

Understanding Inequality: The Experiences and Perceptions of Equality, Diversity, and Inclusion of those Working or Studying within Sport and Exercise Psychology

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Abstract

Discrimination and inequality are ever present in today's society, with athletes facing racial abuse and LGBTQ+ individuals fearing for their safety at international events. Due to these additional stressors, the role of sport psychologists becomes increasingly important when supporting athletes from minority groups. An online questionnaire was developed to gain greater understanding of the equality, diversity, and inclusion (ED&I) knowledge, perceptions, and experiences of those working, studying or researching in the field of sport and exercise psychology. The findings of the current study highlight the ongoing experiences of sexism, racism, homo/transphobia, and ableism experienced by participants, as well as the need for more suitable, in-depth training around ED&I subjects and guidance on meaningful action to combat inequality and discrimination in the field. The involvement of individuals from minority groups in the development, delivery and evaluation of training and research is necessary to move towards true inclusion.

Keywords: Quality, Diversity, Inclusion, Sport, Education

Introduction

Discrimination and inequity have existed within the fabric of human society for millennia; yet, since the rise of online society issues surrounding equality, diversity, and inclusion have drawn increased scrutiny, prompted a shift in the discourse, and provoked substantial action to bring about change (Shaw, 2005; Wolfe, 2019). A worrying culture of hate, inequality and discrimination is ever present in the world of sport. The horrific abuse faced by England football players by fans both in the stadium and online (Harrison, 2020), homophobia causing LGBTQ+ athletes fearing for their safety at international events (Padgett, 2021; Phipps, 2020), the trivialisation of anti-racist acts such as 'taking a knee' by high ranking members of the UK parliament (Bennett & King, 2021), and the gender criticism and lack of legislative protection faced by the transgender and intersex community (Hamilton et al., 2021; Whittle & Simkiss, 2020), are only a few examples of additional stressors faced by people in minority groups within and beyond the sporting world.

There have been many calls to action from academics, practitioners, and athletes looking to combat discrimination in sport, from Smith et al. (2021) petitioning for a move away from ableist language in physical activity messaging, to Hamilton et al. (2021) seeking fairer treatment of intersex athletes in competitive sport. Yet, outdated attitudes and a lack of support for equality interventions makes meaningful change a difficult goal (Amodeo et al., 2021). Equality, diversity and inclusion (ED&I) is not always seen as important in many fields such as education and healthcare and can often be treated as an afterthought (Green et al., 2017; Hinton-Smith et al., 2021). Current literature suggests the favouring of able-bodies (Coop, 2018) and the need for cultural sensitivity training (Quartiroli et al., 2020) as just some of the potential factors contributing to the inequality and marginalisation experienced by minority groups in sport and exercise psychology.

The fields of sport and exercise psychology, and psychology more broadly, are no strangers to inequality and discrimination. Studies show female sport and exercise psychologists experience sexist attitudes and inappropriate behaviour from colleagues, athletes, and employers (Goldman & Gervis, 2021; Krane & Waldron, 2020). Additionally, sport and exercise psychologists from Black and ethnic minority groups report experiencing racist micro-aggressions in the workplace (Carter & Davila, 2017), such as assumptions around language ability or immigration status. Moreover, psychologists with disabilities describe being exposed to damaging stereotypes and negative attitudes, as well as additional practical and financial barriers not faced by their able-bodied colleagues, including costs of adaptable furniture (Levinson & Parritt, 2005). These additional pressures faced by those in minority groups over and above those typically experienced by the majority are known as 'Minority stress'. Minority stress theory posits that simply being a member of

a minority group does not cause poorer health outcomes. However, the stress and additional pressures caused by difficult social situations and marginalisation accrue over time, resulting in long term health deficits (Meyer, 2003). Minority stress theory, along with intersectional theory (which proposes that people may be disadvantaged by multiple sources of oppression at the same time, such as race, gender, religion and other identity markers) (Bowleg, 2017), can be used to help frame the experiences of individuals experiencing marginalisation and discrimination.

Despite both minority stress theory and intersectional theory highlighting the importance of the individual, there is often increased focus on writing generic ED&I policy over actively ensuring such policies lead to tangible change for the individual (Ahmed, 2007). Little is known about why people do not engage with ED&I policy in sport and exercise psychology, with some suggesting the lack of diversity in teachers or a lack of compliance could explain a lack of engagement in ED&I in education (Pilkington, 2014). The Qualification in Sport and Exercise Psychology (QSEP) is an independent training route to Health and Care Professions Council (HCPC) registration, with competence assessed through four key roles. Over the course of their training candidates are required to evidence that they meet each key role standard. Key role one centres on personal and professional standards and ethical practice, key role two is the application of psychological and related methods and theories derived from an evidence base with athletes, exercisers and performers. Key role three comprises the research element and key role four focuses on the communication of psychological knowledge in both research, formal and informal settings (QSEP Candidate Handbook, 2021 p. 38-40). Whilst not assessed directly, equality, diversity and inclusion are clearly linked to key role one; the development, implementation and maintenance of personal and professional standards and ethical practice. Furthermore, the British Psychological Society (BPS) includes ED&I both within general BPS practice guidelines (BPS, 2017) and more specific guidelines for psychologists working with gender, sexuality and relationship diversity (BPS, 2019). Informal feedback from QSEP trainees and other members of the BPS's Division of Sport and Exercise (DSEP) at conferences and training events highlighted the tendency for both in-training members and their supervisors to focus on sport-related material over engagement with ED&I and/or more generic practitioner guidance. This means trainees may miss a rich stream of knowledge in their development, which in turn could impact their skills and knowledge as they move into employment.

Improving the knowledge, importance, and value of ED&I through exploring individuals' experiences and enhancing training has been implemented successfully in other fields such as engineering (Burke, Hanson, & Abraham, 2021). In order to provide a foundation for these improvements to manifest in sport and exercise psychology, the aim of this study was to explore the experiences and perceptions of those currently working, training, or researching within sport and

exercise psychology, in relation to inequality, discrimination and ED&I training; creating a strong foundation for the progression of ED&I in the field.

Materials and Methods

Sample

A snowball recruitment strategy was employed through DSEP social media channels to recruit a sample of people (aged ≥ 18) working, studying and/or researching in the sport and exercise psychology field. Although DSEP is a United Kingdom (UK) based organisation, the call for participants was shared by several international organisations, with the intent of gaining a more global sample population.

Measures

A specifically designed questionnaire was developed by the research team in association with key stakeholders and subject matter experts from both ED&I and sport and exercise psychology. The questionnaire contained two sections: section one contained nine demographic questions related to the individual, and section two involved six questions exploring individuals' experiences and perceptions of ED&I in the discipline. Questionnaire items were a mixture of multiple choice and open text responses.

Procedure

The study gained ethical approval through University of Stirling in Feb 2021 (Ref: 0411). An online survey was published via JISC online surveys and was made available online from February - March 2021. The online survey link was disseminated via the DSEP membership newsletter and DSEP social media channels to recruit participants. Those wishing to participate followed an online link that provided the participant information sheet and online consent form, following completion of the online consent form participants were granted access to the online survey.

Data Analysis

Exploratory descriptive statistical analysis and frequency comparisons of quantitative data (collected through the multiple-choice questions) were conducted using SPSS. Open text/qualitative responses were analysed using narrative and thematic analysis (Braun & Clarke, 2006), this analysis was conducted manually using Microsoft Excel. To mitigate potential unconscious bias, each response was analysed by at least two members of the research team, and themes were identified and developed through group discussion.

Results

Demographic findings

A total of 129 participants took part in the study, of which 50% (N=62) were DSEP members. Participants were aged between 18 - 82 yrs (M=32.28 SD=12.95), and reported a range of job roles e.g. practitioner, lecturer and researcher, with many holding multiple roles simultaneously (see figure 1). The largest group represented within the sample was practitioners (N=32), whilst the smallest was QSEP stage 2 students (N=11). Other groups of in-training members (e.g. Professional Doctorate/PhD, Masters and Undergraduate) were also represented within the sample.

Figure 1: Sample by Job Role

The sample was predominantly white (83% N=107), with 16% (N=20) BAME (Black, Asian and Minority Ethnic) participants (Asian N=14 11%, Black N=4 3%, Arab N=2 2%). 57% of participants identified as female, 38% as male, and 3% identified as a non-binary gender identity. Most of the participants identified as heterosexual (81% N=105), with a small number identifying as LGBQ+ (14% N=14). 16% (N=20) of participants reported having a disability or long term health condition: mental health condition (N=8), learning disability (N=4), neurodiversity (N=2), mobility/physical disability (N=2), and multiple conditions/disabilities (N=4). Much of the sample identified their religious beliefs as either Agnostic (19% N=25) or Atheist (37% N=46), with a smaller number identifying as Christian (23% N=30), Hindu (4% N=5), Jewish (3% N=4), Buddhist (2% N=3), Muslim (1.5% N=2), Sikh (1.5% N=2) or 'other' religions (1.5% N=2).

Discriminatory Experiences

31% (N=40) of participants reported personal experience of inequality or discrimination within their work, study, or research roles within the field. Those who identified as non-binary (75% N=3), LGBQ+ (73.7% N=13) or having a disability/long term health condition (65% N=13) were the most likely to have experienced inequality or discrimination. Participants shared experiences of sexism, racism, ableism, and homophobia/transphobia.

Sexism

Several female participants shared experiencing sexism and inappropriate behaviour from men in positions of power. For example, a female QSEP student stated *"I have had male coaches treat me differently because I'm female or make inappropriate sexual remarks about me"*. These experiences often affected female participants' development, training, and wellbeing, with one

female white lecturer sharing *“My former postgrad dissertation supervisor (male), who suggested to me that a career in applied sport psychology is too complicated for women, and it would be easier for me to be a housewife”*. These experiences extended into applied work, with many women sharing experiences of being overlooked, belittled, or ignored whilst working as qualified practitioners, as the following quote from a white female practitioner demonstrates:

“Whilst working in football, I was the victim of gender discrimination from my male colleagues. My professional opinion was belittled, the physios and S&Cs I worked with felt that they could do my job better than me and they would offer me patronising advice on how to deliver my content, and they would talk about how I didn’t bring any value to the team with my psychology work and that it was a waste of time behind my back.”

Racism

Participants from ethnic minority backgrounds mentioned experiences of direct and systemic racism that impacted their experiences of sport and exercise psychology, for example a female BAME masters student shared, *“it [the sport and exercise psychology field] is very white-centric and British-centric that as an international student, it does make me feel like I am an outsider at times”*. Several participants also recognised the inclusivity labour placed on people in minority groups. They highlighted the potential for damage in placing the burden of sharing experiences and educating others, onto those who are already marginalised and enduring additional stresses. For example, a female BAME PhD/Prof Doc student raised the concern that *“Asking people from diverse backgrounds to talk about their experiences is the wrong approach. It places us in a vulnerable place, where others may (and have done), question your experiences and excuse someone else’s racist behaviours”*.

Ableism

Several participants mentioned facing discrimination based on their physical appearance, body shape, and/or disabilities, describing how this had shaped other peoples’ opinions of their ability as a sport and exercise psychologist. One notable experience was that of a female applied practitioner who identified as having a disability who shared, *“I’ve been discriminated [against] because of my gender and because of my body type. People see me and ask me bluntly ‘do you practice any sport?’ making an assumption about my habits because I’m overweight”*.

Homophobia and Transphobia

Some LGBTQ+ participants reported experiences of homophobia and transphobia that created a culture of fear and reluctance to stay within the field. The experience of transphobia or the fear of transphobia was common within the participants who identified outside the gender binary. For example, a researcher who identified as non-binary and LGBTQ+ stated *“My perception is that*

awareness of LGBTQ+, and specifically, trans experiences is generally low across the field, and across sport as a whole, and I am wary of entering the world of applied work for fear of lack of acceptance”.

Homogeneous Representation

Whilst numerous participants reported experiencing direct discrimination, many also mentioned how the homogeneous representation (typically middle aged heterosexual white males) observed within the field may cause discrimination by omission, and how certain groups of people such as ethnic minorities, transgender and LGBTQ+ participants rarely feel or experience representation. A male BAME PhD/Prof Doc student shared *“I find that limited BAME representation in the training route does not prepare individuals for the diverse nature of sport”*. Similarly, a female LGBTQ+ researcher also reported, *“Most of my experiences with inequity relate to omission rather than outright discrimination. I rarely see myself (or queer people like me) considered in professional conversations, research, and professional practice training/workshops”*.

Training

Many participants discussed specific barriers they identified as impacting upon their training, and how these barriers furthered their experiences of discrimination and marginalisation. For example, some participants with disabilities shared how the inflexibility of the training routes made it very difficult for them to pursue their career, as demonstrated by this quote from a female masters student who identified as having a disability:

“I finished my MSc in 2019 and then planned to do my Stage 2. I have disabilities and I currently work part-time to allow myself to manage these effectively. Due to the nature of how Stage 2 is set up, this is a barrier to me doing Stage 2. I have heard from many people doing Stage 2 about working 6-7 days a week. This would be challenging due to my disabilities. The BPS doesn’t offer any support that I can see for trainees with disability”

For those trainees who are able to overcome the initial barriers training fees and other associated costs were also highlighted as another major barrier for many, that can further the inequalities experienced by individuals existing across marginalised groups. This is succinctly put by a female PhD/Prof Doc student who identified as having a disability: *“I think the pathway (including BSc/MSc/possible conversion before training costs) is very expensive and unfortunately can ‘price out’ people who don’t have the means or don’t want to be saddled with debt”*. These barriers are further compounded for those looking to study in the UK from abroad with astronomical costs for international students and the lack of acceptance of international qualifications the barriers faced by international students can feel astronomical. This quote from a male BAME practitioner illustrates the experiences of many international students: *“there are a number of international students that*

come to the UK to study and train but are met with many restrictions (e.g. visas, increased costs, general reluctance to accept international students and trainees to actually train on the QSEP route and the inflexibility of it)".

Actions

50.8% (N=63) of the total participant sample and 64.5% (N=40) of surveyed DSEP members reported having not received what they deemed adequate training in ED&I. 71.4% of those who identified as LGBTQ+ (N=13), 50% who identified as non-binary (N=2), and 61.5% who reported having a disability/long term health condition (N=12) were the most likely to feel they had not received adequate training in ED&I.

The lack of recognition and importance given to ED&I was highlighted by many participants, who expressed they felt ED&I was often an afterthought, approached in a tokenistic way. The following quote from a female BAME PHD/Prof Doc student illustrates the scepticism felt by some in minority groups around the way some institutions approach ED&I: *"Institutions and governing bodies lack cultural context and understanding. You can have all the EDI projects in the world, but when people don't understand cultures, and intersectionality and see it as a tick box exercise as well as people in power not taking it seriously, it's genuinely pointless".*

Participants consistently mentioned training as an area of action that could have real impact on the levels of marginalisation and discrimination faced by certain groups. There was a call by participants for a standardisation of ED&I training across the QSEP curriculum and wider sport and exercise qualifications, and that this training should be assessed to ensure the subject is covered appropriately. This point was raised perfectly by a female LGBTQ+ PHD/Prof Doc student *"All my EDI training has been self-sourced, and not taught as part of my Stage 2 training. I think this is a significant blind spot, both at an MSc level, and within later S2 qualification pathways. It shouldn't merely be optional CPD that some trainees choose to take, it ought to be a standardised part of the assessment process".*

Many participants also pressed for training and qualification pathways to recognise the Western nature of literature and curriculum materials, with a white male practitioner calling for *"Awareness of non-western versions of psych, working with diverse clients, supporting people with disability, training for those who plan to work abroad".* Additionally participants asked for more practical training and guidance, and information around how to provide for clients in minority groups, as demonstrated in this quote from a female white practitioner:

"We need to learn more about barriers and safeguarding for all ethnicities, socio-economic backgrounds, genders, disabilities, and sexual orientations. There is not enough information out there about how to be an ally as a sport and exercise psychologist in this

context, and/or how to report someone who is clearly discriminating against any of these groups”.

It was also apparent from some participant responses that there was a distrust or disillusion with ‘awareness training’. It was perceived by some that current training models do not suitably address the current knowledge gap around ED&I, and that a move to meaningful action may be necessary for producing tangible change. One white male researcher said:

“It feels like there is a lot of 'awareness' but very little meaningful action when it comes equality, diversity and inclusion. I'm not sure if 'additional training' would help as it feels we've had e.g., unconscious bias training for a number of years and still issues persist. Hopefully, more direction and initiative can be offered to help us overcome these issues”.

The discussion of action, more specifically showing compassion through meaningful action to address inequality, was clear in the responses to the questionnaire. Participants shared examples of when they had confronted discrimination and made steps towards equality. For instance, a male BAME researcher called for colleagues to speaking up and challenging discrimination by *“challenge those by asking effective questions and in extreme circumstances, reporting them to the police”*. Another example of meaningful action was being seen as a role model and setting a good example, as described by this female PhD/Prof Doc student who identified as having a disability:

“I always try and use inclusive images and messaging as well in my applied work-sometimes, tiny things, but if I'm doing a workshop with young footballers and I use images/pictures/examples, I try & make them diverse (BAME, gender etc) and pick one, for example, where the captain has the rainbow armband. These small acts are important I think”.

Discussion

The current study aimed to shed light on the experiences of people who work, study and/or research within sport and exercise psychology, both to identify the experiences of those in minority groups and to explore the perceptions of ED&I of those who identified as belonging to the majority group. The findings of the current study provide further support for the tenants of minority stress theory and intersectional theory (Bowleg, 2017; Meyer, 2003), namely those in multiple minority groups were more likely to have experienced or witnessed acts of discrimination than those in majority groups.

The results of this study provide clear evidence of the existence of inequality and discrimination (at both personal and systemic levels) in the field. For too long, sport has placed the

focus of addressing discrimination on condemning the acts of rogue individuals, instead of addressing the system that allows them (Burdsey, 2011; Kilvington, 2013). There are many levels of harm caused by acts of discrimination, whether overt forms of abuse or more subtle covert acts. The latter typically go unnoticed by those not impacted by them, such as normative assumptions about same sex couples or assumptions about the language abilities of people of colour. This is illustrated in Reynolds and Mayweather (2017) who report 3 main attitudes to race activism by majority groups - if it doesn't affect me then I don't care, I don't know anything and I don't want to, and the whole thing is a waste of time. Iganski (2001) posited five waves of impact that stem from one discriminatory act: 1) the impact on the individual, 2) the impact on the individual's immediate group, 3) impact on the individual's wider group, 4) impact on other targeted communities and 5) impact on wider societal norms and values. The findings of the current study accurately illustrated the wider impacts of discriminatory acts, with individuals reporting the impacts of their personal experiences on themselves and others, but also participants reporting how witnessing discrimination of others impacted on them and their attitudes. Daiches (2010) raises the point that simply talking about ED&I does not necessarily lead to real-world impact for affected individuals unless followed by meaningful action. In order to enact meaningful change that benefits those most at risk, focus must shift from exclusively addressing the immediate impact on the individual to challenging the status quo of the male dominated sporting culture and environment and to consider the impact on wider societal norms and values.

The findings of the current study echo the worrying findings of Goldman and Gervis (2021) and are in line with other studies exploring attitudes and experiences of those in other related fields, such as clinical psychology (Daiches, 2010; Turpin & Coleman, 2010; Williams et al., 2006; Wood & Patel, 2017) and medicine (Atwal et al., 2021; Coe, Wiley & Bekker, 2019; Manik & Sadigh, 2021). Many academics, clinicians and psychologists are calling for a 'cultural awakening' in relation to the experiences of those in minority groups; moving away from seeing minority groups as 'hard to reach', and instead use evidence-based approaches to learn from the experiences of affected individuals and create measurable, actionable steps toward change (Atwal et al., 2021; Coe, Wiley & Bekker, 2019). Literature specifically exploring the experiences of trainee psychologists mirrored the findings of the current study around the concerns of curricula being white/western-centric, with little training considerations or exploration to identities and groups beyond the 'norm' (Wood & Patel, 2017). Although many will seek inclusive and diverse curricula and research that is representative of the different views and backgrounds, it is vital that research moves away from an over-reliance on Western, Educated, Industrialised, Rich, and Democratic (WEIRD) ideals (Lillas & Marchel, 2015). Indeed, the field needs to move beyond superficial involvement of those from

minority groups towards the gaining of collective ownership at all stages of development, implementation and evaluation of research and teaching (Keikelame & Swartz, 2019). This approach is intended to create a strong and authentic evidence base that prioritises centering the voices and experiences of those most affected in minority groups, over comforting the majority. As well as recognising the difference in experience and subsequent action between different groups, for example Williams, Turpin and Hardy (2006) highlighted the difficulties faced by members of the BAME community when seeking out psychological services, an issue which could potentially be experienced by athletes from minority communities when seeking psychological services in sport. The focus on the majority 'norm' in psychology extends beyond the practitioner to the patient; in this case athletes, exercisers and those in positions of authority within the sport and exercise domain.

Participant engagement with the current study also supports the notion that ED&I is not seen as a priority by the wider sport and exercise psychology community. More specifically, in the DSEP community, only 6.6% (N=62) of 938 registered members completed the survey. Additionally, the over representation within the participant sample of individuals from minority groups shows the inclusivity labour often put on people most affected, to also be those who seek to elicit change. In reality, tangible improvements related to ED&I are near impossible without significant engagement from the majority group (Dixon, 2020; Subašić et al, 2018).

The current study highlighted significant gaps in the current training options for those wanting to enhance their ED&I knowledge. Many participants felt the training they were able to access was insufficient for their needs. Additionally, educational routes available for aspiring sport and exercise psychologists are competitive, with many trainees mentioning financial barriers during training with QSEP. This is exacerbated further for international students. Greater exploration is necessary around the best routes to include ED&I into the curriculum in a meaningful, assessed way that will enhance the knowledge of the next generation of sport and exercise psychologists, as well as how best to provide ongoing ED&I information and training to qualified members of the field.

Strengths and Limitations

The low participant numbers and the diversity of the sample were the main limitations of the study, as without a representative sample of the field it was difficult to apply the findings on a larger scale. Like all studies, the current study came with risk of harm. To mitigate this it was made clear participation was voluntary and people only had to contribute what they wanted to share. However, there's a possibility that some people who took part felt that a survey may not have been the best way to discuss such topics, as it does contribute to the notion that change happens at the

expense of getting marginalised people to do the hard work. Under different circumstances and with additional funding, other possibilities of study designs could have been explored (e.g. focus groups/workshops) that were more transparently led by individuals from minority groups and/or offered a chance to include debrief/counselling options.

Despite the limitations the current study also presented several clear strengths. Firstly, the research team was a diverse group of individuals from many different intersecting minority groups, offering minority insight into the design and implementation of the study. The study's design took care to be as inclusive as possible when sampling, being mindful to create a easily accessible questionnaire for those communicating in their second language and not limiting participation beyond the requirement to be an adult (aged ≥ 18) working, studying and/or researching in the sport and exercise psychology field, so as to get views/experiences from the widest range of people in the field. Consequently, the findings of the current study provide a picture of the personal and systemic experiences of participants existing at all levels in their careers within sport and exercise psychology. Secondly, the current study aimed to be the first study to explore ED&I and discriminatory experiences of sport and exercise psychologists that is not an 'ism'/'ia' specific (e.g. sexism, racism, homo/transphobia), to provide a larger picture of the experiences of those in the field beyond one particular group. Finally, the findings of this study provide a strong foundation for positively influencing training and qualification models, conferences and committees in relation to ED&I, based upon feedback from those most affected. Which could clearly benefit practitioners and service users by raising awareness of the differing needs of people in minority groups and providing a possibility for a bottom-up informed approach to what is likely to be top-down change.

Recommendations for future study and implications for practice

The current study set out to explore aspiring, trainee, and qualified practitioners' experiences of inequality and discrimination, as well as their experiences of ED&I training, in order to provide insight into how to improve training and awareness and, in turn, improve the experiences of those in minority groups and reduce the barriers they face. As stated previously, a recommendation for subsequent studies seeking to collect qualitative data surrounding ED&I may consider alternative research designs, such as focus groups or interviews. This encourages deep and rich experiential data collection, and allows for greater authenticity and trust within the participant/researcher relationship by making self-disclosure of researcher minority group membership more transparent. Furthermore, utilising such an approach makes the provision of therapeutically-informed participant debriefs more possible, thus reducing harm. Further studies could also consider additional minority groups not explored within the current study but still relevant to the sport and exercise psychology

field, such as practitioners/students/researchers with children/caring responsibilities, with English as a second language, those from working class backgrounds, international trainees navigating cultural differences and those who enter the profession later in life seeking a second career.

The findings from the current study have the potential to inform applied/research practice at an individual level, and shape training/qualification pathways to be more ED&I aware and inclusive. Critically, it is also important that those in positions of influence such as supervisors are also educated and equipped to support trainees who may encounter ED&I issues that impact on their psychological well being and practice. It is important however, to note that before suitable training materials and models can be developed there needs to be further exploration of the experiences of clients/service users and trainees/students who belong to minority groups. More knowledge is necessary on how to best provide for minority clients and the specifics of their needs, along with how best to imbed this learning into the curriculum in a way that will benefit both the majority group and the minority group. Additionally, the voices of those with lived experience are invaluable to the development of both research and practice, future developments to training models must seek to include experts by experience when possible.

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Figure 1: Sample by Job Role

