Out of sight, out of mind: underrepresentation of racialized faculty in Canadian psychology

Sonya C. Faber^{1,2}, Dana Strauss¹, Annwesha Dasgupta¹, Monnica T. Williams^{1,3,*}

Academic Editor: Gloria M. Gutman

Abstract

Psychologists of colour (herein referred to as BIPOC—Black, Indigenous, and People of Colour) contribute to diverse perspectives and also conduct critical research that addresses the significant disparities and challenges faced by communities of colour in accessing mental healthcare services. There has been some concern that BIPOC psychologists are underrepresented in academia, but this issue has yet to be evaluated in a Canadian context due to a lack of available data. This study examined the racial demographics of psychology faculty across 23 major universities in Ontario, Canada (n = 1421), the province with the largest number of universities. White psychologists are overwhelmingly overrepresented compared to BIPOC psychologists, reflecting significant underrepresentation relative to the province's population. White faculty predominantly hold secure academic positions (tenured, tenure track) while BIPOC faculty are concentrated in precarious roles (adjunct, sessional, lecturer). Professors of East Asian heritage constituted the largest group among BIPOC faculty. Additionally, BIPOC psychologists are underrepresented across all professional subspecialties. Systemic racism, historical biases, and exclusionary practices were identified as major barriers. Our findings call for urgent reforms in university hiring practices and psychology training programmes to reflect the diversity of the population they serve and to dismantle systemic barriers that perpetuate racial inequalities in academia.

Keywords: diversity, psychologists, racism, academia, graduate training

Citation: Faber SC, Strauss D, Dasgupta A, Williams MT. Out of sight, out of mind: underrepresentation of racialized faculty in Canadian psychology. *Academia Mental Health and Well-Being* 2025;2. https://doi.org/10.20935/MHealthWellB7762

1. Introduction

1.1. Importance of diversity in psychology professoriate

The field of psychology increasingly recognizes the profound significance of diversity within its professoriate [1]. Diversity, which can be defined as the representation of individuals from varying racial, ethnic, gender, socioeconomic, religious, and cultural backgrounds is essential not only in clinical practice but also in academic settings. Beyond its critical role within the therapy room, diversity among psychology scholars is a cornerstone of research progress. This recognition stems from a growing body of evidence showing that diversity in research and teaching environments not only fosters innovative insights but also ensures that psychological research and clinical practices are accessible and inclusive for all populations [2].

Psychologists from diverse racial and cultural backgrounds have a unique set of research interests that enrich the field in ways that have historically been overlooked [1, 3]. They investigate the intersections of culture, identity, and mental health, shedding light on vital topics such as the impact of cultural identity on well-being, the coping strategies of racialized communities facing racial trauma, the influence of implicit bias on clinical practices, as well as the effectiveness of community-based interventions. These inquiries

enrich the field by offering a more comprehensive understanding of human behaviour and mental health. Moreover, they champion the cause of social justice in mental health.

Due to their socialization, White researchers may sometimes be hesitant or lack the skills to explore research questions related to race, ethnicity, and culture, particularly when it involves examining their own cultural socialization. Conversely, psychologists with specific connections (i.e., through language, race, or ethnicity) to their communities can help to bridge the gap [4–6].

As Canada does not yet routinely collect data on race, in the closest analogous country, the US, the most recent demographics in 2021 found that the majority of Assistant Professors (60.5%) identified as White, with 71% at the Associate Professor rank, and 76% of Full Professors during the same period [3]. Further, these numbers do not address the institution and location of the faculty. For example, if the majority of the BIPOC (Black, Indigenous, and People of colour) faculty are teaching at historically Black colleges and universities (HBCUs) then the impact of the diversity would be limited.

European institutions have largely focused on gender diversity,

¹School of Psychology, Faculty of Social Sciences, University of Ottawa, Ottawa, ON K1N 6N5, Canada.

 $^{^2}$ School of Public Health and Epidemiology, University of Ottawa, Ottawa, ON K1N 6N5, Canada.

³Department of Cellular and Molecular Medicine, University of Ottawa, Ottawa, ON K1N 6N5, Canada.

^{*}email: monnica.williams@uOttawa.ca

neglecting other critical aspects of representation, including race. A survey of 159 higher education institutions across 36 European systems revealed that while 88% explicitly include diversity, equity, and inclusion (DEI) in their institutional values, there is a significant gap in data collection practices [7]. Although 83% of these institutions collect gender-related data, only 19% gather information on race [7]. As such, they cannot make good on their DEI commitment in the absence of the data necessary to do so.

A direct effect of having a predominantly White faculty is the challenge it creates for students of colour. Faculty of colour serve as role models and mentors for young students of colour, and without representation, students of colour may not feel there is a place for them in the discipline [8]. Further, Black, Indigenous, and other students of colour continue to face racism at the systemic and individual level [5, 9-11]. Success in psychology requires a mentor who, in most cases, is interested in the same research topic as the student; racialized students interested in subjects that impact their communities can experience difficulties if most of the available mentors are studying subjects that may be less relevant for racialized groups. Lack of community and common research interests can make them feel alienated [4, 5]. Faculty members who share a part of their identity are regarded as role models because they are better able to relate to their journey in the academic world and draw inspiration from it. Past research indicates that although ethnic matches between mentors and mentees are not necessary for building effective relationships, lack of diverse faculty is an environmental racial microaggression that impacts feelings of safety and inclusion [8, 11-14].

Furthermore, for doctoral students, mentorship, particularly from thesis advisors or other departmental faculty members, is critical for professional development and skills training. Hofstra and colleagues [15] found that racialized doctoral students, particularly African American, Hispanic American, and Native American students in STEM fields, are more likely to become faculty members when mentored by advisors of the same race. In non-STEM fields, having a same-race advisor increases their likelihood of continuing in research-related careers. Interestingly, the career outcomes for White scholars remain unaffected by the race of their advisor.

1.2. Race in professional psychology

The field of psychology has historically been predominantly White [5, 14]. The lack of racial diversity within professional psychology creates a barrier to care for clients of colour when it comes to accessing mental healthcare services, as many are hesitant to trust White psychologists [16] who may hold implicit biases and have been socialized to downplay the concerns of people of colour, such as the trauma of racism. As a result, they may provide substandard care to clients of colour or even inadvertently harm them if they have not engaged in personal anti-racism work [17, 18]. This issue is deeper than a lack of cultural competence, as it requires greater numbers of psychology researchers, educators, and clinicians of colour with shared lived experiences.

Professional psychologists may make inappropriate and even harmful assessment, diagnostic, and treatment decisions depending on the patient's race [14]. For example, when presented with identical symptoms, physicians were more likely to diagnose Black patients with schizophrenia or bipolar disorder and White patients with depression [19, 20]. It has been suggested that this may be due, in part, to clinicians' lack of empathy for mood symptoms

ACADEMIA MENTAL HEALTH AND WELL-BEING 2025, 2

in Black patients compared to other ethnoracial groups [21]. Disparities have also been reported in the diagnosis of posttraumatic stress disorder (PTSD) among veterans; Latino veterans were less likely than White veterans to receive a minimal trial with pharmacotherapy, and African American veterans were the least likely to receive any treatment at all within the six months following their diagnosis [22]. These studies demonstrate that without proper, culturally sensitive training, White psychologists may over-diagnose psychotic disorders, under-diagnose mood disorders, and overall undertreat their clients of colour.

1.3. A shortage of diverse psychologists

While there are no data on the race of Canadian psychologists, limited publications on the impact of the lack of BIPOC representation in mental healthcare do exist. A 2020 scoping review of the barriers and facilitators for Black youth accessing mental healthcare in Canada found that a lack of shared identity due to the pronounced underrepresentation of Black mental health professionals created an impediment to accessing mental healthcare [23], which was further confirmed in a national study of barriers to mental healthcare published more recently, where 31% of Black respondents cited the absence of Black clinicians as a barrier to care [24]. In 2018, in response to the Truth and Reconciliation Commission Final Report, the Canadian Psychological Association (CPA) [25] estimated that "there are likely fewer than 12 Indigenous practising and or teaching psychologists throughout Canada" (p. 226) [4], which no doubt contributes to the sobering statistic that 50% of Indigenous people seeking mental healthcare had negative experiences with providers [24]. The lack of Indigenous representation is particularly abysmal considering that Indigenous peoples comprise 5% of the Canadian population. Additionally, there are too few psychologists who are competent to work with clients of Asian heritage, who typically endorse a worldview different from that of the dominant Western culture [26, 27], which may explain why 38% of South Asians in Canada report negative experiences as a barrier to care [24]. Notably, 21% of South Asian Canadians seeking mental healthcare reported that they could not find someone who speaks their language, and among Asian Canadians, around 21% said they could not find a clinician in their own ethnic group. Among Middle Eastern/North African/Arab (MENA) persons seeking mental health services, over one-third (36%) cited negative experiences as a barrier to care. Lack of representation not only limits access to culturally relevant care but points to the need for a diverse psychology professoriate that can educate future psychologists to help them better serve these communities.

Over the past few decades, there has been an increased awareness of racial disparities within the postsecondary education system, with calls to undo the historical harm caused by a colonialist past. In psychology, there is also emerging recognition of the importance of introducing cross-cultural perspectives in contemporary educational paradigms. Yet faculty of colour, who are often best suited to deliver multicultural material in a nuanced and sensitive manner, remain underrepresented in universities across Canada. The CPA and the provincial registration colleges do not collect membership data by race. Statistics Canada has data on faculty at Canadian universities arranged by academic rank, age group, and gender, but not race [28]. As of 2019, only 19.4% of university professors across Canada identified as a visible minority and only 2% as Indigenous [28]. The lack of a systematic effort to collect disaggregated data hinders a deeper understanding of this issue and impedes assessment of the actual impact of diversity initiatives. Often, privacy reasons are cited for the absence of race-specific data. However, such data are routinely collected in countries like the USA and UK, which have proved to be beneficial in identifying gaps in policy [29]. Notably, the tri-agency collects racial and other sensitive demographic data from its Canada Research Chair holders annually to ensure equity in the award process [30].

1.4. Race and ethnicity

Race and ethnicity must be understood as distinct concepts that play significant roles in understanding human identity, yet differ in fundamental ways (Supplementary Table S1). Unlike ethnicity, race is a social construct, based on visual characteristics, that was created to separate and privilege or oppress people based on physical appearance and perceived ancestry [31–33]. Research has shown that people categorize intersectional identities (race and gender), hierarchically, demonstrating that they perceive the same social reality of a profound pre-existing power imbalance associated with race [31]. Race is categorized based on visible physical features and presumed heritage, compartmentalizing individuals into a limited number of predefined groups. Importantly, people also make racial and ethnic judgements about others based on names. Physical features such as height, eye colour, hair texture and skin colour are not equivalent to genetic ancestry and correspondingly, race is also not equivalent to genetic ancestry. Although people with similar visual features may share genetic ancestry, they may also share no genetic ancestry, while those who look nothing alike may be genetically highly related. Classifications by race however are ubiquitous in global society. This social construct historically served to establish hierarchies and divide societies, often resulting in the external imposition of identity upon individuals, a phenomenon referred to as "racialization". These racial categories, determined by government authorities, can change according to the needs of prevailing powers. Notably, Canada defines race by identifying individuals as "visible minorities", a term for non-White individuals that deliberately excludes Indigenous peoples and reflects the state's colonialist history; it is an inconsistency that emphasizes the point that "race" as a category is not biological rather political. Furthermore, racial categories are prone to attributing genetic fallacies, in which inaccurate traits are attached to specific races [34].

Ethnicity in contrast encompasses a broader spectrum of factors that individuals use to define themselves. (i.e., a Nigerian-Brazilian (ethnicity) person could be either Black or White (race)). It encompasses elements such as heritage, family, ancestral ties, cultural or religious practices, historical connections, and linguistic affiliations [16]. Significantly, ethnicity may or may not include genetic factors. Unlike race, ethnicity grants individuals the agency to self-identify, allowing them to express the intricate interplay of these factors. This self-identification reflects a more personal and diverse understanding of identity. Studies demonstrate the vast diversity of ethnicity, revealing around 650 self-identified distinct ethnic groups across 190 countries [35]. This recognition of diversity is key to the respectful acknowledgment of the individual freedom to define oneself. Ethnic identity, unlike race, can also be fluid, evolving with personal experiences, migrations, and changing social contexts.

1.5. Purpose of study

This study aimed to examine the racial diversity among university psychologists and explore potential disparities in academic rank and specialization. Specifically, we investigated (1) the racial composition of psychologists teaching at the 23 universities in Ontario with psychology faculty and departments; (2) the relationship between race and academic rank; and (3) racial disparities within clinical psychology, a subspecialty with significant influence in the field. We hypothesized that an overwhelming majority of the sampled psychologists would be White and that White psychologists would be disproportionately overrepresented in more secure academic positions (tenure track, tenured, emeriti) compared to BIPOC professors, and the population demographics of Ontario, while BIPOC psychologists would be disproportionately overrepresented in more precarious positions (adjunct, sessional, instructor/lecturer) compared to White faculty.

1.6. Positionality

Because an individual's social, cultural, and personal background significantly influences their perspective and understanding of the world, positionality has become a crucial factor when publishing scholarly articles [36]. Recognizing positionality helps promote self-awareness and ensures a more comprehensive and empathetic approach when engaging with diverse perspectives and experiences. As such, the authors provide their own positionalities with respect to this work.

All of the authors are part of the Canadian academic psychology community as researchers, students, and professors. The first author is a Black German and an experienced neuroscientist and pharmaceutical professional, specializing in clinical development and social justice issues. The second author is a Jewish Canadian doctoral student in clinical psychology who researches in the areas of racial microaggressions and bias, institutional racism, racial trauma, and psychedelics. The third author is a first-generation immigrant woman pursuing her doctoral studies in experimental psychology at a Canadian university, who is racialized as South Asian in Canada; her research focuses on racial trauma, systemic and institutional racism, and social determinants of health. The senior author is a Canada Research Chair, a registered clinical psychologist, and an African American woman; she has published over 200 peer-reviewed articles, with a focus on trauma-related conditions and cultural differences, including articles about therapeutic best practices. We are all deeply concerned about the observable lack of racial and ethnic diversity in our field and correspondingly frustrated by the lack of data to quantify the problem and inform solutions, which has motivated us to conduct this study.

2. Materials and methods

Between March 2022 and July 2023, we examined the full psychology faculty of all the universities in Ontario, Canada. We included all faculty members listed on departmental websites, encompassing both clinical and non-clinical psychologists. This included psychologists working in areas such as social, developmental, cognitive, and neuroscience, as well as those registered with the College of Psychologists of Ontario (CPO). This was a cross-sectional observational study using publicly available data from the official websites of Ontario university psychology departments. As no human subjects were contacted and no identifiable private data were collected, ethics approval and informed consent were not required. We chose Ontario because it has the largest number of universities of all provinces in Canada. We collected data on race,

rank position, and registration with the College of Psychologists of Ontario (CPO) for each faculty member listed on that department's website (n=1421). To accomplish this, we created a list of all universities in Ontario and searched the website of each one to determine if there was a department of psychology. Any that did not have a psychology department were omitted, leaving a total of 23 that were examined. We created a spreadsheet where we listed the name of each psychology professor of each university for each department. Based on the web department's website information, the professor's name, rank, tenure track status, full/part time status, and gender were recorded. We also looked up the CPO registration status of each professor and recorded whether or not they were registered to practice, and classified them into 5 categories: clinical, counselling, neuropsychology, school, and not registered.

Each professor's race was then determined by 14 trained graduate student raters (one BIPOC and one non-BIPOC for each professor). Nine of the raters were female and five were male. Six were White; eight were BIPOC (Black, East Asian, Indigenous, South Asian). Tie breakers and ambiguous photos were also rated by two senior lab members—both Black Women—who each independently provided a rating of the professor's race based on the professor's photo and the ethnic origin of their last name. This methodology was similar to that employed by other Canadian researchers of faculty demographics [37]. Racial category choices included Black, East Asian, Indigenous, MENA, non-White Latinx, South Asian, Southeast Asian, White, and Multiracial. These options were based on Statistics Canada categories, with some smaller categories collapsed or combined.

As noted in the Introduction, in this study, we distinguish between race and ethnicity whenever possible. As race is both a visible category, and a social reality, a person who identifies with the specific ethnoracial category "Hispanic" but appears to society to be "White" is noted as Hispanic as an ethnic category but also categorized in this paper as racially "White". Further, there are many people whose appearance may not match the ethnic origin of their last name (e.g., people who are of mixed backgrounds, adopted, took their spouse's name, Black descendants of enslaved people, etc.). If there was a discrepancy, the photo was prioritized over the name. The raters also took into consideration any self-identified information about ethnicity on the faculty web page. Interrater discrepancies (n = 70) were resolved with a tie-breaker rating by a third rater, also supplemented by information found on publicly available professional web pages such as LinkedIn, Instagram, and university or lab web pages made by the faculty member. The raters found 15 race discrepancies and 16 gender discrepancies, with the remainder being rank discrepancies. See Supplementary Table S2 for more information about methodological and ethical considerations of our approach.

In 2021, (latest census data) visible minorities comprised 32.3% of Ontario's population (4,596,995 persons), representing more than half of Canada's total visible minority population. Additionally, 412,552 Ontarians reported being Indigenous (9.0%); surprisingly, Indigenous people are not counted by the province as visible minorities. Based on these demographics, if there are 1,400 psychology faculty members in Ontario, approximately 452 would be expected to identify as "visible minorities" and an additional 126 as Indigenous, for a total of 578 faculty of colour to achieve parity in representation.

3. Results

The total number of psychology faculty was n = 1421. Full-time faculty (n = 321) comprised 23% of the total. The breakdown by university is illustrated in **Figure 1**.

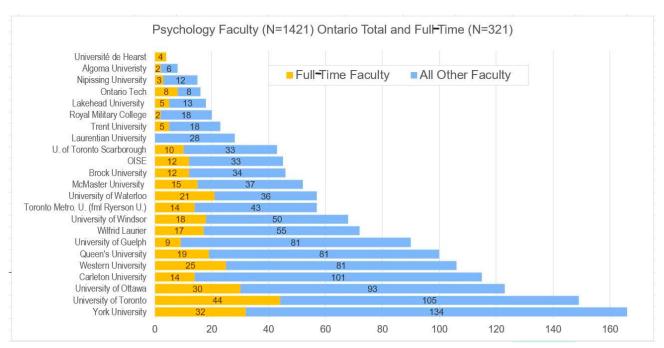


Figure 1 • Major universities and colleges with a psychology faculty in Ontario, Canada (n = 23).

In total, White psychologists were overwhelmingly overrepresented (82%, n=1244) compared to BIPOC psychologists (11%, n=168). In terms of racial groups, professors of East Asian heritage comprised the largest proportion (5%, n=74), followed by South

Asian (2%, n = 36), Middle Eastern/North African (2%, n = 32), Black (0.6%, n = 9), Indigenous (0.3%, n = 5), Southeast Asian (0.3%, n = 4), Latinx (non-White; 0.3%, n = 4), and Multiracial professors (0.3%, n = 3). Finally, a small number of psychologists

(7%, n = 103) were of unknown race (no photos) and were not included in the totals.

Academic rank/position was classified based on job title. Full, Associate, and Assistant are generally tenured or tenure-track positions, with Full generally being tenured. Full, Associate, and Assistant, Instructor/Lecturer Professors are generally full-time. Seasonal reflects some level of non-tenure part-time status. Adjunct represents formal affiliate status, which may or may not include teaching. Emeritus represents retired but active tenured faculty. Status-only is affiliated with few or no teaching responsibilities and no regular salary. Not all universities used these titles in the same way, so the classifications are not exact. Nonetheless, we believe they provide a useful representation of the overall pattern of employment.

As shown in **Table 1**, White psychologists are disproportionately overrepresented across all academic rank positions compared to BIPOC psychologists (**Figure 2**). In addition, the number of White psychologists increases substantially through tenure-track

to tenured positions (Assistant to Full Professor) while the number of BIPOC psychologists decreases.

White psychologists are represented in higher proportions in more secure academic positions (tenure-track, tenured, and emeriti) compared to more precarious academic positions (adjunct, sessional, and instructor/lecturer; 83% and 75%, respectively), and BIPOC psychologists are represented in higher proportions in more precarious academic positions compared to more secure academic positions (12% and 11%, respectively). These findings are detailed in **Figure 2**.

White psychologists are represented in higher proportions in more secure academic positions (tenure-track, tenured, and emeriti) compared to more precarious academic positions (adjunct, sessional, and instructor/lecturer; 83% and 75%, respectively), and BIPOC psychologists are represented in higher proportions in more precarious academic positions compared to more secure academic positions (12% and 11%, respectively). These findings are detailed in **Figure 2**.

Table 1 • Racial breakdown of psychology faculty by academic rank position.

Rank position	White	East Asian	South Asian	Southeast Asian	MENA	Latinx (non-white)	Indigenous (Canadian)	Black	Multiracial	SUM BIPOC
Sessional	117	9	4	1	5	0	0	0	0	19
Adjunct	173	8	8	0	5	1	0	1	0	23
Instructor/ Lecturer	51	2	3	0	5	1	0	0	0	11
Status Only	34	0	О	0	1	0	0	0	0	1
Emeritus	177	2	2	0	2	0	0	1	0	7
Assistant	156	22	6	1	4	1	2	3	2	41
Associate	248	17	5	0	6	2	2	3	0	35
Full Professor	288	14	8	2	4	0	1	1	1	31
Total	1244	74	36	4	32	5	5	9	3	168

Note: Sum BIPOC (The total number of all racialized professors) includes all groups except White.



Figure 2 • Rank position by race and within race. (A) Depicts numbers of psychology faculty by their job seniority. White faculty are shown in blue and aggregate BIPOC faculty in pink. (B) shows numbers of faculty by job seniority excluding White faculty but including breakdown by race for the BIPOC group.

In terms of academic rank, BIPOC faculty are found most often in the Assistant Professor role (20%), followed by Instructors/Lecturers (14%), Sessionals (12%), Associate Professors (11%), Adjuncts (10%), Full Professors (10%), and Emeritus Professors (3%). These findings are detailed in **Figure 2A**. Among BIPOC faculty, professors of East Asian heritage comprised the largest proportion (**Figure 2B**).

Registration status with the College of Psychologists of Ontario (CPO) as well as type of professional psychologist (neuropsych, school, counselling, and clinical) was examined for each faculty member sampled. Of the total psychology faculty examined, 23% (n=331) are registered with the CPO, with the vast majority registered as clinical psychologists, followed by counselling, neuropsych, and school psychologists, respectively.

White and BIPOC psychologists comprise 83% and 11% of professional psychologists registered with the CPO, respectively. Within the subspecialities, the percentage of White psychologists is greatest among neuropsychologists (87%), followed by clinical (82%), school (81%), and counselling psychologists (79%), respectively. The percentage of BIPOC psychologists is greatest among clinical (12%) and school psychologists (12%), followed by counselling (11%) and neuropsychologists (10%), respectively. See **Figure 3** for details.

To assess whether racial disparities were driven by differences in licensure status (**Figure 4**), we examined registration with the College of Psychologists of Ontario (CPO). Of 1412 faculty members, 397 (28%) were registered clinicians, while 1015 (72%) were not registered.

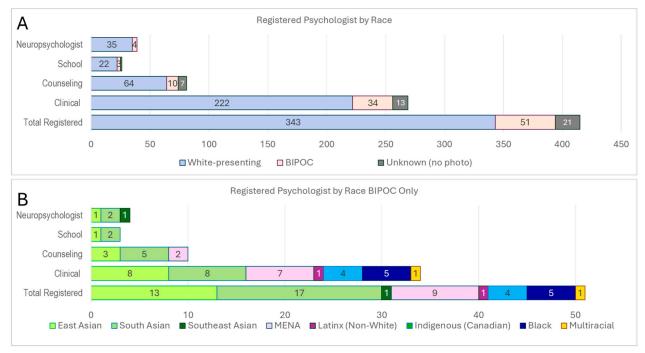


Figure 3 • Registered professional psychologists by race. *Note*. Registration is with the College of Psychologists of Ontario (CPO). (A) depicts number of registered psychologist faculty by sub-speciality with White faculty in blue and aggregate BIPOC faculty in pink, (B) shows number of registered psychologist faculty by subspeciality broken down by race and excluding White individuals.

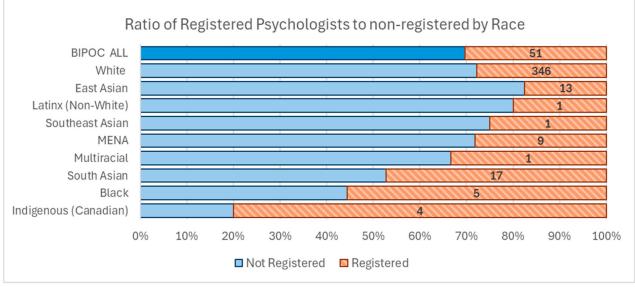


Figure 4 • Registered professional psychologists by Race.

Among the registered group, 51 of the psychologists were BIPOC and 346 were White; in the non-registered group, 117 were BIPOC and 898 were White. This indicates that racial disparities persist across both registered and non-registered groups, and that the overall underrepresentation of BIPOC faculty in psychology is not due to an overrepresentation of non-clinicians.

4. Discussion

Our findings show that White psychologists make up the overwhelming majority of teaching and professional psychologists at major universities in Ontario, while BIPOC psychologists are disproportionately underrepresented, comprising a mere 11%, 1.5 times less than their representation of 32.3 percent in the province of Ontario [28, 38]. This is consistent with data from the 2020 U.S. Census indicating that people of colour are underrepresented in tenure-track psychology positions, comprising 24.6% of faculty across academic ranks as of fall 2021 despite making up 40% of the U.S. population [3]. Additionally, BIPOC psychologists are represented in higher proportions in more precarious compared to secure academic positions, and White psychologists are represented in higher proportions in more secure versus precarious academic positions.

This finding is also consistent with results from the American Psychological Association (APA)'s 2023 Task Force Report that found the bulk of self-identified faculty of colour in the U.S. hold Assistant Professor positions rather than Associate or Full Professor positions [3]. Relatedly, as the total number of psychologists increases from lower-ranking to higher-ranking academic positions, the number of White psychologists mirrors this growth, while the number of BIPOC psychologists decreases.

Within the professional subspecialities, BIPOC psychologists are underrepresented across all subspecialities, with the most pronounced underrepresentation among neuropsychologists.

4.1. Biases in the origins of professional psychology

The underrepresentation of BIPOC psychologists in Ontario's academic landscape align with the historical foundations and entrenched practices within psychology. This issue's roots can be traced back to the field's US origins, where foundational training models and structural biases created systemic barriers that still shape who enters and succeeds in psychology [39, 40].

The scientist-practitioner (Boulder) model was conceived at a 1949 Graduate Education conference in Boulder, Colorado, and formulated by a group of middle-class White men who believed it represented a "value-neutral" scientific approach, albeit tailored to individuals like themselves [5]. This model neither considered nor validated its principles for clients from diverse cultural backgrounds and explicitly excluded racialized groups. Despite these inequitable origins, it became the primary approach for training students in both the science and practice of psychology, significantly shaping the field's trajectory [41].

In response to the marginalization and exclusion of women and racialized individuals in the Boulder model, the practitioner–scholar model, also recognized as the Vail model, emerged in the aftermath of the 1973 Vail Conference on Professional Training in Psychology [42]. This model was designed to provide a more

comprehensive pathway, enabling students to pursue a PsyD (Doctor of Psychology) and prepare for clinical practice, primarily treating clients. Nevertheless, deeply ingrained academic biases persistently favour the Boulder model, often leading to an undervaluation of PsyD graduates due to disparities in training focus and evaluation criteria [43]. This disparity amplifies the underrepresentation of racialized psychologists in the field, especially in research positions [5] and has been so entrenched in Canada that until recently, the PsyD was practically non-existent in Canada as a professional option for obtaining faculty status [5].

Explicitly racist historical policies in Canada have limited the educational and professional opportunities available to BIPOC individuals today, effectively restricting current access to faculty positions in higher education [5, 44–48]. Historical legislation in Canada, including the *Indian Act*, which revoked Indigenous status for those pursuing higher education [5, 48]; the *Common Schools Act of 1850*, which enforced segregated and underfunded schools for Black students [45]; and the *Chinese Immigration Act* of 1923, which barred Chinese immigrants and restricted access to education and professional roles [46, 47], collectively created systemic barriers that continue to hinder BIPOC representation in academia. These systemic barriers created long-term disadvantages that hindered BIPOC representation in faculty positions across Canadian universities.

While policies such as the Indian Act or school segregation no longer operate in their original forms, systemic exclusion has evolved rather than disappeared. One current example was the College of Psychologists of Ontario's (CPO) language fluency requirement. While fluency in English or French is required for licensure, the exemption policy privileges applicants from majority-White countries (e.g., France or Belgium) while imposing additional documentation or language-testing burdens on applicants from racially diverse French-speaking nations (e.g., Senegal or Haiti). Although framed as neutral, this rule produces racially inequitable outcomes. Given that 22.9% of Canadians have a nonofficial language as their mother tongue, and most of them are racialized [49], this policy compounds barriers to licensure, limits culturally responsive care, and restricts the pipeline of qualified racialized professionals into academic psychology [5, 50]. By exempting applicants from majority-White countries while imposing additional language barriers on those from non-White English- and French-speaking nations, these policies systematically impede BIPOC professional psychologists, contributing to the underrepresentation of these faculty in Canadian psychology departments [39, 44]. Another contemporary example of systemic inequity is grant funding. Data from the Canadian Institutes of Health Research (CIHR) revealed that in the last five Project Grant competitions, racialized principal investigators received 82 fewer grants than expected based on application proportions [51], prompting CIHR to implement equalization measures beginning in Fall 2024 [52]. These inequities are particularly pronounced for Black health researchers, who report that their work is often undervalued in peer review and disproportionately dismissed as lacking relevance to Canadian priorities [51]. While some may attribute these outcomes to differences in proposal quality, CIHR's own internal analysis identified systemic bias-not merit-as the driving factor. Such disparities in funding directly affect the career progression, research output, and long-term retention of BIPOC faculty in academia.

4.2. The cause of faculty underrepresentation in psychology: race vs. other factors

Extensive research overwhelmingly indicates that systemic racism and structural discrimination are the primary drivers of the underrepresentation of BIPOC faculty in Canada, including Asian, Black, and Indigenous scholars [5, 8, 44, 53–55]. Current disparities are, in part, remnants of the biased origin of the field of psychology and the hidden ways in which current policy and practices work to maintain the inequalities that have always been present in the field [39].

An analysis by Henry and colleagues [44] demonstrated that racialized and Indigenous faculty are overrepresented in insecure contract roles and that racialized women in tenure-track positions are paid less than both White women and men, despite outperforming them in terms of securing grants and publishing research. Despite equity initiatives, racialized scholars face systemic barriers in hiring, promotion, and tenure processes, including biased perceptions of "fit" and the devaluation of research on race and equity issues [8, 39, 44]. The covert goal of these structural barriers is to limit participation in academia and the ultimate outcome is the underrepresentation we see in faculty positions [5].

Several putatively race-neutral explanations have been offered to explain the underrepresentation of BIPOC faculty in psychology—ranging from a supposed lack of interest in the discipline and financial barriers to graduate study, to feelings of not fitting into predominantly White departments, the field's racist origins, under-recognition of BIPOC accomplishments, and greater cultural stigma around mental health [5, 39, 40, 44, 54]. On closer inspection, however, nearly all of these factors are rooted in racism—whether through exclusionary policies, the devaluation of scholarship on race and equity, or biased perceptions of who "belongs" [4, 56]. In other words, what may appear as disparate obstacles converge on racism as a primary driver of underrepresentation.

In response to these longstanding inequities, the University of Ottawa launched an initiative to recruit cohorts that are 67% BIPOC each year, directly counteracting past exclusionary practices [10, 57]. Despite early concerns about finding enough qualified applicants, in 2025 the programme was in its third year and had consistently met or even exceeded that 67% target. This success clearly demonstrates that lack of interest is not the problem—instead, dismantling the racist barriers remains the most essential step toward truly diversifying psychology.

4.3. Subpopulation analyses reveal anti-Asian biases

Asian (East, South and Southeast) presence is the highest within BIPOC groups regarding faculty representation. However, despite the growing Asian population in Ontario, as a group, they remain underrepresented in psychology faculty positions (114 Asian faculty, constituting 8%), and this reflects deep-rooted systemic barriers. Kim and Shang [46] emphasize that Asian professionals have long endured racialized experiences in North America, challenging the persistent 'model minority' myth that suggests Asians are immune to racism. They argue that organizations are not exempt from enacting racial discrimination against Asian professionals, undermining the assumption that these spaces operate as meritocracies. This erasure of anti-Asian racism, fueled by the perception that Asians are 'White-adjacent,' contributes to their marginalization and invisibility in DEI efforts.

This dynamic is evident in Ontario's psychology departments, where East Asian and South Asian faculty are more heavily represented in assistant and lower-ranking roles but remain underrepresented in more secure and influential positions such as Full and Associate Professorships, reflecting broader patterns of discrimination and exclusion that prevent Asian scholars from achieving equitable representation in higher education leadership [44, 55]. The gap between the 19.2% Asian population in Ontario and their 8% representation in psychology faculty suggests systemic barriers to career advancement and demonstrates the lasting impact of historic exclusionary practices [58].

4.4. The qualification question: anti-Black biases

Beyond the underrepresentation of Asian faculty, the disparities are even more pronounced for Black and Indigenous scholars, with only 9 Black and 5 Indigenous faculty members out of approximately 1,400 psychology faculty in Ontario. To reflect proportional representation, there should be approximately 66 Black and 39 Indigenous faculty members.

Given the high qualifications required to become a professor, one question that often arises is if BIPOC professors are as qualified as White professors, and if these differences can explain the observed disparity. To examine this in our sample, we conducted a detailed follow-up review of the publication records and qualifications of the eight Black psychology faculty (excluding the one emeritus) identified in our sample. Of the eight, four are trained clinical psychologists, one specializes in industrial/organizational psychology, two work in developmental or educational psychology, and one focuses on community and health equity research.

Several are registered psychologists, and several hold senior academic ranks such as Associate or Full Professor, and several hold research chairs. Their publication records and career accomplishments demonstrate that their qualifications match or exceed those of their peers. For instance, of the three Black professors at one urban university, one Black professor has published over 180 peer-reviewed articles, one over 200, and another has published over 140. Those at other universities maintain robust research or teaching profiles aligned with their applied or pedagogical roles. A Black Adjunct Professor holds a PhD in Industrial/Organizational Psychology, has extensive experience as an executive coach and HR consultant, and is widely recognized for her applied expertise and national leadership in workplace equity. She is also the author of a professional book on workplace equity, which has been adopted in several organizational training programmes across Canada.

This focused review confirms that the Black faculty in our sample are highly qualified, exceptionally productive, and in several cases significantly outperform national norms. According to a 2023 analysis of Canadian psychology faculty, the average number of publications for Full Professors in CPA-accredited clinical psychology programmes is 79. In comparison, the three Ottawa professors far exceed this benchmark, with publication counts nearly double or more than the national average [59].

In response to the question of whether age might account for differences in academic rank, we conducted a follow-up review of publicly available information to estimate the career stage of the nine Black psychology faculty in our sample. Most are midto senior-career scholars, with six of the nine in their 40s or 50s, and one holding emeritus status. Several have publication records

far exceeding national averages for their rank. This suggests that underrepresentation in secure or senior positions cannot be attributed to early-career status or lack of experience. In fact, their career progression and scholarly output affirm their qualifications for higher academic standing.

This is consistent with employment research that overwhelmingly indicates that BIPOC professionals in Canada must be overqualified (not underqualified) to obtain the same opportunities as White professionals of equal status [60, 61].

4.5. Indigenous faculty in Canada

Although still few in number, Indigenous psychologists in Ontario have built an outsized record of achievement. Collectively, they hold three Canada Research Chairs, direct community-engaged laboratories, and secure consistent tri-council funding to confront suicide, addiction, and environmental injustice in First Nations contexts. Their programmes blend Indigenous ways of knowing with clinical and developmental science-testing culturally tailored interventions for substance-use recovery, developing digital resilience tools for youth, and mapping how family- and school-based relationships shape learning and mental health. They also provide editorial leadership in emerging subfields, mentor first-generation and Indigenous students, and translate findings into policy guidance for health and education systems. In short, this small cohort demonstrates both the depth of Indigenous scholarship and the transformational impact that greater representation could have on psychology departments across the province.

Yet despite the calls for increasing instruction on Indigenous ways of knowing, research documents that Indigenous faculty commonly experience strong resistance from White students, colleagues, and administration when attempting to re-centre Indigenous history, philosophy, and culture [62]. Ansloos and colleagues describe these issues in depth [4] in their critical paper about Indigenous peoples and professional training in psychology in Canada.

4.6. Challenges faced by faculty of colour

These disparities are not accidental but are reinforced by institutional policies that systematically disadvantage BIPOC professionals [5, 44]. This exclusion of BIPOC faculty is further reinforced by academic gatekeeping, where predominantly White faculty control hiring and promotion processes, often favouring candidates who

align with their dominant cultural norms and research priorities [39, 44].

Grant funding plays a pivotal role in the career mobility of principal investigators (PIs). They provide the financial resources necessary to conduct innovative research. Several studies have identified racial inequalities with regard to research funding, with racialized PIs being less likely to secure grants compared to their White counterparts [55, 63, 64]. Notably, this research has primarily been conducted in the United States and there is a lack of similar studies examining these trends in Canada. However, Nakhaie and colleagues [65] examined compiled Social Sciences and Humanities Research Council (SSHRC) data from 1998 to 2018 and found that racialized applicants received less SSHRC grant funding than non-racialized applicants (also see [66]).

Finding a mentor to guide them through the maze of academia and its rules and conventions is a challenge faced by most racialized and Indigenous faculty, when there are few senior academics that share their identities. As an example, one large university has a mentorship programme for faculty to help them advance which is available to any professor by request. One of the authors sought to obtain a Black female mentor to help her achieve tenure, but there were no tenured Black female professors available to work with her. In the absence of such guidance, it is difficult to gain access to the unwritten rules and the inner workings of the institution specifically, and academia more generally. This has a detrimental impact on career progression and ultimately contributes to underrepresentation in senior faculty positions.

4.7. Implications

As noted in the introduction, faculty of colour are needed to meet the needs of racialized and ethnic minority students. The absence of such professors maintains the problem, as the lack of role models is creating additional barriers for students who wish to become psychologists [8]. Further, we can see how this lack is contributing to mental health barriers in communities that may have no professional psychologists to serve them. To address this problem, we propose bold emergency actions to diversify the professoriate.

The first action is to prioritize hiring of BIPOC faculty. In **Table 2**, we calculate how many faculty of each race would need to be hired each year to achieve proportional representation within 5 years across Ontario psychology faculty. Such a measure echoes the readjustment of grant funding at the CHIR to ensure proportional representation for francophone and English-speaking grant recipients in Canada.

Table 2 • Numbers needed to achieve representation in five years.

Race	Ontario population	Percent of population	Percent of psychology faculty	Current faculty	Proportional faculty representation	Hires per year to achieve proportional in 5 years
Asian	2,634,230	19%	8%	114	269	31
Black	768,740	5.50%	0.60%	9	66	12
Indigenous	412,552	2.90%	0.60%	5	39	6
MENA	496,405	3.49%	2.00%	32	50	4

The second action is to dramatically increase BIPOC admissions to psychology graduate programmes. Sarr and colleagues [10] provide an excellent roadmap for this endeavour that includes expansions to the admissions processes (including reserved seats for

racialized students), requiring students to provide diversity statements as part of the selection process, credit for fluency in non-official languages, reducing financial barriers, anti-racism training for all faculty, and collecting sociodemographic admissions data to

monitor progress. For example, the University of Ottawa formalized its diversity goals for admissions to the clinical programme in September 2021, with a primary objective of increasing admissions of BIPOC students who could meet the scientific, professional, and mental health needs of diverse communities. They implemented a BIPOC pool of applications and updated their scoring criteria for admissions to make it less exclusionary. Accordingly, now 67% of offers are allocated to candidates who self-identify as BIPOC. The remaining 33% are allocated to BIPOC or general pool candidates, depending on their ranking scores. This example is exemplary, as the programme took bold steps to increase the admission of racialized students, whereby students of colour will be overrepresented in recognition of past exclusionary practices and the dire need for professional psychologists for these communities. Further, they identified problems in their own admissions criteria that advantaged White applicants and took decisive actions to make changes [5, 10].

It is important to note, however, that representation alone, i.e., a diverse professional psychology professoriate, does not guarantee equity in departments of psychology. When racialized individuals manage to persist in academia and pursue an academic career, they are faced with a different set of challenges, including navigating an institutional culture that undervalues research topics that serve BIPOC communities [67]. Increasing BIPOC faculty representation will only be impactful if these scholars are empowered to explore research that challenges systemic inequities and focus on the well-being of their communities; otherwise, their presence is merely tokenization. They must also be integrated into a welcoming, inclusive academic environment where they feel their presence is valued [54].

4.8. Limitations

One limitation of this study is the concern that the collected data is observational, and it could be argued that it may not be as accurate as self-reported data. However, we remind readers that race is based on visual characteristics and assumed ancestry, and thus is not a label that an individual is able to select; there is no agency. Even gender is subject to more agency than is race, which is one reason why race is so divisive and inhumane. A person who is racialized as "Asian" cannot simply state that they no longer accept this and choose to be "White".

Further, it should be noted that we did not collect data on religion. Some ethnic groups are highly intertwined with a specific faith group (e.g., Judaism), which was not captured in this study. We note this as a limitation and area for future study.

We also did not collect data on faculty age, and as such we could not formally test whether rank disparities by race might be partially attributable to differences in career stage. However, we note that publicly available data for the senior Black faculty in our sample indicates that most are mid- to late-career and exceed national publication benchmarks for their rank, suggesting that underrepresentation in senior roles cannot be fully explained by age. Future research should build on these findings by examining differences in qualifications, career progression, and access to funding across racial groups, using larger-scale data that includes metrics such as publication counts, grant success rates, and teaching or clinical evaluations. Our assessment of Black faculty in this sample demonstrated high levels of productivity and qualification, providing further evidence that observed disparities reflect structural

barriers, not individual merit. Additionally, although we performed a detailed individual-level analysis of all Black and Indigenous faculty, this was not possible for all groups; such an endeavour would have significantly exceeded the scope of this study and shifted the focus away from our core aim: to document racial disparities in faculty representation, particularly among those groups most severely underrepresented.

Finally, given that 8% of the psychology faculty in our data set could not be identified as White or BIPOC due to a missing photo, it is important that systematic race-based demographic data for psychology faculty be collected throughout Canada using other means as well (e.g., surveys) to better understand and ultimately redress disparities.

As a foundational study, our aim was to document racial and ethnic representation across Ontario psychology departments. While the study is descriptive in nature, it provides a springboard for future work exploring the experiences and career trajectories of BIPOC faculty members in their own voices. Qualitative research has already begun to illuminate these lived realities [4, 56], and our demographic findings help contextualize such accounts and underscore the need for continuing to pay attention to systemic inequities.

5. Conclusions

Before conducting this study, we were unaware of the full extent of the underrepresentation of faculty of colour in psychology departments, and we understand that universities may also lack awareness of the severity of this issue. It is, however, uncertain whether institutions would have eventually independently uncovered these disparities or shown genuine interest in addressing them, especially given the long-standing reluctance to collect and transparently report race-based data [44, 53]. This avoidance may reflect an institutional hesitancy to confront uncomfortable truths about systemic racism, raising concerns about whether universities are truly committed to implementing meaningful strategies for change or even acknowledging the problem [8].

Decades of ineffective and performative equity policies in Canada have failed to address the structural barriers into the professoriate, confirming that racism—not productivity or interest—is the root cause of these disparities [44]. Both new and existing qualitative and statistical data have been utilized to document inequities and provide strong evidence that race specifically is driving the inequity. Their study illustrates the downstream effect of entrenched institutional biases, exclusionary practices, and barriers to career advancement perpetuate disparities in faculty representation, leaving little credible evidence to support alternative explanations. These problems have been documented throughout the country [67].

There have been numerous calls for increased inclusion in Canadian psychology training programmes to address this issue [10, 68], and a few Canadian universities have begun to implement changes. However, this is not enough. Universities have an ethical obligation to ensure their incoming cohorts are representative of the population that requires training and mental health services. Ethnoracial data must be published to ensure transparency, as universities clearly cannot be left to hold themselves accountable. The government and accreditation bodies, such as the CPA, should collect and publish data on the diversity of

Canadian psychologists (similar to what the APA has done in the United States) so that programmes can hold themselves to these standards. CPA Accreditation Standards [69] require diversity in faculty and student admissions, but unless policy and procedure align, change will not occur.

Acknowledgments

We would like to thank the following individuals for their assistance with the data collection: M. Myriah MacIntyre, Kellen Saxberg, Chioma Ezumike, Raymond Feng, Aidan Kaplan, Amy Bartlett, Edward Wu, Mirana Rambelo, Shruti Mistry, Aye-Lama Bah, and Will Culpepper.

Funding

This research was undertaken, in part, thanks to funding from the Canada Research Chairs Program, Canadian Institutes of Health Research (CIHR) award number: CRC-2024-00171.

Author contributions

Conceptualization, M.T.W.; methodology, M.T.W., S.C.F. and D.S.; data collection, D.S., S.C.F. and A.D.; formal analysis, D.S. and S.C.F.; visualization, S.C.F.; writing—original draft preparation, D.S., S.C.F., A.D. and M.T.W.; writing—review and editing, S.C.F., D.S., A.D. and M.T.W.; project administration, D.S. and S.C.F.; supervision, M.T.W. All authors have read and agreed to the published version of the manuscript.

Conflict of interest

Author S.C.F. is an employee of Angelini Pharma and a partner in Bioville GmBH. These companies played no role in the conception, execution, interpretation, or writing of this manuscript. The other authors declare no conflicts of interest.

Data availability statement

The data supporting the findings of this study are available from the corresponding author upon reasonable request.

Institutional review board statement

Not applicable.

Informed consent statement

Not applicable.

Supplementary materials

The following supporting information can be downloaded at: ht tps://doi.org/10.20935/MHealthWellB7762. Supplementary materials include: Table S1: Differences between race and ethnicity; Table S2: Methodology and ethical considerations.

Additional information

Received: 2025-03-11 Accepted: 2025-05-27 Published: 2025-06-17

Academia Mental Health and Well-Being papers should be cited as Academia Mental Health and Well-Being 2025, ISSN 2997-9196, https://doi.org/10.20935/MHealthWellB7762. The journal's official abbreviation is Acad. Ment. Health WellB.

Publisher's note

Academia.edu Journals stays neutral with regard to jurisdictional claims in published maps and institutional affiliations. All claims expressed in this article are solely those of the authors and do not necessarily represent those of their affiliated organizations, or those of the publisher, the editors and the reviewers. Any product that may be evaluated in this article, or claim that may be made by its manufacturer, is not guaranteed or endorsed by the publisher.

Copyright

© 2025 copyright by the authors. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (https://creativecommons.org/licenses/by/4.0/).

References

- Roberts SO, Bareket-Shavit C, Dollins FA, Goldie PD, Mortenson E. Racial inequality in psychological research: trends of the past and recommendations for the future. Perspect Psychol Sci. 2020;15(6):1295-309. doi: 10.1177/1745 691620927709
- 2. Williams M, Tellawi G, Wetterneck CT, Chapman LK. Recruitment of ethnoracial minorities for mental health research. Drugs. 2013;67(2):236–44. [cited 2025 Jun 5]. Available from: https://www.monnicawilliams.com/articles/Williams_MinorityRecruitment_2013.pdf
- American Psychological Association. APA task force report on promotion, tenure and retention of faculty of color in psychology. 2023 [cited 2024 Dec 15]. Available from: https://www.apa.org/pubs/reports/inequities-ac ademic-tenure-promotion.pdf
- 4. Ansloos J, Stewart S, Fellner K, Goodwill A, Graham H, McCormick R, et al. Indigenous peoples and professional training in psychology in Canada. Can Psychol/Psychol Canadienne. 2019;60(4):265–80. doi: 10.1037/cap0000189
- Faber SC, Williams MT, Metzger IW, MacIntyre MM, Strauss D, Duniya CG, et al. Lions at the gate: how weaponization of policy prevents people of colour from becoming professional psychologists in Canada. Can Psychol. 2023;64(4):335–54. doi: 10.1037/cap0000352

- 6. Girio-Herrera E, Ferro R, Asif M, Aston C. Improving Black student outcomes: the multifaceted role of psychology professors in higher education. Theory Into Pract. 2023;62(4):448-63. doi: 10.1080/00405841.2023.2259252
- 7. Claeys-Kulik A-L, Jørgensen TE, Stöber H. Diversity, equity and inclusion in European higher education institutions: results from the INVITED Project. Brussels: European University Association; 2019 [cited 2025 Mar 14]. Available from: https://multinclude.eu/wp-content/uploads/sites/23/2020/06/35.-EUA-diversity-equity-and-inclusion-in-eur opean-higher-education-institutions.pdf
- 8. Williams MT. Adverse racial climates in academia: conceptualization, interventions, and call to action. New Ideas Psychol. 2019;55:58–67. doi: 10.1016/j.newideapsych.2019. 05.002
- Gerhards SM, Schweda M, Weßel M. Medical students' perspectives on racism in medicine and healthcare in Germany: identified problems and learning needs for medical education. GMS J Med Educ. 2023;40(2):Doc22. doi: 10.3205/zma001604
- 10. Sarr F, Knight S, Strauss D, Ouimet AJ, Cénat JM, Williams MT, et al. Increasing the representation of Black, Indigenous, and People of Colour as students in psychology doctoral programmes. Can Psychol/Psychologie Canadienne. 2022;63(4):479–99. doi: 10.1037/cap0000339
- Williams MT, Skinta MD, Kanter JK, Martin-Willett R, Mier-Chairez J, Debreaux M, et al. A qualitative study of microaggressions against African Americans on predominantly White campuses. BMC Psychol. 2020;8:111. doi: 10.1186/s40359-020-00472-8
- Cross JD, Carman CA. The relationship between faculty diversity and student success in public community colleges.
 Community Coll J Res Pract. 2022;46(12):855-68. doi: 10.1080/10668926.2021.1910595
- 13. Mills KJ. "It's systemic": environmental racial microaggressions experienced by Black undergraduates at a predominantly White institution. J Divers High Educ. 2020;13(1): 44–55. doi: 10.1037/dheo000121
- 14. Williams M, Faber SC, Duniya C. Being an anti-racist clinician. Cogn Behav Therapist. 2022;15:e19. doi: 10.1017/S1754470X22000162
- 15. Hofstra B, McFarland DA, Smith S, Jurgens D. Diversifying the professoriate. Socius. 2022;8:237802312210851. doi: 10.1177/23780231221085118
- 16. Williams MT, Osman M, Kaplan A, Faber SC. Barriers to care for mental health conditions in Canada. PLOS Ment Health. 2024;1(4):e0000065. doi: 10.1371/journal.pmen.0000065
- 17. Bergkamp J, Sloan MOL, Krizizke J, Lash M, Trantel N, Vaught J, et al. Pathways to the therapist paragon: a decolonial grounded theory. Front Psychol. 2023;14:1185762. doi: 10.3389/fpsyg.2023.1185762
- 18. Hall WJ, Chapman MV, Lee KM, Merino YM, Thomas TW, Payne BK, et al. Implicit racial/ethnic bias among health care

- professionals and its influence on health care outcomes: a systematic review. Am J Public Health. 2015;105(12):e60–e76. doi: 10.2105/AJPH.2015.302903
- 19. Gara MA, Minsky S, Silverstein SM, Miskimen T, Strakowski SM. A naturalistic study of racial disparities in diagnoses at an outpatient behavioral health clinic. Psychiatr Serv. 2019;70(2):130–34. doi: 10.1176/appi.ps.201800223
- 20. Kuno E, Rothbard AB. Racial disparities in antipsychotic prescription patterns for patients with schizophrenia. Am J Psychiatry. 2002;159(4):567–72. doi: 10.1176/appi.ajp.159. 4.567
- 21. Smith DT, Faber SC, Buchanan NT, Foster D, Green L. The need for psychedelic-assisted therapy in the Black community and the burdens of its provision. Front Psychiatry. 2021;12:774736. doi: 10.3389/fpsyt.2021.774736
- 22. Spoont MR, Nelson DB, Murdoch M, Sayer NA, Nugent S, Rector T, et al. Are there racial/ethnic disparities in VA PTSD treatment retention? Depress Anxiety. 2015;32(6):415–25. doi: 10.1002/da.22295
- 23. Fante-Coleman T, Jackson-Best F. Barriers and facilitators to accessing mental healthcare in Canada for Black youth: a scoping review. Adolesc Res Rev. 2020;5(2):115–36. doi: 10.1007/s40894-020-00133-2
- 24. Faber SC, Osman M, Williams MT. Access to mental health care in Canada. Int J Ment Health. 2023;52(3):312–34. doi: 10.1080/00207411.2023.2218586
- 25. Canadian Psychological Association. Psychology's response to the Truth and Reconciliation Commission of Canada's report. Canadian Psychological Association and the Psychology Foundation of Canada. 2018 [cited 2024 Dec 15]. Available from: https://cpa.ca/docs/File/Task_Forces/TRC %20Task%20Force%20Report_FINAL.pdf
- 26. Gao Z. Mental health of Chinese in Canada. In: Minas H, editor. Mental health in China and the Chinese diaspora: historical and cultural perspectives. Cham: Springer; 2021. p. 211–23. doi: 10.1007/978-3-030-65161-9_15
- 27. Naeem F, Tuck A, Mutta B, Dhillon P, Thandi G, Kassam A, et al. Protocol for a multi-phase, mixed methods study to develop and evaluate culturally adapted CBT to improve community mental health services for Canadians of South Asian origin. Trials. 2021;22(600):1–9. doi: 10.1186/s13063-021-05547-4
- 28. Statistics Canada. Visible minority by gender and age: Canada, provinces and territories. 2023 June 21 [cited 2024 Dec 15]. Available from: https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=9810035101&pickMembers%5B0%5 D=2.1&pickMembers%5B1%5D=3.1&pickMembers%5B2%5 D=4.2
- 29. Thompson E, Edjoc R, Atchessi N, Striha M, Gabrani-Juma I, Dawson T. COVID-19: a case for the collection of race data in Canada and abroad. Can Commun Dis Rep. 2021;47(7/8):300–4. doi: 10.14745/ccdr.v47i78a02

- 30. Government of Canada. Forms and instructions. Self Identification Form. Canada research chairs program. 2021 [cited 2024 Dec 5]. Available from: https://www.chairs-chaires.gc.ca/forms-formulaires/self_identification_preview-eng.pdf
- 31. Faber N, Lei R. Perceptions of gender and racial inequality differ for Black and White participants. Proceedings of the Society for Personality and Social Psychology 2023 Conference; 2023 Febr 23–25; Atlanta, GA, USA. 2023.
- 32. Ghavami N, Mistry RS. Urban ethnically diverse adolescents' perceptions of social class at the intersection of race, gender, and sexual orientation. Dev Psychol. 2019;55(3):457–70. doi: 10.1037/dev0000572
- 33. Haeny A, Holmes S, Williams MT. The need for shared nomenclature on racism and related terminology. Perspect Psychol Sci. 2021;16(5):886–92. doi: 10.1177/17456916211000760
- 34. Mersha TB, Abebe T. Self-reported race/ethnicity in the age of genomic research: its potential impact on understanding health disparities. Hum Genomics. 2015;9:1–15. doi: 10. 1186/s40246-014-0023-x
- 35. Fisher M. A revealing map of the world's most and least ethnically diverse countries. Washington Post. 2013 May 16 [cited 2024 Dec 07]. Available from: https://www.washingtonpost.com/news/worldviews/wp/2013/05/16/a-revealing-map-of-the-worlds-most-and-least-ethnically-diverse-countries/
- 36. American Psychological Association Working Group for Journal Reporting Guidelines for Equity, Diversity, Inclusion, and Justice in Psychological Science. Race, Ethnicity, and Culture reporting standards (JARS–REC): information recommended for inclusion in all manuscripts. Washington (DC): American Psychological Association; 2023.
- 37. Henry F, Choi A, Kobayashi A. The representation of racialized faculty at selected Canadian universities. Can Ethn Stud. 2012;44(1):1–12. doi: 10.1353/ces.2012.0008
- 38. Statistics Canada. Indigenous population continues to grow and is much younger than the non-indigenous population, although the pace of growth has slowed. 2022 September 21 [cited 2024 Dec 7]. Available from: https://www150.statcan.gc.ca/n1/daily-quotidien/220921/dq220921a-eng.htm
- 39. Dupree CH, Kraus MW. Psychological science is not race neutral. Perspect Psychol Sci. 2022;17(1):270–5. doi: 10.1177/1745691620979820
- 40. Guthrie RV. Even the rat was white: a historical view of psychology. 2nd ed. Boston: Allyn & Bacon, Inc.; 2003.
- Dana RH. Mental health services and multicultural populations, Chapter 1. In: Understanding cultural identity in intervention and assessment. Thousand Oaks (CA): SAGE Publications; 1998. p. 1–14. doi: 10.4135/9781483328225.n1
- Dana RH, Allen J. Cultural competency training in a global society. Dordrecht: Springer Science & Business Media; 2008.

- 43. Graham JM, Kim YH. Predictors of doctoral student success in professional psychology: characteristics of students, programs, and universities. J Clin Psychol. 2011;67:340–54. doi: 10.1002/jclp.20767
- 44. Henry F, Dua E, Kobayashi A, James C, Li P, Ramos H, et al. Race, racialization and Indigeneity in Canadian universities. Race Ethn Educ. 2017;20(3):300–14. doi: 10.1080/13613324.2016.1260226
- 45. Knapp J. "On the importance of education...it is as necessary as the light—it should be as common as water, and as free as air...": perpetuating racial discrimination through education in nineteenth century Windsor and Sandwich. Great Lakes J Undergrad History. 2013;1(1):8–36. doi: 10.22329/gljuh.v1i1.8520
- 46. Kim JY, Shang Z. No, I do belong: how Asian American and Asian Canadian professionals defy and counter workplace racial violence during COVID-19. J Manage Stud. 2022;61(3):888–925. doi: 10.1111/joms.12898
- 47. Li PS. The Chinese in Canada. Oxford: Oxford University Press; 1998.
- 48. Truth and Reconciliation Commission of Canada. Honouring the truth, reconciling for the future: Summary of the final report of the truth and reconciliation commission of Canada. 2015. Cat. no.: IR4-7/2015E-PDF [cited 2025 May 2]. Available from: https://publications.gc.ca/collections/collection_2015/trc/IR4-7-2015-eng.pdf
- 49. Office of the Commissioner of Official Languages. Canadian linguistic facts and figures: Ontario edition. Ottawa (ON): Minister of Public Works and Government Services Canada; 2001 [cited 2025 May 2]. Available from: https://publicatio ns.gc.ca/collections/Collection/SF31-53-1-2001E.pdf
- 50. College of Psychologists of Ontario (CPO). CPO registration guidelines: Appendix F—Language fluency policy. Toronto: The College of Psychologists of Ontario; 2015 Apr [cited 2025 Jun 5]. Available from: https://cpbao.ca/cpo_resources/app endix-f-language-fluency-policy/
- Canadian Institutes of Health Research (CIHR). What we heard: equity, diversity and inclusion in the federal research funding system. 2023 [cited 2025 Jan 15]. Available from: https://cihr-irsc.gc.ca/e/54089.html
- 52. Canadian Institutes of Health Research (CIHR). Equalization measures for racialized principal investigators in project grants. 2023 [cited 2025 Jan 15]. Available from: https://cihr-irsc.gc.ca/e/53907.html
- 53. Cranston J, Bennett A. Systemic racism in Canadian higher education: A rapid scoping review of 22 years of literature. Can J High Educ. 2024;54(1):103–25. doi: 10.47678/cjhe.v54i1.190069
- 54. Lin PS, Kennette LN. Creating an inclusive community for BIPOC faculty: Women of color in academia. SN Soc Sci. 2022;2:246. doi: 10.1007/s43545-022-00555-w
- 55. Meixiong J, Golden SH. The US biological sciences faculty gap in Asian representation. J Clin Investig. 2021;131(13): e146933. doi: 10.1172/JCI151581

- 56. Tze VMC, Li JCH. Obstacles to diversification: lived experiences of visible minority applicants and faculty members in psychology. Can Psychol. 2025. doi: 10.1037/cap0000417
- 57. University of Ottawa. BIPOC pool procedures—clinical psychology program. Faculty of Social Sciences. 2023 [cited 2024 Dec 29]. Available from: https://www.uottawa.ca/faculty-social-sciences/psychology/graduate/clinical-psychology/bipoc-pool-procedures
- 58. Statistics Canada. Canada at a glance. Racialized groups. 2021 [cited 2024 Dec 15]. Available from: https://www150.statcan.gc.ca/n1/pub/12-581-x/2022001/sec3-eng.htm
- 59. Krakauer RL, Drakes DH, Asmundson AJN, Carleton RN. Assessing the publication productivity of clinical psychology professors in Canadian Psychological Association-accredited Canadian psychology departments: a 10-year replication study. Can Psychol. 2023. doi: 10.1037/cap0000378
- 60. Banerjee R, Reitz JG, Oreopoulos P. Do large employers treat racial minorities more fairly? An analysis of Canadian field experiment data. Can Public Policy. 2018;44(1):1–12. doi: 10.32920/ryerson.14638335.v1
- Quillian L, Midtbøen AH. Comparative perspectives on racial discrimination in hiring: the rise of field experiments. Annu Rev Sociol. 2021;47(1):391–415. doi: 10.1146/annurev-soc-090420-035144
- 62. Junos K. UBC Prof condemns school for allegedly burying teacher candidate reports. CityNews Vancouver. 2021 February 1 [cited 2024 Dec 7]. Available from: https://vancouver.citynews.ca/2021/01/31/ubc-professor-f aculty-of-education-reports-destroyed/
- 63. Ginther DK, Kahn S, Schaffer WT. Gender, race/ethnicity, and National Institutes of Health Ro1 research awards: is

- there evidence of a double bind for women of color? Acad Med. 2016;91(8):1098–107. doi: 10.1097/ACM.0000000 000001278
- 64. Lauer MS, Roychowdhury D. Inequalities in the distribution of National Institutes of Health research project grant funding. eLife. 2021;10:e71712. doi: 10.7554/eLife.71712
- 65. Nakhaie R, Lippert RK, Cukarski D. Granting inequities: Racialization and gender differences in Social Science and Humanities Research Council of Canada's grant amounts for research elites. Can Ethn Stud. 2023;55(2):25–49. doi: 10.1353/ces.2023.a902150
- 66. Canadian Institutes of Health Research [CIHR]. Findings from CIHR environmental scan on systemic racism in health research and funding systems (2021–22). 2022 May 3 [cited 2025 Jan 15]. Available from: https://cihr-irsc.gc.ca/e/5289 9.html
- 67. Mohamed T, Beagan BL. "Strange faces" in the academy: EXperiences of racialized and Indigenous faculty in Canadian universities. Race Ethn Educ. 2019;22(3):338-54. doi: 10.1080/13613324.2018.1511532
- 68. Students for Systemic Transformation and Equity in Psychology. Time to SSTEP forward: recommendations to promote anti-racist clinical practice. Psynopsis. 2020;42(4):14.
- 69. Canadian psychological association accreditation standards for doctoral and residency programs in professional psychology. 6th ed. Ottawa (ON): Canadian Psychological Association; 2023 [cited 2024 Dec 28]. Available from: https://cpa.ca/docs/File/Accreditation/CPA%202023%20 Accreditation%20Standards_EN_Web.pdf