

Department of Public Health Sciences
Task Force on Ethnoracial Diversity
Final Report
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Committee Membership:

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The committee also acknowledges the valuable contributions of Usha George (Social Work) and Sherene Razack (SES/OISE).

Terms of Reference:

The Task Force developed the following Terms of Reference in consultation with the Chair of the department:

1. Develop recommendations for enhancing the ethno-racial diversity of the faculty in the Department of Public Health Sciences, for the next wave of hiring and for the longer term.
2. Develop recommendations for enhancing, maintaining, and supporting the ethno-racial diversity of the student body.
3. Develop recommendations for curriculum renewal with respect to ethno-racial diversity, as it pertains to public health and the required competence of graduates of our programs.
4. Develop goals, objectives, strategies, and measurable outcomes for each of the above for inclusion in the departmental 5-year plan.
5. Develop recommendations regarding monitoring and evaluation, accountability structures, etc.

Process:

The Task Force was established at the end of May 1999, in response to a concern being raised by a faculty member via email that drew strong support for this issue to be addressed. The Department Chair took this issue to the department, which recommended that a Task Force be struck. A committee was constituted to include representation from white and non-white faculty and students, as well as an individual from the community; and chaired jointly by a faculty member and senior graduate student. The Task Force met 5 times in May/June, and continued deliberations via email throughout July. The committee consulted with members of other departments on campus, which had initiated action on issues of ethno-racial diversity, and with members of University administration whose portfolio included specific responsibility for such issues. We also consulted the literature, including documents produced in this department and in other departments in this and other universities. An interim progress report was given at a departmental meeting in the third week of June. A draft of the report was circulated widely within the department and to several members of diverse ethnoracial communities, and comments solicited, with the final report revised accordingly. While recognizing that many specific issues covered in this report could be expanded on considerably, the desire was also to produce a report of manageable size and complexity.

The co-Chairs, Blake and Elaine, would like to acknowledge limitations in our ability to adequately name and represent the multiple subtle but very real oppressions associated with race and racism in academia

that remain largely invisible to us as white colleagues because they lie outside of our personal experience. We do not wish to speak for our minority colleagues, but to stand in solidarity in expressing our concern about these issues and our desire for proactive change.

Definition of ethno-racial diversity:

For largely pragmatic reasons, the Task Force chose to define 'ethno-racial diversity' in terms of visible minorities, while recognizing the limitations of doing so. We note that in Canada, the Employment Equity Act defines visible minorities as "persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour", to include "Chinese, South Asians, Blacks, Arabs and West Asians, Filipinos, Southeast Asians, Latin Americans, Japanese, Koreans and Pacific Islanders" (Statistics Canada, <http://www.statcan.ca/Daily/English/980217/d980217.htm>). However, for the purposes of this committee, which include recommendations regarding faculty appointments, curriculum content, and student admissions, we include aboriginal peoples in our understanding of what ethno-racial diversity encompasses, though we appreciate that aboriginal peoples do not generally see themselves as members of a 'visible minority'. Of course, as noted elsewhere in this report, we did not consider other important aspects of diversity/oppression related to sexual orientation, gender, disability, and social class.

A few words about terminology and assumptions

It has been drawn to our attention that the term "diversity", while potentially more inclusive, is also more neutral (de-politicized) than a focus on race and racism. We caution against an appropriation of language that obscures the key dynamics of oppression (racism, sexism, classism, ableism, heterosexism). A commitment to social justice (which we have made core feature of our Departmental mission statement) requires an adequate understanding of processes of marginalization which mitigate against social justice, and which are inextricably intertwined with race, gender, class, disability, and sexual orientation.

We define racism "by its impact on those who experience it, not by the intent of a person or organization who might be practicing it" (CUSO Anti-Racism Draft Policy, June 1997). In other words, racism is most often not intentional, and it is often perpetrated by people of good will through ignorance and/or lack of critical introspection, because it occurs as a result of the taken-for-granted application of dominant white culture. It is about who and what counts as legitimate and valued, and who/what does not. It is about the "whiteness" of (both lay and professional) "knowledge" itself. The fact that these are so taken-for-granted and embedded in our everyday lives makes it all the more difficult for us to see, when we have made the effort to do so.

Because it is so difficult for white people to see and understand the many subtle and not-so-subtle ways that we oppress others based on their race and culture, when concerns are raised about something we (individually or collectively) have said or done, we typically rise to our own defense. We announce our own goodwill towards them and 'their kind'. We point to what we see as a manifest lack of evidence of racism, based on our own white experience in a white-dominated institutional and societal context, failing to acknowledge that we may be ill-placed and ill-prepared to see the racist impacts of the assumptions, conventions, procedures, and structures that we daily take for granted. When concerns about racism are raised, we also respond to what we perceive to be the implicit charge of intentionality or conscious prejudice, rather than attending to the experience of the other. When we shift the debate so that the experience becomes secondary to the intentions behind the actions that are claimed to have caused it, we deny the possibility that racism can be unintentional and perpetrated by well-intentioned people who have not become fully conscious of the many ways that white dominance is reflected in customs, conventions, ideologies, and institutions; indeed in "knowledge" itself. In failing to see, and by challenging the

experience of others, we silence (and thus further disempower) them. Our defensiveness is rightly seen as an assertion of power that is simultaneously and paradoxically ignorant of its own power, and as an unwillingness to see, a reluctance to reflexive self-examination. Having silenced others without realizing we were doing so, we wonder why they don't speak out when they feel injustices have been done. We then use that silence as evidence that nothing is wrong. Because it is often so hard for us to see racism from our own privileged positions, our tendency is to label those who raise concerns as "overly sensitive", "not being collegial", or even as "troublemakers". (In effect, we redirect our discomfort with accusations of racism back onto those who seek to raise our consciousness about these issues). Thus, minorities experiencing racism face the double burden of that experience and the fear of further marginalization if they speak up about it. We feel the need to articulate these dynamics as we understand them because they may come into play as the department struggles with these issues. To truly make a difference on these issues will require critical self-reflection and ongoing consciousness raising on all our parts, as well as a commitment to treat each other with respect and compassion, and a commitment to making a difference on this issue.

The Context for Addressing Issues of Ethnoracial Diversity in the Department of Public Health Sciences

Current situation & rationale for action

- Race-related inequalities in health are well documented. The US Department of Health and Human Services is implementing a Campaign to Eliminate Racial and Ethnic Disparities in Health by 2010, with significant implications for funding and priority setting at all its agencies.
- For those of us brought up in societies where white is the colour of power, the predominance of white people in positions of power usually appears to be 'natural', the result of processes that seem 'fair' and 'just' (just as the predominance of men in positions of power once seemed 'natural'). (We include academia within the purview of 'positions of power'). Without specific attention to systemic, usually subtle and invisible, barriers that prevent those of colour from reaching positions of power, white domination is self-perpetuating. Without the awareness that comes with confronting and addressing issues of colour and race, we each tend to unwittingly and unknowingly perpetuate subtle and systemic racism. This is manifested in academia in ways such as a Eurocentric curriculum and hiring practices that reproduce white reality and white dominance.
- University of Toronto policies state that "The University of Toronto..[has] a resolute commitment to the principles of equal opportunity, equity and justice", and further that "While remaining alert and sensitive to the issue of fair and equitable treatment for all, the University has a special concern with the participation and advancement of members of four designated groups that have traditionally been disadvantaged in employment: women, visible minorities, aboriginal peoples and persons with disabilities". The University has recently appointed Rona Abramovitch as Provostial Advisor, with the specific task of enhancing the ethno-racial diversity of the University of Toronto's faculty and supports Kelvin Andrews as its Race Relations and Anti-Racism Initiatives Officer.
- In the GTA, 46% of the population belong to visible minorities (1995 figures). This is projected to increase to over 50% by the year 2000. In Canada, visible minorities constitute 11.2% of the population (1996 Census figures), with a further 4% Aboriginal peoples. In Ontario, the comparable figures are 15.8% visible minority and 1.4% aboriginal. 52.6% of Canada's visible minorities live in Ontario; 42% of Canada's visible minorities live in Toronto. One in three visible minorities were born in Canada

- In the Department of Public Health Sciences (PHS), 2 of 7 administrative staff (29%) belong to visible minorities.
- In PHS, 2 of 21 (10%) core tenured/tenure stream faculty (with 80-100% appointment in PHS) belong to visible minorities. One of them will retire in 2001 and the other in 2003. Hence the urgency to address maintaining and enhancing the ethno-racial diversity of the PHS faculty. Currently, none of the 7 (14%) non-tenure stream faculty whose salary is at least 50% paid by the Department belongs to a visible minority. Thus, of the total of 28, two or 7% belong to visible minorities. (Of course this is a moving estimate, since the situation changes somewhat from year to year. Notably, two tenure-stream and one non-tenure stream minority faculty have recently left the department)
- In the PHS programs, the following numbers and percentages of the student body are of a visible minority. Please note that these are approximations, compiled by each of the program directors. MSc/PhD Biostatistics, 14/25 (56%); MHSc Community Health and Epidemiology, 3/8 (38%); Community Medicine Residency, 6/22 (27%); MSc/PhD Epidemiology, 18/66 (27%); MHSc Health Promotion, 7/19 (37%); MHSc Occupational and Environmental Health, 6/18 (33%); MSc Occupational and Environmental Health, 0; Social Science and Health, 6/65 (9%).
- While the history of the former Department of Preventive Medicine and Biostatistics suggests that several minority faculty have been hired without explicit attention to issues of race, this has not been the case in other parts of PHS and other departments at the University. The examples of OISE (notably the Department of Sociology and Equity Studies) and the Faculty of Social Work suggest that white faculty are hired unless the job descriptions specify anti-racism scholarship and demonstrated linkages to ethno-racial communities as part of the candidate's expertise. In our new faculty hirings, if we are not explicit about hiring recruits from visible minorities, then we may end up with 2/31 or 6% of faculty from visible minorities (i.e. diversity reduced by 50%). (We are concerned about what we perceive to be a lack of explicit consideration of ethno-racial diversity in the searches currently in progress). Additionally, the two tenured faculty members from visible minorities will be retiring in the near future. Thus, there is a possibility that within five years, none of the tenure-stream faculty members will be from visible minorities unless this issue is given explicit consideration. (Note that the Department of Sociology and Equity Studies at OISE will be at 50% visible minorities by September).
- In its handbook, "Toward Ethnic Diversification in Psychology Education and Training", the American Psychological Association (1990) recommends that at least 15% of faculty must be from visible minorities to maintain a minimal critical mass. (Critical mass is understood to refer to reducing the potential for minority colleagues to feel isolated or marginalized. We do not mean feelings of affinity based on specific racial or cultural heritage, but an unspoken sharing of common experiences related to being a visible minority in a dominant white society. In this context, it is not simply the experiences themselves, but the social relations within which these experiences are formed, that are germane).
- Addressing ethno-racial issues in hiring faculty means hiring faculty who are qualified for the job, meeting the high standards of academic excellence set by the University of Toronto, but recognizes that extra effort is required to recruit and retain those from visible minorities. We note that standards of academic excellence are social constructs whose nature and application have shifted over time. By 'social construct' we mean that they are constructed out of social interaction and subject to social change, rather than preordained and immutable. We believe that academic excellence can be maintained at the same time as—indeed is strengthened when—openness to alternative understandings, methodologies and experiences is enhanced. We also note that unless the Department of Public Health Sciences and the University of Toronto are perceived by ethno-racial communities to be genuinely interested in, and making progress towards, addressing race equity issues, qualified applicants from visible minorities are unlikely to apply. We feel that specifically designating certain

positions a priori on the basis of skin colour may not be tenable, and that energies should be spent on ensuring that (a) adequate numbers of minority candidates apply, (b) where appropriate, specific attention be given to recruiting faculty with expertise in ethno-racial issues and strong links to ethno-racial communities, and (c) minority candidates are assessed appropriately using standards that do not automatically privilege white candidates.

- In addressing ourselves primarily to ethno-racial issues, the committee also recognizes the importance of also addressing other historic sources of inequity associated with gender, sexual orientation, people with disabilities, and social class. We strongly believe that all these diversity issues should be addressed by the department. But we feel that explicit attention also must be devoted to racism and ethno-racial diversity. It was brought to our attention that historically when multiple forms of oppression/diversity are considered simultaneously, issues of racism and racial diversity, which are arguably among the most difficult to address, fall onto the back burner. In an effort to avoid this, the committee chose to retain a primary focus on ethno-racial diversity. Thus, we urge the Department of Public Health Sciences to express its commitment to social justice in the structure, organization and everyday functioning of the Department in part by examining other sources of inequity separately. It is noted that at earlier retreats, faculty have already affirmed their commitment to social justice as a core value of the department.
- We recognize that we are not unique in facing the challenge of increasing ethno-racial diversity, and note that other departments on campus (notably OISE, Social Work) and elsewhere (e.g. Queen's, Stanford, etc. – see list of references below) have made important progress in making changes to improve conditions in their departments. Much can be learnt from these experiences.
- Addressing ethno-racial issues within the faculty, student body, and curriculum will (a) enhance the credibility, relevance, and competitiveness of the Department of Public Health Sciences; (b) meet the needs of the student body; (c) meet the needs of the professional groups and the public for graduates with competence in addressing ethno-racial issues, (d) better position us to assist in promoting the health of ethno-racial groups in Canada.

A Vision for Departmental Action on Ethnoracial Diversity

The short-term vision (3-6 months) is for the Department to make a strong commitment to addressing issues of ethno-racial diversity in its curriculum, in its hiring policies and practices, and in student recruitment and retention; and to be taking active steps to develop the leadership, infrastructure, awareness and broad-based support, linkages, resources, and other changes required to make this happen. This will require training and development initiatives with faculty and students.

Over the next 2-3 years, the Department should strive to be clearly recognized by ethno-racial communities as having made significant progress on these issues.

The long-term vision for the Department of Public Health Sciences with respect to issues of ethno-racial diversity is for the Department to have (a) a minimum of 15 percent of its tenure-track faculty from non-white/visible minorities; (b) a student body that reflects as closely as possible the ethno-racial diversity of the community; (c) a supportive and welcoming climate that is conducive to the retention of minority faculty, staff and students; and (d) a curriculum and research portfolio that adequately reflects the importance of race/ethnicity/culture as both a determinant of health and as a critical factor in the development and delivery of public health services (policy, programming, etc.), and the important contributions of non-White scholars and cultures, both currently and historically, to our understanding of public health.

Recommendation 1: The Department of Public Health Sciences make an explicit commitment to ethno-racial diversity of the faculty and student body and to curriculum renewal vis a vis race/ethnicity/culture be included in the departmental 5-year plan.

Principles to Guide Development of Ethno-racial Competence in Department:

The Task Force suggested that activities in the Department directed at addressing ethno-racial issues should be guided by the following principles:

- we should strive to learn from the experiences of others who have demonstrated commitment and ability to effect positive changes consistent with the goals proposed in this report;
- where appropriate, we should make use of resources available on campus to assist with faculty recruitment, student diversity, and curriculum renewal;
- we should strive to become more aware of the subtle ways in which each of us contributes to the exclusion of visible minorities through the focus on white scholars, white theories and paradigms and predominantly white or Eurocentric conceptions of health (both historical and contemporary) in the curriculum, the application of certain culture-bound standards (or emphasis on language proficiency) in marking of student assignments, privileging of certain cultural standards of conduct in the recruitment of faculty and students, and so-forth;
- white colleagues who have not experienced systemic racism need to recognize the limitations of their personal experience as a basis for assessing the experience of those who belong to visible minorities and be aware of the appropriation of voice when we speak on behalf of minority colleagues. White colleagues should be prepared to listen attentively to the experiences of colleagues who belong to visible minorities, recognizing that doing so may threaten and challenge assumptions about the social order and our everyday environment;
- responsibility for initiating or implementing change in these areas should not be left to visible minority faculty and students. It is the responsibility of us all.

All faculty have a responsibility to address issues of race and racism as it pertains to the health of populations, and to see that this is adequately reflected in their teaching and research. Thus, we should not expect a few visible minority colleagues to 'carry the ball' on these issues. To do so would be to place unfair expectations on them and to stereotype their roles. It also ignores the importance of recognizing the contribution that we all make to creating a climate supportive of diversity

- committees and other bodies designated to undertake work issues of racism and ethno-racial diversity should ideally comprise white and non-white faculty, students, and community members
- given the potentially divisive nature of the issues, it is important that everyone take responsibility for creating a safe environment for issues and concerns to be raised and discussed. In particular, it must be recognized that minority colleagues may be put in an uncomfortable position of having to reveal instances of racism or discrimination to counter the assertion of white colleagues regarding the lack thereof.

- we need to consistently remind ourselves that while dialogue is vital, it is action that is required

The merits and demerits associated with the setting of quotas were discussed on several occasions. It was felt that the setting of 15% as a minimum (as per the APA recommendation, discussed above) should not preclude setting higher standards, but that a number was needed if we were going to ensure accountability and follow-through.

In discussing the need for a faculty complement and student body reflective of the ethno-racial diversity of the community, the appropriate scale and definition of 'community' was highlighted. It was noted that we serve the Toronto community (in terms of education, research, and service), but also Ontario, Canada, and beyond. Given that roughly 15% of the Canadian population is of visible minority or Aboriginal status, this lends further support to the setting of 15% as a minimum standard for faculty diversity.

Aims and Objectives for Academic Plan, 1999-2004

Proposed Aim: To promote the capacity of the Department of Public Health Sciences to: (a) address racial inequities in health, (b) serve the needs of a multi-cultural student body; (c) prepare PHS graduates to work in increasingly multicultural settings. To do so, the department will also have to strive to identify and overcome barriers and hidden systemic racism that may be present within the department and the university.

Objectives:

- (a) increase the proportion of visible minority faculty to a minimum of 15%; and the proportion of minority students to reflect the ethno-racial diversity of the community;
- (b) ensure a supportive and welcoming environment for minority faculty, students and staff;
- (c) develop a curriculum that avoids Euro-centrism, reflects the importance of race as a determinant of health, and recognizes the role of ethno-racial issues in the development and delivery of public health services;
- (d) develop a research portfolio that addresses race-related health inequities.

Objectives	Outcomes	Strategies
<p>1. Enhance ethno-racial diversity of the faculty complement</p>	<ul style="list-style-type: none"> - dramatically increase the ethno-racial diversity of the pool of applicants for currently advertised and future positions - at least one future position designated specifically for scholar with expertise in race/cultural issues - work toward minimum 15% of faculty of visible minority - minority faculty feel welcomed and supported 	<ul style="list-style-type: none"> - seek the advice of the Provostial Advisor, Rona Abramovitch, at the earliest possible point in the recruitment process -re-advertise currently advertised positions more broadly -review appropriateness of changes to wording of ads to include explicit mention of anti-racist scholarship and links with ethno-racial communities -proactive use of informal networks to invite minority candidates to apply -convene search committees prior to deadline for applications, to take more active role in recruitment -in interviews with all candidates include questions that allow candidates to demonstrate links to ethnoracial communities and-an understanding of the relationship between race and-socio-economic inequality, gender, class etc. - create climate welcoming and supportive of minority faculty
<p>2. Enhance, maintain and support the ethno-racial diversity of the student body</p>	<ul style="list-style-type: none"> - ethno-racial diversity of student body in each educational program reflects as much as possible the diversity of the community 	<ul style="list-style-type: none"> -request that each program develop a detailed plan - create climate welcoming and supportive of minority faculty and students - encourage mentorship of visible minority students - link minority students to supports available to them on campus - enhance student financial assistance
<p>3. Curriculum renewal</p>	<ul style="list-style-type: none"> - curriculum reflects salience of race/ethnicity/culture as determinant of health and as a factor in developing and implementing policy and programming responses - curriculum reflects contributions to the field made by non-white 	<ul style="list-style-type: none"> -request that all faculty review their course offerings -initiate curriculum review re inclusion of ethno-racial issues and those of other equity-seeking groups (note models for doing this are available)

	<p>scholars (both contemporary and historical) and non-white cultures and societies that are currently not represented in the mainstream literature (i.e. counter male Eurocentric bias)</p>	<ul style="list-style-type: none"> - put ‘Cultural Competency’ manual (Delgado/Disman) and this report on the PHS website, including links to campus & off-campus resources - encourage each program to develop a community advisory board that includes strong representation from ethno-racial communities - invite or include guest lecturers knowledgeable in non-Eurocentric contributions to the public health sciences - encourage faculty to acknowledge and become more knowledgeable of contributions made to public health sciences both historically and currently by non-white societies, cultures and scholars and to incorporate this into their teaching
<p>4. Develop a research portfolio that addresses race-related health inequities</p>	<ul style="list-style-type: none"> - research addressing race-related health inequities will have a high profile in the Department 	<ul style="list-style-type: none"> - hire new faculty with expertise in anti-racism scholarship - promote collaborative research with AMNI Centre - promote opportunities for research addressing race-related health inequities while implementing the recommendations of Task Force on International Health - encourage and support faculty (and students) to consider ways of including ethno-racial issues in their research agendas - <u>encourage faculty and students to consider ways of more routinely recognizing contributions made by non-white groups/cultures in their scholarly work</u> - assist students in securing funding for research that addresses race-related health inequities
<p>5. Monitoring & evaluation</p>	<ul style="list-style-type: none"> - measurable progress on objectives listed above - regular progress reports to department (chair, faculty, students) and community (via 	<ul style="list-style-type: none"> - clarify lines of accountability - setting of concrete targets/goals - ongoing departmental committee to oversee implementation, monitoring & evaluation (with strong

	web site and other means)	community input, and input from other departments and NGOs) <ul style="list-style-type: none">- ongoing training & development workshops for students & faculty (maintain profile of issues, competency)- other, as determined by implementation committee
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Infrastructure and resource requirements:

The committee felt that it will be crucial for the Chair of the Department to provide leadership on this issue. Further, it was recognized that resources (in terms of release time, student support, training and development activities, etc.) will be required to ensure that the department is able to meet its goals regarding ethno-racial diversity within the specified time period.

Therefore, the Task Force recommended that:

Recommendation 2: Resources be committed to ensure that the Department is able to meet its goals regarding ethno-racial diversity within the specified time period

Next steps:

The Task Force recommended the following next steps

Recommendation 3: An implementation committee with a chair be established as soon as possible in the Department to conduct more detailed planning, and to oversee implementation, monitoring and evaluation.

Regarding the structure of this implementation committee, it is recommended that:

Recommendation 4: The implementation committee should include viable subgroups that will specifically address issues of (a) faculty recruitment, (b) student diversity, (c) curriculum renewal, (d) research.

We foresee that monitoring and evaluation functions could be conducted by the larger committee or by a subcommittee, as members see fit.

Regarding the composition of this committee, in addition to faculty, staff and student representation from within PHS, it is recommended that:

Recommendation 5: That the implementation committee include significant representation from ethno-racial communities, constituencies outside the university that have a stake in the training of our graduates (e.g. Toronto Public Health), other Departments on campus who have been successful in making the changes proposed in this report, relevant NGOs, and University interest groups.

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