

Pandemic Tiers: How the COVID-19 Pandemic Affected UBC Vancouver Tenured Faculty

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Executive Summary



The curtailment of on-campus activities, brought on by the COVID-19 pandemic, led to a rapidly evolving series of personal and professional challenges impacting the research, teaching, and service of faculty members within and beyond UBC. To better understand and respond to these challenges, the Office of the Provost and Vice-President Academic conducted a survey in summer 2020 of UBC Vancouver faculty members' experiences of the pandemic and, more broadly, workplace climate.

The survey design emphasized the importance of gathering demographic data and using an intersectional analysis to understand the impacts of the interrelated and overlapping pandemics, including racism. While, in general, all faculty members experienced challenges that negatively impacted their ability to work within a pandemic, intersectional analysis of survey data reveals several instances where members belonging to certain socio-demographic groups report significantly greater levels of negative impact.

This report concludes with a description of steps taken to support UBCO and UBCV faculty since the beginning of the pandemic, and recommendations for addressing some glaring gaps and issues made bare by this study.

The findings of this research are presented across the following sections:

Workplace Climate Experiences of UBCV Faculty (2018-2020)

- Respondents' Demographics
- Workplace Climate Experience

Impact of the First Wave of the COVID-19 Pandemic

- Effects on Overall Ability to Work
- Effects on Teaching
- Effects on Research
- Effects on Service
- UBC Actions and Response to the Pandemic
- Recommendations

Introduction



Background

The 2019-novel coronavirus (2019-nCoV) was declared a world pandemic by the World Health Organization (WHO) on March 11, 2020. Few days later, on March 16, 2020, UBC transitioned to online classes and faculty were asked to deliver classes remotely. Shortly after, on March 24, 2020, human, laboratory and field research activity were curtailed and UBC campuses were closed to comply with federal and provincial guidelines.

Almost overnight, faculty faced a sudden transition to remote teaching and had to consider novel ways to maintain research productivity, if at all. The simultaneous closure of schools and daycare centres led to a significant increase in caregiving responsibilities for many faculty members.

Very soon after the outbreak, the Senior Advisor on Women and Gender-Diverse faculty and the Senior Advisor on Racialized faculty to the UBC Vancouver Provost and Vice-President, Academic¹ began hearing from faculty members about the effects of the lockdown on all aspects of research, learning and service, as well as on their personal lives. Increasingly it also became clear that there were differences in how faculty members across UBC were experiencing the pandemic.

With support from the Provost, UBCV a decision was made to conduct a survey to probe, understand and respond to the impacts of the pandemic on UBC Vancouver faculty. The Senior Advisors formed an ad-hoc committee² to develop a survey on the impact of the pandemic on UBC faculty.

While the outbreak of the COVID-19 virus pandemic brought about unprecedented challenges and disruptions, 2020 saw other major events (Statistics Canada, 2020; Wilson, 2020). Global and national incidents in 2020 highlighted the prevalence of racial discrimination and systemic racism within institutions, including higher education (Deckard et al., 2021; Universities Canada, 2019). Accordingly, the committee expanded the initial survey in order to probe faculty on their experiences of UBC's climate, including racism.

About this Report

In late 2020 and early 2021, Professor Moura Quayle presented three preliminary results of this survey to the Board of Governors, which are available online³. This report offers a more thorough presentation of the findings. Specifically, the purpose of this report is to:

1. document and highlight UBC's workplace climate two years prior up to and including Canada's first wave of the pandemic⁴;
2. summarize how the initial period of the pandemic (March 2020-July 2020) effected the research, teaching, and service activities of faculty, and their overall ability to work;

1 Dr. Naznin Virji-Babul and Dr. Minelle Mahtani, respectively

2 The members of the ad-hoc committee are listed in the Acknowledgments section on page 2 of this report.

3 September 20, 2020 - [Tenure-Track faculty COVID-19 Survey](#)
November 24, 2020 - [UBC Vancouver faculty Survey Results by Gender](#)
April 8, 2021 - [UBC Vancouver Tenure Track faculty Survey on The Effects of COVID-19 Tenure Track faculty Race Analysis](#)

4 For timeline of pandemic waves in Canada click [here](#)

3. provide an intersectional lens to the findings;
4. reference the actions UBC has taken to respond to the effects of the pandemic on faculty; and
5. briefly discuss the lessons learned and propose actionable solutions for moving forward.

About the Survey

The survey was distributed to all tenure-track faculty members at UBC Vancouver⁵ (n=2348⁶) from June 19 to July 10, 2020 (see appendix A for the survey questionnaire). A total of 1049 survey responses were received, accounting for a response rate of 45%. In accordance with UBC's data reporting standard, results with 5 or fewer respondents are not reported in order to maintain confidentiality.

Research Caveats

An accurate interpretation of the findings necessitates that consideration be given to the following caveats:

1. Surveys that do not yield a high response rate may suffer from non-response bias. While there is no consensus on what is an acceptable response rate, online surveys have, on average, a 33% response rate (Nulty, 2008) and, generally, leading journals require a response rate no less than 30%-40% for the publication of a manuscript (Story & Trait, 2019). This survey has an acceptable response rate (45%), but because the response rate is not high, caution is required when generalizing the findings. The presented findings stem from respondents of the survey, and may or may not accurately reflect the experience of all tenured faculty. Completing surveys such as the [employment equity survey](#) is vital for developing a more accurate grasp of experiences and conditions. UBC staff and faculty are asked to complete the employment equity survey.⁷
2. Of the respondents who shared their racial identity, 14 disaggregated racial identity groups are represented. However, 5 of the 14 racial identity groups have a sample size of three or less, 6 have a sample size of seven or less, and 10 have a sample size of eighteen or less. To therefore maintain the anonymity of respondents, we aggregated the racial identity groups into three racial groups: Indigenous, Racialized, and White. As a result, different experiences between racialized groups (e.g., Arab, Black, Southeast Asian) may not be fully reflected in this report.
3. Although not a longitudinal survey, the findings are a snapshot of conditions at a particular time (June-July 2020) that reflect long-standing preexisting inequities. As such, findings on the effects of the pandemic curtailment on faculty's overall ability to work, teaching, research, and service are overlaid with other preexisting conditions evident in the workplace climate results.
4. The analysis in this report is descriptive as opposed to explanatory. In other words, it summarizes and presents the findings and shares observed patterns. A regression analysis was not performed; the report does not statistically claim which variable(s) cause or explain an outcome.

5 UBC Okanagan chose not to deploy a survey at this time

6 Source: Tenure Stream faculty by Year (Including Deans and Other Senior Admin Appointments), UBC's faculty and Staff Dashboard, 2020

7 Employment equity survey available [here](#)

Parameters of Findings

Due to the large data set, a set of rules inform the results shared in this report:

- A certain number of survey questions (n=12) and factors (n=56) were selected for reporting
- Rather than describing the response of each socio-demographic groups, we report the Faculty with the highest percentage, and the socio-demographic groups with the *top three different percentages*
- In compliance with UBC's data reporting standard, we only share findings answered by 6 or more respondents
- To determine the differential impact of the pandemic and curtailment on faculty, the results are shared by identity categories and primary faculty
- We only share results where there is a 6% or more difference between the dominant group (DG) and non-dominant group (NDG) in an identity category⁸. The DG is the reference group:
 - *racial identity*: white (DG), racialized (NDG), Indigenous (NDG)
 - *(dis)ability*: non-disabled (DG), disabled respondents (NDG)
 - *gender identity*: men (DG), women (NDG), non-binary (NDG)
 - *sexual orientation*: heterosexual (DG), 2SLGBQ+ (NDG)
 - *caregiving role*: respondents with no caregiving role (DG), respondents with caregiving role (NDG)⁹
- we also only share results where there is a 6% or more difference between the dominant group (DG) and non-dominant group (NDG) in an *intersected* identity category. For a list of the intersected identity demographics see appendix B.

Why We Are Using an Intersectional Approach

In 1989, Kimberlé Crenshaw coined the term 'intersectionality' to address the theoretical erasure of Black women in feminist theory and anti-racist politics. Drawn from her work as a legal scholar and rooted in Black feminist and critical race theories, intersectionality creates a framework to understand the way multiple forms of marginalization (e.g., racism, sexism, and classism) intersect/interact and impact people.

In this report, we use an intersectional approach to ascertain how the pandemic curtailment has impacted respondents differently. While a non-intersectional approach focuses on how membership in a social group (e.g. non-binary people) and/or inequity (e.g. racism) *separately* shape or impact a phenomenon (e.g., research interests and outcome), an intersectional approach starts from the premise that people are part of multiple social groups that can be arranged on a vertical axis denoting proximity and access to formal power. Dominant or advantaged groups are those that wield the most social power. Non-dominant

⁸ For example, '79% of non-disabled and 75% of disabled respondents agree to this statement' is a 4% difference between the dominant and non-dominant group.

⁹ 'Dominant' and 'non-dominant' values are not suitable labels for the 'caregiving role' category. We acknowledge, however, that not having a caregiving role has advantages on the time available one has for work, and that the 'motherhood penalty', 'parenthood penalty', and 'fatherhood premium' is a common reality.

groups, which are “historically, persistently, or systemically marginalized groups”¹⁰, wield different degrees of less power. The positions of groups within the axis of power are not accidental. They are the product of state-sanctioned discrimination.

Most people are, simultaneously, members of dominant and non-dominant social groups, and thus face a unique set of unequal burdens and advantages in life. During data analysis, an intersectionality approach seeks to understand how two or more social inequities (e.g., ableism and heterosexism) shape a phenomenon, and/or how the combination of two or more social identities (e.g. disabled Indigenous people) inform and play a role in experiences and outcomes. In using an intersectional approach to analyze the findings, we are better equipped to understand and respond to the unequal effects of the pandemic (Maestriperi, 2021).

Cumulative Effects

In addition to an intersectional lens, we pay attention to the cumulative nature of positive effects and negative effects.

This concept submits that:

- People may experience various combinations of positive and negative effects within the *same* domain (e.g., research) and across domains (e.g., research, teaching, and service).
- Positive and negative effects within and across domains may *aggregate* over time and lead to large inter-group disparities.
- Positive and negative effects in one domain may directly or indirectly impact one or more other domains.
- A positive or negative effect generally reinforces a similar effect; in other words, positive effects may increase the likelihood of positive effects, and negative effects may increase the likelihood of negative effects.

Terminology

Domains: In this report, domains refer to the five areas of faculty’s lives assessed in the survey: workplace climate, overall ability to work, teaching activities, research activities, and service activities.

Factors: Each domain is assessed through a number of survey questions that, in turn, assess various factors. For example, results for the workplace climate domain stem from two questions¹¹ that assess a total of 14 factors¹² (see appendix C for a list of the factors).

10 See UBC’s Equity and Inclusion Office’s [glossary](#) for more on ‘historically, persistently, or systemically marginalized’

11 Question 1: Based on your experience in the past two years at UBC, please indicate the extent to which you agree or disagree with each of the following statements.

Question 2: In the past two years at UBC, how often have you experienced the following in your work environment?

12 For example: ‘I am satisfied with opportunities to collaborate with faculty in my primary department’; ‘My head/director/dean helps me obtain the resources I need’; and ‘Exclusion from social interactions with colleagues’.

Social category and social groups: In this report, a social category refers to a demographic variable (e.g., racial identity, (dis)ability, sexual orientation, gender identity), while a social group refers to clusters of people within a category that are different from one another on the basis of the category's characteristic of interest (e.g., 'South Asian', 'Black', 'White', etc. are social groups for the category of race; 'disabled people' and 'non-disabled people' are social groups for the category of (dis)ability).

People with disability or disabled people: Person-first language (i.e. person with a disability) is a familiar practice that intends to shift the focus on impairment to the social barriers that impede full participation in the community¹³. In recent years, self-advocates and disability justice scholars have argued the limitations of this language and presented identity-first language as an alternative. Identity-first language aims to demonstrate that disability is central to how a person exists in the world, and that the distancing of disability in person-first language conveys a negative connotation of disability. There are varying perspectives and preferences within disability communities and scholarship, as language of identification is deeply personal and political. As such, it is important in individual contexts to use a person's preferred language. In the context of our report, we have chosen to use identity-first language to discuss (dis)ability category.

Ancestry or racial identity: The questionnaire uses the term 'ancestry' as a proxy for racial group identity, and differentiates 'ancestry' from birthplace, citizenship, language, and culture. In this report we use the term 'racial identity' as it is more familiar in everyday parlance.

2SLGBQ+: The survey does not use this acronym but asks respondents if they "identify as someone who is lesbian, gay, bisexual, queer, two-spirit, or an analogous term." Another survey question asks participants if they "identify as someone with trans experience". Reflecting the survey, the analysis treats these questions as separate. Since response rate of people who identify as trans is less than 6, to remain in compliance with UBC's data reporting standard, we do not report on the findings of trans people as an exclusive demographic unit.

¹³ Simonsen, M., & Mruzek, C. (2019, August 22). [Person-first versus identity-first language](#). The University of Kansas: School of Education.

Findings

The findings are presented across seven sections:

1. Demographics of Respondents
2. Workplace Climate
3. Pandemic's Effects on Faculty's Overall Ability to Work
4. Pandemic's Effects on Teaching
5. Pandemic's Effects on Research
6. Pandemic's Effects on Service
7. Assessment of Cumulative Negative and Positive Effects

The results of sections 2-6 stem from an analysis of 12 questions and 56 factors (see appendix A and C). Two calculations are used to make sense of the data:

- The first calculation uses the *overall* response to a question (aka, total sample) as the denominator and the *response option* (aka, answer choices) as the numerator. In other words, this percentage is based on the number of people who chose 'agree' or 'disagree' divided by the number of people who answered the question (total sample).
- The second calculation uses the total count of a social group (e.g., women) who answered a question as the denominator, and the proportion of the social group who chose a specific response option (e.g., 'agree' or 'disagree') as the numerator. This percentage is presented in the paragraphs below the first calculation.

Lastly, some results may be considered as having a 'negative effect' and others a 'positive effect' on faculty's work experience or output. For example, a decrease in grant opportunities has a 'negative effect,' while an increase in grant opportunities has a 'positive effect' for a faculty. Where relevant, results are expressed as 'negative' or 'positive'. This is particularly useful to assess the number of negative effects or positive effects social groups experience and if there is an unequal distribution of burdens and benefits across social groups.

The designation of 'negative' and 'positive' effects cannot, however, be automatically taken to mean that those experiencing a 'negative effect' experience **more** of a negative experience than those labeled as experiencing a 'positive effect'. For example, Individual A who dedicated 10 hours per week *before* the pandemic for class-preparation and did not experience an 'increase' or 'decrease' in class-preparation hours *during* the pandemic is considered to have a 'positive' experience. On the other hand, Individual B who dedicated 7 hours a week *before* the pandemic and experienced a 3-hour-per-week increase in class-preparation *during* the pandemic is labeled to have experienced a 'negative effect'—although both individuals now prepare for class for the same duration (10 hours per week). Caution should thus be taken when interpreting the findings.

Findings: Demographics of Respondents



The findings in this first section describes the socio-demographic and work-demographic characteristics of respondents.

Respondents were asked to identify their racial identity, (dis)ability, gender identity, sexual orientation, and caregiving role (socio-demographics), and their primary Faculty, stream (research or educational leadership), academic title, administrative appointment, title of administrative appointment, and years working at UBC (work-role demographics).

Socio-Demographics (Single Variables):

Racial Identity (aggregate)		
White	671	64%
Racialized	204	19%
Indigenous	17	2%
N/A	157	15%

The racial identity distribution of survey respondents mirrors the racial identity distribution of tenured-faculty at UBCV captured in the employment equity survey; most are white, followed by racialized and Indigenous.

Racial Identity (disaggregate)		
White	671	64%
East Asian	87	8%
Multiracial	37	4%
South Asian	30	3%
West Asian or Middle Eastern	18	2%
Latin, South, or Central American	15	1%
Indigenous	17	2%
Arab	7	1%
African/Black	x	x
Southeast Asian	x	x
Filipino/a	x	x
Indigenous (ONA)	x	x
South Pacific Islander	x	x
N/A	157	15%
<i>x = data suppressed due to insufficient data to report</i> <i>ONA = outside of North America</i>		

White survey respondents are three times the population of racialized *and* Indigenous respondents combined (75% vs. 25%), and substantially more than the next largest racial group of respondents, East Asian (10%). More West Asian or Middle Eastern faculty responded to the COVID-19 survey than to the employment equity survey, a discrepancy that may be due to an increase in said faculty *after* the 2019-2020 employment equity survey data collection launch.

Disability

Non-Disabled People	804	77%
Disabled People	100	10%
N/A	145	14%

11% of respondents identify as having a disability, which includes mobility, sensory, learning, and other physical or mental health impairments. Additionally, more respondents in the COVID-19 survey identify with having a disability than respondents captured in the 2019/2020 employment equity survey.

Gender Identity

Men	491	49%
Women	433	44%
Non-Binary	11	1%
N/A	59	6%

While the gender distribution between women (44%) and men (49%) is close, only 1% of respondents identify as non-binary.

Sexual Orientation

Heterosexual	838	84%
2SLGBQ+	85	9%
N/A	73	7%

A sizeable percentage of respondents (84%) identify as heterosexual, while 9% identify as 2SLGBQ+.

Caregiver Role

Caregiver	793	92%
Non-Caregiver	27	3%
No Response	42	5%

The vast majority of respondents provide care to at least 1 person.

Socio-Demographics (Intersected Variables):

To perform an intersectional analysis, each of the five socio-demographic categories were combined with other socio-demographic categories, producing a set of ten intersected socio-demographic categories¹⁴:

14

- 1) Racial Identity*Disability
- 2) Racial Identity*Gender
- 3) Racial Identity*LGBTQ
- 4) Racial Identity*faculty
- 5) LGBTQ*Disability
- 6) LGBTQ*Gender.
- 7) LGBTQ*faculty
- 8) Gender*Disability
- 9) Gender*faculty
- 10) Disability*faculty

Socio-Demographic Categories (intersected)

	Disability	Sexual orientation	Gender	Caregiver role
Racial Identity <i>and</i>	✓	✓	✓	✓
Disability <i>and</i>		✓	✓	✓
Sexual orientation <i>and</i>			✓	✓
Gender <i>and</i>				✓

In light of UBC's commitments to anti-racism, which includes adopting the Scarborough Charter on Anti-Black Racism and Black Inclusion in Canadian Higher Education, the data shown below are demographics of racial identity intersected with the remaining four socio-demographic categories.

Racial Identity by Disability

Non-Disabled White Person	560	67%
Non-Disabled Racialized Person	174	21%
Non-Disabled Indigenous Person	15	2%
Disabled White Person	70	8%
Disabled Racialized Person	19	2%
Disabled Indigenous Person	x	x

x = data suppressed due to insufficient data to report

Racial Identity by Sexual Orientation

White Heterosexual Person	584	68%
Racialized Heterosexual Person	182	21%
White 2SLGBQ+ Person	65	8%
Indigenous Heterosexual Person	12	1%
Racialized 2SLGBQ+ Person	12	1%
Indigenous 2SLGBQ+ Person	x	x

x = data suppressed due to insufficient data to report

Racial Identity by Gender

White Men	332	38%
White Women	320	37%
Racialized Men	115	13%
Racialized Women	80	9%
Indigenous Men	8	1%
Indigenous Women	7	1%
White Non-Binary Person	x	x
Racialized Non-Binary Person	x	x
Indigenous Non-Binary Person	x	x

x = data suppressed due to insufficient data to report

Racial Identity by Caregiver Role

White Faculty Caregiver	523	73%
Racialized Faculty Caregiver	160	22%
White Person with no Caregiving Role	15	2%
Indigenous Caregiver of One or More Persons	13	2%
Racialized Person with no Caregiving Role	6	1%
Indigenous Person with no Caregiving Role	x	x

x = data suppressed due to insufficient data to report

Work-Role Demographics (Single Variables):

The next set of demographics are of respondents' work-roles and status: primary Faculty, academic stream, academic title, administrative appointment, title of administrative appointment, and years working at UBC.

Primary Faculty

Arts	290	28%
Science	215	20%
Medicine	181	17%
Applied Science	105	10%
Education	77	7%
Business (Sauder)	36	3%
Forestry	32	3%
Law	21	2%
Land and Food Systems	19	2%
Dentistry	17	2%
Pharmaceutical Sciences	15	1%

All 11 UBC faculties are represented in the findings, with respondents from Arts Science, and Medicine accounting for 65% of respondents' home Faculty.

Faculty Stream

Research stream	863	86%
Educational leadership stream	135	13%
Other	10	1%

Academic Title (Research Stream)

Assistant Professor	173	20%
Associate Professor	238	28%
Professor	445	52%
Other (please specify)	x	x

x = data suppressed due to insufficient data to report

Academic Title (Education Leadership Stream)

Instructor/Assistant Professor of Teaching	44	33%
Senior Instructor/Associate Professor of Teaching	72	54%
Professor of Teaching	18	13%

Administrative Appointment

No	794	80%
Yes	198	20%

Administrative Appointment Title

Associate Head	41	21%
Head	32	17%
Associate Dean	25	13%
Dean	x	x
Other (please specify)	88	46%

x = data suppressed due to insufficient data to report

Time at UBC

2 years or less	97	10%
3-5 years	100	10%
5-10 years	159	16%
10-20 years	383	38%
More than 20 years	264	26%

Socio-Demographics x Work-Role (Intersected Variables):

The tables below show the distribution of *racial identity* by each work-role variable. Considering the large data set, excluded from this report is the distribution of the remaining four socio-demographics individually by each of the work-role variables, and the intersected racial identity variables by the work-role variables.

Racial Identity by Primary Faculty						
	Indigenous		Racialized		White	
Applied Science	x	x	24	12%	56	8%
Arts	x	x	54	27%	204	31%
Business	x	x	15	7%	16	2%
Dentistry	x	x	x	x	9	1%
Education	x	x	12	6%	50	7%
Forestry	x	x	6	3%	21	3%
Land and Food Systems	x	x	x	x	14	2%
Law	x	x	x	x	10	1%
Medicine	x	x	37	18%	123	18%
Pharmaceutical Sciences	x	x	x	x	9	1%
Science	x	x	41	20%	155	23%

x = data suppressed due to insufficient data to report

Racial Identity by Faculty Stream				
	Research		Education Leadership	
Indigenous	12	71%	135	x
Racialized	175	87%	30	12%
White	574	86%	90	13%

x = data suppressed due to insufficient data to report

Racial Identity by Academic Title (Research Stream)						
	Assistant Professor		Associate Professor		Professor	
Indigenous	x	x	x	x	7	58%
Racialized	49	28%	50	29%	76	43%
White	102	18%	160	28%	309	54%

x = data suppressed due to insufficient data to report

Racial Identity by Academic Title (Education Stream)						
	Instructor / Assistant Professor		Senior Instructor / Associate Professor		Professor	
Indigenous	x	x	x	x	x	x
Racialized	13	52%	10	40%	x	x
White	23	26%	52	58%	14	16%

x = data suppressed due to insufficient data to report

Racial Identity by Administrative Appointment

	Yes		No	
Indigenous	x	x	11	73%
Racialized	32	16%	170	84%
White	140	21%	516	79%

x = data suppressed due to insufficient data to report

Racial Identity by Administrative Appointment Title

	Associate Head		Head		Associate Dean		Dean		Other	
Indigenous	x	x	x	x	x	x	x	x	x	x
Racialized	7	23%	x	x	x	x	x	x	18	58%
White	28	20%	28	20%	16	12%	x	x	61	45%

x = data suppressed due to insufficient data to report

Racial Identity by Time at UBC

	2 years or less		3-5 years		5-10 years		10-20 years		More than 20 years	
Indigenous	x	x	x	x	x	x	7	41%	x	x
Racialized	34	17%	25	12%	37	18%	77	38%	31	15%
White	53	8%	61	9%	101	15%	259	39%	194	29%

x = data suppressed due to insufficient data to report

Findings: Workplace Climate



Workplace climate refers to the overall quality of a workplace produced by characteristics including the physical environment, organizational values, norms, guidelines, decisions and actions, management style, organizational culture, relations between employees, etc. Generally, large organizations have an all-encompassing climate that exists alongside divisional-level climates. For varying reasons, employees' perception and experience of the climate may differ.

Results for the workplace climate domain stems from two survey questions that ask respondents to reflect on their experiences across 14 factors over the last two years (summer 2018 - summer 2020).

- Based on your experience in the past two years at UBC, please indicate the extent to which you agree or disagree with each of the following statements.
- In the past two years at UBC, how often have you experienced the following in your work environment?

Based on your experience in the past two years at UBC, please indicate the extent to which you agree or disagree with each of the following statements.¹⁵

My colleagues value my research/scholarship

Agree (72%) = Positive Effect

72% of respondents agree that their colleagues value their research/scholarship. Respondents in Business (89%), non-caregivers (89%), 2SLGBQ+ respondents (82%), non-binary respondents (82%), and men (77%) are the highest single-variable demographic groups to agree with this statement. When intersected, heterosexual faculty with no caregiving role (95%), white respondents with no caregiving role (93%), and non-disabled respondents with no caregiving role (90%) are the top three groups to agree that their colleagues value their research/scholarship.

Disagree (18%) = Negative Effect

Conversely, 1 in 6 (18%) respondents disagree that their colleagues value their research/scholarship, with disabled respondents (28%), faculty with a caregiving role (19%), heterosexual respondents (18%), and respondents in Forestry (30%) disagreeing the most. When intersected, disagreement is highest for faculty with a disability, more specifically, disabled racialized respondents (37%), disabled men (33%), and disabled faculty caregivers (28%).

I am satisfied with opportunities to collaborate with faculty in my primary department

Agree (68%) = Positive Effect

Most respondents (68%) are satisfied with opportunities to collaborate with faculty in their primary department. This is especially so for men (73%), white respondents (71%), and non-disabled respondents (70%), as well as respondents in Business (92%). When intersected, non-disabled men (75%), white men

¹⁵ There are 7 response options to this question. We combined 6 into two separate bins and omitted 1 response option. Bin one, **Disagree**, combines 'strongly disagree', 'disagree', and 'disagree somewhat'. Bin two, **Agree**, combines 'strongly agree', 'agree', and 'agree somewhat'. Omitted from this presentation is the 'neither agree nor disagree' response option.

(74%), men faculty caregivers (73%), and heterosexual men (73%) are the top groups to report being satisfied with opportunities to collaborate with faculty in their primary department.

Disagree (20%) = Negative Effect

1 in 5 (20%) respondents report dissatisfaction with opportunities to collaborate. Indigenous faculty (35%), disabled faculty (28%), and women faculty (24%) report the highest disagreement, as well as respondents in Education (38%). When socio-demographic groups are intersected, disagreement is highest for faculty with a disability, more specifically, disabled racialized faculty (42%), disabled faculty caregivers of at least 1 recipient (32%), and disabled men (29%).

I feel excluded from an informal network in my department

Agree (31%) = Negative Effect

About 1 in 3 respondents (31%) feel excluded from an informal network in their department. Respondents from Education (53%) report the highest level of exclusion, followed by disabled respondents (48%), women (40%) and Indigenous respondents (35%). When intersected, agreement is highest for faculty with a disability, more specifically, disabled racialized respondents (53%), disabled faculty caregivers (48%), disabled heterosexual respondents (47%), and disabled women (47%) report the highest feelings of exclusion from informal department networks.

Disagree (52%) = Positive Effect

Conversely, persons with no caregiving role (67%), men respondents (61%), and non-disabled faculty (55%), as well as respondents from Business (75%), disagree the most with this statement. When intersected, relative to their population, Indigenous men (75%), heterosexual faculty with no caregiving role (74%), and men with no caregiving role (72%) are the most to disagree that they feel excluded from informal department networks.

I have to work harder than my colleagues to be perceived as a legitimate scholar

Agree (37%) = Negative Effect

More than 1 in 3 respondents (37%) agree that they have to work harder than their colleagues to be perceived as a legitimate scholar. Agreement with this statement is highest for Indigenous (59%), non-binary (55%), racialized (48%), disabled (48%) and women (48%) respondents, as well as faculty in Land and Food Systems (56%). When intersected, disabled racialized respondents (74%), Indigenous faculty caregivers (69%), and disabled 2SLGBQ+ respondents (67%) are the most likely to report having to work harder than their colleagues to be perceived as a legitimate scholar.

Disagree (40%) = Positive Effect

Conversely, faculty with no caregiving role (52%), men (51%), and white faculty (45%), as well as respondents from Business (58%), are significantly more likely to disagree with this statement. When intersected, disagreement is highest for faculty with no caregiving role, more specifically, heterosexual persons with no caregiving role (58%), non-disabled persons with no caregiving role (57%), and men with no caregiving role (56%) were the top three demographic groups to disagree having to work harder than their colleagues to be perceived as a legitimate scholar.

My department is a place where individual faculty may comfortably raise personal and/or family issues

Agree (59%) = Positive Effect

About 3 in 5 (59%) respondents agree that their department is a place where individual faculty may comfortably raise personal and/or family issues. Persons with no caregiving role (67%), men (64%) and white (62%) respondents, as well as faculty in Forestry (75%) are the top groups to agree that their department is a place where faculty may comfortably raise personal and/or family issues. When intersected, white respondents with no caregiving role (80%), men with no caregiving role (72%), and 2SLGBQ+ women (69%) are the top three groups to agree with this statement.

Disagree (26%) = Negative Effect

Conversely, non-binary (55%), Indigenous (53%), disabled (32%), and women (32%) respondents are the top demographic groups to disagree with this statement, as well as faculty from Dentistry (63%). When intersected, Indigenous heterosexual respondents (67%), non-binary faculty caregivers (60%), and disabled 2SLGBQ+ respondents (58%) are the most likely to disagree with this statement.

My head/director/dean creates a collegial and supportive environment

Agree (73%) = Positive Effect

73% of respondents agree that their head/director/dean creates a collegial and supportive environment. Respondents with no caregiving role (81%), men (78%), and non-disabled respondents (75%), as well as faculty in Business (92%), are the top demographic groups to agree that their head/director/dean creates a collegial and supportive environment. When intersected, agreement is highest for faculty with no caregiving role, more specifically, white respondents with no caregiving role (93%), Indigenous women (86%), and heterosexual non-caregivers (84%).

Disagree (16%) = Negative Effect

Conversely, about 1 in 6 (16%) disagree that their head/director/dean creates a collegial and supportive environment. Relative to their population, disabled respondents (23%), women (19%), and faculty with a caregiving role (17%) report the highest levels of disagreement with this statement, including respondents in Dentistry (63%). When intersected, disabled racialized respondents (42%) are by far the most likely to disagree with this statement, followed by disabled faculty caregivers (25%) and 2SLGBQ+ faculty caregivers (24%).

My head/director/dean helps me obtain the resources I need

Agree (66%) = Positive Effect

Most respondents (66%) agree that their head/director/dean helps them obtain the resources they need. Men (70%) and non-disabled faculty (68%) are the most likely to agree with this statement, including faculty in Business (92%). When intersected, white persons with no caregiving role (80%), men with no caregiving role (78%), and racialized men (77%) agree the most with this statement.

Disagree (19%) = Negative Effect

Close to 1 in 5 (19%) disagree with this statement. Indigenous respondents (41%) report significantly greater levels of overall disagreement, followed by disabled (24%) and 2SLGBQ+ (23%) respondents. Dentistry (50%) and Land and Food Systems (50%) report the highest levels of disagreement among faculties. When intersected, disabled racialized respondents (47%), Indigenous faculty caregivers (46%), and 2SLGBQ+ faculty caregivers (29%) disagree the most with this statement.

I have a voice in the decision-making that affects the direction of my department/school

Agree (70%) = Positive Effect

Most respondents (70%) agree that they have a voice in the decision-making that affects the direction of their department/school. Non-binary faculty (82%), faculty with no caregiving role (78%), and men (75%) agree the most with this statement, including faculty in Business (81%). When intersected, men with no caregiving role (89%), non-disabled non-binary respondents (86%), and heterosexual faculty with no caregiving role (84%) are the top three demographic groups to agree having a voice in decision-making that affects the direction of their department/school.

Disagree (22%) = Negative Effect

Close to a quarter (22%) do not agree with this statement. Disabled respondents (30%) and women (25%) report the highest levels of overall disagreement with this statement, including respondents in Land and Food Systems (56%). When intersected, disagreement is highest for faculty with a disability, more specifically, disabled racialized respondents (42%), disabled women (30%), disabled faculty caregivers (30%), and racialized women (26%) disagree the most that they have a voice in department/school decision-making.

I am reluctant to bring up issues that concern me about the behaviour of my colleagues

Agree (35%) = Negative Effect

More than 1 in 3 (35%) of respondents agree that they are reluctant to bring up issues that concern them about the behaviour of their colleagues. Disabled (45%), women (43%) and racialized (42%) respondents, including faculty in Law (60%) agree the most with this statement. When intersected, racialized women (51%), heterosexual Indigenous respondents (50%), and disabled racialized respondents (47%) report the most reluctance to bring up issues about the behaviors of their colleagues that concern them.

Disagree (45%) = Positive Effect

Conversely, non-binary respondents (55%), 2SLGBQ+ respondents (53%), and men (52%), including respondents from Business (69%), are the most groups to disagree with this statement. When intersected, racialized 2SLGBQ+ respondents (67%), men with no caregiving role (61%), and non-binary faculty caregivers (60%) report the highest disagreement with this statement relative to their populations.

In the past two years at UBC, how often have you experienced the following in your work environment?¹⁶

Exclusion from social interactions with colleagues

Some or More Times (31%) = Negative Effect

Overall, about 1 in 3 (31%) respondents report experiencing exclusion from social interactions with colleagues at least sometimes (i.e. sometimes, often, or all the time). Non-binary (55%), Indigenous (53%), and disabled (49%) respondents report the highest experience of interpersonal exclusion, including respondents in Education (55%). When intersected, disabled 2SLGBQ+ respondents (58%), disabled racialized respondents (58%), Indigenous faculty caregivers (54%), and disabled caregivers (51%) report the most experience of interpersonal exclusion.

Never (42%) = Positive Effect

Conversely, faculty with no caregiving role (56%), men (53%), and white faculty (45%), including respondents from Land and Food Systems (56%), are the uppermost demographic groups to report never experiencing exclusion from social interactions with colleagues. When intersected, men with no caregiving role (72%), heterosexual faculty with no caregiving role (63%), and white men (57%) report never experiencing interpersonal exclusion the most.

Being left out of the loop on important information that other colleagues got

Some or More Times (38%) = Negative Effect

More than 1 in 3 (38%) respondents experience being left out of the loop of important information that other colleagues got *at least* sometimes. Indigenous (59%), non-binary (55%), 2SLGBQ+ (50%) and disabled (50%) respondents, including faculty in Dentistry (56%), report significantly greater experiences of being left out of the loop. When intersected, Indigenous women (86%), disabled racialized respondents (79%), and disabled 2SLGBQ+ faculty (67%) are the foremost to report experiencing information exclusion some or more times.

Never (29%) = Positive Effect

Conversely, faculty with no caregiving role (52%), men (36%), and non-disabled (31%) respondents, including faculty in Business (50%), report never being left out of the loop on important information the most. When intersected, faculty with no caregiving role report never experiencing this the most; with the top three being men with no caregiving role (61%), heterosexual faculty with no caregiving role (58%), and white persons with no caregiving role (53%).

¹⁶ There are 5 response options to this question. We combined 3 into one bin, kept 1 as is, and omitted the other from this presentation. Bin one, **Some or More Times**, combines 'sometimes', 'often', and 'all the time'. Response option, 'never', remains as is. Omitted from this presentation is the 'rarely' response option.

Someone else receiving or taking credit for your ideas or work

Some or More Times (26%) = Negative Effect

1 in 4 respondents (26%) have experienced someone else receive or take credit for their ideas or work some or more times. Relative to their population, disabled faculty (40%), women faculty (36%), and Indigenous respondents (35%), as well as faculty from Dentistry (50%), report the highest rate of someone else receiving or taking credit for their ideas or work. When intersected, the top three socio-demographics that report this experience are disabled racialized faculty (68%), disabled 2SLGBQ+ respondents (58%), and Indigenous heterosexual faculty (50%).

Never (52%) = Positive Effect

Conversely, men (62%), non-disabled faculty (54%), and white respondents (53%) are the top groups to report never having this experience, including faculty in Forestry (69%). When intersected, non-disabled men (66%), heterosexual men (63%), white men (63%), racialized men (63%) and men caregivers (59%) are the foremost to report never experiencing someone else receiving or taking credit for their ideas or work.

Gender-based insults or put-downs

Some or More Times (17%) = Negative Effect

1 in 6 (17%) respondents report experiencing gender-based insults or put-downs some or more times. Respondents in the Faculty of Law (45%), 2SLGBQ+ respondents (29%), women faculty (28%) and disabled faculty (26%) report experiencing gender-based insults or put-downs the most. Across *all* intersected demographic categories, women report this experience substantially more than men faculty. The top three reportable intersected demographic groups involving gender are disabled racialized (37%), 2SLGBQ+ women (36%), and 2SLGBQ+ caregivers (34%).

Never (68%) = Positive Effect

Conversely, faculty in Business (89%), men faculty (84%), respondents with no caregiving role (74%), and non-disabled respondents (70%) are the foremost groups to report *never* experiencing gender-based insults or put-downs. Across *all* intersected demographic categories, men report never experiencing this considerably more than women. The top three intersected demographic groups who report never experienced gender-based insults are non-disabled men (86%), heterosexual men (86%), white men (85%), and racialized men (83%).

Racist insults or put-downs

Some or More Times (8%) = Negative Effect

1 in 12 (8%) respondents report experiencing racist insults or put-downs some or more times. Indigenous (35%), racialized (19%), and disabled (14%) respondents, as well as faculty in Education (16%), report the most experience of racist insults or put-downs. When intersected, Indigenous heterosexual faculty (50%), disabled racialized faculty (47%), and Indigenous faculty caregivers (46%) are the top three demographic groups to report experiencing racist insults or put-downs at this frequency.

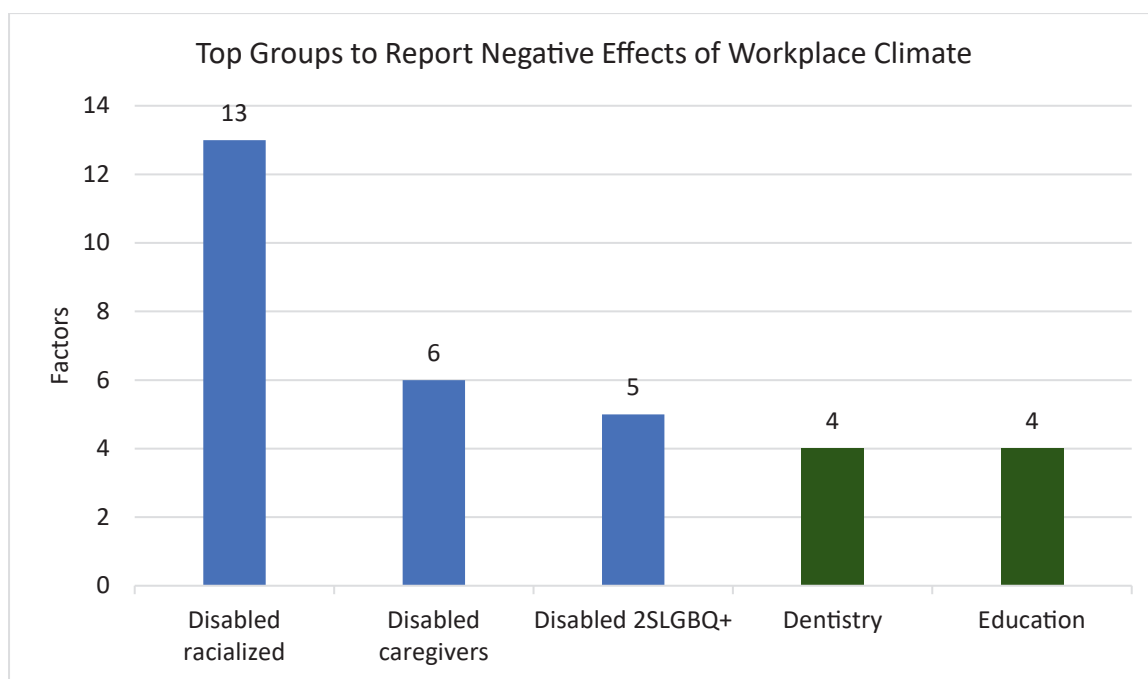
Never (82%) = Positive Effect

Overall, 82% of respondents report never experiencing racist insults or put-downs. This is especially so for faculty in Pharmaceutical Sciences (93%), white respondents (90%), men (86%), and non-disabled faculty (83%). When intersected, white men (92%), white heterosexual respondents (91%), non-disabled white faculty (91%), white faculty caregivers (89%) and white women (89%) are the top groups to report never experiencing racist insults or put-downs.

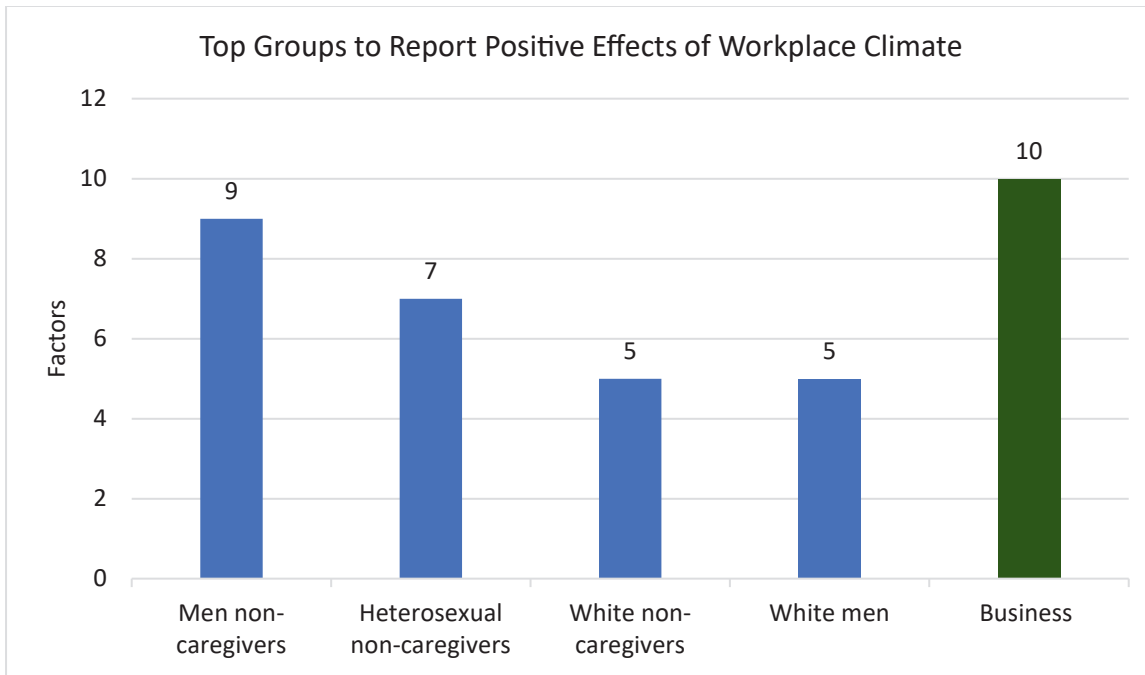
Cumulative Effects: Workplace Climate

Negative and positive effects are unequally distributed across faculty groups, with some groups experiencing more negative or positive effects than others. The patterned nature of this distribution suggests an underlying structural process that contributes and/or fails to prevent disparities in the workplace.

The results for the workplace climate domain stem from two questions and 14 factors.



The above graph presents the top socio-demographic groups and faculty who report the most counts of negative effects in the workplace. Disabled racialized faculty report negative effects across 13 factors of this domain, disabled caregivers report negative effects across 6 factors, and disabled 2SLGBQ+ faculty report negative effects across 5 factors. Among faculty, respondents from Dentistry and Education each report negative across 4 factors in this domain.



Conversely, positive effects across factors were reported mainly by non-caregivers and men; more specifically, men non-caregivers report positive effects across 9 factors of this domain, heterosexual non-caregivers across 7 factors, and white non-caregivers and white men each report positive effects across 5 factors. Among faculty, respondents from Business overwhelmingly report the highest positive effects compared to other faculty—across 10 factors.

Findings: Effects on Overall Ability to Work



This section explores the effects of the COVID-19 pandemic and curtailment on faculty's overall ability to work during the first wave of the pandemic (Jan 2020-July 2020). The findings for this domain stem from two survey questions that assess 9 factors:

- Overall, how have each of the following affected your ability to perform your work during COVID-19?
- Have any of the following reduced your ability to perform your work during COVID-19?

Overall, how have each of the following affected your ability to perform your work during COVID-19?¹⁷

Time available

Restricted Ability to Work (57%) = Negative Effect

Overall, 57% of faculty members report time availability as a restricting factor in their ability to work. Faculty caregivers (64%) and women (62%) report time availability as restricting their ability to perform their work the most. Among faculty, respondents from Land and Food Systems (74%) report the highest level of work performance restriction due to time availability. When intersected, the restrictive effect of time availability on work performance is, proportionally to their survey population, most acute for disabled 2SLGBQ+ faculty (75%), disabled women (65%), non-disabled faculty caregivers (65%) and heterosexual faculty caregivers (64%).

Improved Ability to Work (13%) = Positive Effect

Conversely, non-caregivers (23%), disabled faculty (18%), and faculty from Forestry (19%) were the most likely to report that time availability *improved* their ability to work. When intersected, work performance improvement is highest for disabled heterosexual persons (22%), disabled men (19%), disabled white person (19%), and disabled women (18%). The top four demographic groups to report an improvement on their work due to time availability are all disabled. This may reflect a decrease in what we may call "time or temporal inequality", whereby disabled faculty, constrained in great part by environmental, organizational, and attitudinal social barriers, expend more time navigating life outside their homes than non-abled individuals. For some disabled people, remote work reduces the time required to navigate inaccessible environments thus increasing time available for work.

Available work space

Restricted Ability to Work (63%) = Negative Effect

Sixty-three percent (63%) of respondents experience work space availability as a significant restricting factor on their overall ability to work. Racialized (73%), 2SLGBQ+ (68%) and caregiving (66%) respondents, including faculty from Applied Science (70%), report experiencing this burden the most. When intersected, racialized men (77%), racialized faculty caregivers (75%), racialized 2SLGBQ+ faculty (75%), and disabled men (71%) are the top sociodemographic groups to report work space availability as restricting their work performance ability.

¹⁷ There are 3 response options to this question. We omitted 1 response option from this presentation. 'Restricted my ability to perform my work' and 'improved my ability to perform my work' are presented as is. Omitted from this presentation is the 'no effect/NA' response option.

Improved Ability to Work (2%) = Positive Effect

Few respondents report the availability of work space as a factor that *improved* their ability to work. When intersected, disabled racialized persons (17%), disabled women (10%), and racialized 2SLGBQ+ faculty (8%) report the highest improvement to their work due to workspace availability.

Staff support

Restricted Ability to Work (44%) = Negative Effect

A sizeable portion (45%) of respondents found that (the lack of) staff support, such as administrative, teaching, and research assistants, restricted their overall ability to perform their work. Indigenous (59%), racialized (48%) and caregiving (45%) respondents, including faculty in Medicine (52%) report the highest staff support restriction. When intersected, Indigenous faculty caregivers (62%), Indigenous heterosexual respondents (58%), and disabled racialized faculty (53%) report the highest restriction.

Improved Ability to Work (7%) = Positive Effect

Very few respondents report staff support as a factor improving their overall ability to perform their work during COVID-19. Respondents in Forestry are an outlier, as 22% mention that staff support *improved* their overall ability to perform their work. In the other demographic groups, 0% to 10% report the same, including 10% of white 2SLGBQ+ faculty.

Have any of the following reduced your ability to perform your work during COVID-19?¹⁸

Certain factors have 'somewhat' to 'severely' reduced respondents' ability to work during COVID-19. Key factors among them are presented below.

Disability/accessibility

Reduced Performance (9%) = Negative Effect

Overall, 1 in 11 (9%) of respondents report accessibility as a factor that reduced their ability to perform their work during COVID-19. This is a factor especially for disabled respondents (39%), 2SLGBQ+ respondents (12%), and women respondents (12%), including Faculty of Law respondents (43%). When intersected, disabled 2SLGBQ+ faculty (64%), disabled women (45%), and disabled racialized faculty (44%) report accessibility issues as reducing their ability to work during COVID-19 the most.

No Effect/NA (91%) = Positive Effect

Conversely, faculty in Dentistry (100%), non-disabled respondents (96%), non-caregivers (96%), and men (95%) report accessibility issues as having *no effect* on or not applying to their ability to perform their work.

When intersected, groups containing able-bodied respondents or men are the most to report accessibility

¹⁸ There are 3 response options to this question. We combined 2 response options into one bin, and kept 1 response option as is. Bin one, **Reduced**, combines 'severely reduced my ability to perform my work' and 'somewhat reduced my ability to perform my work'. Response option, 'no effect/NA', remains as is.

issues having no effect or not applying to their ability to perform their work. The top groups include 100% of non-disabled respondents with no caregiving role, racialized respondents with no caregiving role, men with no caregiving role, and Indigenous men. This is followed by 97% of non-disabled white persons, non-disabled men, white men, and 2SLGBQ+ men, and 96% of white men, non-disabled heterosexual respondents, non-disabled women, non-disabled caregivers, and non-disabled 2SLGBQ+.

Household conflict

Reduced Performance (30%) = Negative Effect

Close to 1 in 3 (30%) respondents report household conflict as reducing their ability to perform their work during COVID-19. Indigenous (47%), racialized (41%), and caregiving (36%) respondents, and Forestry faculty (44%) report the highest rates of this impact on work performance due to household conflict. When intersected, the negative work performance impact of household conflict is most reported by Indigenous caregivers (62%), Indigenous heterosexual faculty (50%), and racialized faculty caregivers (49%).

No Effect/NA (70%) = Positive Effect

Conversely, respondents with no caregiving role (89%), white respondents (75%), and men respondents (71%), including faculty in Dentistry (88%), were the main groups to report household conflict bearing no effect on their ability to perform their work or not applying to them. When intersected, of the reportable findings, respondents with no caregiving role are the most to report household conflict having no effect or not being applicable to their work performance. This includes racialized persons with no caregiving role (100%), men with no caregiving role (94%), and white persons with no caregiving role (93%).

Role as a caregiver

Reduced Performance (57%) = Negative Effect

Respondents attributed caregiving, whether for family, friends, community, etc., as a significant factor reducing their work performance ability during COVID-19. More than 1 in 2 (57%) report caregiving as severely or somewhat reducing their work performance. Faculty who are caregivers (71%), non-binary (64%), racialized (63%), and women (63%), and faculty in Law (71%) report caregiving impacting work performance the most. When intersected, the top three demographic groups to report the same are Indigenous faculty caregivers (77%), women faculty caregivers (73%), and disabled racialized faculty (72%).

No Effect/NA (43%) = Positive Effect

Conversely, 100% of faculty with no caregiving role, respondents from Dentistry (71%), and 2SLGBQ+ (51%) and men (48%) faculty report the least effect or caregiving not applying to their work performance. When intersected, 100% of *all* faculty with no caregiving role report that caregiving bears no effect or applicability on their work performance. This includes racialized non-caregivers, white non-caregivers, non-disabled non-caregivers, heterosexual non-caregivers, men non-caregivers, and women non-caregivers. The next top two demographic groups include 2SLGBQ+ men (59%) and disabled 2SLGBQ+ (58%).

Stress/anxiety/sadness

Reduced Performance (73%) = Negative Effect

The impact of stress on work is also unequally distributed. While 73% of all respondents report a negative impact of stress on their ability to work, certain social groups report higher rates of stress having this impact: non-binary (91%), Indigenous (88%), disabled (81%), women (81%) and 2SLGBQ+ (81%) respondents. Among faculty, respondents from Law (90%) report the highest rate of negative impact of stress on work performance. An intersectional analysis shows that, proportional to their population, 92% of Indigenous faculty caregivers, Indigenous heterosexual faculty, and disabled 2SLGBQ+ faculty, 90% of non-binary faculty caregivers, and 88% of Indigenous men, white 2SLGBQ+ faculty, and 2SLGBQ+ non-binary faculty experience the highest negative impact of stress on work.

No Effect/NA (27%) = Positive Effect

Conversely, respondents with no caregiving role (44%), men (34%), non-disabled faculty (28%), heterosexual faculty (28%), and respondents from Dentistry (41%) report no effect of stress on work or this factor as not applicable to them. When intersected, racialized 2SLGBQ+ faculty (50%), heterosexual persons with no caregiving role (47%), and men with no caregiving role (44%) are the top three demographic groups to report 'no effect of stress' or of this factor as 'not applicable' to their work performance.

Racism/racist incidents

Reduced Performance (10%) = Negative Effect

The overwhelming majority of respondents (90%) report that racism/racist incidents had no effect on their work performance or that it does not apply to them. Of those that do mention racism having an impact, the largest impact was reported by racialized (22%) respondents. At the faculty level, Law was an outlier with 37% of respondents indicating racism/racist incidents reducing their work performance. When intersected, disabled racialized faculty (39%), racialized women (32%), and racialized faculty caregivers (26%) report the highest negative impact on work performance during COVID-19 due to racism/racist incidents.

No Effect/NA (90%) = Positive Effect

Conversely, 95% of white faculty and 100% of faculty in Business and Pharmaceutical Sciences report that racism/racist incidents have no effect on their work performance or that this factor does not apply on their ability to perform their work. When intersected, racialized faculty with no caregiving role (100%), white men (97%), non-disabled white faculty (96%), and 95% of white heterosexual respondents and white 2SLGBQ+ faculty report no effect of racism on their work performance or that this factor is not applicable on their work performance.

Harassment/discrimination

Reduced Performance (8%) = Negative Effect

Overall, 8% of respondents report that harassment/discrimination reduced their work performance ability. The top three demographic groups to report that harassment/discrimination severely or somewhat reduced their ability to perform their work include disabled (15%), racialized (13%), and 2SLGBQ+ (13%) respondents. Among faculty, respondents from Education (14%) report the same. When intersected, and

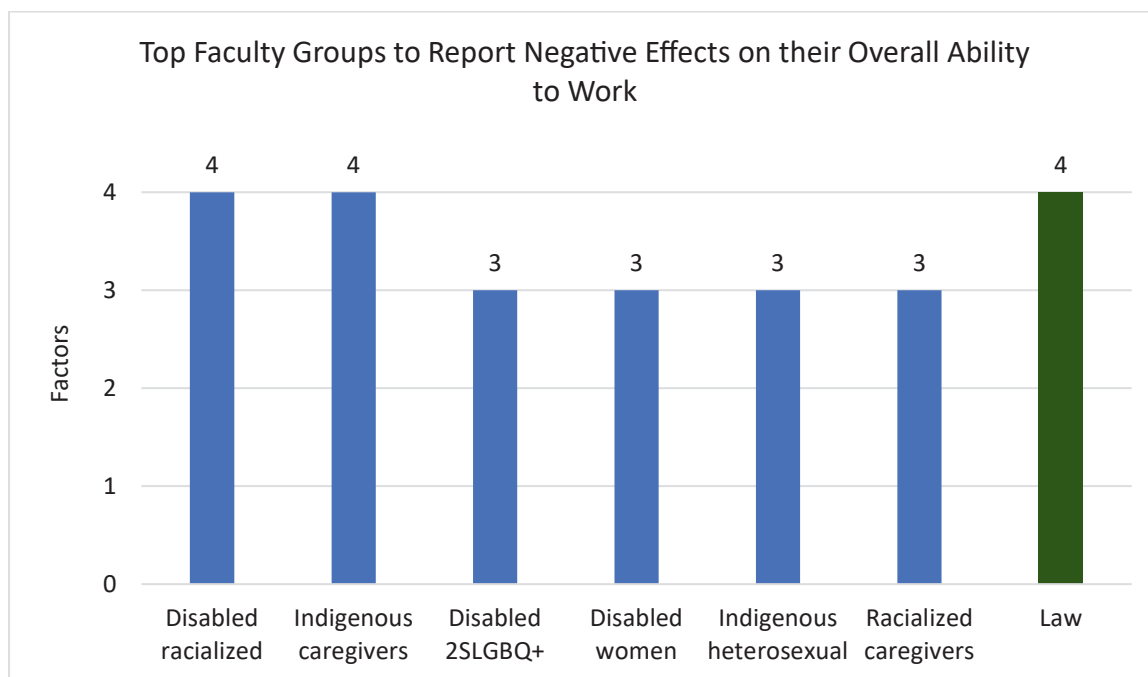
relative to their population, disabled women (20%), racialized women (19%), and disabled faculty caregivers (17%) report the highest level of negative impact of harassment/discrimination on work performance.

No Effect/NA (92%) = Positive Effect

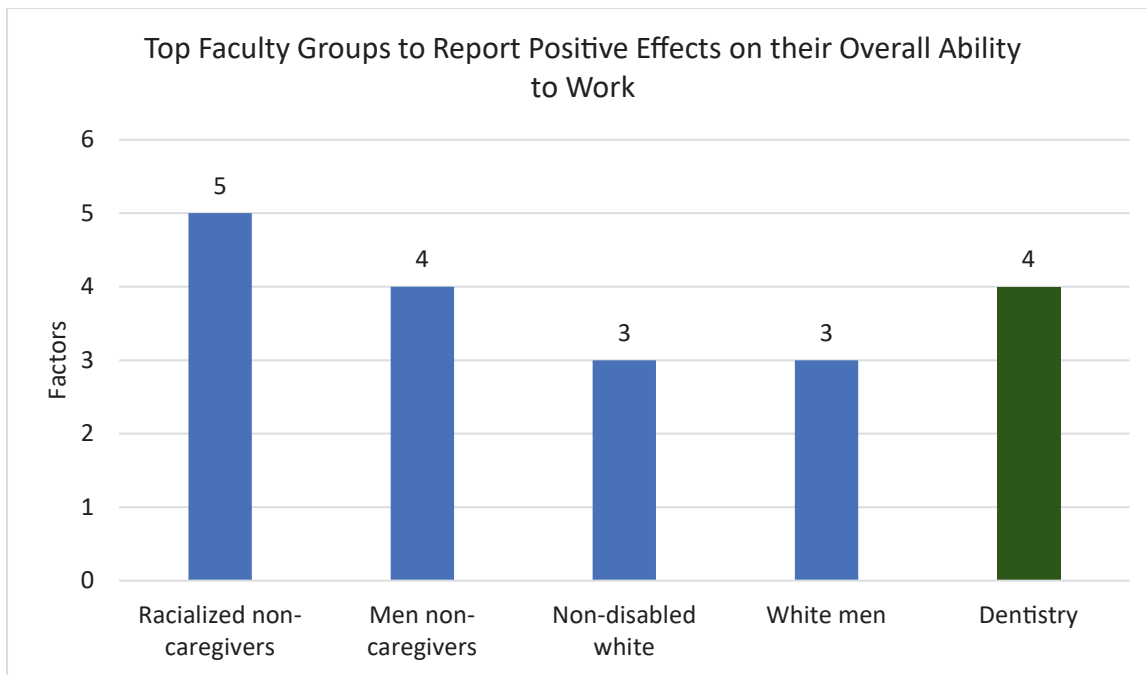
Conversely, the top respondents who report that harassment/discrimination had no effect on their work performance or is 'not applicable' to them include 100% of respondents from Business and Pharmaceutical Sciences, 96% of men respondents, 95% of white respondents, and 93% of non-disabled faculty. When intersected, the top groups to respond no effect or 'not applicable' include 100% of Indigenous heterosexual faculty, Indigenous men and Indigenous women faculty, racialized persons with no caregiving role, and women with no caregiving role. Following these respondents are 98% of white men, and 97% of disabled men.

Cumulative Effects: Overall Ability to Work

Results for the overall ability to work domain consists of two questions and 9 factors.



The highest count of negative effects of the pandemic on their overall ability to work were reported by six faculty groups. Disabled racialized faculty and Indigenous caregivers separately report negative effects across 4 factors, and disabled 2SLGBQ+ faculty, disabled women, Indigenous heterosexual faculty, and racialized caregivers each report negative effects across 3 factors. Respondents in the faculty of Law reported negative effects across 4 factors in this domain.



Conversely, racialized non-caregivers report positive effects across 5 factors, men non-caregivers across 4 factors, non-disabled white faculty and white men faculty each report positive effects across 3 factors, and, among faculty, respondents from Dentistry report positive effects across 4 factors in the overall ability to work domain.

Findings: Effects on Teaching



This section focuses on the different ways COVID-19 and curtailment impacted the teaching activities of faculty. The analysis for this domain stems from three survey questions that assess 11 factors altogether.

- Was your teaching workload affected by the transition to online courses?
- How have the following aspects of your teaching been affected by the transition to online courses due to COVID-19?
- Have you sought advice or assistance to prepare for teaching?

Was your teaching workload affected by the transition to online courses?¹⁹

Decreased Entirely to Somewhat Decreased (4%) = Positive Effect

Overall, 4% of faculty report that their workload somewhat decreased to decreased entirely as a result of the transition to online courses. As this is a small overall count, attention is paid to the next two response options.

Somewhat Increased to Increased by Half (39%) = Negative Effect

39% of respondents report that their workload somewhat increased to increased by half. The top groups to experience this degree of teaching workload increase due to the transition to online courses include respondents in Dentistry (69%), faculty with no caregiving role (57%), men faculty (43%), and heterosexual faculty (39%). When intersected, heterosexual faculty with no caregiving role (71%), men faculty with no caregiving role (64%), and non-disabled faculty with no caregiving role (60%) are the top three demographic groups to report this degree of teaching workload increase.

Increased by Half to Doubled or More (57%) = Negative Effect

For the majority (57%) of respondents, teaching workload increased at least by half; meaning, it increased by half, doubled, or more than doubled. This degree of increase was most prominent for Indigenous faculty (80%), non-binary faculty (78%), and 2SLGBQ+ faculty (70%). Among faculty, respondents from the Faculty of Arts (68%) report the highest increase of workload increase by half or more. When intersected, 100% of non-disabled non-binary persons, 75% of Indigenous faculty caregivers, 75% of non-binary faculty caregivers, and 74% of white 2SLGBQ+ faculty report the highest increase in workload by half or more.

¹⁹ This question uses 1 factor to determine how transition to online courses affected teaching workload. It is a slider question from 0 ('decreased entirely') to 2 ('doubled or more'). The values were combined into three bins: Bin one, **Decreased entirely to somewhat decreased**, combines values 0 to 1. Bin two, **Somewhat increased to increased by half**, combines values 1.1 to 1.5. Bin three, **Increased by half to doubled or more**, combines values 1.6 to 2.

How have the following aspects of your teaching been affected by the transition to online courses due to COVID-19?²⁰

Class preparation

Became Harder (75%) = Negative Effect

For 75% of respondents, class preparation became harder due to the transition to online teaching. Class preparation was especially harder for 2SLGBQ+ (83%), Indigenous (82%), and women (79%) respondents. At the faculty level, respondents from Applied Sciences (86%) and Arts (86%) report the similar effect on their workload. When intersected, the top three reportable demographics for who class preparation became harder include all racialized 2SLGBQ+ faculty (100%), Indigenous faculty caregivers (89%) and 88% of non-disabled 2SLGBQ+ faculty, heterosexual Indigenous faculty, and non-binary faculty caregivers.

Became Easier/Did Not Change (25%) = Positive Effect

Conversely, the top reportable results of respondents whose teaching workload became easier or did not change include faculty with no caregiving role (38%), men (29%), heterosexual persons (26%) and faculty in Dentistry (56%). When intersected, the top three socio-demographic groups to report ease or no change include heterosexual persons with no caregiving role (43%), non-disabled persons with no caregiving role (40%), and heterosexual men (31%).

Lecture delivery

Became Harder (75%) = Negative Effect

Similar to class preparation, as result of the transition to online courses, lecture delivery became harder for 76% of faculty. Of the reportable results among them, Indigenous faculty (91%), faculty with one or more caregiving roles (76%), and respondents in Business (90%) are the top groups to report that lecture delivery became harder. When intersected, lecture delivery became harder the most for non-disabled non-binary faculty (100%), racialized 2SLGBQ+ faculty (89%), Indigenous faculty caregivers (89%), and Indigenous heterosexual respondents (88%).

Became Easier/Did Not Change (24%) = Positive Effect

Conversely, lecture delivery became easiest or remained unchanged for respondents with no caregiving role (32%) and respondents from Dentistry (43%). When intersected, disabled faculty caregivers (29%), disabled men (29%), disabled heterosexual persons (27%), and white men (25%) report an easing or unchanging effect on lecture delivery as a result of the transition to online courses.

Facilitating class activities

Became Harder (82%) = Negative Effect

Overall, as a result of the transition to online teaching, 82% of respondents report that facilitating class

²⁰ There are 3 response options to this question. We combined 2 response options into one bin, and kept 1 response option as is. Bin one, **Became easier or not affected**, combines 'became easier' and 'not affected (stayed the same)'. These were combined because of the negligible responses to 'became easier' (7% or less). Response option, 'became harder' remains as is.

activities became harder. Among them, this burden was highest for Indigenous faculty (100%), non-binary faculty (100%), disabled faculty (88%), and caregivers (83%). While a sizeable majority of respondents across all faculties report that facilitating class activities became harder, respondents in the Faculty of Land and Food Systems (93%) report the highest level. When intersected, the biggest burden was reported by 100% of respondents who are heterosexual Indigenous, Indigenous faculty caregivers, non-disabled non-binary, 2SLGBQ+ non-binary, and non-binary faculty caregivers. This was followed by 92% of disabled white respondents, and 89% of disabled 2SLGBQ+ respondents and disabled women.

Became Easier/Did Not Change (18%) = Positive Effect

Conversely, besides respondents from Dentistry (40%), among those who report an easing or non-change to class facilitation activities, no significant variation exists between socio-groups. When intersected, white men (21%) are the only reportable group to report a benefit in this factor.

Class discussion

Became Harder (83%) = Negative Effect

Overall, a majority of respondents (83%) report that class discussion became harder in the transition to online teaching. This was more acute for Indigenous faculty (100%) and faculty caregivers (84%), with respondents in Pharmaceutical Sciences (100%) reporting the most burden of this nature among faculties. When intersected, the following socio-groups reported the highest degree of class discussion burden: 100% of Indigenous heterosexual, Indigenous faculty caregivers, and non-disabled non-binary respondents. Followed by 2SLGBQ+ men (96%) and non-disabled 2SLGBQ+ (92%).

Became Easier/Did Not Change (17%) = Positive Effect

While respondents from medicine (28%) report the highest benefit of this nature, no significant variations exist between socio-groups who report an easing or a non-change to class discussion activities.

Interaction with students (real time and asynchronous)

Became Harder (83%) = Negative Effect

Overall, 83% of respondents report that interactions with students became harder in the transition to online teaching. The top three social identity groups to report experiencing interaction with students the hardest include non-disabled respondents (85%), non-binary respondents (78%), and respondents in Arts (91%).

When intersected, this hardship was highest for Indigenous heterosexual faculty (100%), racialized 2SLGBQ+ faculty (100%), 2SLGBQ+ men (96%), and non-disabled 2SLGBQ+ faculty (92%).

Became Easier/Did Not Change (17%) = Positive Effect

Conversely, the top reportable demographics to report interaction with students becoming easier or not changing include disabled persons (22%) and faculty in Medicine (28%). When intersected, disabled faculty caregivers (22%) report the highest benefit of this factor.

Managing assessment (e.g., marking, invigilation, etc.)

Became Harder (56%) = Negative Effect

A bit more than 1 in 2 (56%) respondents report that managing assessments (e.g., marking, invigilation, etc.) become harder in the transition to online teaching. This was more pronounced for non-binary (67%), racialized (64%), Indigenous (64%) and women (61%) respondents. Among faculties, respondents from Pharmaceutical Science (75%) report the highest burden of this nature. When intersected, of the reportable findings, non-binary faculty caregivers (75%), racialized women (68%), and racialized heterosexual respondents (67%) report the most that management assessment became harder.

Became Easier/Did Not Change (44%) = Positive Effect

Conversely, managing assessments became easier or did not change chiefly for faculty in Forestry (62%), men (48%), and white respondents (47%). When intersected, the top three socio-demographic groups to report this benefit include disabled 2SLGBQ+ respondents (89%), racialized 2SLGBQ+ respondents (67%), and heterosexual faculty with no caregiving role (54%).

Have you sought advice or assistance to prepare for teaching at UBC this fall?

From an equity lens, various social and attitudinal factors contribute or act as barriers to help seeking-behavior for different demographic groups. Considering the complexity of this research area, and minus qualitative data, the findings for this section are not presented with 'positive effect' or 'negative effect' labels.

Advice/assistance from peers/colleagues at UBC or beyond

Has Sought this Type of Support (52%)

While 52% of all respondents sought advice/assistance from their peers/colleagues at UBC or beyond, disabled (61%) and white (56%) respondents sought this the most, including faculty from Law (71%). When intersected, the top three socio-groups to seek this type of support include women with no caregiving role (86%), white persons with no caregiving role (73%), and disabled men (65%). This is followed by four groups of disabled faculty: disabled heterosexual respondents (64%), disabled faculty caregivers (63%), and disabled white respondents (63%).

Has Not Sought this Type of Support (48%)

Conversely, Indigenous (59%), non-binary (55%) and racialized (52%) faculty, including respondents in the Faculty of Medicine (70%), were the top groups to not have sought advice/assistance from peers/colleagues. When intersected, Indigenous faculty caregivers (77%), disabled 2SLGBQ+ respondents (75%), and Indigenous heterosexual persons (67%) were the top three groups to not have sought this type of support.

Advice/assistance from school/faculty-based instructional support unit

Has Sought this Type of Support (38%)

Overall, 38% of respondents sought advice from their school/faculty-based instructional support unit. However, Indigenous faculty (53%), respondents with no caregiving role (48%), disabled respondents (48%), white faculty (40%), and faculty in Business (61%) sought advice from their school/faculty-based instructional support unit the most. When intersected, women with no caregiving role (86%), Indigenous men (75%), and white persons with no caregiving role (67%) sought this type of support the most.

Has Not Sought this Type of Support (62%)

Conversely, faculty from Dentistry (82%), racialized faculty (69%), 2SLGBQ+ faculty (68%), and men faculty (63%) are the top groups to have not sought advice/assistance from their school/faculty-based instructional support unit. When intersected, the top groups to not have sought this type of support include 2SLGBQ+ women (73%), 2SLGBQ+ faculty caregivers (70%), racialized heterosexual faculty (70%), racialized men (70%) and non-disabled racialized respondents (69%).

Advice/assistance from CTLT and/or LTHub

Has Sought this Type of Support (25%)

In general, 1 in 4 (25%) respondents sought advice/assistance to prepare for teaching from UBC's Centre for Teaching, Learning and Technology (CTLT) and/or Learning Technology Hub (LTHub). Indigenous (35%), disabled (31%), and women (29%) respondents, including faculty from Forestry (44%), report seeking this type of support the most. Of the reportable findings when intersected, disabled heterosexual respondents (34%), disabled white respondents, and disabled women (32%) and white women (32%) sought this type of support the most.

Has Not Sought this Type of Support (75%)

Conversely, the main socio-demographic groups that have not sought this type of support include faculty from Dentistry respondents (88%), racialized respondents (79%), men respondents (78%), and non-disabled persons (75%). When intersected, heterosexual respondents with no caregiving role (89%), Indigenous women (86%), disabled 2SLGBQ+ respondents (83%), and men with no caregiving role (83%) are the most to not have sought this type of support.

Attended one or more workshop sessions offered through CTLT and/or LTHub

Has Sought this Type of Support (26%)

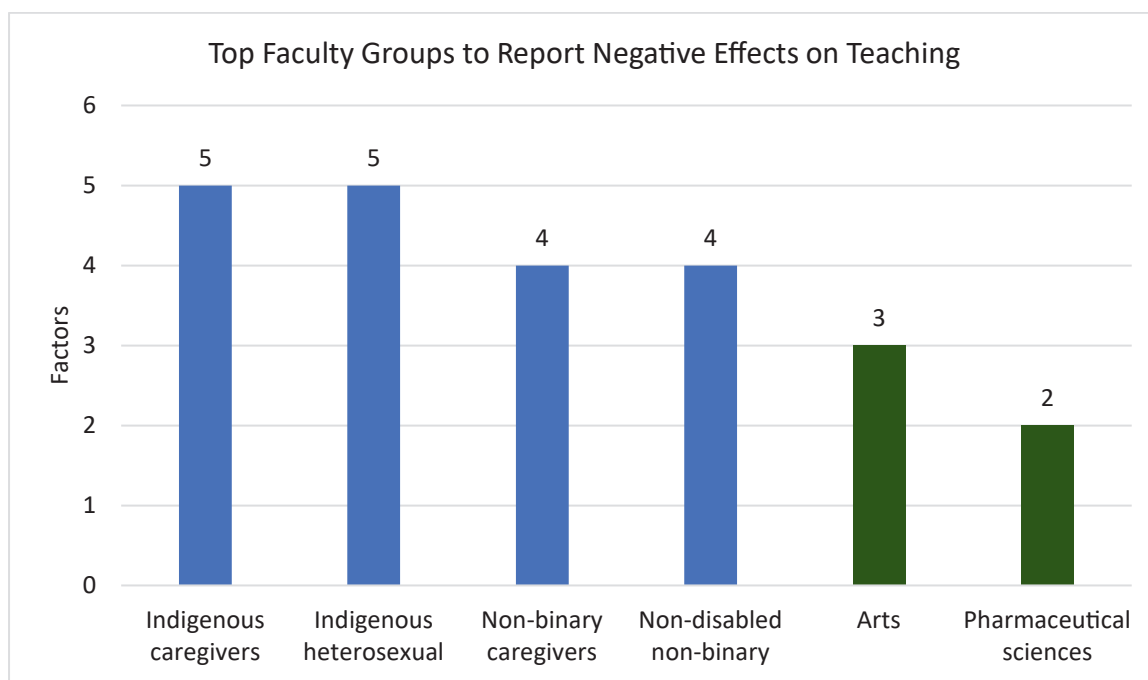
Overall, 26% of respondents report attending one or more workshop sessions offered by CTLT and/or LTHub—especially women faculty (36%), disabled persons (34%), faculty with no caregiving role (33%), and respondents from Land and Food Systems (47%). When intersected, white persons with no caregiving role (47%), racialized women (38%), disabled racialized persons (37%), and disabled faculty caregivers (37%) attended workshop sessions through CTLT and/or LTHub the most.

Has Not Sought this Type of Support (74%)

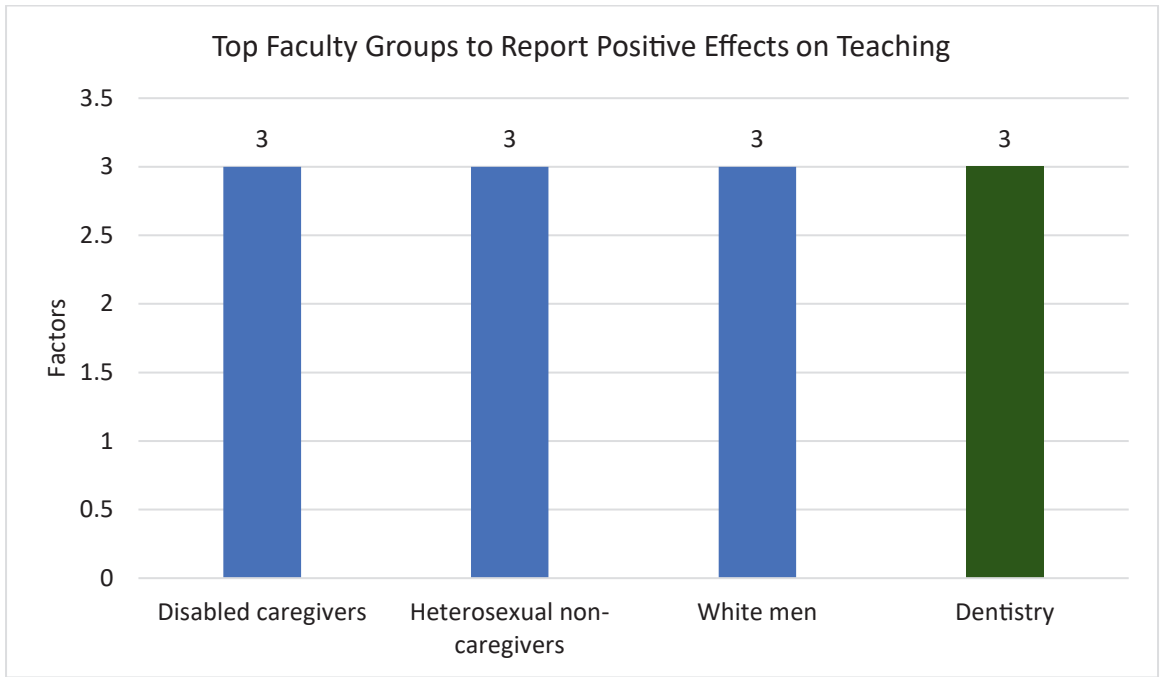
Conversely, Indigenous faculty (88%), men respondents (81%), 2SLGBQ+ respondents (80%), and faculty from Dentistry (84%), and, when intersected, Indigenous women (100%), Indigenous heterosexual faculty (92%), and Indigenous men (88%) are the top groups to have not sought this type of support.

Cumulative Effects: Teaching

Although the results for the effects on teaching domain consists of three questions and 11 factors, only the first two questions, thus 7 factors, are applicable for determining which group report the highest negative or positive effects. As explained above, the results of the third question were not characterized as 'negative' or 'positive' thus are inapplicable for a cumulative advantage and disadvantage determination.



Four faculty groups report the highest count of negative effects of the pandemic on their teaching. While Indigenous caregivers and Indigenous heterosexual faculty each report negative effects in 5 factors, non-binary caregivers and non-disabled non-binary faculty separately report negative effects across 2 factors. Among faculty, respondents from Arts and Pharmaceutical Science report negative effects across 3 and 2 factors, consecutively.



Conversely, the top three groups to report positive effects in the teaching domain include disabled caregivers, heterosexual non-caregivers, and white men—each of whom reported positive effects across 3 factors. Among faculty, the top count of positive effects is from respondents in Dentistry.

Findings: Effects on Research



This section focuses on the different ways COVID-19 and curtailment impacted the research activities of faculty. The analysis for this domain stems from three survey questions that assess an aggregate of 15 different factors:

- How have your research programs and projects been affected by COVID-19?
- Please indicate whether the following factors have had a negative impact on your research programs and projects since April.
- In the coming months, what are your anticipated needs for research support services to support your research program and projects?

How have your research programs and projects been affected by COVID-19?²¹

Collaborative work

Decreased (62%) = Negative Effect

In general, 62% of faculty members found that collaborative work on research programs and projects decreased as a result of the COVID-19 pandemic. Indigenous faculty (71%), faculty with caregiving responsibilities (63%), and non-binary faculty (55%) report the highest level of decrease, including respondents in Dentistry (71%) and Pharmaceutical Science (71%). When intersected, disabled racialized faculty (79%), Indigenous heterosexual faculty (75%) disabled 2SLGBQ+ respondents (75%), and Indigenous faculty caregivers (69%) experienced the most decrease in collaborative research work.

Increased (11%) or Not Affected/N/A (27%) = Positive Effect

Conversely, of the reportable findings, faculty with no caregiving role (56%) and faculty in Law (52%) report the most that the pandemic has increased or not affected their collaborative research work, or that this factor does not apply to them. When intersected, the top respondents to report that collaborative research work 'increased, was not affected, or does not apply to them' include heterosexual faculty with no caregiving role (63%), men with no caregiving role (61%), and white persons with no caregiving role (53%).

Grant opportunities

Decreased (38%) = Negative Effect

While 38% of overall respondents report a decrease in grant opportunities as a result of the pandemic, this was most pronounced for racialized faculty (44%), women faculty (42%), and faculty caregivers (40%). Respondents in Pharmaceutical Science (57%) report the highest level of decrease in grant opportunities compared to respondents from other faculties. When intersected, the top demographic groups to report a decrease in grant opportunities include racialized women (58%), disabled racialized faculty (53%), and 44% of disabled women, disabled faculty caregivers, and racialized heterosexual faculty.

²¹ There are 5 response options to this question. We combined the response options into 2 bins. Bin one, **Decreased**, combines 'decreased significantly' and 'decreased somewhat'. Bin two, **Increased or Not affected/NA**, combines 'increased significantly', 'increased somewhat', and 'not affected/NA'. The latter three were combined because aggregated and intersected results to the two 'increased' options, even when combined, are mainly in the 9%-6% range.

Increased (7%) or Not Affected/N/A (54%) = Positive Effect

Conversely, Indigenous faculty (76%), faculty with no caregiving role (70%), 2SLGBQ+ faculty (68%), and respondents in Business (94%) report the most that the pandemic has increased or not affected grant opportunities or that this factor does not apply to them. When intersected, the top respondents to report the same include Indigenous men (88%), non-disabled non-binary respondents (86%), Indigenous heterosexual respondents (75%), disabled 2SLGBQ+ respondents (75%), and heterosexual women (75%).

Research funding

Decreased (28%) = Negative Effect

Over 1 in 4 (28%) respondents report a decrease in research funding as a result of the pandemic, with faculty in Medicine experiencing the highest decrease in research funding (42%). While 25%-32% of faculty from other socio-demographic groups report a decrease, the variation between groups in each social category were minimal (5% or less). When intersected, however, disabled racialized faculty (47%), racialized women (36%), and disabled faculty caregivers (34%) report the highest decrease in research funding.

Increased (5%) or Not Affected/N/A (67%) = Positive Effect

Conversely, faculty with no caregiving role (81%), Indigenous faculty (76%), men faculty (75%), and respondents in Business (92%) report the most that the pandemic has increased or not affected their research funding or that this factor does not apply to them. When intersected, the top respondents to report the same include racialized 2SLGBQ+ faculty (92%), men faculty with no caregivers (89%), and Indigenous men (88%).

Community engagement

Decreased (64%) = Negative Effect

In general, 64% of respondents report a decrease in community engagement as a result of the COVID-19 pandemic. Indigenous respondents (76%), women respondents (68%), faculty caregivers (66%), and respondents in Law (76%) experienced the highest decrease in community engagement research activities. When intersected, the top three socio-demographic groups to report this type of research activity burden are all Indigenous: Indigenous faculty caregivers (77%), Indigenous heterosexual faculty (75%), Indigenous men (75%), and women faculty caregivers (70%).

Increased (6%) or Not Affected/N/A (30%) = Positive Effect

Conversely, faculty with no caregiving role (52%), men faculty (38%) and respondents in Science (48%) report the most that the pandemic has increased or not affected their community engagement or that this factor does not apply to them. When intersected, the top respondents to report the same include white faculty with no caregiving role (53%), disabled racialized faculty (53%), non-disabled faculty with no caregiving role (52%), and men with no caregiving role (50%).

Research outputs (publications, presentations, gatherings, etc.)

Decreased (72%) = Negative Effect

Overall, 7 in 10 (72%) respondents report a decrease in research outputs. Indigenous faculty (82%), non-binary faculty (82%), women faculty (79%), and faculty caregivers (74%) report the highest decrease in research outputs. Among faculties, respondents in Pharmaceutical Science (86%) report the highest level of overall decrease. When intersected, 100% of Indigenous women respondents, 92% of disabled 2SLGBQ+ respondents, and 88% of 2SLGBQ+ non-binary respondents report the highest decrease of this type of setback.

Increased (9%) or Not Affected/N/A (19%) = Positive Effect

Conversely, faculty with no caregiving role (41%), 2SLGBQ+ faculty (35%), men faculty (32%) and respondents in Forestry (56%) report the most that the pandemic has increased or not affected their research outputs or that this factor does not apply to them. When intersected, the top respondents to report the same include men with no caregiving role (50%), white faculty with no caregiving role (47%), heterosexual faculty with no caregiving role (42%), and non-disabled 2SLGBQ+ faculty (42%).

Please indicate whether the following factors have had a negative impact on your research programs and projects since April.²²

Time needed to be a care provider (childcare, elder care, etc.)

Negative Impact (53%) = Negative Effect

Caregiving duties impacts faculty's research outputs. Overall, a little over half (53%) of respondents report that time needed to be a care provider had a negative impact on their research programs/projects. Faculty who are caregivers (66%), racialized (62%), and women (58%), and faculty in Law (79%) report the highest level of negative impact on research work resulting from care provision time. When intersected, disabled racialized respondents (78%), racialized faculty caregivers (75%), and 68% of women faculty caregivers and heterosexual faculty caregivers report the highest negative impact from this factor.

No Negative Impact or N/A (47%) = Positive Effect

Conversely, 93% of respondents who have no caregiving role, 76% of respondents in Dentistry, 60% of 2SLGBQ+ respondents, and 56% of Indigenous respondents are the top socio-demographic groups to report care provision time not having a negative impact on their research work or that this factor is *not* applicable to them. Indeed, a potential explanation of this finding for 2SLGBQ+ respondents is that more of them have *no* caregiving role than heterosexual respondents (for infants, elementary and high school students, returned college students, and the elderly). When intersected, the top socio-demographic groups to report 'no negative impact' or 'not applicable' include 100% of women, racialized, and heterosexual faculty who have no caregiving role. Followed by non-disabled non-caregivers (90%), and men non-disabled non-caregivers (89%).

²² There are 3 response options to this question. We combined two response options into 1 bin, and kept the other response option as is. Bin one, **Negative impact**, combines 'significant negative impact' and 'some negative impact.' The response option, 'no negative impact/NA' remains as is.

Home environment for remote work

Negative Impact (68%) = Negative Effect

Sixty-eight percent (68%) of respondents report that their home environment had an overall negative impact on their research programs/projects outputs. Indigenous (82%) and racialized (74%) respondents, and non-binary (73%) report the highest rates of overall negative impact. Among faculties, respondents in Land and Food Systems (84%) report the most negative impact. When intersected, Indigenous heterosexual (92%), Indigenous women (86%), and 77% of racialized faculty caregivers, racialized women, 2SLGB+ faculty caregivers, and Indigenous faculty caregivers report the highest levels of overall negative impact.

No Negative Impact or N/A (32%) = Positive Effect

Conversely, faculty with no caregiving responsibility (48%), disabled faculty (37%), white faculty (33%), and faculty in Dentistry (65%) are the top three groups to report this factor not having a negative impact or not applying to their research activities. When intersected, respondents with no caregiving duties who are also heterosexual (53%), men (50%), or white (47%) report the highest rate of this type of benefit.

Limitations to in-person behavioural or clinical studies

Negative Impact (27%) = Negative Effect

Limitations to in-person behavioural or clinical studies has an overall negative impact on the research programs/projects of 27% of respondents. This is more acute for Indigenous (63%), 2SLGBQ+ (34%), and women (33%) respondents, including faculty in Medicine (51%). When intersected, this burden was heaviest for Indigenous heterosexual respondents (73%), Indigenous faculty caregivers (58%), disabled 2SLGBQ+ respondents (58%), and white faculty with no caregiver role (47%).

No Negative Impact or N/A (73%) = Positive Effect

Conversely, no negative impact/not applicable was most reported by respondents from the Faculty of Science (89%), and respondents who identify as men (78%), white (74%), or heterosexual (34%). When intersected, the most benefit of this type are experienced by white men (80%), heterosexual men (78%), heterosexual non-caregivers (78%), non-disabled men (78%), white heterosexual respondents (75%), and non-disabled white respondents (75%).

Limitations to field work

Negative Impact (44%) = Negative Effect

Overall, limitations to field work had a negative impact on the research programs/projects of 44% of respondents. Indigenous respondents (81%), 2SLGBQ+ respondents (57%), and disabled respondents (53%) reported the highest rates of negative impact on field work of the social demographic groups. Among faculty, respondents from Forestry (71%) report the highest burden of this nature. When intersected, disabled 2SLGBQ+ faculty (92%), disabled racialized faculty (84%), and Indigenous faculty caregivers (83%) report the highest levels of overall negative impact.

No Negative Impact or N/A (56%) = Positive Effect

Limitations to field work did not have a negative impact or was not applicable to the research activities of the following top three socio-demographic groups and faculty: non-binary (64%), men (59%), and heterosexual (57%) respondents, and faculty from Dentistry (82%). When intersected, non-binary faculty caregivers (70%), heterosexual faculty with no caregiving role (63%), and heterosexual men (61%) are the top reportable demographic groups to report 'no negative impact/not applicable'.

Access to support for research (e.g., grant writing, partnership, support, etc.)

Negative Impact (29%) = Negative Effect

Overall, access to support for research had a negative impact on the research programs and projects of 29% of respondents. 2SLGBQ+ faculty (36%), racialized faculty (34%), women faculty (32%), and faculty from Dentistry (41%) report the highest burden of this type. When intersected, disabled racialized respondents (53%), white persons with no caregiving role (47%), and 2SLGBQ+ faculty caregivers (40%) report the highest negative impact of this nature.

No Negative Impact or N/A (71%) = Positive Effect

Conversely, the top reportable demographic groups to report that this factor has 'no negative impact or does not apply to their research work include respondents from Business (92%), men respondents (75%), white respondents (73%), and heterosexual respondents (72%). When intersected, the top demographic groups to report same include: Indigenous men (100%), white men (76%), heterosexual men (76%), non-disabled men (76%), racialized 2SLGBQ+ respondents (75%), and Indigenous faculty caregivers (75%).

Additional time required for online teaching

Negative Impact (68%) = Negative Effect

The additional time required for online teaching had a negative impact on the research programs/projects of 68% of respondents. This burden was most acute for non-binary (82%), 2SLGBQ+ (75%), and disabled (73%) faculty, including 90% of respondents from Law. When intersected, the top three demographic groups to report the negative impact of this dimension on research work include women faculty with no caregiving role (100%), 2SLGBQ+ non-binary respondents (88%), and non-disabled non-binary respondents (86%).

No Negative Impact or Not Applicable (32%) = Positive Effect

Conversely, 52% of faculty from Medicine, 37% of faculty with no caregiving role, 37% of men faculty, 34% of non-disabled faculty, and 33% of heterosexual faculty report the highest that this factor has no negative impact or is not applicable to their research work. When intersected, the top three reportable group include faculty men with no caregiving role (50%), heterosexual faculty with no caregiving role (42%), and racialized men faculty (39%).

In the coming months, what are your anticipated needs for research support services to support your research program and projects?²³

Partnership development

Require More Support (34%) = Negative Effect

About a third (34%) of respondents anticipate that in the coming months they will need more support than usual on partnership development for research programs and projects. Indigenous faculty (50%), racialized faculty (41%), and women faculty (38%) anticipate needing this support the most, including respondents from Applied Science (61%). When intersected, Indigenous women faculty (86%), Indigenous faculty caregivers (70%), and Indigenous heterosexual faculty (60%) also anticipate needing this type of support the most.

Unchanged Need (65%) or Require Less Support (1%) = Positive Effect

Conversely, non-binary respondents (89%), 2SLGBQ+ respondents (71%), white respondents (69%), and faculty from Science (81%) are the top socio-demographic groups to anticipate no change in their support need on partnership development or needing less partnership development support in the coming months. When intersected, non-disabled non-binary respondents (100%), 2SLGBQ+ non-binary respondents (100%), 88% of non-binary faculty caregivers, and 75% of disabled white respondents anticipate the most that there will be no change in their support need or that they will need less support.

Knowledge exchange

Require More Support (38%) = Negative Effect

Thirty-eight percent (38%) of respondents anticipate they will require more support than usual on knowledge exchange for research purposes. Indigenous (56%) and racialized (53%) respondents, and faculty caregivers (40%) anticipate needing this type of support in the next months the most, including respondents in Business (52%). When intersected, the top respondents including Indigenous women faculty (86%), Indigenous faculty caregivers (75%), and Indigenous heterosexual faculty (64%).

Unchanged Need (60%) or Require Less Support (2%) = Positive Effect

Conversely, the top socio-demographic groups to anticipate needing the same or less support in the coming months with knowledge exchange include non-binary faculty (70%), faculty with no caregiving role (69%), white faculty (68%), and respondents in Forestry (76%). When interested, white faculty with no caregiving role (88%), non-disabled faculty with no caregiving role (71%), white men faculty (69%), white heterosexual faculty (69%), disabled white faculty (69%), and non-disabled white faculty (69%) anticipate the most that there will be no change in their need for knowledge exchange support or that they will need less support.

²³ There are 3 response options to this question. We combined two response options into 1 bin, and kept the other response option as is. Bin one, **Unchanged/Require less**, combines 'require less than usual' and 'unchanged' response options. The response option, 'require more than usual', remains as is.

Support for engagement with indigenous partners

Require More Support (28%) = Negative Effect

In general, 28% of respondents report that they would require more support than usual to engage with Indigenous partners in their research programs/projects in the coming months. Indigenous respondents (64%), disabled respondents (39%), women respondents (34%) and, at the faculty level, respondents in Law (50%) anticipate needing this support the most. When intersected, Indigenous faculty caregivers (75%), Indigenous heterosexual respondents (67%) and disabled women faculty (44%) anticipate needing this type of support more than usual the most.

Unchanged Need (71%) or Require Less Support (1%) = Positive Effect

Conversely, the top socio-demographic groups to anticipate needing the same or less support with engagement with Indigenous partners include faculty with no caregiving role (80%), men faculty (77%), non-disabled faculty (73%), and faculty in Dentistry (100%). When intersected, men with no caregiving role (86%), white men (79%), heterosexual men (78%), non-disabled men (78%), and non-disabled persons with no caregiving role (78%) anticipate the most that there will be no change in their need for Indigenous engagement support or that they will need less support on this in the coming months.

Trainee and team support

Require More Support (53%) = Negative Effect

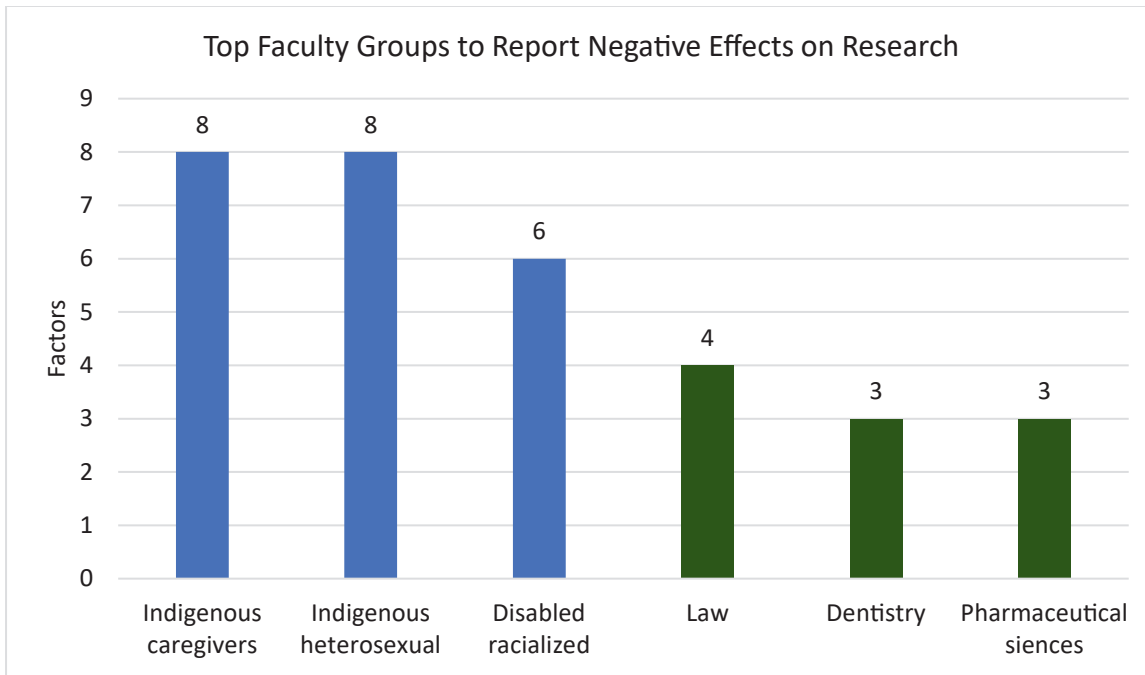
A little over 1 in 2 (53%) respondents anticipate needing more support than usual in the coming months for research trainees and teams. Indigenous (70%), women (61%), and racialized (59%) respondents, and respondents in Dentistry (67%) report needing this type of support the most. When intersected, Indigenous heterosexual respondents (75%), racialized women (71%), non-disabled women (63%), and women faculty caregivers (63%) anticipate the most that they will require more support than usual on trainee and team research.

Unchanged Need (46%) or Require Less Support (2%) = Positive Effect

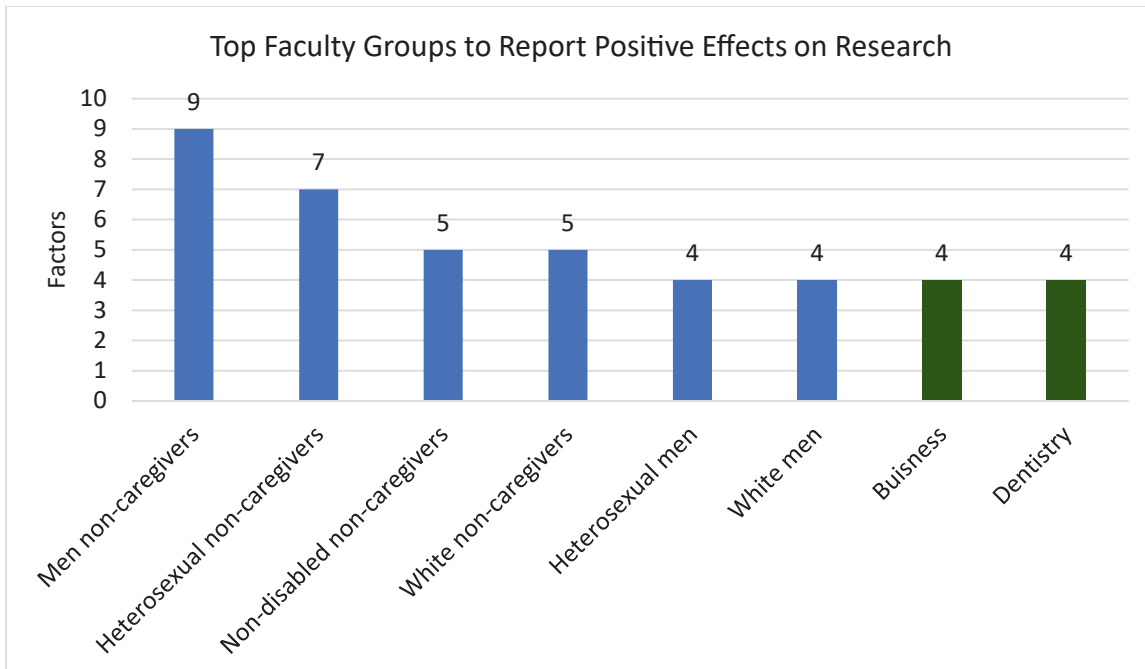
Conversely, faculty with no caregiving role (67%), men faculty (54%), disabled faculty (52%), and faculty in Business (63%) anticipate the most that there will be no change in their need for this type of support or will need less support in the coming months. When intersected, the top socio-demographic groups to anticipate needing the same or less support with trainee and team research include non-disabled respondents with no caregiving role (83%), men with no caregiving role (73%), and disabled men (61%).

Cumulative Effects: Research

The results for the effects on reach domain consists of three questions and 15 factors.



The groups to report the most negative effects in the research domain include Indigenous caregivers and Indigenous heterosexual faculty, who each report negative effects across 8 factor, and disabled racialized faculty, who report negative effects across 6 factors. Among faculty, respondents from Law report negative effects across 4 factors, while respondents in Dentistry and Pharmaceutical Sciences each report negative across 3 factors.



Conversely, men non-caregivers report positive effects across 9 factors, heterosexual non-caregivers across 7 factors, non-disabled non-caregivers and white non-caregivers each across 5 factors, heterosexual men and white men each across 4 factors, and, among faculty, Business and Dentistry respondents each report positive effects across 4 factors.

Findings: Effects on Service



This section explores the effects of the COVID-19 pandemic and curtailment on faculty's service activities. The findings for this domain stem from two survey questions which assess 7 factors altogether.

- Has your department, unit, faculty, or the institution asked you to take on more service responsibilities and roles during the pandemic?
- How have your academic service or administrative duties been affected by COVID-19?

Has your department, unit, faculty, or the institution asked you to take on more service responsibilities and roles during the pandemic?²⁴

This question is limited to formal requests for additional service during the pandemic. Responses indicate neither the level of respondents' service workloads prior the pandemic, nor how faculty responded to the request to take on more service responsibilities. For this reason, responses are not labeled as having a positive or negative effect.

Yes (45%)

About half (45%) of respondents were asked by their department, unit, faculty, or the institution to take on more service responsibilities and roles during the pandemic. Non-binary respondents (73%), Indigenous respondents (65%), 2SLGBQ+ respondents (56%), and respondents from Education were asked the most. When intersected, non-binary faculty caregivers (80%), Indigenous heterosexual faculty (75%), Indigenous men (75%), 2SLGBQ+ non-binary faculty (75%), and Indigenous faculty caregivers (69%) reported the highest.

No (55%)

Conversely, the top groups to have answered that they were not asked to take on additional service responsibilities and roles during the pandemic include racialized faculty (66%), faculty with no caregiving role (63%), men faculty (58%), and faculty in Business (67%). When intersected, the top groups include disabled racialized faculty (74%), heterosexual faculty with no caregiving role (74%), white faculty with no caregiving role (73%), and men faculty with no caregiving role (72%).

How have your academic service or administrative duties been affected by COVID-19?²⁵

Service is a required component of tenure-track faculty work, thus the assumption underlying the 'positive and 'negative' effect labeling is that respondents were already fulfilling their service work duties at the time of the pandemic. As such, increases in service work during the pandemic suggests faculty are working way beyond what is expected.

24 This question uses 1 global factor to determine if respondents have been asked to take on more service responsibilities and roles during the pandemic.

25 There are 3 response options to this question. We combined two response options into 1 bin and kept the other response option as is. Bin one, **Decreased or unaffected/NA**, combines 'decreased' and 'unaffected/NA' response options. The latter were combined because a very low number of respondents report a 'decrease' in service or administrative duties. The response option, 'increased', remains as is.

Overall service load

Increased (62%) = Negative Effect

Sixty-two percent (62%) of respondents report an increase in their service load as a result of the COVID-19 pandemic. The top groups to report the greatest level of service workload increase include Indigenous (94%), non-binary (73%), and women (68%) respondents, including respondents in Education (76%). When intersected, the top three different percentages were reported by Indigenous heterosexual respondents (100%), Indigenous women (100%), Indigenous faculty caregivers (100%), Indigenous men (88%), 2SLGBQ+ non-binary respondents (88%), and disabled 2SLGBQ+ respondents (75%).

Unaffected/NA (34%) or Decreased (3%) = Positive Effect

Conversely, faculty with no caregiving role (56%), racialized faculty (49%), men (44%), and faculty in Pharmaceutical Sciences (43%) are the top group to report that during the pandemic their overall service load was unaffected or decreased. When intersected, heterosexual faculty with no caregiving role (63%), white faculty with no caregiving role (60%), and disabled racialized faculty (58%) report the same.

Committee work

Increased (50%) = Negative Effect

Half (50%) of the respondents report an increase in committee work as a result of the pandemic. Indigenous (82%) respondents experienced the highest level of increase, followed by 2SLGBQ+ respondents (59%), and non-binary respondents (55%). Among Faculty, the highest rate increase is from respondents in Dentistry (65%). When intersected, Indigenous men (100%), Indigenous faculty caregivers (85%), and Indigenous heterosexual faculty (83%) report the highest increase in committee work.

Unaffected/NA (47%) or Decreased (4%) = Positive Effect

Conversely, racialized respondents (58%), men respondents (54%), heterosexual respondents (52%) and, among Faculties, respondents from Land and Food Systems (74%) are the top groups to report that during the pandemic their committee work was unaffected or decreased. When intersected, the top groups to report the same include disabled racialized faculty (63%), racialized men (59%), non-disabled racialized faculty (58%), racialized 2SLGBQ+ faculty (58%), and racialized heterosexual faculty (58%).

Administrative duties

Increased (55%) = Negative Effect

In general, over half of respondents (55%) report an increase in administrative duties due to the COVID-19 pandemic. Indigenous respondents (71%), faculty in Education (68%), non-binary respondents (64%) and faculty caregivers (59%) report the highest increase in administrative duties. When intersected, the top three different percentages are reported by Indigenous heterosexual respondents (83%), Indigenous faculty caregivers (77%) and Indigenous men (75%).

Unaffected/NA (42%) or Decreased (3%) = Positive Effect

Conversely, faculty in Land and Food Systems (74%), faculty with no caregiving role (52%), racialized faculty (52%), and men faculty (49%) and, when intersected, heterosexual faculty with no caregiving role

(63%), men with no caregiving role (61%), and disabled racialized faculty (58%) are the top groups to report that during the pandemic their committee work was unaffected or decreased.

Reviewing (manuscripts, theses, etc.)

Increased (29%) = Negative Effect

A bit more than 1 in 4 (29%) of respondents report an increase in reviewing duties (manuscripts, theses, etc.) brought on by the COVID-19. This was most acute for Indigenous respondents (50%), faculty caregivers (30%), and faculty in Medicine (42%). When intersected, Indigenous faculty caregivers (50%), 2SLGBQ+ faculty caregivers (33%), women faculty caregivers (32%), non-disabled women (32%) and disabled faculty caregivers (32%) are the top groups to report an increase in reviewing duties during the pandemic.

Unaffected/NA (69%) or Decreased (3%) = Positive Effect

Conversely, faculty with no caregiving role (85%), faculty in Law (80%), men faculty (73%) and white faculty (73%) report the highest unaffected or decrease in reviewing duties. When intersected, the top groups include racialized faculty with no caregiving role (100%), non-disabled faculty with no caregiving role (90%), and men with no caregiving role (88%).

Student support/mentoring

Increased (61%) = Negative Effect

In general, 6 in 10 (61%) of respondents report an increase in student support / mentoring duties as a result of the COVID-19 pandemic. This is more acute for non-binary respondents (82%), Indigenous respondents (76%), women respondents (70%), and faculty in Pharmaceutical Sciences (71%). When intersected, Indigenous women (86%), non-disabled non-binary faculty (86%), non-binary faculty caregivers (80%), and Indigenous caregivers (77%) report the greatest levels of increased student support/mentoring duties.

Unaffected/NA (34%) or Decreased (5%) = Positive Effect

Conversely, faculty with no caregiving role (63%), faculty in Land and Food Systems (53%), men faculty (46%) and, when intersected, men with no caregiving role (72%), heterosexual faculty with no caregiving role (63%) and non-disabled faculty with no caregiving role (62%) are the top groups to report that student support/mentoring duties were either unaffected or decreased during the pandemic.

Junior faculty support/mentoring

Increased (26%) = Negative Effect

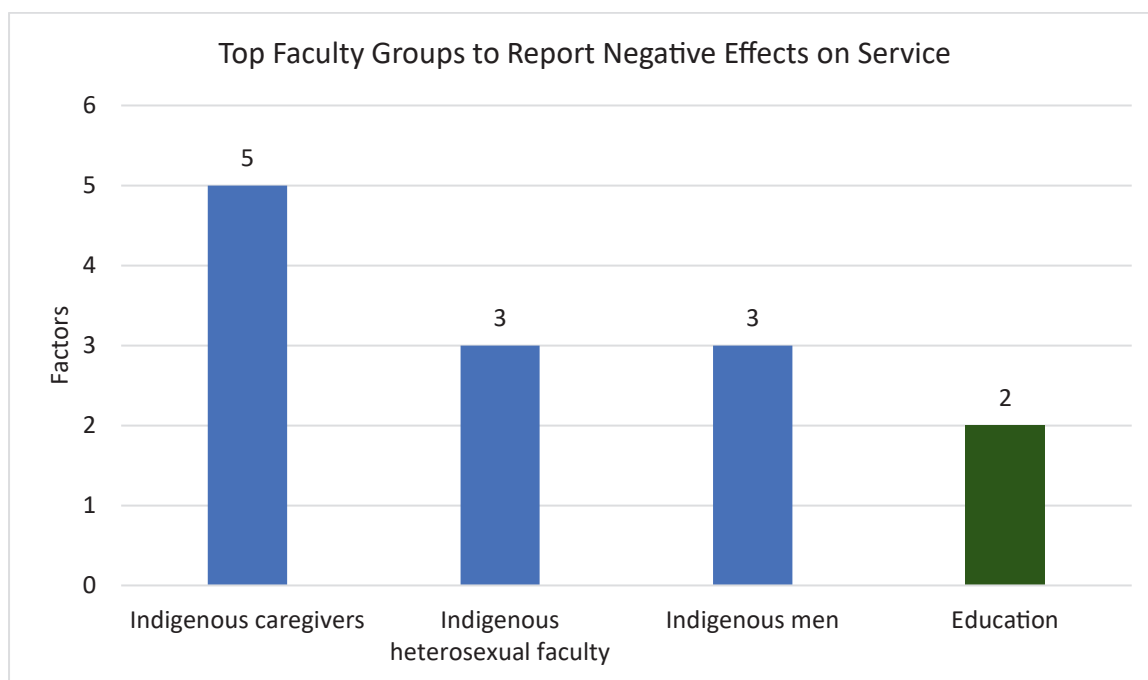
Lastly, 26% of respondents report that the COVID-19 pandemic increased their junior faculty support/mentoring duties. This was most acute for faculty in Law (55%), women faculty (33%), and faculty caregivers (29%). When intersected, the top groups to report an increase in junior faculty support and mentoring include racialized women respondents (37%), disabled women respondents (37%), women faculty caregivers (36%), and heterosexual women respondents (35%).

Unaffected/NA (70%) or Decreased (3%) = Positive Effect

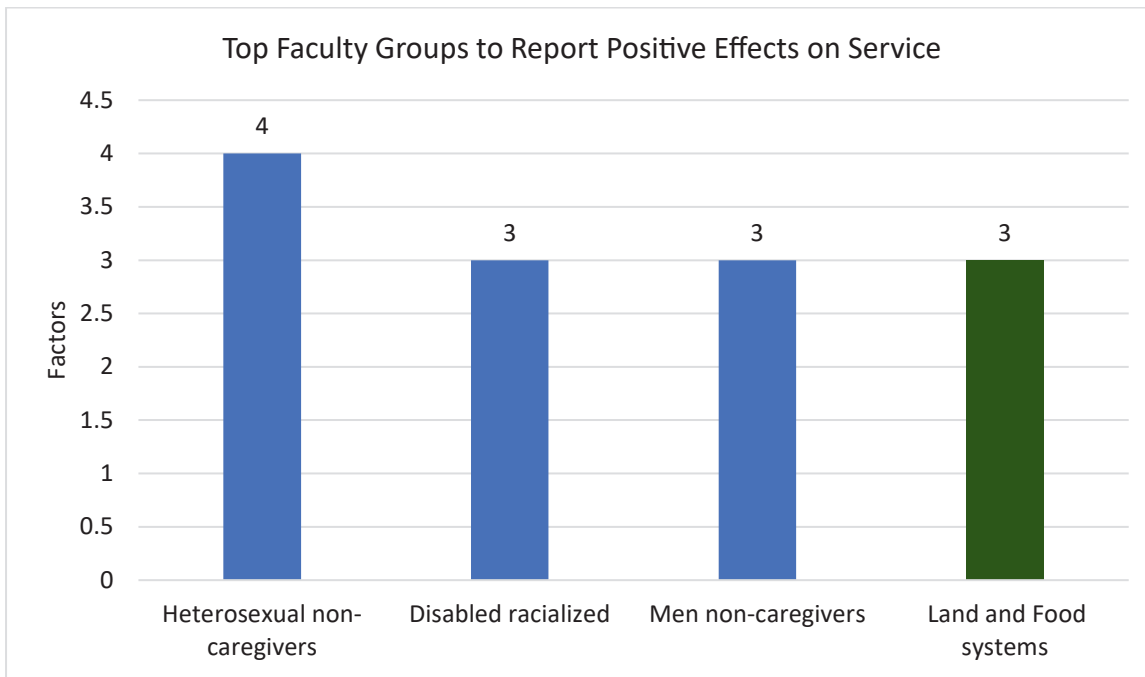
Conversely, non-binary faculty (91%), faculty with no caregiving role (85%), faculty in Applied Science (81%), and men faculty (80%) and, when intersected, Indigenous men (100%), heterosexual faculty with no caregiving role (95%), and non-binary faculty caregivers (90%), are the top groups to report that junior faculty support/mentoring duties were either unaffected or decreased during the pandemic.

Cumulative Effects: Service

Although the results for the effects on service domain consists of two questions and 7 factors, for the above explained reason, only one question, thus 6 factors, is applicable for determining which group report the highest negative or positive effects.



The groups to report the highest count of negative effects in the service domain include Indigenous caregivers, who report negative effects across 5 factors, and Indigenous heterosexual faculty and Indigenous men, who each report negative effects across 3 factors. Among faculty, respondents from Education report negative effects across 2 factors.



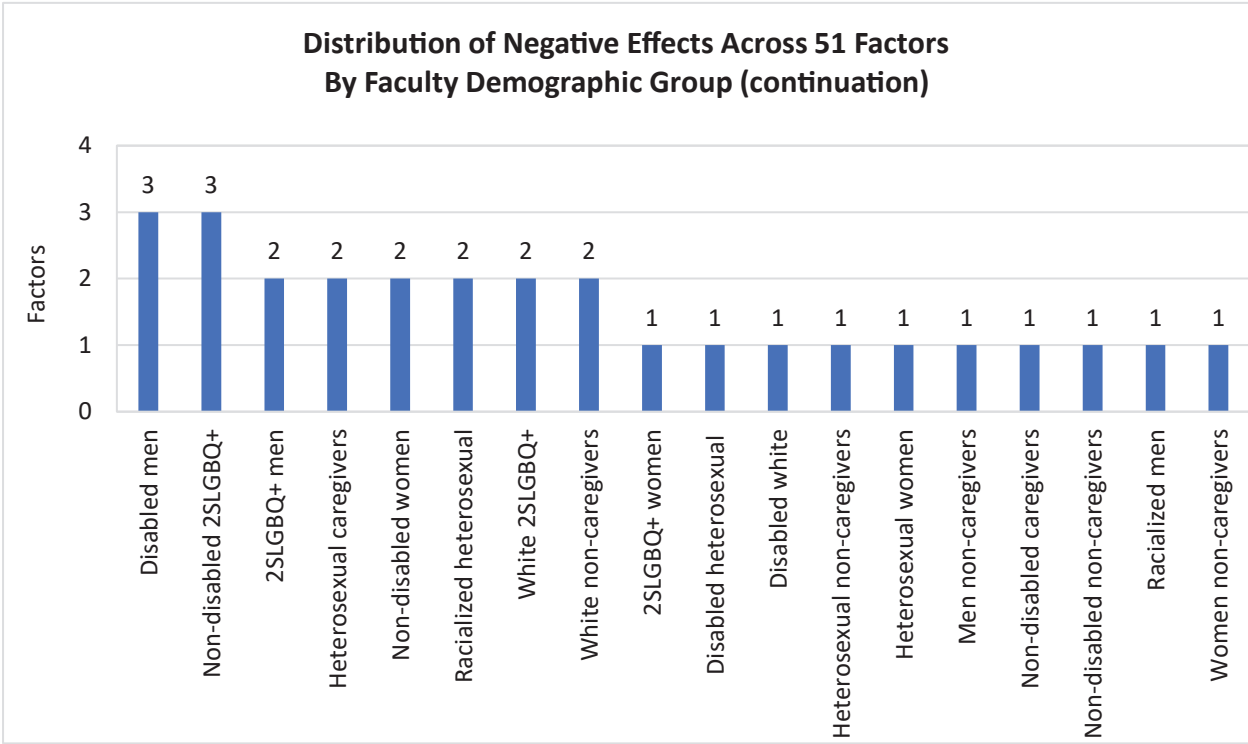
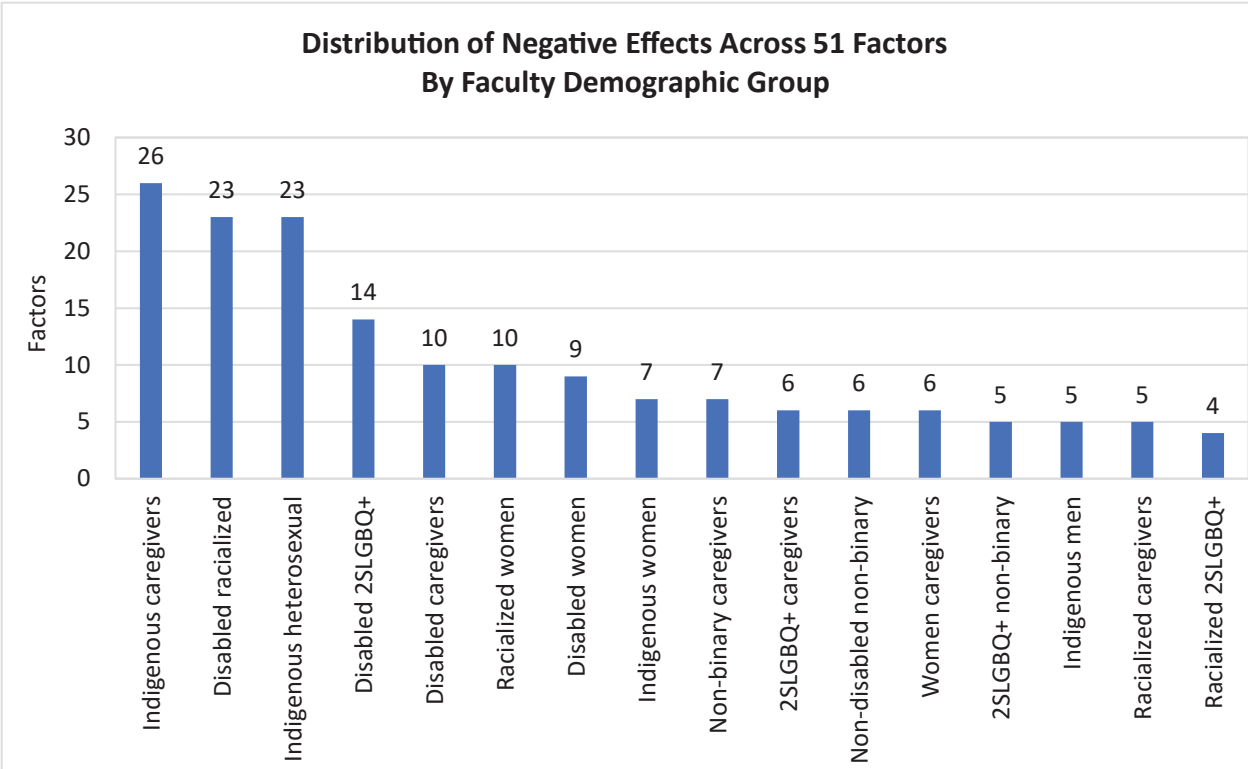
Conversely, heterosexual non-caregivers report the highest count of positive effects; across 4 factors. Disabled racialized faculty, men non-caregivers, and respondents in Land and Food Systems each report positive effects across 3 factors.

Findings: Cumulative Effects: Overall

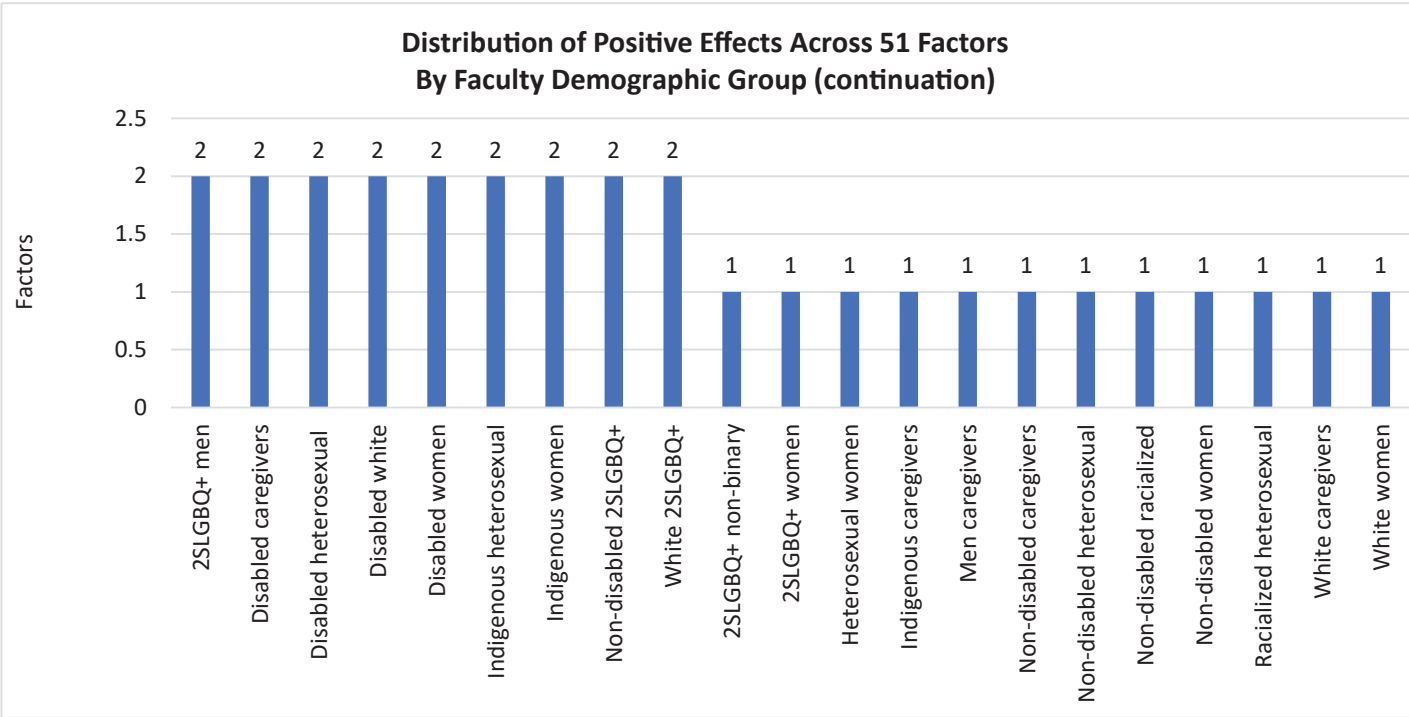
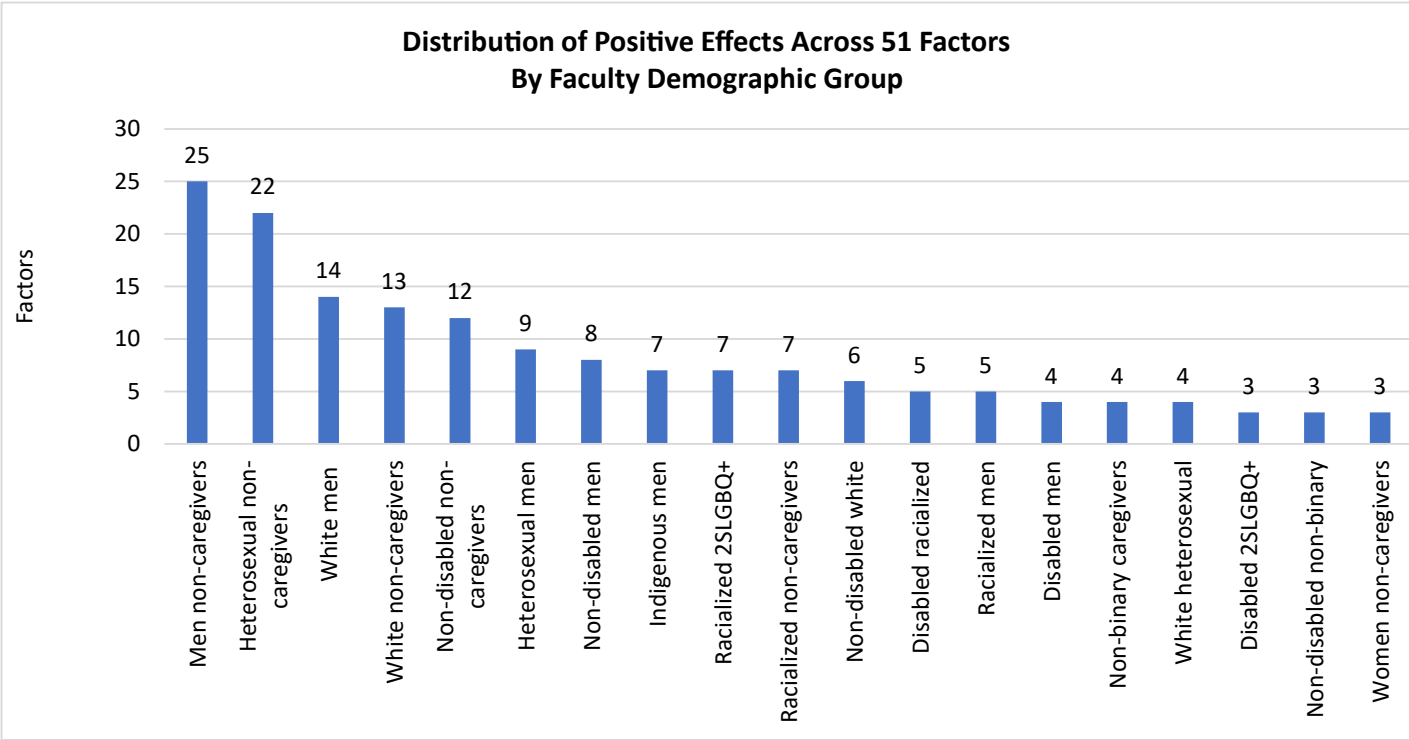


Faculty may experience various combinations of positive and negative effects *within* the same domain, as the results above show, and *across* different domains. The graph below presents the aggregate count of positive and negative per socio-demographic group *across* the five domains that this study focuses on: workplace climate, effects on overall ability to work, effects on teaching, effects on research, and effects on service. The results stem from 10 questions that together assess a total of 51 factors.

Readers are reminded to be cautious when drawing meaning from the cross-group comparisons of positive and negative effects as the results reflect respondents' report of their experience *during* the pandemic. The survey asks respondents to compare their *pandemic* experience to their *pre-pandemic* experience. While the findings broadly mirror existing studies on the unequal distribution of benefits and burdens, the actual lived experience of disabled racialized faculty, for example, may involve facing substantially more barriers in service work than the barriers experienced by men non-caregivers. ***In short, equal count in effects does not equal lived experience make.***

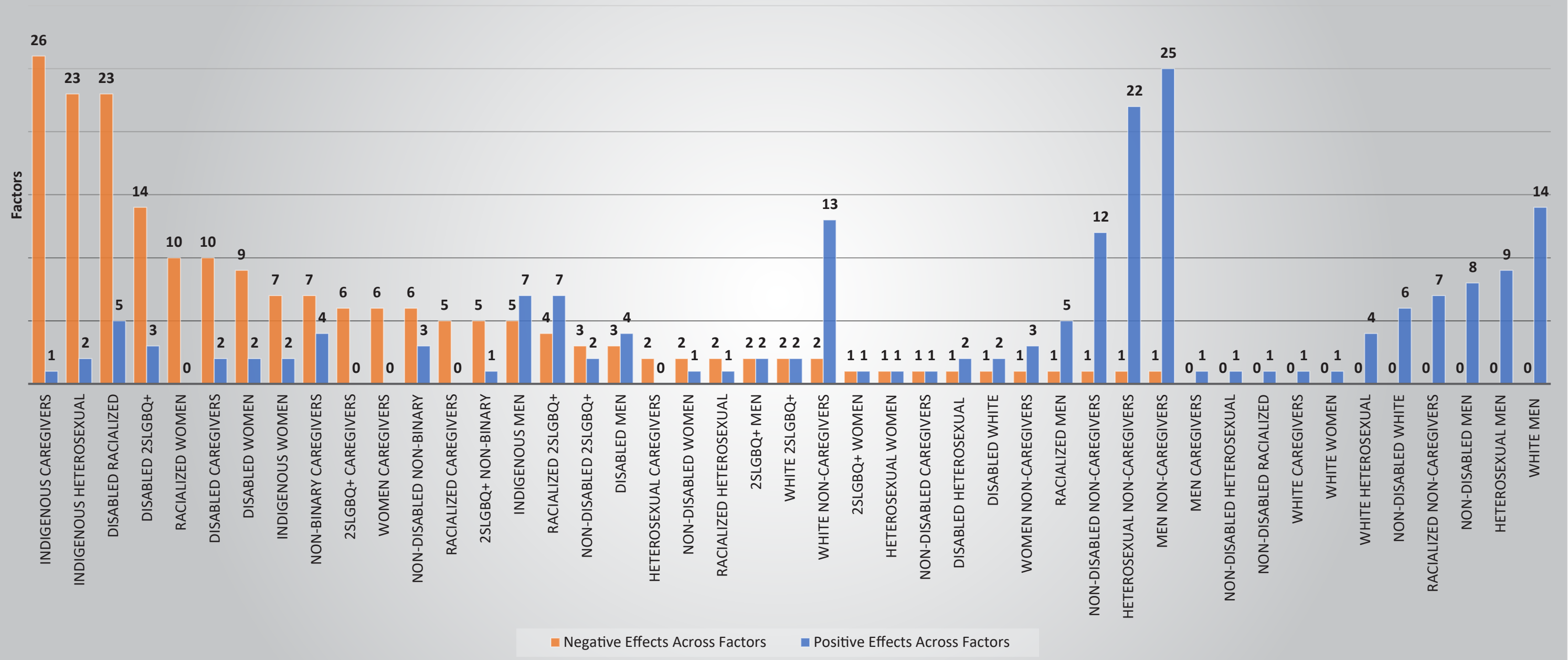


Bearing in mind the research caveats and parameters of the findings, across all factors, Indigenous caregivers, disabled racialized faculty, Indigenous heterosexual faculty, and disabled 2SLGBQ+ faculty report the top three counts of negative effects, 26, 23, 23, and 14, respectively.



Conversely, the top groups to report the highest cumulative positive effects are non-caregivers and men, with men non-caregivers, heterosexual non-caregivers, and white men leading the trend. These three faculty groups each report positive effects across 25, 22, and 14 factors, respectively.

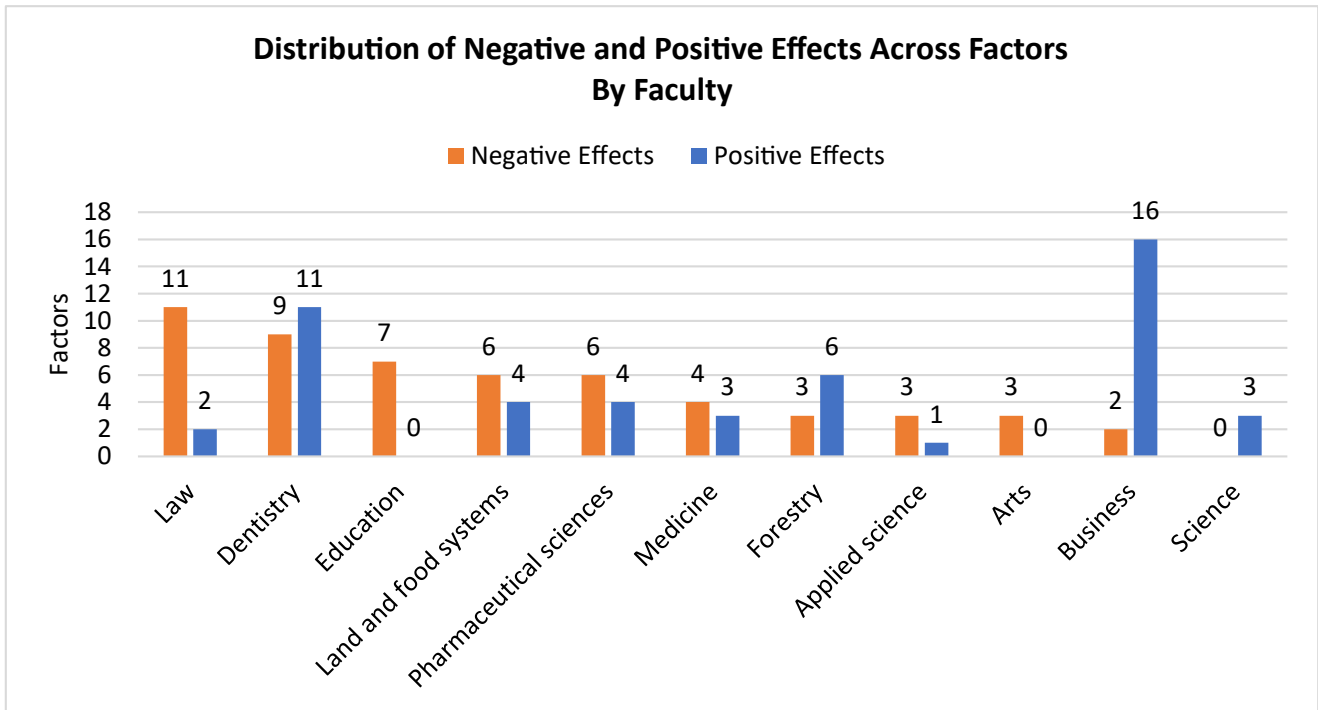
Distribution of Negative and Positive Effects Across 51 Factors
By Faculty Demographic Group



The above graph displays the distribution of *both* negative and positive effects across the factors.

Of interest is the concentration of faculty whose intersected identities include 'white' (=5), 'men' (n=4), 'non-disabled' (n=4), or 'heterosexual' (n=3) who report **no negative effects**. In effect, 63% (5/8) of all intersected identities that include 'white' report no negative effects, and 44% (4/9) of intersected identities that include 'men', 44% (4/9) of intersected identities that include 'non-disabled', and 33% (3/9) of intersected identities that include 'heterosexual' report no negative effects.

Conversely, 67% (4/6) of identities that include non-caregivers, 44% (5/9) of identities that include men, and 22% of identities that include 'white' (2/9), 'heterosexual' (2/9), and 'non-disabled' (2/9) are in the top 20% of those who report **positive effects**. Jarringly, and bearing in mind the research caveats and parameters of the reportable findings, racialized women, racialized caregivers, 2SLGBQ+ caregivers, women caregivers, and heterosexual caregivers report *no* positive effects across all 51 factors.



Across all 51 factors, respondents from the faculties of Business, Dentistry and Forestry report the top three counts of positive effects, 16, 11, and 6, respectively. Conversely, respondents from Law, Dentistry, and Education report the top three counts of negative effects across all factors.

Steps Taken by UBC to Support Faculty during the Pandemic



9

✓ LFFS ~~FUND~~ ASSESSMENT

FRAMEWORK/S DRAFTED

✓ LFFS ASSESSMENT (commenced)

✓ - GHG

Ready

On June 2, 2020, September 10, 2020, and June 8, 2021 the Provost and Vice-President, Academic, Andrew Szeri, and the Associate Provost, Teaching and Learning, Simon Bates, presented to UBC's Board of Governors' Learning and Research Committee on programming and supports implemented to enable faculty members, Teaching Assistants, and students at UBCV and UBCO to work remotely.

Significant investment in resources, support and tools were mobilized to enable thoughtful assessment, planning, redesign, development and execution of courses for online delivery. Refer to appendix D for the materials presented to the Learning and Research Committee that contain a list of the supports provided to faculty.

Directions Emerging from the Findings



The impact of the pandemic clearly transformed our university community. The findings from this report highlight the changes in research productivity, teaching environments and how faculty engaged and continue to engage with the many constituents within UBC during the early stages of the pandemic. Key findings from the report point to specific directions to support Strategy 4 of UBC's Strategic Plan, Inclusive Excellence²⁶, and, in particular, to create and bolster structures, processes, and ideas that foster and sustain the wellbeing of academic employees.

We outline some of these key directions below. Administrators and faculty are encouraged to use this report to develop recommendations by considering the findings from their individual faculties.

Lead Request

1. Assemble a small team—under the direction of Dr. Naznin Virji-Babul, Senior Advisor to the Provost, Women and Gender-Diverse Faculty, and Dr. Arig al Shaibah, Associate Vice-President, Equity and Inclusion—to consider the key learnings and actions to develop evidence-informed solutions to enhance the quality of UBC's workplace climate for faculty.

Child Care Services

2. Provide affordable, accessible, timely, and inclusive child care for tenured and non-tenured faculty; especially for faculty caregivers who are Indigenous, disabled, racialized, 2SLGBQ+, and exclusively or primarily solo parents. Recommendations 3, 12, 13, 29, and 54 of the Anti-Racism and Inclusive Excellence (ARIE) Final Report echoes longstanding calls for improved child care services. This study suggests it be of top priority.
3. Create multi-age co-operative child care services at UBC. Engage with professionals, including [Dr. Michelle Stack](#), on co-operative models in post-secondary institutions.
4. Create and/or turn a reasonable amount of UBC day care service to [\\$10 a Day ChildCareBC Centres by 2024](#).
5. Develop and implement incentives to attract, recruit and retain early childhood educators. In addition to better wages for child care service providers, additional incentives could include yearly tuition coverage for a set number of students pursuing a career as early childhood educators and subsidizing course and certification cost to become child care assistants.

Accessibility

6. Conduct proper engagement and co-create with UBC's [Disability Affinity Group](#) on the Workplace Accommodation Policy for UBC Employees policy draft. An intersectional lens should inform engagement and co-creation, and ensure the unique needs of disabled racialized faculty, disabled 2SLGBQ+ faculty, disabled caregivers, and disabled women in engagement, recommendations, policy and service delivery.
7. Create an institutional Disability Task Force driven by an intersectionality lens. Refer to recommendation 26 of the Anti-Racism and Inclusive Excellence Final Report.
8. Comply with the *Accessible Canada Act* on identifying, addressing, and removing barriers to accessibility.

26 [Shaping UBC's Next Century \(Strategic Plan 2018 - 2028\)](#)

Equity in Quality Control and Improvement

9. Improve accountability for adherence to the Inclusion Action Plan (IAP), Indigenous Strategic Plan (ISP), and Anti-Racism and Inclusive Excellence (ARIE) recommendations by ensuring that all [Academic Administrators](#) know of their responsibility to the IAP, ISP and ARIE, and by creating clear and measurable targets for Academic Administrators to work on during their appointment.
10. To prevent the shelving of equity audit reports, work with EIO to develop a central mechanism to monitor and evaluate the implementation of all recommendations stemming from external and internal equity reports for UBC units and services.

Inclusive Climate and Transparency

11. Use the results from the Workplace Climate and Overall Ability to Work dimensions in this report and the Workplace Experience Survey (WES) results to develop faculty-level interventions that promote a collegial and inclusive workplace climate.
12. Provide faculty-level and portfolio-level WES results on the [WES UBC webpage](#).
13. Analyze the 2017, 2018, and 2021 WES results using a disaggregated and intersectional approach and make the results available on the WES UBC webpage.

Community Research Partnerships

14. Encourage faculties to develop resources to help faculty co-create pilot projects led by community members on ethical, safe and mutually beneficial remote research methods.

References

- Deckard, N., Akram, A., & Ku, J. (2021, April 19). Years of anti-racism at Canadian universities but little action [commentary]. *Global News*. Retrieved June 6, 2022, from <https://globalnews.ca/news/7661916/canada-university-racism/>
- Maestriperi, L. (2021). The covid-19 pandemics: Why intersectionality matters. *Frontiers in Sociology*, 6. <https://doi.org/10.3389/fsoc.2021.642662>
- Nulty, D. D. (2008). The adequacy of response rates to online and paper surveys: what can be done? *Assessment & Evaluation in Higher Education*, 33(3), 301-314. <https://doi.org/10.1080/02602930701293231>
- Statistics Canada. (2020, September 17). *Experiences of discrimination during the COVID-19 pandemic*. The Daily. Retrieved June 6, 2022, from <https://www150.statcan.gc.ca/n1/daily-quotidien/200917/dq200917a-eng.htm>
- Story, D. A., & Tait, A. R. (2019). Survey Research. *Anesthesiology*, 130(2), 192-202. <https://doi.org/10.1097/aln.0000000000002436>
- Universities Canada. (2019, November). *Equity, diversity and inclusion at Canadian universities: Report on the 2019 survey*. <https://www.univcan.ca/media-room/publications/equity-diversity-and-inclusion-at-canadian-universities-report-on-the-2019-survey/>
- Wilson, C. (2020, July 31). COVID-19 hit racialized, lower income groups in Toronto harder, data shows. *CTV News*. Retrieved June 6, 2022, from <https://toronto.ctvnews.ca/covid-19-hit-racialized-lower-income-groups-in-toronto-harder-data-shows-1.5045885>

Relevant Manuscripts on the Impact of the COVID-19 Pandemic at UBC

- Davis, J. (2021, March 2). University survey shows how COVID-19 pandemic is hampering career progress for women and racialized faculty. *The Conversation*. Retrieved January 10, 2022, from <https://theconversation.com/university-survey-shows-how-covid-19-pandemic-is-hampering-career-progress-for-women-and-racialized-faculty-153169>
- Davis, J. C., Li, E. P. H., Butterfield, M. S., DiLabio, G. A., Santhagunam, N., & Marcolin, B. (2022). Are we failing female and racialized academics? A Canadian National Survey examining the impacts of the Covid-19 pandemic on tenure and tenure-track faculty. *Gender, Work & Organization*, 29(3), 703-722. <https://doi.org/10.1111/gwao.12811>
- Engle, W. (2021, May 10). Open UBC snapshot 2021: Open strategies for remote teaching and learning. Open UBC. Retrieved January 10, 2021, from <https://open.ubc.ca/2021-open-ubc-snapshot/>
- Yee, G., Lorenz, M., Mehta, S., Andres, C., & Edward, H. (2020, September). COVID-19 impacts on UBC students survey report. UBC Alma Mater Society. <https://www.ams.ubc.ca/news/2020-aes-and-ams-covid-survey-reports/>

For more COVID-19 related research projects involving UBC researchers, see the “UBC COVID-19 Research” webpage: <https://covid19.research.ubc.ca/research-projects/social-and-policy-response>

Appendix

Appendix A: COVID-19 Faculty Survey



Appendix B: List of Socio-Demographic and Work Role Variables



Appendix C: List of Factors



Appendix D: Steps Taken by UBC to Support Faculty during the Pandemic

“Preparations for Online/Remote Learning”. June 2, 2020, PowerPoint presentation to the Board of Governors’ Learning & Research Committee. (Presentation deck available [here](#))

“Expenditures and Programming for High-Quality Remote Teaching”. September 10, 2020, PowerPoint presentation to the Board of Governors’ Learning & Research Committee. (Presentation deck available [here](#))

“Planning and Support for Fall Instruction (2021W1)”. June 8, 2021, PowerPoint presentation to the Board of Governors’ Learning & Research Committee (Presentation deck available [here](#))

