

# Diversity: More Than a Number— A Story of Individual Lives

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Quotes have an inspiring, healing, and most importantly a felt sense of *truth* to me. I find that for any aspect of my life, I can find a quote to encapsulate the phenomenology of the experience. The same was true when I was selected to participate in the inaugural class of the Emerging Leaders Program (ELP) for the Pennsylvania Psychological Association

(PPA) in 2017. As part of the ELP experience, I was able to select a project to complete with my mentor, Dianne Salter PhD, JD, throughout the year. I chose the category of “underrepresented populations in psychology.” The central quote at that point in my life (and in truth, still today) was “we have before us the glorious opportunity to inject a new dimension of love into the veins of our civilization,” by Dr. Martin Luther King Jr.

As an aspiring licensed psychologist, I am a firm believer that the ultimate task of our profession is to help civilization grow and evolve. I believe we are on the frontline of societal change and must use our skill set of compassionate understanding to light the way for others. However, with the overwhelming deluge of human struggle, it is often difficult to know where to shine our light first.

In my professional development, the importance of self-reflection, awareness of internal motivations, and emphasis on taking up the mantle of personal responsibility has guided me to start all change within myself. It is probably evident that another important quote in my life is by Mahatma Gandhi: “Be the change you wish to see in the world.”

With all of this in mind, I knew that I wanted to understand those underrepresented individuals within the discipline of psychology. Diverse individuals have always been a part of the history of psychology, even before Francis Cecil Sumner, known as the father of black psychology, became the first African American to receive his doctorate in psychology from Clark University on June 14, 1920.

Psychology as a field has found a focus in diversity containing a myriad of aspects since the 1960s, beginning with the development of various multicultural therapies and theories. The American Psychological Association (2002) implemented “Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists.” A quick search in the database PsycARTICLES will produce at least 4,000 articles when you use the phrase “diversity in psychology.”

Invariably, undergraduate general psychology textbooks include a pie chart (usually chapter 1) discussing the various ethnic and racial makeup of psychologists. We have charts that display the growth in numbers of member psychologists who consider themselves diverse across various publications (APA, 2015; Golding & Lippert, 2016). However, what struck me was

the limited knowledge of the actual lived experience of diverse psychologists.

**Methods.** As a fervent supporter of qualitative study, I felt that a vital component of understanding this experience lay beyond the face value of the number of self-reported ethnically and racially diverse psychologists rising from 8.9% in 2005 to 16.4% in 2013 or that 58.2% of active psychologists reported a female gender in 2005, growing to 68.3% in 2013 (APA, 2015). I wanted to know about the day-to-day experience of those diverse psychologists in their interactions with other professionals, supervisors, and the public.

I created a 31-question survey to explore this information. Twenty-seven individuals completed the survey questions. For purposes of this study, diversity was not predetermined and one survey question asked participants to self-identify areas of diversity. Among the responses, diversity was identified as racial, ethnic, religious affiliation, gender, veteran status, and socioeconomic status. These questions sought to understand the experience of diverse psychologists concerning the personal and professional issues they faced. Other researchers (Green & Hawley, 2009; Pedrotti & Burnes, 2016) have found that diverse psychologists report struggles with work-life balance, occupational satisfaction, and systems of social support differently than do their dominant culture counterparts.

**Results.** The results of this study support the findings of previous research in this area. Diverse participants consistently reported that they were expected to work harder (participating on more committees, being the diversity officer, or the go-to diverse clinician) than their white, male counterparts. This expectation was often tied to advancement and promotion and participants reported feeling that if they declined to put in this extra work that they would be seen as less professional or less competent.

Participants often reported these expectations were the result of cultural taxation. That is, because of their diverse identifiers, it was assumed they should educate the rest of the agency on diversity issues and thereby complete all the extra work associated with this role. One participant reported that due to a lack of other diverse individuals, she was often put in the position as the “ONLY black professional and this meant [she] always had to be the VOICE.” She further elaborated that “white fragility prevented the surfacing of necessary discussions.”

The additional work demands placed on diverse individuals also meant that participants had less time to participate in self-care or other meaningful personal or professional pursuits. One participant stated: “I always had to work twice as hard to be considered half as good. Self-care suffers in that equation big time!”

Female participants reported feeling that they would be seen as less professional than their male peers. One participant

stated that her veteran status was not believed due to her gender. Another stated that she was told, “that’s the price for being cute” when she discussed the harassment she was receiving.

If women missed work for childcare tasks, they reported feeling that this was negatively viewed as an indication of a poor work ethic. Male participants did not express a similar conflict between work and family. Participants reported feeling that they received limited support as a mother and were mistreated in the field and work culture.

Participants also discussed the impact of socioeconomic status as a measure of diversity. Increasingly, early career psychologists (ECPs) are accruing more student debt for their education, required to spend more time in training, and find starting salaries decreasing (Green & Hawley, 2009). Participants reported feeling that they must hide their lower socioeconomic status from clients and colleagues alike. One participant reported, “I try to remain invisible, under the radar. I have worried that people will be able to tell about my social class based on how I talk.”

Participants discussed experiences of subtle biases as well as overt racism or sexism. One participant discussed having to see clients that made her uncomfortable because of the derogatory comments about women and sexuality made by those clients. Other participants also provided overt examples of racism as well as examples of microaggressions. Participants discussed being exposed to jokes about slavery, the n-word on multiple occasions, and even harassment for voting for President Obama.

**Conclusion.** The APA has documented their commitment to increasing the number of ECPs from diverse backgrounds (Pedrotti & Burnes, 2016). As such, the findings from this qualitative study are very important to our understanding of best practices to make the field of psychology inclusive with diverse psychologists.

First, it is evident that merely attracting an increasing number of individuals who consider themselves diverse into the field

of psychology will not help it to evolve into a pluralistic and inclusive field. Participants in this study discussed the impact of changing themselves to fit the mold of the psychology field instead of changing the field to be more open to diverse individuals. Having more diverse individuals in the field of psychology does nothing to change the field in a way that better prepares it to meet the needs of diverse clients.

It is imperative we understand the unique individual experience of aspiring psychologists and rebuild the profession in a manner that honors and supports these experiences. Qualitative study is not simply a nice addition to quantitative studies of diversity but is instead a vital and imperative component. We must also ensure that educational, organizational, or systemic procedures do not place diverse professionals in a position of sacrificing their health, identity, or culture to attain professional milestones or accomplishments.

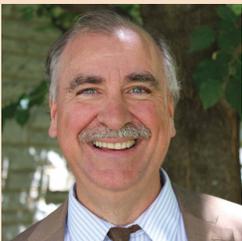
To meet the needs of our clients, create a psychology that is pluralistic and inclusive, and use the field of psychology as a light for the rest of society, we must focus on changes to the field that support individual differences. Instead of forcing aspiring psychologists into a predetermined mold, we need to understand their stories and honor them. 📖

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## PPA Member Spotlight

### Scott Browning, PhD, ABPP



PPA would like to congratulate Scott Browning, PhD, ABPP, on receiving the Division 43, 2017 Distinguished Contribution to Family Psychology Award. Dr. Browning was the corecipient of the award with his colleague, Patricia Papernow, EdD. The two have dedicated a great deal of their careers to the understanding and treatment of stepfamilies. Dr. Browning is a full-time professor at the APA-approved clinical psychology program at Chestnut Hill College. He has cowritten, with Elise Artelt, a book on treating stepfamilies entitled *Stepfamily Therapy: A 10-Step Clinical Approach*, published by APA Books in 2012. Since then he has written articles and encyclopedia entries on the stepfamily and step-grandparenting, in particular. Outside of the stepfamily, Dr. Browning is interested in: Families

on the Spectrum, Families of Addiction, and Families of Homicide. He has an upcoming (June) article coming out in the *Journal of Psychotherapy Integration* on using the genogram to integrate systemic and psychoanalytic treatment. Dr. Browning is board certified in Couple and Family Psychology from the American Board of Professional Psychology, and he serves on that board, as well as on the board of National Stepfamily Resource Center.