherapy.

About diversity, in the last decades, internationally, there has been an emphasis on making physiotherapy more diverse. In Australia, the increasing numbers of physiotherapy programs have resulted in the student population there becoming increasingly diverse with respect to age, ethnicity and prior qualifications (McMeeken, 2007). A study from the UK shows that the use of recruitment interviews has succeeded in increasing diversity, resulting in a higher rate of minority students (Hammond, 2013). Regarding admission, physiotherapy programs, internationally, select students based on marks and interviews, depending on institutional philosophies (Bithell, 2007; McMeeken, 2007; Redenbach & Bainbridge, 2007, Threlkeld & Paschal, 2007). Although the above-mentioned studies demonstrate an increase in BME students in physiotherapy programs, use of selection interviews has been criticized for being biased in terms of educators selecting those who are similar to themselves, maintaining sameness within physiotherapy (Lewis & Smith; Yeowell, 2013 a). In Norway, there is currently no use of interviews to select students to the physiotherapy programs. The existing policy implies that the physiotherapy bachelor-degree programs enrol students solely on marks from upper secondary school and so-called age-points. There is a 30% quota of first-time seekers in where students enrol directly from upper-secondary; these students compete solely on marks, whereas the other 70% compete also based on age-points. Age-points means that independent of what students do they get an age point for each year of age for four years after graduation from upper secondary. From time to time there are debates about the politics of "passive agepoints" and one counter-argument is that what students do (work-experience and relevant studies) should count as points, not only 'passive ageing'. Also, there is some debate about gender-points that is giving an extra point to the gender being underrepresented in the profession, however in Norway there seems to be a massive resistance towards the thinking of favouring the under-represented gender. So far, there have not been discussions on giving extra points to minority students as an action to recruit more of these students. Taken together, at the present time, the educational programs in Norway cannot choose students based on whom they find to be suitable for becoming physiotherapists and neither can they select students in order to enhance diversity. In other words, they do not have direct influence on

who becomes a student; however, they do have indirect influence on who becomes physiotherapists.

As outlined in the introduction, role models are important for students' choice of physiotherapy as a career. The recruitment of MBE students thus requires that more MBE role models are visible. Here marketing plays an important role and has the potential for indirect recruitment. A look into how the different Norwegian physiotherapy programs market themselves on their web pages shows that there is a lack of minority students in marketing photos. Here, the private physiotherapy program protrudes from the public programs in how they promote their program. In short, there are more photos; video links and visual information on the web site from the private program. Notably, a presentation of former students on this program includes minority students. There are however only photos of male students with immigrant backgrounds on these web pages. Female students with immigrant backgrounds are not visible in any marketing materials in the physiotherapy education programs in Norway. Whereas the public study programs are free in Norway, the private program requires that students pay for their education. Thus, the private program is only an opportunity for those who can afford to pay for it, and thereby excludes some BME students (and other students as well).

The political concern for increasing diversity within the physiotherapy workforce is to provide citizens with equal services (Nicholls and Cheek, 2005, Yeowell 2013 a and b). Whereas there is a shortage of studies addressing the lack of diversity within the physiotherapy profession in Norway, the UK offers some relevant studies indicating that recruitment is one barrier, whereas attribution and performance are other challenges that need to be solved. Students from BME groups performed less well than their white British peers (Williams et al., 2015). Furthermore, BME students had lower attainment and greater attrition in a preregistration physiotherapy education within South-East England (Norris et al. 2017; Ryan et al., 2017). Physiotherapy students from minority ethnic backgrounds were also awarded a significantly lower mark than their white majority peers in final clinical placements (although the differences are small) (Naylor, Norris & Williams, 2014). Increased diversity in the physiotherapy program in South-East England decreased the achievement of sufficient ECTs (study points within the European Credit Transfer and Accumulation System). The numbers of students that graduate successfully seems to decrease as diversity increases (Hammond, 2013). However, I will argue that by bearing this cost the education demonstrates accountability to its social responsibilities.

10.5 CONCLUSION

In this study *the sporty body, the scientific body and the social body* are displayed as significant cultural notions in physiotherapy students' professional training. Notably, majority and minority students' notions of the body are largely displayed as similar, which might indicate that if the minority students originally were different from the majority students, they have assimilated successfully into the Norwegian culture already before they started in the physiotherapy program. However, it also points to the huge lack of diversity within physiotherapy education.

As outlined in this chapter, there are many possible reasons for the underrepresentation of immigrants. For example, missing role models and skewed marketing are areas where the physiotherapy education has potential regarding their web sites and course material. Furthermore, the underrepresentation may also be due to bodily notions in physiotherapy where the ability to cope easily with undressing in public and the ability to transcend traditional gender norms are important to succeed in the physiotherapy education. Put differently and more broadly, the physiotherapy education has not yet succeeded in embracing diversity. Indeed, there is a potential regarding the cultural notions that the physiotherapy education conveys to remove biases that constitute factors of exclusion. In doing so, the physiotherapy education could possibly attract a more diverse student population. One way of increasing diversity within physiotherapy education is to recruit more minority students, in particular those who will challenge the established norms, for example regarding the notions of the body in physiotherapy. So far, the Norwegian physiotherapy education has given remarkably little attention to the underrepresentation of BME students' and thus, it lags behind physiotherapy education internationally. Moreover, to ensure that the citizens in the future are provided with equal services it is important that physiotherapy responds to the call for a more diverse workforce in general and the underrepresentation of BME students in the education in particular. Notably, the equality ideals embedded in the Norwegian physiotherapy education might unintendedly prevent equality for all groups of students. If students should continue to have free choice, the factors that lead to self-recruitment need to be undermined. Furthermore, higher education in Norway must address students' choice of education and representation of different students within different educations on a more general level by considering use of recruitment interviews, allocated quotas, gender points and minority points. Still, physiotherapy education first seems to need to embrace diversity in a broad sense; in doing so more kinds of students might fit into physiotherapy.

REFERENCES

Bithell, C. (2007). Entry-level physiotherapy education in the United Kingdom: Governance and curriculum. *Physical Therapy Reviews*, 12(2), 145–155.

Bjørknes Høyskole (2018). https://bjorkneshoyskole.no/studie/fysioterapi/ [lesedato 06.07.2018].

- Creswell, J. W. (2007). *Qualitative Inquiry & Research Design. Choosing Among Five Approaches.* California/London/New Delhi: Sage Publications.
- Dahl-Michelsen, T (2015). Gender in Physiotherapy Education: A Study of Gender Performance among Physiotherapy Students and Changes in the Significance of Gender. (PhD), Centre for the Study of Professions, Oslo and Akershus University College of Applied Sciences, Oslo.
- Dahl-Michelsen, T. (2014). Sportiness and masculinities among female and male physiotherapy students. *Physiotherapy Theory and Practice*, 30(5), 329–337.
- Dahl-Michelsen, T. (2015). Curing and caring competences in the skills training of physiotherapy students. *Physiotherapy Theory and Practice*, *31*(1), 8–16. https://doi.org/10.3109/09593985.2014.949946
- Dahl-Michelsen, T., & Solbrække, K. N. (2014). When bodies matter: Significance of the body in gender constructions in physiotherapy education. *Gender and Education*, 26(6), 672–687. https://doi.org/10.1080/09540253.2014.946475
- Drange, I., & Helland, H. (2017). Studenter med innvandringsbakgrunn i profesjonsutdanningene – rekruttering og arbeidsmarkedskarriere. In S. Mausethagen & J.-C. Smeby (eds.), Kvalifisering til profesjonell yrkesutøvelse. Oslo: Universitetsforlaget.
- Greenwood, N., & Bithell, C. (2005). Perceptions of physiotherapy compared with nursing and medicine amongst minority ethnic and White UK students: implications for recruitment. *Phy*siotherapy, 91(2), 69–78.
- Hammond, J. A. (2013). Doing gender in physiotherapy education: A critical pedagogic approach to understanding how students construct gender identities in an undergraduate physiotherapy programme in the United Kingdom. Kingston University.
- Kvale, S., & Brinkmann, S. (2009). Interviews: Learning the Craft of Qualitative Research Interviewing. Los Angeles, Calif.: Sage.
- Leseth, A. B., & Solbrække, K. N. (2011). Profesjon, kjønn og etnisitet: Cappelen akademisk.
- Lewis, M., & Smith, S. (2002). Selection of pre-registration physiotherapy students: Changing to a more objective process. *Physiotherapy*, 88(11), 688–698.
- Mason, C., & Sparkes, V. J. (2002). Widening participation in physiotherapy education: Part 2: Ethnicity among undergraduates. *Physiotherapy*, *88*(5), 276–284.
- McMeeken, J. (2007). Physiotherapy education in Australia. *Physical Therapy Reviews*, 12(2), 83–91.
- National Curriculum for Physiotherapy Education: Rammeplan for Fysioterapeututdanning. Fastsatt 1.juli 2004 av Utdannings- og forskningsdepartementet, (2004).
- Naylor, S., Norris, M., & Williams, A. (2014). Does ethnicity, gender or age of physiotherapy students affect performance in the final clinical placements? An exploratory study. *Physiotherapy*, 100(1), 9–13.
- Nicholls, D. A. (2018). The End of Physiotherapy. Abingdon: Routledge.

- Nicholls, D. A., Cheek, J. (2005). Physiotherapy and the shadow of prostitution: The Society of Trained Masseuses and the massage scandals of 1894. *Social Science & Medicine*, *62*, 2336–2348.
- Norris, M., Hammond, J. A., Williams, A., Grant, R., Naylor, S., & Rozario, C. (2017). Individual student characteristics and attainment in pre-registration physiotherapy: a retrospective multi-site cohort study. *Physiotherapy*, 104(4) (2018) 446–452.
- Nygård, G. (2018). Statisk Sentralbyrå, Seksjon for utdannings –og kultur statistikk, Personal correspondence (e-mail) 13.04.2018.
- Patton, M. Q. (2002). *Qualitative Research & Evaluation Methods*. Thousand Oaks, Calif.: Sage Publications.
- Redenbach, D., & Bainbridge, L. (2007). Canadian physiotherapy education: The University of British Columbia example. *Physical Therapy Reviews*, 12(2), 92–104.
- Statistisk sentralbyrå (SSB). (2017). *Hvor mye har innvandrerandelen økt siden 1970?* Retrieved from http://www.ssb.no/befolkning/artikler-og-publikasjoner/_attachment/309560?_ts= 15c360be828
- Ryan, J. M., Potier, T., Sherwin, A., & Cassidy, E. (2017). Identifying factors that predict attrition among first year physiotherapy students: a retrospective analysis. *Physiotherapy*. http://dx.doi.org/10.1016/j.physio.2017.04.001
- Threlkeld, A. J., & Paschal, K. A. (2007). Entry-level physical therapist education in the United States of America. *Physical Therapy Reviews*, *12*(2), 156–162. https://doi.org/10.1179/108331907x175140
- Tønnesen, E., Larsen, H. and Fimland, Ø. (2017). Andelen av innvandrere som tar høyere utdanning går ned, *Khrono*. 12.04.2018 https://khrono.no/ntnu-uio-unik5/andelen-avinnvandrere-som-tar-hoyere-utdanning-gar-ned/217837
- Williams, A., Norris, M., Cassidy, E., Naylor, S., Marston, L., & Shiers, P. (2015). An investigation of the relationship between ethnicity and success in a BSc (Hons) Physiotherapy degree programme in the UK. *Physiotherapy*, 101(2), 198–203.
- Yeowell, G. (2013a). 'Isn't it all Whites?' Ethnic diversity and the physiotherapy profession. *Physiotherapy*, *99*(4), 341–346.
- Yeowell, G. (2013b). 'Oh my gosh I'm going to have to undress': Potential barriers to greater ethnic diversity in the physiotherapy profession in the United Kingdom. *Physiotherapy*, 99(4), 323–327.
- Öhman, A. (2001). *Profession on the move. Changing conditions and gendered development in physiotherapy*. Umeå: Department of Public Health and Clinical Medicine, Umeå University, Sweden.