Climate Survey Report

Healthy Brains Healthy Lives, November 2024

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Summary

An online climate survey focused on equity, diversity, and inclusion (EDI) was distributed to the Healthy Brains Healthy Lives (HBHL) community in August-October 2024. This was a follow-up to previous HBHL climate surveys distributed in 2020 and 2022. A total of 171 responses were submitted to the 2024 survey, of which 46% are trainees, 20% are faculty, 27% are staff, and 7% either hold another type of role or did not specify their role. Key findings cover the following themes:

Demographics of survey respondents

Three-quarters (75%) of respondents self-identified in at least one designated equity group, and 29% of respondents self-identified in at least two groups. Across all respondents, 59% are women, less than 5 are Indigenous Peoples, 8% have disabilities, 34% are racialized persons, 4% are Black, and 11% are members of LGBTQI2S+ communities. One quarter (25%) of respondents experienced physical and/or mental health conditions affecting their work in the past year. A third (33%) were primary caregivers for children and/or adult dependents in the past year. Differences in demographics were observed between trainees, staff, and faculty.

General inclusion sentiment

Overall, 88% of respondents feel included in their lab or office space, 79% feel included in their research institute/centre, 67-69% feel included in the broader McGill community, and 69-70% feel included at HBHL activities and other McGill neuroscience activities. Differences in sense of inclusion were found related to role, LGBTQI2S+ identity, first-generation status, gender, health, disability, race, and age.

Access to support and opportunity

Overall, 81-86% of respondents have positive role models at McGill, receive mentoring, and feel that peers and supervisors are supportive. 61% of respondents are able to access support and/or accommodations that they need to fully participate in their job/education. Differences in access to supports were found related to role, gender, race, age, disability, health, LGBTQI2S+ identity, and first-generation status.

Among trainees, perception of similar access to training/advancement compared to peers is lower among respondents who are racialized persons, respondents who experienced mental health conditions in the past year, first-generation students, and respondents who are not Canadian citizens/permanent residents. Among faculty, gender differences were found related to balance of research, teaching, and administrative workload.

Harassment and discrimination

Twenty-one percent of respondents indicated experiencing harassment and 26% reported experiencing discrimination at least once within the McGill environment. Sexism, racism, and religious intolerance were the most commonly-experienced forms. Higher prevalence of experiences of harmful conduct were found in several groups including LGBTQI2S+ respondents, women faculty, and respondents in the 45-54 age range.

Comparison with the 2022 climate survey

Over 100 fewer individuals completed the 2024 survey compared to the 2022 survey. In the 2024 survey, increased sense of inclusion in HBHL activities, increased participation rate in HBHL activities among people with disabilities, larger proportion of respondents who receive valuable mentoring, larger proportion of faculty who have similar training/advancement access as peers, and reduced gender gap in faculty workload balance were observed compared to 2022. Decreases were observed related to satisfaction and inclusion in the broader McGill environment, and access to training/advancement among trainees and staff. Findings of differences may stem from a combination of HBHL actions, institutional context, broader socio-political context, and/or differences in the characteristics of the two survey populations.

Context and approach

An online climate survey focused on equity, diversity, and inclusion (EDI) was developed by HBHL and distributed to the HBHL community in August-October 2024. This was a follow-up to previous HBHL climate surveys distributed in 2020 and 2022. The survey was anonymous, and included a statement that pooled data may be shared publicly on the HBHL website as part of HBHL's efforts to maximize transparency in its EDI strategy.

The survey included the following components:

- 1. **Identification of status within HBHL**, including role (faculty, staff, trainee), connection to HBHL, and frequency of participation in HBHL events and activities.
- 2. Self-identification in demographic groups.
- 3. **Agreement-scale questions**, where respondents were asked to indicate their level of agreement (Strongly Agree Agree Neutral Disagree Strongly Disagree) with 21-23 statements related to sense of inclusion, support, and access in their academic environments.
- 4. Questions related to harassment and discrimination, where respondents were invited to indicate their frequency (if any) of experiences and observations of harassment and discrimination within the McGill environment, along with the types of harassment and/or discrimination they experienced and/or witnessed.

Terminology used throughout this report is based on terminology used in the survey questions. As self-identification questions were in a yes-no format and specific identities were not collected for respondents who indicated "no", phrases in the form of "respondents who are not women" or "respondents who are not racialized persons" are used in the report to refer to respondents who indicated "no" to the corresponding self-identification question.

Chi-squared (X²) tests were used to assess differences in response distribution between role groups (faculty, staff, trainees) and demographic groups (respondents who indicated "yes" to a particular self-identification compared to respondents who indicated "no"), including intersectional analysis where group size permitted. Differences between demographic groups were tested overall and in each role group separately.

In order to reduce the number of cases where a data point is based on groups of less than 5 respondents, responses of Strongly Agree and Agree were combined together, and responses of Strongly Disagree and Disagree were combined together in the analysis of group differences. For questions related to harassment and discrimination frequency, responses of "once or twice" and "three or more times" were combined together.

Group differences with a chi-squared p-value of 0.2 or lower are prioritized in the report, however key findings with a higher p-value that have important equity implications and a group difference of at least 10 percentage points are also included. Given the reduced sample size compared to the previous survey, this more open approach was taken to maximize comparison between the two surveys as group differences of approximately 10 percentage points were generally above the cutoff for inclusion in the previous report.

Survey respondents

Section summary:

- 46% percent of respondents are trainees, including mainly PhD students and postdoctoral fellows. 20% of respondents are faculty, including both tenure-track faculty and contract academic staff. 27% of respondents are staff members, including administrative and research staff.
- 52% of respondents have current or past direct funding from HBHL, 44% have current or past indirect funding from HBHL, and 10% have participated in HBHL leadership and/or governance. 73% of respondents participate in HBHL activities at least once per year.
- 75% of respondents, including 81% of staff, 79% of trainees, and 74% of faculty, self-identified in at least one designated equity group. 29% of respondents self-identified in at least two designated equity groups, including 44% of trainees and 17% of staff.
- Across all respondents, 59% are women, 34% are racialized persons/members of visible minorities, 11% are persons of minority sexual orientation and/or gender identity (LGBTQI2S+), 8% are persons with disabilities, and less than 5 are Indigenous Peoples.
- Across all respondents, 28% are first-generation students and 30% are not Canadian citizens or permanent residents.
- A third of respondents (33%) have been primary caregivers for children and/or adult dependents in the
 past 12 months. 25% have experienced physical and/or mental health conditions that have impacted
 their work/training in the past 12 months.

Response rate

The survey was distributed to 990 HBHL community members, of which 171 (17%) submitted responses to the survey with at least one question answered. Out of those who submitted responses, 155 proceeded until the climate-related questions, 11 ended the survey after the demographic questions, and 5 ended the survey after the HBHL connection questions.

Role groups

Out of the 171 respondents, 78 (46%) are trainees including students and postdoctoral fellows. Thirty-four respondents (20%) are faculty members and 47 respondents (27%) are staff. Twelve respondents (7%) indicated another role category (<5 respondents per category) or left this question blank. A detailed breakdown of respondent role groups is provided in Figure 1 and Table 1.

Figure 1. Roles of the 2024 HBHL climate survey respondents.

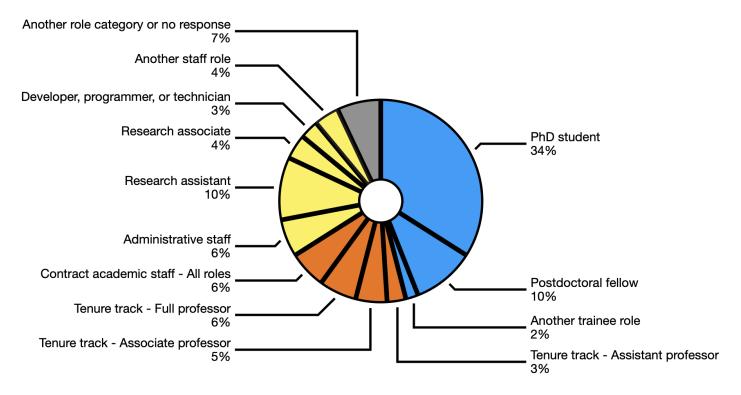


Table 1. Respondent distribution by role.

Role	Number of respondents (percentage of total respondents)	Specific role	Number of respondents (percentage of total respondents)
Trainee	78 (46%)	PhD student	57 (34%)
		Postdoctoral fellow	17 (10%)
		Another trainee role	4 (2%)
Faculty	34 (20%)	Tenure track - Assistant professor	5 (3%)
		Tenure track - Associate professor	9 (5%)
		Tenure track - Full professor	10 (6%)
		Contract academic staff - All roles	10 (6%)
Staff	47 (27%)	Administrative staff	10 (6%)
		Research assistant	17 (10%)
		Research associate	8 (4%)
		Research staff - Developer, programmer, or technician	5 (3%)
		Another staff role	7 (4%)
Another role category or no response	12 (7%)		

HBHL connection

All 171 respondents answered the question about HBHL connection. Eighty-nine individuals (52%) indicated receiving past or current direct funding from HBHL, and 75 (44%) indicated receiving past or current indirect funding from HBHL. Faculty were most likely to indicate receiving direct funding, while staff were most likely to indicate receiving indirect funding. Seventeen respondents (10%) indicated current or past participation in HBHL leadership and/or governance.

Out of the 167 respondents who answered the question about participation in HBHL activities and events, 106 (63%) indicated participation 1-4 times per year and 16 (10%) indicated participation 5 times per year or more. Forty-five respondents (27%), including 40% of staff and approximately 20% of faculty and trainees, reported never participating in HBHL activities and events. A summary of HBHL connections and participation, overall and separated by role, is provided in Table 2.

Table 2. HBHL connections and participation among 2024 climate survey respondents.

Role	Direct HBHL funding	Indirect HBHL funding	Participation in HBHL leadership and/or governance	Participation in HBHL activities 5 times per year or more	Participation in HBHL activities 1-4 times per year	No participation in HBHL activities
Trainees	47 (60%)	34 (44%)	8 (10%)	7 (9%)	56 (72%)	15 (19%)
Faculty	27 (79%)	5 (15%)	5 (15%)	<5	23 (68%)	7 (21%)
Staff	10 (21%)	30 (64%)	<5	5 (11%)	22 (47%)	19 (40%)
All respondents combined*	89 (52%)	75 (44%)	17 (10%)	16 (10%)	106 (63%)	45 (27%)

^{*}Note that the "all respondents combined" totals also include respondents who did not indicate a role category, and therefore may be larger than the sum of the faculty, staff, and trainee values.

Demographics

In the context of this survey, designated equity groups include Women, Persons with disabilities, Indigenous Peoples, Racialized persons/Members of visible minorities, and LGBTQI2S+ people/Members of sexual orientation and/or gender identity minorities. Across all respondents, 75% self-identified in at least one of these groups and 29% self-identified in at least two of these groups. An overview of the proportion of respondents who self-identified in at least one or at least two designated groups, separated by role, is provided in Table 3.

Table 3. Number and percentage of respondents who self-identified in one or more designated equity groups, overall and separated by role.

Role	Number (percentage) of respondents who identified in at least one designated equity group	Number (percentage) of respondents who identified in at least two designated equity groups
Trainees	62 (79%)	34 (44%)
Faculty	25 (74%)	<5
Staff	38 (81%)	8 (17%)
All respondents combined	129 (75%)	49 (29%)

Across all respondents, 59% self-identified as women, less than 5 respondents self-identified as Indigenous Peoples, 8% self-identified as persons with disabilities, 34% self-identified as racialized persons/members of visible minorities, and 11% self-identified as persons of minority sexual orientation and/or gender identity (LGBTQI2S+).

Differences in demographics were observed between trainees, staff, and faculty. The trainee group includes the highest proportion of racialized persons (45% of trainees), LGBTQI2S+ persons (19%), and respondents who are not Canadian citizens or permanent residents (53%). The faculty group has the highest proportion of individuals who indicated experiencing physical health conditions in the past year (26% of faculty) while the trainee group has the highest proportion of individuals who indicated experiencing mental health conditions in the past year (24% of trainees). A detailed breakdown of demographics across all respondents and separated by trainees, staff, and faculty is provided in Figure 2 and Table 4.

Figure 2. Percentage of respondents who self-identified in demographic groups in the 2024 HBHL climate survey, separated by role group.

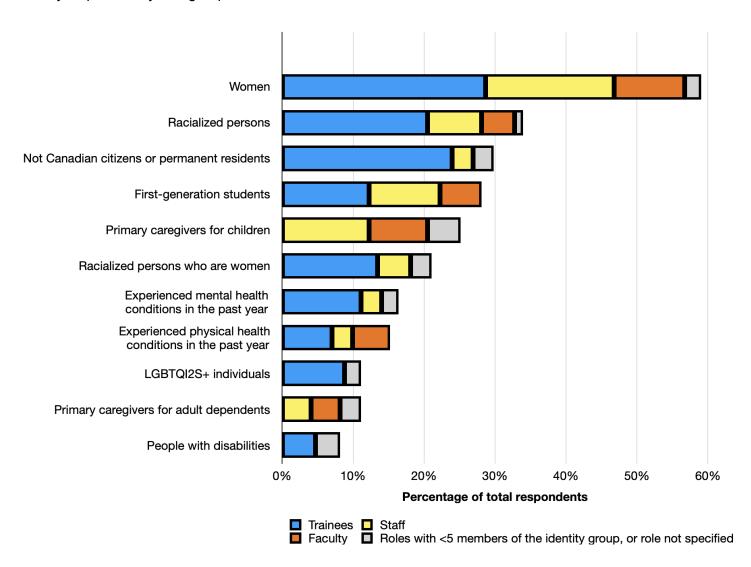


Table 4. Number and percentage of respondents who self-identified in demographic groups, overall and separated by role.

Identity	Number (percentage) of total respondents who indicated "yes" to self-identification	Number (percentage) of trainee respondents who indicated "yes"	Number (percentage) of staff respondents who indicated "yes"	Number (percentage) of faculty respondents who indicated "yes"
Woman	101 (59%)	49 (63%)	31 (66%)	17 (50%)
Indigenous person (First Nations, Inuit, or Métis, status or non-status, or Native American)	<5	<5	<5	<5
Person with a disability	14 (8%)	8 (10%)	<5	<5
Racialized person/Member of a visible minority	58 (34%) - 6 (4%) of respondents self-identified as Black	35 (45%)	13 (28%)	8 (24%)
Racialized person and woman	36 (21%)	23 (29%)	8 (17%)	<5
Person of minority sexual orientation and/or gender identity (LGBTQI2S+)	19 (11%)	15 (19%)	<5	<5
First-generation university student (current or past)	48 (28%)	21 (27%)	17 (36%)	10 (29%)
Not a Canadian citizen or permanent resident	51 (30%)	41 (53%)	5 (11%)	<5
Experienced physical health conditions in the past 12 months that impacted work/training	26 (15%)	12 (15%)	5 (11%)	9 (26%)
Experienced mental health conditions in the past 12 months that impacted work/training	28 (16%) - 11 (6%) experienced both physical and mental health conditions	19 (24%)	5 (11%)	<5
Primary caregiver for children in the past 12 months	43 (25%)	<5	21 (45%)	14 (41%)
Primary caregiver for adult dependents in the past 12 months	19 (11%) - 5 (3%) were caregivers for both children and adult dependents	<5	7 (15%)	7 (21%)

Respondents cover all age groups from 18-24 to 55+. Among the 163 respondents who responded to the age question, the largest groups are in the 25-34 (40%) and 35-44 (24%) age ranges. Age across all respondents and separated by trainees, staff, and faculty is provided in Table 5.

Table 5. Number and percentage of respondents across age ranges, overall and separated by role.

Role	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55+
Trainees	7 (9%)	56 (74%)	13 (17%)	<	:5
Faculty	<5		8 (25%)	11 (34%)	11 (34%)
Staff	8 (17%)		14 (30%)	9 (20%)	15 (33%)
All respondents combined	10 (6%)	66 (40%)	39 (24%)	21 (13%)	27 (17%)

Intersectional analysis

Where group sizes allowed, intersectional analysis was conducted to investigate relationships between demographics, role, and HBHL connection variables in the survey participant sample. Percentages are reported based on the number of respondents who provided an answer (excluding blanks or "prefer not to answer") for all of the corresponding questions. Findings are as follows:

Intersectional demographics

- The proportion of women is higher (79%) among respondents with disabilities compared to respondents without disabilities (61%).
- A larger proportion of respondents with disabilities (46%) are members of LGBTQI2S+ communities compared to respondents without disabilities (10%).
- A smaller proportion of racialized persons (19%) are/were first-generation students compared to respondents who are not racialized persons (41%).
- A smaller proportion of LGBTQI2S+ respondents (<5) are/were first-generation students compared to respondents who are not LGBTQI2S+ (38%).
- A larger proportion of women (37% in all, 54% in faculty) indicated that they are or were first-generation students, compared to respondents who are not women (24% in all, <5 faculty).
- While no gender differences were found in the proportion of respondents who have been primary caregivers for children in the past year, a larger proportion of women (17%) were primary caregivers for adult dependents in the past year compared to respondents who are not women (<5).
- A larger proportion of racialized persons (48% in all, 71% in trainees) are not Canadian citizens or permanent residents than respondents who are not racialized persons (24% in all, 41% in trainees).
- Among trainees, a larger proportion of women (27%) are members of LGBTQI2S+ communities than trainee respondents who are not women (<5).
- Among staff, a larger proportion of racialized persons (67%) were primary caregivers for children in the past year, compared to staff who are not racialized persons (43%).
- Among staff, the group of respondents who are not women has a higher proportion of individuals who are members of other designated equity groups (46%) and aged 55+ (46%) compared to staff respondents who are women (26% are members of other equity groups, 26% are aged 55+).

Demographics and HBHL connection

- A smaller proportion of respondents with direct HBHL funding (21%) indicated never participating in HBHL events and activities compared to respondents with indirect funding (31%).
- A smaller proportion of women respondents (48% in all, 53% in trainees) received direct funding from HBHL compared to respondents who are not women (67% in all, 80% in trainees). A larger proportion of women respondents (50% in all, 53% in trainees) received indirect funding from HBHL compared to respondents who are not women (33% in all, 20% in trainees).
- A smaller proportion of respondents with disabilities (43%) received direct funding from HBHL compared to respondents without disabilities (53%). A larger proportion of respondents with disabilities (57%) received indirect funding from HBHL compared to respondents without disabilities (44%).
- A larger proportion of respondents with disabilities (43%) indicated never participating in HBHL events and activities compared to respondents without disabilities (26%).
- Among staff, a larger proportion of women (48%) indicated never participating in HBHL events and activities compared to staff who are not women (<5).
- Among faculty, 50% of contract staff is aged under 45, compared to 23% of tenure-track faculty.
- Among faculty, Associate Professors were the least likely (58%) to have received direct HBHL funding, compared to Assistant and Full Professors (90%).

Demographics and health

- Respondents who experienced physical health conditions in the past year were more likely (46%) to
 indicate also experiencing mental health conditions in the past year, compared to respondents who did
 not experience recent physical health conditions (14%).
- A larger proportion of respondents with disabilities experienced physical (57%) and/or mental health conditions (79%) in the past year compared to respondents without disabilities (12-13%).
- A larger proportion of LGBTQI2S+ respondents experienced physical (28%) and/or mental health conditions (44%) in the past year compared to respondents who are not LGBTQI2S+ (12-16%).
- A larger proportion of respondents who are not Canadian citizens or permanent residents experienced recent mental health conditions (27%) compared to Canadian citizens/permanent residents (15%).
- While no age differences were found related to physical health conditions, respondents under 45 were more likely (26%) to experience recent mental health conditions than respondents aged 45+ (<5).
- A larger proportion of women (23% of all, 36% of trainees) indicated experiencing mental health conditions in the past year compared to respondents who are not women (13% of all, <5 trainees).
- Among trainees, racialized persons were more likely (24%) to indicate experiencing recent physical health conditions compared to respondents who are not racialized persons (<5).
- Among trainees, first-generation students were more likely (38%) to indicate experiencing recent mental health conditions than trainees who are not first-generation students (23%).
- Among faculty, women were more likely (40%) to indicate experiencing recent physical health conditions compared to faculty who are not women (<5).

Climate

Section summary:

- Overall, 88% of respondents feel included in their lab or office space, 79% feel included in their research institute/centre, and 67-69% feel included in the broader McGill community. Sense of inclusion varies across demographic and role groups.
- 81% of respondents have positive role models at McGill and 82% receive valuable mentoring in the McGill community. Faculty were most likely to indicate positive experiences in these areas. Across role groups, differences were observed related to gender and race.
- 86% of respondents feel that their peers are supportive of their professional goals, and 82% feel that
 their supervisors are supportive of their professional goals. Staff were least likely to indicate receiving
 such support. Especially among trainees, differences were found related to health and disability.
- 77% of respondents are comfortable raising different opinions and 80% are comfortable bringing up concerns with supervisors. These proportions were lower in several groups including faculty who are women and/or racialized persons and respondents who experienced mental health conditions in the past year.
- Overall, 22-23% of respondents agreed with statements that McGill and HBHL put too much focus on EDI. Staff were most likely to agree. Increased disagreement was found among respondents who self-identified in designated equity groups.
- 42% of respondents feel that McGill puts sufficient resources towards EDI and 61% are able to access support and/or accommodations that they need to fully participate in their job, education, and/or professional activities. Lower access to support was found in several groups including respondents with disabilities, LGBTQI2S+ respondents, first-generation students, and women faculty.
- 88% of respondents feel physically safe on campus. This proportion is lower among LGBTQI2S+ respondents, women faculty, and trainees who are racialized persons.
- 70% of respondents feel included at HBHL events/activities and 69% feel included at other McGill
 neuroscience events/activities. Similar patterns were observed related to both these contexts, with
 reduced sense of inclusion among staff, LGBTQI2S+ respondents, respondents who are caregivers for
 children, and trainees who are racialized persons.
- Among trainees, 71-73% feel they have similar access to training and advancement as others within their department. 79-84% feel they have similar access as others with the same supervisor. Differences were found related to race, citizenship, first-generation status, health, and gender.
- Among staff, 68% feel they have similar access to training and 59% feel they have similar access to advancement opportunities compared to others in similar roles. Differences were found related to race, gender, and first-generation status.
- Among faculty, 96% feel they have similar access to training and 79% feel they have similar access to
 advancement opportunities compared to others in similar roles. Among faculty, 33% of women and
 46% of respondents who are not women are satisfied with their balance of work types. 57% of women
 and 67% of respondents who are not women feel their workload balance is similar to others in
 comparable roles.

Survey participants were asked to indicate their level of agreement (Strongly Agree - Agree - Neutral - Disagree - Strongly Disagree) with 21-23 statements related to their experiences in their work and training environments. Overall responses per statement and group differences are shown in Tables 6 and 7, with percentages reported out of the group that provided a response for the corresponding question (excluding "prefer not to answer", "not applicable", and blanks).

Table 6. Overall responses and group differences for the all-respondent agreement scale statements.

Statement and number of responses	Overall responses:	Group differences
(excluding "prefer not to answer", "not applicable", and blanks)	Mean (1 = Strongly Agree, 3 = Neutral, 5 = Strongly Disagree)	
and blanks)	% Agree or strongly agree	
	% Disagree or strongly disagree	
I am satisfied	Mean: 2.42	Faculty were more likely (79%) to agree than trainees (62%) and staff (59%).
with the overall climate at McGill	Agree: 92 (64%)	LGBTQI2S+ respondents were less likely to agree (42%) than respondents who are not LGBTQI2S+ (70%). This was observed overall and among trainees.
University. (143 responses)	Disagree: 17 (12%)	Respondents who are/were first-generation students were more likely to agree (79%) compared to respondents who are/were not first-generation students (58%). This was observed overall and among trainees.
		Respondents in the 35-44 age range were least likely to agree (53%) and respondents in the 45-54 age range were most likely to agree (85%). Within the other age ranges, the proportion of respondents who agreed was between 60-65%.
		Among trainees, women were less likely to agree (58%) compared to respondents who are not women (70%).
		Among trainees, respondents who experienced mental health conditions in the past year were less likely to agree (56%) compared to respondents who did not experience mental health conditions in the past year (69%).
I feel included in my lab or	Mean: 1.78 Agree: 130	Respondents with disabilities were less likely to agree (<80%) compared to respondents without disabilities (90%).
office space. (147 responses)	(88%) Disagree: <5	Respondents who experienced mental health conditions in the past year were less likely to agree (73%) compared to respondents without recent mental health conditions (95%). This was observed overall and among trainees.
		Among faculty, respondents who experienced physical health conditions in the past year were less likely to agree (71%) compared to respondents without recent physical health conditions (100%).
		Among staff, racialized persons were less likely to agree (77%) compared to respondents who are not racialized persons (96%).
		Among trainees, respondents who are not Canadian citizens or permanent residents were less likely to agree (82%) compared to trainees who are Canadian citizens or permanent residents (97%).

Statement and number of responses	Overall responses	Group differences
I feel included in my research institute or research centre. (144 responses)	Mean: 2.02 Agree: 114 (79%) Disagree: 7 (5%)	Faculty were more likely to agree (96%) than staff (78%) and trainees (75%). Respondents who self-identified in three or more designated equity groups were less likely to agree (60%) than those who self-identified in one or two groups (78-81%) or zero groups (88%). Respondents with disabilities were less likely to agree (69%) than respondents without disabilities (82%). Respondents who are racialized persons were less likely to agree (73%) than respondents who are not racialized persons (84%). This was observed overall and among staff and among trainees (66% of racialized trainees agreed). LGBTQI2S+ respondents were less likely to agree (63%) compared to respondents who are not LGBTQI2S+ (81%). This was observed overall and among trainees. Respondents who experienced mental health conditions in the past year were less likely to agree (65%) than respondents who did not experience recent mental health conditions (84%). This was observed overall and among trainees. Among staff, respondents aged 45+ were more likely to agree (87%) compared to respondents aged under 45 (67%).
I feel included in my McGill department or unit. (142 responses)	Mean: 2.27 Agree: 95 (67%) Disagree: 16 (11%)	Faculty were more likely to agree (83%) than trainees (66%) and staff (58%). Respondents who self-identified in three or more designated equity groups were less likely to agree (50%) than those who self-identified in one or two groups (64-69%) or zero groups (77%). LGBTQI2S+ respondents were less likely to agree (47%) compared to respondents who are not LGBTQI2S+ (73%). This was observed overall and among trainees. Respondents who experienced physical health conditions in the past year were more likely to disagree (22%) than respondents without recent physical health conditions (8%). Respondents aged 55+ were less likely to agree (50%) than respondents aged 45-54 (85%), 35-44 (71%), and under 35 (65%). Among faculty and trainees, women were less likely to agree (75% of women faculty, 60% of women trainees) compared to respondents who are not women (92% in faculty, 78% in trainees). Among staff, the opposite pattern was found with women more likely to agree (67%) compared to respondents who are not women (46%). • (As noted in the Intersectional demographics section, the group of staff who are not women has a higher proportion of members of other designated equity groups compared to staff who are women.) Among trainees, respondents who experienced mental health conditions in the past year were less likely to agree (56%) compared to respondents without recent mental health conditions (76%).

Statement and number of responses	Overall responses	Group differences
I feel included in the general McGill community related to my field of research, study, or work. (143 responses)	Mean: 2.27 Agree: 98 (69%) Disagree: 13 (9%)	Respondents who self-identified in 3+ equity groups were less likely to agree (55%) than those who identified in two (64%), one (70%), or zero groups (75%). Among faculty and trainees, women were less likely to agree (62% in faculty, 59% in trainees) than respondents who are not women (92% in faculty, 78% in trainees). The opposite was observed in staff where women were more likely to agree (79%) than respondents who are not women (55%). Respondents with disabilities were less likely to agree (46%) than respondents without disabilities (73%). LGBTQI2S+ respondents were less likely to agree (61%) compared to respondents who are not LGBTQI2S+ (73%). Respondents who are not Canadian citizens or permanent residents were more likely to disagree (17%) compared to respondents who are Canadian citizens or permanent residents (5%). This was observed overall and among trainees. Respondents who experienced physical (48%) or mental health conditions (46%) in the past year were less likely to agree compared to respondents without recent health conditions (74-78%). The finding related to mental health conditions was also observed in trainees, where 33% of those who did and 84% of those who did not experience mental health conditions in the past year agreed. Among staff, racialized persons were less likely to agree (62%) compared to respondents who are not racialized persons (72%). Among staff, respondents aged 55+ were less likely to agree (50%) compared to respondents aged under 55 (79%).
I have positive role models at McGill. (143 responses)	Mean: 1.92 Agree: 116 (81%) Disagree: 5 (3%)	Faculty were more likely to agree (93%) compared to staff and trainees (78%). Among staff and trainees, women were more likely to agree (89% in staff, 84% in trainees) compared to respondents who are not women (54% in staff, 65% in trainees). The opposite was found among faculty, where women were less likely to agree (<90%) compared to respondents who are not women (100%). Racialized persons were less likely to agree (73%) compared to respondents who are not racialized persons (87%). This was observed overall, in staff and trainees. Respondents who are not Canadian citizens or permanent residents were less likely to agree (73%) compared to respondents who are Canadian citizens or permanent residents (85%). This was observed overall and among trainees.
I receive valuable mentoring from one or more member(s) of the McGill community. (141 responses)	Mean: 1.93 Agree: 115 (82%) Disagree: 6 (4%)	Staff were less likely to agree (74%) than trainees (82%) and faculty (89%). Respondents in the 55+ age group were less likely to agree (60%) compared to respondents aged 45-54 (94%), 35-44 (86%) and under 35 (82%). Among faculty, respondents who experienced physical health conditions in the past year were less likely to agree (71%) than those without recent physical health conditions (95%). Among staff and trainees, women were more likely to agree (83% in staff, 87% in trainees) than respondents who are not women (54% in staff, 74% in trainees). Among trainees, racialized persons were less likely to agree (75%) compared to respondents who are not racialized persons (89%).

Statement and number of responses	Overall responses	Group differences
My peers are supportive of my professional goals. (145 responses)	Mean: 1.83 Agree: 124 (86%) Disagree: <5	Staff were less likely to agree (76%) than trainees and faculty (88-89%). Respondents who experienced physical health conditions in the past year were less likely to agree (70%) than respondents without recent physical health conditions (88%). This was observed overall, among faculty, and among trainees. Respondents in the 55+ age group were less likely to agree (64%) compared to respondents aged 54 and under (89%). In staff, women were more likely to agree (86%) than those who are not women (54%). Among trainees, respondents with disabilities were less likely to agree (75%) compared to respondents without disabilities (89%). Trainee respondents who experienced mental health conditions in the past year were less likely to agree (83%) compared to respondents without recent mental health conditions (93%).
My supervisor(s) are supportive of my professional goals. (136 responses)	Mean: 1.79 Agree: 112 (82%) Disagree: <5	Staff were less likely to agree (70%) than trainees and faculty (88-89%). Women were more likely to agree (87%) than respondents who are not women (75%). This was observed overall and among staff (79% of women and 46% of staff who are not women agreed). Respondents in the 55+ age group were less likely to agree (58%) compared to respondents aged 54 and under (86%). Among trainees, racialized persons were less likely to agree (81%) compared to respondents who are not racialized persons (94%). Among trainees, respondents who experienced mental health conditions in the past year were less likely to agree (78%) compared to trainees who did not experience recent mental health conditions (96%).
In professional discussions, I am comfortable raising opinions that may be different from those expressed by others. (145 responses)	Mean: 2.06 Agree: 111 (77%) Disagree: 7 (5%)	In faculty and trainees, women were less likely to agree (69-71%) than those who are not women (83-85%). The opposite was observed in staff where women were more likely to agree (86%) than respondents who are not women (69%). Respondents who experienced recent mental health conditions were less likely to agree (72%) than respondents without recent mental health conditions (81%). This was observed overall and among trainees. Among faculty, racialized persons were less likely to agree (62%) compared to respondents who are not racialized persons (84%). Among staff, respondents aged 55+ were less likely to agree (62%) compared to respondents ages 45-54 (78%), and under 45 (95%).
I am comfortable bringing up concerns with my supervisor(s). (138 responses)	Mean: 2.00 Agree: 110 (80%) Disagree: 9 (7%)	Trainees were less likely to agree (72%) than staff and faculty (88-90%). Among faculty, women were less likely to agree (71%) than respondents who are not women (100%). The opposite was observed among staff, where women were more likely to agree (93%) than respondents who are not women (77%). Respondents who are not Canadian citizens or permanent residents were less likely to agree (70%) than respondents who are Canadian citizens or permanent residents (85%). This was observed overall and among trainees. Respondents who experienced recent mental health conditions were less likely to agree (73%) than respondents without recent mental health conditions (83%). Among faculty, racialized persons were less likely to agree (75%) compared to respondents who are not racialized persons (100%).

Statement and number of responses	Overall responses	Group differences
McGill puts too much focus on equity, diversity, and inclusion. (143 responses)	Mean: 3.29 Agree: 33 (23%) Disagree: 61 (43%)	Staff were least likely to disagree (26%) compared to faculty (46%) and trainees (49%). (18% of faculty, 21% of trainees, and 31% of staff agreed.) Responses were related to the number of designated equity groups self-identified in: zero groups (31% disagreed, 39% agreed), one group (39% disagreed, 21% agreed), two groups (46% disagreed, 23% agreed), 3 or more groups (90% disagreed, <5 agreed). Among trainees, women were less likely to agree (18%) and more likely to disagree (59%) than respondents who are not women (26% agreed, 30% disagreed). The opposite pattern was observed among staff, where 38% of women and <5 respondents who are not women agreed. Respondents with disabilities were more likely to disagree (70%) compared to respondents without disabilities (41%). This was observed overall and among trainees. Racialized persons were less likely to agree (15%) than respondents who are not racialized persons (27%). This was observed overall and among trainees. Similarly, among staff, racialized persons were more likely to disagree (42%) compared to respondents who are not racialized persons (21%). LGBTQI2S+ respondents were more likely to disagree (68%) and less likely to agree (<5) compared to respondents who are not LGBTQI2S+ (39% disagreed, 27% agreed). This was observed overall and among trainees, where 80% of LGBTQI2S+ respondents disagreed. Respondents who experienced recent mental health conditions were more likely to disagree (54% disagreed, 19% agreed) than respondents without recent mental health conditions (41% disagreed, 23% agreed). This was observed overall and among trainees.
HBHL puts too much focus on equity, diversity, and inclusion. (141 responses)	Mean: 3.20 Agree: 31 (22%) Disagree: 54 (38%)	Staff were least likely to disagree (27%) compared to faculty (43%) and trainees (42%). (21% of faculty, 18% of trainees, and 32% of staff agreed.) Responses were related to the number of designated equity groups self-identified in: zero equity groups (35% disagreed, 35% agreed), one (39% disagreed, 20% agreed), two (35% disagreed, 21% agreed), three or more groups (50% disagreed, <5 agreed). Racialized persons were less likely to agree (15%) than respondents who are not racialized persons (26%). This was observed overall and among staff. LGBTQI2S+ respondents were less likely to agree (<5) compared to respondents who are not LGBTQI2S+ (25%). First-generation students were more likely to agree (31%) than respondents who are/were not first-generation students (17%). This was observed overall and among staff. 43% of respondents aged 44 and under disagreed (18% agreed), compared to 27% of respondents aged 45+ (32% agreed). Among faculty and trainees, women were more likely to disagree (53% in faculty, 47% in trainees) than respondents who are not women (<5 faculty, 35% in trainees).

Statement and number of responses	Overall responses	Group differences
McGill puts sufficient resources towards facilitating equity, diversity and inclusion for all. (139 responses)	Mean: 2.72 Agree: 59 (42%) Disagree: 23 (17%)	Trainees were more likely to disagree (27%) compared to faculty and staff (<5 each). Respondents who self-identified in three or more designated equity groups were more likely to disagree (70%) compared to respondents who self-identified in two (18%), one (13%) or zero equity groups (<5). Women were more likely to disagree (22%) compared to respondents who are not women (<5). This was observed overall and among trainees, where 37% of women disagreed. Respondents with disabilities were more likely to disagree (39%) compared to respondents without disabilities (14%). This was observed overall and among trainees, where over 60% of respondents with disabilities disagreed. LGBTQI2S+ respondents were more likely to disagree (58%) compared to respondents who are not LGBTQI2S+ (10%). This was observed overall and among trainees, where over 70% of LGBTQI2S+ respondents disagreed. Respondents who experienced recent mental health conditions were more likely to disagree (35%) than respondents without recent mental health conditions (13%). This was observed overall and among trainees, where 50% of those who experienced recent mental health conditions disagreed.
I am able to access any support and/or accommodations that I need to be able to fully participate in my job/education and professional activities at McGill. (127 responses)	Mean: 2.36 Agree: 78 (61%) Disagree: 12 (9%)	Respondents who self-identified in three or more (50%) or one or two equity groups (56%) were less likely to agree compared to respondents who did not self-identify in any equity groups (87%). Respondents with disabilities were less likely to agree (50%) compared to respondents without disabilities (65%). LGBTQI2S+ respondents were less likely to agree (41%) than respondents who are not LGBTQI2S+ (65%). This was observed overall and among trainees. First-generation students were less likely to agree (55%) compared to respondents who are/were not first-generation students (66%). This was observed overall and among faculty and staff. Respondents who are not Canadian citizens or permanent residents were more likely to disagree (16%) compared to respondents who are Canadian citizens or permanent residents (6%). Respondents who experienced mental health conditions in the past year were less likely to agree (54%) compared to respondents without recent mental health conditions (66%). Among faculty, women were less likely to agree (46%) compared to respondents who are not women (91%). Among staff, racialized persons were less likely to agree (58%) compared to respondents who are not racialized persons (70%). See Figure 3.
I feel physically safe on campus. (137 responses)	Mean: 1.85 Agree: 120 (88%) Disagree: 5 (4%)	LGBTQI2S+ respondents were less likely to agree (79%) than respondents who are not LGBTQI2S+ (89%). Among faculty, women were less likely to agree (75%) compared to respondents who are not women (100%). Among trainees, racialized persons were less likely to agree (84%) than respondents who are not racialized persons (97%).

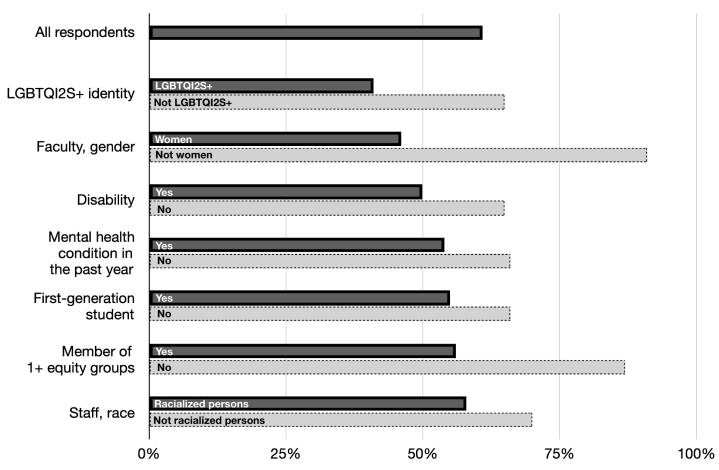
Statement and number of responses	Overall responses	Group differences
I avoid HBHL activities due to concerns of	Mean: 4.46 Agree: 6 (4%)	Women were more likely to disagree (93%) compared to respondents who are not women (83%). This was found overall, among staff, and among trainees.
physical safety. (135 responses)	Disagree: 121 (90%)	Among trainees, respondents who are not Canadian citizens or permanent residents were less likely to disagree (84%) compared to respondents who are Canadian citizens or permanent residents (97%).
I feel included at events and	Mean: 2.22	Staff were less likely to agree (58%) than trainees (74%) and faculty (79%).
activities organized or funded by	Agree: 94 (70%)	LGBTQI2S+ respondents were less likely to agree (53%) than respondents who are not LGBTQI2S+ (75%). This was observed overall and among trainees.
HBHL. (134	Disagree: 11 (8%)	Respondents who experienced mental health conditions in the past year were less likely to agree (59%) compared to respondents without recent mental health conditions (76%). This was found overall and among trainees.
responses)		Caregivers for children were more likely to disagree (22%) than respondents who are not caregivers for children (<5). This was observed overall and among faculty.
		Over 75% of respondents aged under 35 agreed, compared to 68-70% of respondents aged 35-54, and 59% of respondents aged 55+.
		Out of the respondents who indicated participating in HBHL activities at least once a year, 74% agreed and 6% disagreed. Out of the respondents who indicated never participating in HBHL activities, 56% agreed and <5 disagreed.
		Among faculty, women were less likely to agree (69%) compared to respondents who are not women (92%). The opposite was observed in staff, where women were more likely to agree (67%) than respondents who are not women (39%).
		Among trainees, racialized persons were less likely to agree (67%) compared to respondents who are not racialized persons (81%).
		Among trainees, respondents who are not Canadian citizens or permanent residents were less likely to agree (68%) than respondents who are Canadian citizens or permanent residents (84%).
		See Figure 4.
I feel included	Mean: 2.21	Staff were less likely to agree (59%) than faculty (69%) and trainees (74%).
at other McGill neuroscience events and	Agree: 92 (69%)	LGBTQI2S+ respondents were less likely to agree (56%) than respondents who are not LGBTQI2S+ (74%). This was observed overall and among trainees.
activities. (134 responses)	Disagree: 7 (5%)	Respondents with recent physical health conditions were less likely to agree (55%) compared to respondents without recent physical health conditions (72%).
responses)		Caregivers for children were more likely to disagree (13%) compared to respondents who are not caregivers for children (<5).
		Over 76% of respondents aged under 35 agreed, compared to 68% of respondents aged 35-44, and 59% of respondents aged 45+.
		Among faculty and trainees, women were less likely to agree (56% in faculty, 70% in trainees) compared to respondents who are not women (85% in faculty, 82% in trainees). The opposite pattern was observed among staff, where women were more likely to agree (75%) compared to respondents who are not women (<5).
		Among trainees, racialized persons were less likely to agree (69%) compared to respondents who are not racialized persons (79%).
		Trainees who experienced mental health conditions in the past year were less likely to agree (59%) than trainees without recent mental health conditions (83%).

Table 7. Overall responses and group differences for the role-specific agreement scale statements.

Statement and number of responses	Overall responses	Group differences
(excluding "prefer not to answer", "not applicable", and blanks)		
I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department/ unit and level of study. (66 responses, trainees only)	Mean: 2.18 Agree: 48 (73%) Disagree: 14 (21%)	Respondents who self-identified in one or more designated equity groups were less likely to agree (70%) compared to respondents who did not self-identify in any equity groups (90%). Women were more likely to disagree (26%) compared to respondents who are not women (<5). Racialized persons were less likely to agree (62%) compared to respondents who are not racialized persons (82%). First-generation students were more likely to disagree (35%) than respondents who are/were not first-generation students (16%). Respondents who experienced mental health conditions in the past year were more likely to disagree (38%) compared to respondents without recent mental health conditions (14%).
I have similar access to training opportunities (e.g. conferences, workshops) as other trainees who work under my supervisor. (67 responses, trainees only)	Mean: 1.87 Agree: 56 (84%) Disagree: 8 (12%)	Respondents who self-identified in one or more designated equity groups were less likely to agree (81%) compared to respondents who did not self-identify in any equity groups (100%). Racialized persons were less likely to agree (71%) compared to respondents who are not racialized persons (94%). First-generation students were less likely to agree (75%) than respondents who are/were not first-generation students (87%). Respondents who are not Canadian citizens or permanent residents were less likely to agree (76%) compared to respondents who are Canadian citizens or permanent residents (93%). Respondents who experienced mental health conditions in the past year were less likely to agree (72%) compared to respondents without recent mental health conditions (91%).
I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other individuals in the same department/unit and level of study. (68 responses, trainees only)	Mean: 2.26 Agree: 48 (71%) Disagree: 14 (21%)	Respondents who self-identified in one or more designated equity groups were less likely to agree (69%) compared to respondents who did not self-identify in any equity groups (80%). Racialized persons were less likely to agree (59%) compared to respondents who are not racialized persons (81%). Respondents who are not Canadian citizens or permanent residents were more likely to disagree (27%) compared to respondents who are Canadian citizens or permanent residents (14%). Respondents who experienced mental health conditions in the past year were more likely to disagree (28%) compared to respondents without recent mental health conditions (18%).

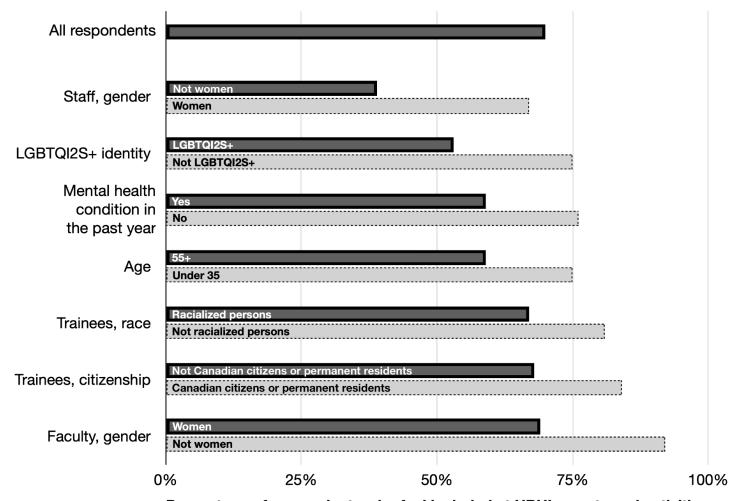
Statement and number of responses	Overall responses	Group differences
I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other trainees who work under my supervisor. (67 responses, trainees only)	Mean: 1.99 Agree: 53 (79%) Disagree: 9 (13%)	Racialized persons were less likely to agree (71%) compared to respondents who are not racialized persons (86%). Respondents who are not Canadian citizens or permanent residents were less likely to agree (71%) compared to respondents who are Canadian citizens or permanent residents (90%). Respondents who experienced mental health conditions in the past year were less likely to agree (67%) compared to respondents without recent mental health conditions (86%).
I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department/unit and type of position. (40 responses, staff only)	Mean: 2.38 Agree: 27 (68%) Disagree: 5 (13%)	Racialized persons were less likely to agree (62%) compared to respondents who are not racialized persons (72%).
I have similar access to advancement opportunities (e.g. publicity, promotions, funding, publications) as other individuals in the same department/unit and type of position. (41 responses, staff only)	Mean: 2.54 Agree: 24 (59%) Disagree: 6 (15%)	Women were more likely to agree (67%) compared to respondents who are not women (39%). Respondents who are/were first-generation students were less likely to agree (50%) compared to respondents who are/were not first-generation students (67%).
I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department and rank. (28 responses, faculty only)	Mean: 1.54 Agree: 27 (96%) Disagree: <5	Group differences not analyzed due to small numbers of respondents who selected neutral or disagree responses.
I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other individuals in the same department and rank. (29 responses, faculty only)	Mean: 1.86 Agree: 23 (79%) Disagree: <5	Group differences not analyzed due to small numbers of respondents who selected neutral or disagree responses.
I am satisfied with my balance of research, teaching and administrative work. (28 responses, faculty only)	Mean: 2.89 Agree: 11 (39%) Disagree: 8 (29%)	Women were less likely to agree (33%) compared to respondents who are not women (46%).
My balance of research, teaching and administrative work is similar to that of others in the same rank and department. (26 responses, faculty only)	Mean: 2.69 Agree: 16 (62%) Disagree: 9 (35%)	Women were less likely to agree (57%) compared to respondents who are not women (67%).

Figure 3. Percentage of respondents who are able to access any support and accommodations that they need, overall and among groups where differences were found.



Percentage of respondents who are able to access any support and/or accommodations that they need to fully participate in their job/education and professional activities at McGill

Figure 4. Percentage of respondents who feel included at events and activities organized or funded by HBHL, overall and among groups where differences were found.



Percentage of respondents who feel included at HBHL events and activities

Harassment and discrimination

Section summary:

- 21% of respondents indicated experiencing harassment at least once within the McGill environment, and 26% reported experiencing discrimination at least once within the McGill environment. While a range of forms of harmful conduct were experienced, sexism, racism, and religious intolerance were the most commonly-experienced.
- 35% of respondents indicated witnessing harassment at least once within the McGill environment, and 35% reported witnessing discrimination at least once within the McGill environment. Harassment and discrimination related to gender, race, religion, sexual orientation, and power dynamics were the most commonly-witnessed forms.
- Higher prevalence of experiences of harmful conduct were found in several groups including LGBTQI2S+ respondents, women faculty, trainees who experienced mental health conditions in the previous year, trainees who are not Canadian citizens/permanent residents, and respondents in the 45-54 age range.

Respondents were invited to indicate the frequency, if any, of experiences and observations of harassment and discrimination in the McGill environment. Among respondents who provided an answer to the corresponding questions (excluding "prefer not to answer", "not applicable", and blanks), 21% indicated experiencing harassment at least once within the McGill environment and 35% reported witnessing harassment experienced by others within the McGill environment. Twenty-six percent indicated experiencing discrimination at least once within the McGill environment, and 35% reported witnessing discrimination experienced by others within the McGill environment. A summary of frequency of experiences and observations, along with differences by demographics and roles, is provided in Table 8.

Out of the respondents who answered the questions about harassment and discrimination, 19 (13%) indicated experiencing sexism, 11 (7%) indicated experiencing racism, 6 (4%) reported experiencing religious intolerance, and 18 (12%) reported experiencing other types of harassment and/or discrimination (<5 respondents per type).

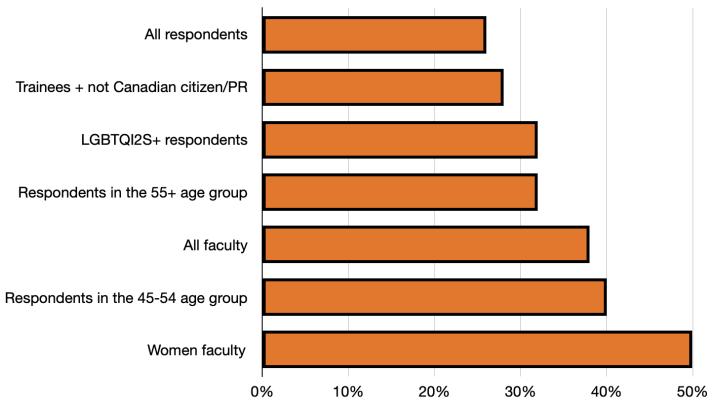
Thirty respondents (20%) indicated witnessing sexism, 27 (18%) reported witnessing racism, 21 (14%) indicated witnessing harassment and/or discrimination related to religion, 9 (6%) indicated witnessing homophobia, 6 (4%) indicated witnessing transphobia, 5 (3%) reported witnessing harmful conduct related to power dynamics, and 8 (5%) reported witnessing other types of harassment and/or discrimination (<5 respondents per type).

Table 8. Frequency of experiences and observations of harassment and discrimination within the McGill environment, among HBHL survey respondents.

Statement and number of responses (excluding "prefer not to answer", "not applicable", and blanks)	Response distribution	Group differences
I have experienced harassment within the McGill environment. (149 responses)	Never: 118 (79%) Once or twice + Three or more times: 31 (21%)	Across all participants, LGBTQI2S+ respondents were more likely to experience harassment (32%) compared to respondents who did not self-identify as LGBTQI2S+ (20%). This was observed overall and among trainees. Among trainees, those who experienced mental health conditions in the past 12 months were more likely to indicate experiencing harassment (29%) compared to those without recent mental health conditions (13%). Respondents in the 45-54 age group were most likely to indicate experiencing harassment (35%), followed by the 55+ age group (28%), under 34 (20%), and 35-44 (<5). Among staff, respondents who are not women were more likely to indicate experiencing harassment (39%) than staff who are women (<5). (As noted in the Intersectional demographics section, the group of staff who are not women has a higher proportion of members of other designated equity groups compared to staff who are women.) Among respondents who are not women, racialized persons were more likely to experience harassment (33%) than respondents who are not racialized persons (19%). Across all participants, respondents who self-identified in one designated equity group were more likely to indicate experiencing harassment (27% experienced harassment) compared to respondents who did not self-identify in any equity groups (17%) or 2+ equity groups (14%).
I have witnessed harassment experienced by others within the McGill environment. (148 responses)	Never: 97 (65%) Once or twice: 38 (26%) Three or more times: 13 (9%)	Faculty members were more likely to indicate witnessing harassment (50%) compared to trainees (33%) and staff (27%). LGBTQI2S+ respondents were more likely to witness harassment (50%) compared to respondents who did not self-identify as LGBTQI2S+ (31%). This was observed overall and among trainees. Across all participants, respondents who are not first-generation students were more likely to indicate witnessing harassment (39%) compared to first-generation students (24%). This was found among trainees separately as well. Respondents in the 45-54 age group were most likely to indicate witnessing harassment (50%), followed by the 55+ age group (40%), under 34 (36%), and 35-44 (18%). Respondents who are not women were more likely to indicate witnessing harassment (41%) compared to women (30%). This was observed among staff separately as well.

Statement and number of responses	Response distribution	Group differences	
I have experienced discrimination within the McGill environment. (149 responses)	Never: 110 (74%) Once or twice: 31 (21%) Three or more times: 8 (5%)	Faculty members were more likely to indicate experiencing discrimination (38%) than trainees (25%) and staff (21%). Among faculty, women were more likely to experience discrimination (50%) than respondents who are not women (<5). Across all participants, LGBTQI2S+ respondents were more likely to experience discrimination (32%) compared to respondents who did not self-identify as LGBTQI2S+ (22%). This was observed overall and among trainees. Among trainees, respondents who are not Canadian citizens or permanent residents were more likely to experience discrimination (28%) than those who are Canadian citizens or permanent residents (18%). Respondents in the 45-54 age group were most likely to indicate experiencing discrimination (40%), followed by the 55+ age group (32%), 35-44 (24%), and under 34 (21%).	
I have witnessed discrimination experienced by others within the McGill environment. (149 responses)	Never: 97 (65%) Once or twice: 39 (26%) Three or more times: 13 (9%)	Faculty members were more likely to indicate witnessing discrimination (45%) than trainees (36%) and staff (25%). Respondents who are members of one or more designated equity groups were more likely to witness discrimination (38%) compared to respondents who are not members of any designated equity groups (23%). LGBTQI2S+ respondents were more likely to indicate witnessing discrimination (47%) compared to respondents who are not LGBTQI2S+ (32%). Among staff, respondents who are not women were more likely to indicate witnessing discrimination (39%) compared to women (17%). Respondents in the 18-24 age range were most likely to indicate witnessing discrimination (60%), followed by the 45-54 age group (55%), 25-34 (35%), 35-44 (24%) and 55+ (24%).	

Figure 5. Percentage of respondents who indicated experiencing discrimination at least once within the McGill environment, across all respondents and groups with the highest percentages.



Percentage of respondents who experienced discrimination at McGill

Comparison with the 2022 HBHL climate survey

Section summary:

- The number of respondents and response rates were lower in 2024 (171 respondents, 17% response rate) compared to 2022 (274 respondents, 25% response rate). The 2024 sample includes a higher proportion of PhD students and postdoctoral researchers, and a lower proportion of faculty compared to 2022.
- In interpreting climate findings, it is important to consider possible contributors in the broader socio-political and institutional context that may not be directly related to HBHL, as well as the increased proportion of members of designated equity groups in the 2024 survey respondents.
- Several findings are aligned with positive progress. In the 2024 survey, increased sense of inclusion in HBHL activities, increased participation rate in HBHL activities among people with disabilities, larger proportion of respondents who receive valuable mentoring, larger proportion of faculty who have similar training/advancement access as peers, and reduced gender gap in faculty workload balance were observed compared to 2022.
- Several findings are aligned with decreases in equity, inclusion, and/or satisfaction with the work
 climate from the 2022 to 2024 survey populations. In the 2024 survey, decreased satisfaction with the
 McGill climate, decreased inclusion within the McGill community, smaller proportion of trainees and
 staff who have similar access to training/advancement as peers, increased sense of too much focus on
 EDI, and decreased satisfaction with workload balance in faculty were observed compared to 2022.
- Distribution of responses to climate statements differed across role and demographic groups in both years. The specific differences varied between questions, with a general finding that differences related to caregiving were more frequent in 2022 than 2024.
- The proportion of respondents who indicated experiencing and/or witnessing harassment and/or discrimination was larger in 2024 compared to 2022. Since the wording of these questions in the survey did not provide a time frame for the experiences and observations, the 2024 findings cannot be interpreted as a change from 2022.

The results of the 2024 HBHL climate survey were compared with the results of the 2022 HBHL climate survey. Similarities and differences between the two survey findings related to survey respondents, overall response distributions and group comparisons for climate statements, and experiences/observations of harmful conduct are presented in this section.

Survey respondents

The number of respondents and response rates were lower in 2024 (171 respondents, 17% response rate) compared to 2022 (274 respondents, 25% response rate).

Roles

While the proportion of respondents who are staff members was identical across both years (27%), the proportion of trainee respondents is higher in 2024 (46% compared to 39% in 2022) and the proportion of faculty respondents is lower in 2024 (20% compared to 28% in 2022). The proportion of respondents who hold another role or did not specify their role is similar across both years at 6-7%.

Among staff and faculty respondents, the distribution of specific role categories are similar across both years, with no difference larger than 4 percentage points in any category. However, the 2024 survey includes a larger proportion of PhD students (34% compared to 25% in 2022) and postdoctoral fellows (10% compared to 4% in 2022) and a lower proportion of Masters students (<5 in 2024 compared to 8% in 2022).

HBHL connection

The proportion of respondents with current or past direct and indirect HBHL funding both increased 5 percentage points between the 2022 and 2024 surveys (47% to 52% for direct, 39% to 44% for indirect). In both surveys, the proportion of respondents with current or past participation in HBHL leadership or governance was similar at 10-11%.

In 2024, a higher proportion of respondents (73%) indicated participating in HBHL events at least once per year compared to 62% in 2022. The proportion of respondents who indicated never participating in HBHL events and activities dropped across all role groups. While staff are still most likely to indicate never participating in HBHL activities, the proportion dropped from 55% in 2022 to 40% in 2024. The proportion of respondents with direct funding who never participate in HBHL events is similar in both years (19-21%), but the proportion of respondents with indirect funding who never participate in HBHL events dropped from 52% in 2022 to 31% in 2024.

In both surveys, respondents with disabilities were more likely than respondents without disabilities to indicate never participating in HBHL activities. However, the proportion of respondents with disabilities who never participate in HBHL activities dropped from 63% in 2022 to 43% in 2024.

Demographics

In 2024, a higher proportion of respondents self-identified in at least one designated equity group (62% in 2022, 75% in 2024). This pattern was observed across all three role categories (trainees, staff, faculty), with the largest difference observed among faculty (49% in 2022, 74% in 2024). A smaller increase was observed in the proportion of respondents who self-identified in two or more designated equity groups (23% in 2022, 29% in 2024) with the largest difference observed in trainees (36% to 44%).

 There are multiple factors that may be contributing to this, including shifting demographics in the HBHL community, increased survey engagement among members of designated groups, and/or reduced survey engagement among individuals who are not members of designated groups.

The proportion of respondents who are women increased in all three role categories, bringing the proportion of respondents who are women up to 59% in 2024 from 47% in 2022. The proportion of respondents who are racialized persons increased from 27% in 2022 to 34% in 2024. The proportion of respondents who were primary caregivers for adult dependents increased from 4% in 2022 to 11% in 2024.

The proportion of respondents with disabilities (6-8%), Black respondents (3-4%), Indigenous respondents (<5), LGBTQI2S+ respondents (9-11%), first-generation students (27-28%), respondents who experienced physical and/or mental health conditions in the previous year (15-16%), and respondents who were primary caregivers for children in the previous year (22-25%) were all similar across both surveys.

The age distribution among faculty is very similar between surveys, (57-59% aged 35-54 and 34-35% aged 55+). The trainee age distribution skews older in 2024 (more in the 25-44 range and less under 25), likely connected with the higher proportion of PhD students and postdoctoral researchers, and fewer Masters students. In 2024, the age range of staff has a lower proportion aged 45-54 and a higher proportion of respondents aged 55+.

Across both surveys, connections were found between membership in designated equity groups and increased likelihood of experiencing health conditions in the previous 12 months. Between surveys, opposite relationships between LGBTQI2S+ identity and first-generation student status were observed. In 2024, additional connections were observed between gender, LGBTQI2S+ identity, and disability that were not noted in 2022.

Climate

The percentage of respondents who agreed, percentage of respondents who disagreed, and group differences were compared for each agreement-scale statement between the 2022 and 2024 surveys (Tables 9 and 10). In interpreting these findings, it is important to consider two points:

- Some of the assessed contexts are HBHL specific, while others are connected with the broader McGill
 environment. While the general McGill experiences impact members of the HBHL community, findings
 of differences in such areas may be related to institutional action and/or broader socio-political context
 they may not be directly connected to HBHL practices and activities.
- The 2024 survey population includes a higher proportion of respondents who are members of designated equity groups compared to the 2022 survey population. Findings may be connected with an increased proportion of respondents who are members of groups experiencing inequities.

Several findings are aligned with positive progress. In the 2024 survey, increased sense of inclusion in HBHL activities, larger proportion of respondents who receive valuable mentoring, larger proportion of faculty who have similar training/advancement access as peers, and reduced gender gap in faculty workload balance were observed compared to 2022.

Several findings are aligned with decreases in equity, inclusion, and/or satisfaction with the work climate from the 2022 to 2024 survey populations. In the 2024 survey, decreased satisfaction with the overall McGill climate, decreased inclusion within the general McGill community, smaller proportion of trainees and staff who have similar access to training/advancement as peers, increased sense of too much focus on EDI, and decrease in satisfaction with workload balance among faculty were observed compared to 2022.

Statements showing a difference of at least 10 percentage point difference in either agree or disagree (among all respondents combined) between the two surveys are as follows. A (+) symbol is listed next to differences that are aligned with positive progress, and a (-) symbol is listed next to differences that are aligned with decreases in equity, inclusion, and/or satisfaction with the work climate.

- (-) Decrease of 26% in agreement, and increase of 9% in disagreement: I am satisfied with my balance of research, teaching and administrative work (faculty only).
- (-) Decrease of 12% in agreement, and increase of 14% in disagreement: I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department/ unit and level of study (trainees only).
- (-) Decrease of 12% in agreement: I have similar access to training opportunities (e.g. conferences, workshops) as other trainees who work under my supervisor (trainees only).
- (+ and -) Increase of 12% in agreement, and increase of 8% in disagreement: My balance of research, teaching and administrative work is similar to that of others in the same rank and department (faculty only).
 - (+) Further, the gender gap related to this statement decreased 13 percentage points.
- (+) Increase of 10% in agreement: I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department and rank (faculty only).
- (-) Decrease of 10% in agreement: I am satisfied with the overall climate at McGill University.

• (+) Increase of 10% in agreement: I receive valuable mentoring from one or more member(s) of the McGill community.

Statements showing a difference of between 5 and 9 percentage points in either agree or disagree between the two surveys are:

- (-) Decrease of 9% in agreement: I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department/unit and type of position (staff only).
- (-) Decrease of 9% in disagreement, and increase of 6% in agreement: HBHL puts too much focus on equity, diversity, and inclusion.
- (+) Increase of 8% in agreement: I feel included at events and activities organized or funded by HBHL.
- (-) Increase of 8% in agreement, and decrease of 6% in disagreement: McGill puts too much focus on equity, diversity, and inclusion.
- (-) Increase of 8% in disagreement, and decrease of 7% in agreement: I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other individuals in the same department/unit and level of study (trainees only).
- (-) Decrease of 7% in agreement: I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other trainees who work under my supervisor (trainees only).
- (-) Decrease of 6% in agreement: I have similar access to advancement opportunities (e.g. publicity, promotions, funding, publications) as other individuals in the same department/unit and type of position (staff only).
- (+) Increase of 6% in agreement: I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other individuals in the same department and rank (faculty only).
- (-) Decrease of 5% in agreement: I feel included in my McGill department or unit.
- (-) Decrease of 5% in agreement: I feel included in the general McGill community related to my field of research, study, or work.

Table 9. Difference in responses to the all-respondent climate statements between the 2022 and 2024 surveys.

Statement	Change in % agree or strongly agree, 2022 to 2024	Change in % disagree or strongly disagree, 2022 to 2024	Comparison of group differences between the 2022 and 2024 surveys
I am satisfied with the overall climate at McGill University.	Decrease of 10% (74% to 64%)	Increase of 2% (10% to 12%)	In both years, LGBTQI2S+ respondents were less likely to agree with this statement than respondents who are not LGBTQI2S+. The gap widened from 15 percentage points in 2022 to 28 in 2024. In both years, trainees who experienced mental health conditions in the past year were less likely to agree with this statement than trainees without recent mental health conditions. In 2022, staff who are/were first-generation students were less likely to agree with this statement. In 2024, an opposite pattern was observed across all respondents, where first-generation students were more likely to agree with this statement than respondents who are/were not first-generation students. Differences related to disability and caregiving were observed in 2022, not in 2024. Differences related to role categories as well as gender in trainees were found in 2024, but not 2022.
I feel included in my lab or office space.	Decrease of 2% (90% to 88%)	4% in 2022, <5 in 2024	In both years, respondents who experienced mental health conditions in the past year were less likely to agree with this statement than respondents without recent mental health conditions. The gap widened from 14 percentage points in 2022 to 22 percentage points in 2024. Differences connected with LGBTQI2S+ identity in trainees, and differences at the intersection of caregiving and gender, were found in 2022 but not 2024. Differences related to disability across all participants, physical health in faculty, race in staff, and citizenship in trainees were found in 2024 but not 2022.
I feel included in my research institute or research centre.	Increase of 2% (77% to 79%)	Decrease of 1% (6% to 5%)	Decreasing agreement with an increasing number of equity groups self-identified in was found in both years. The gap between highest and lowest agreement rates shrunk from 40 percentage points in 2022 to 28 percentage points in 2024. In both years, the proportion of LGBTQI2S+ respondents who agreed was 18 percentage points less than respondents who are not LGBTQI2S+. In both years, respondents who experienced mental health conditions in the past year were less likely to agree with this statement than respondents who did not experience recent mental health conditions. The gap shrunk from 38 percentage points in 2022 to 19 percentage points in 2024. Across all participants and among faculty, differences related to caregiving and gender were found in 2022 but not in 2024. Differences related to role group, disability, race, and age were found in 2024 but not 2022.
I feel included in my McGill department or unit.	Decrease of 5% (72% to 67%)	Increase of 4% (7% to 11%)	In 2022, women were less likely to agree with this statement. In 2024, this was also observed in faculty and trainees but the opposite was observed among staff. In both years, trainees who experienced mental health conditions in the past year were less likely to agree with this statement than trainees who did not experience recent mental health conditions. In both years, LGBTQI2S+ trainees were less likely to agree with this statement than trainees who are not LGBTQI2S+ with similar gaps in both years. A difference related to citizenship in trainees was found in 2022 but not 2024. Differences related to role group, number of equity groups self-identified in, physical health, and age were found in 2024 but not 2022.

Statement	Change in % agree or strongly agree, 2022 to 2024	Change in % disagree or strongly disagree, 2022 to 2024	Comparison of group differences between the 2022 and 2024 surveys
I feel included in the general McGill community	Decrease of 3% (74% to (6% to 9%)		Decreasing agreement with an increasing number of equity groups self-identified in was found in both years. The gap between highest and lowest agreement rates were similar across both years (23 and 20 percentage points).
related to my field of research, study, or work.	69%)		In both years, among faculty and trainees, women were less likely to agree with this statement. The gaps shrunk from 35 to 30 percentage points in faculty and 27 to 19 in trainees. In 2024 only, the opposite gender difference was found in staff.
			In both years, LGBTQI2S+ respondents were less likely to agree with this statement (difference of 12-13 percentage points both years).
			In both years, respondents who experienced physical and/or mental health conditions in the previous year were less likely to agree with this statement. Differences were 21 (physical) - 26 (mental) percentage points in 2022 and 26-32 percentage points in 2024.
			In 2024, differences related to race and age among staff, and disability and citizenship overall, were also observed.
I have positive role models at McGill.	Increase of 1% (80% to	Decrease of 2% (5% to 3%)	In both years, faculty were most likely to agree. While the proportion of trainees who agreed dropped slightly (82% to 78%), the proportion of staff who agreed increased from 2022 to 2024 (67% to 78%).
	81%)		Differences related to LGBTQI2S+ identity, physical and mental health, and caregiving were found in 2022 but not 2024.
			Differences related to gender, race, and citizenship were found in 2024, not 2022.
I receive valuable mentoring from one or more	10% 4	10% 4% (72% to (8% to 4%)	While the proportion of trainees who agreed was consistent across both years (80-82%), the proportion of staff (64% to 74%) and faculty (63% to 89%) who agreed was higher in 2024.
member(s) of the McGill community.		22 70)	In 2022, among staff, women were less likely than respondents who are not women to agree with this statement. In 2024, among staff and trainees, the opposite direction of difference was observed (women were more likely to agree).
			Differences related to LGBTQI2S+ identity in trainees, mental health, and the intersection of race and caregiving were found in 2022 but not 2024.
			Differences related to age, physical health in faculty, and race in trainees were found in 2024 but not 2022.
My peers are supportive of my professional Increase of 4% (82% to		3% in 2022, <5 in 2024	In both years, respondents in the 55+ age group were least likely to agree. However, there was an increase in 11 percentage points in the level of agreement in this group, from 53% in 2022 to 64% in 2024.
goals.	86%)		Differences related to race in faculty, and the intersection of race and gender, were found in 2022 but not 2024.
			Differences related to role group, physical health, disability in trainees, and gender in staff were found in 2024 but not 2022.
My supervisor(s) are supportive of my professional	Increase of 1% (81% to 82%)	6% in 2022, <5 in 2024	In both years, trainees who experienced mental health conditions in the previous year were less likely to agree than those without recent mental health conditions.
goals.			In 2022, differences related to gender in faculty and the intersection of race and gender overall were found. In 2024, differences related to race were found only in trainees and gender differences were driven by staff.
			Differences related to LGBTQI2S+ identity, physical health, and caregiving were found in 2022 but not 2024.
			Differences related to role group, with staff being the least likely to agree, were found in 2024 but not 2022.

Statement	Change in % agree or strongly agree, 2022 to 2024	Change in % disagree or strongly disagree, 2022 to 2024	Comparison of group differences between the 2022 and 2024 surveys	
In professional discussions, I am comfortable raising opinions that may be	Increase of 2% (75% to 77%)	Decrease of 4% (9% to 5%)	In both years, respondents who experienced mental health conditions in the previous year were less likely to agree than respondents who did not experience recent mental health conditions. The gap is similar across both years (7-9 percentage points).	
different from those expressed by others.			Differences related to role group, disability, physical health, and caregiving were found in 2022 but not 2024.	
by others.			Differences related to gender, race in faculty, and age in staff were found in 2024 but not 2022.	
I am comfortable bringing up concerns with	Increase of 3% (77% to	Decrease of 4% (11% to	While the proportion of trainees (72-75%) and staff (88-90%) who agreed remained similar, the proportion of faculty who agreed increased from 65% in 2022 to 90% in 2024.	
my supervisor(s).	80%)	7%)	Gender differences were observed in both years. In 2022, lower agreement among women was found overall. In 2024, opposite patterns of difference were found between faculty and staff.	
			In both years, respondents who experienced mental health conditions in the previous year were less likely to agree than those who did not experience recent mental health conditions. The gap shrunk from 17 percentage points in 2022 to 10 percentage points in 2024.	
			Differences related to LGBTQI2S+ identity, physical health, and caregiving were found in 2022 but not 2024.	
			Differences related to citizenship overall and race in faculty were found in 2024 but not 2022.	
McGill puts too much focus on equity, diversity, and inclusion.	Increase of 8% (15% to 23%)	Decrease of 6% (49% to 43%)	Increases in agreement were found across all role groups, with smaller increases among trainees and faculty (6-7 percentage points) and the largest increase among staff (12 percentage points). In both years, staff were most likely to agree.	
and inclusion.	2370)	4370)	In both years, reduced agreement / increased disagreement was found with identification in an increasing number of equity groups.	
			In both years, reduced agreement / increased disagreement was observed among women trainees, compared to respondents who are not women. In 2024, the opposite pattern of gender difference was observed among staff.	
			In both years, reduced agreement / increased disagreement was observed among respondents with disabilities, racialized persons, LGBTQI2S+ respondents, and respondents with recent mental health conditions.	
HBHL puts too much focus on equity, diversity,	Increase of 6% (16% to	Decrease of 9% (47% to	Increases in agreement were observed across all role groups, with an increase of 3 percentage points among trainees, 8 in faculty, and 13 in staff. In both years, staff were most likely to agree.	
and inclusion.	22%)	38%)	In both years, women trainees were less likely to agree / more likely to disagree compared to trainees who are not women. In 2024, this was also found in faculty.	
			In both years, LGBTQI2S+ respondents were less likely to agree than respondents who are not LGBTQI2S+.	
			Age differences were found in both years, though the patterns were somewhat different.	
			In 2024, reduced agreement / increased disagreement was observed among racialized persons overall and in staff. In 2022, this was mainly found in faculty.	
			Differences related to disability and health were observed in 2022 but not 2024.	
			Differences related to first-generation student status were found in 2024, not 2022.	

Statement	Change in % agree or strongly agree, 2022 to 2024	Change in % disagree or strongly disagree, 2022 to 2024	Comparison of group differences between the 2022 and 2024 surveys
McGill puts sufficient resources towards facilitating equity, diversity and inclusion for all.	Increase of 2% (40% to 42%)	Decrease of 2% (19% to 17%)	Reduced agreement / increased disagreement with identification in an increasing number of equity groups was observed in both years. Reduced agreement / increased disagreement among women compared to respondents who are not women was found in both years. In both years, LGBTQI2S+ respondents were more likely to disagree than respondents who are not LGBTQI2S+. The gap widened from 35 percentage points in 2022 to 48 in 2024. In both years, respondents who experienced mental health conditions in the previous year were less likely to agree / more likely to disagree compared to respondents without recent health conditions. Differences related to role groups in 2024 (trainees more likely to disagree) are aligned with age differences observed in 2022 (younger respondents less likely to agree). Differences related to disability were found in 2024 but not 2022.
I am able to access any support and/or accommodations that I need to be able to fully participate in my job/education and professional activities at McGill.	Increase of 3% (58% to 61%)	Decrease of 2% (11% to 9%)	Decreasing agreement with an increasing number of equity groups self-identified in was found in both years. While agreement levels increased overall, the gap between highest and lowest agreement rates grew from 29 percentage points in 2022 to 37 in 2024. Across all participants, women were less likely to agree with this statement in 2022. In 2024, this difference was found in faculty. In both years, LGBTQI2S+ respondents were less likely to agree than respondents who are not LGBTQI2S+. The gap was identical at 24 percentage points both years. In both years, differences related to first-generation status were observed (overall and among faculty/staff in 2024, among staff only in 2022). In both years, respondents who experienced mental health conditions in the previous year were less likely to agree. The gap shrunk from 21 percentage points in 2022 to 12 in 2024. Differences related to caregiving and physical health were found in 2022, not 2024. Differences related to disability were found in 2024, not 2022.
I feel physically safe on campus.	Decrease of 3% (91% to 88%)	<5 in 2022, 4% in 2024	Group differences not analyzed in 2022 due to too few respondents who disagreed.
I avoid HBHL activities due to concerns of physical safety.	Decrease of 1% (5% to 4%)	Increase of 3% (87% to 90%)	Differences related to disability were found in 2022 but not 2024. Differences related to gender and citizenship were found in 2024 but not 2022.
I feel included at events and activities organized or funded by HBHL.	Increase of 8% (62% to 70%)	Increase of 1% (7% to 8%)	In both years, differences related to gender and caregiving were observed. In 2022, the intersection of gender and caregiving was an area of difference, while in 2024 difference was observed related to caregiving across genders and the pattern of gender difference was opposite between faculty and staff. Differences related to the number of equity groups identified in and disability were found in 2022 but not 2024. Differences related to role group, age, LGBTQI2S+ identity, mental health, race in trainees, and citizenship in trainees were found in 2024 but not 2022.

Statement	Change in % agree or strongly agree, 2022 to 2024	Change in % disagree or strongly disagree, 2022 to 2024	Comparison of group differences between the 2022 and 2024 surveys
I feel included at other McGill neuroscience events and activities.	No change (69% both years)	No change (5% both years)	In both years, women trainees and faculty were less likely to agree with this statement compared to respondents who are not women. In 2024, the opposite pattern of gender difference was also observed among staff. In both years, LGBTQI2S+ trainees were less likely to agree than trainees that are not LGBTQI2S+. In both years, respondents who experienced physical health conditions in the past year were less likely to agree compared to respondents who did not experience recent physical health conditions. In both years, respondents who are primary caregivers for children were less likely to agree or more likely to disagree compared to respondents who are not caregivers for children. Differences related to the number of equity groups identified in, first-generation status in trainees, and disability were found in 2022 but not 2024. Differences related to role group, age, race in trainees, and mental health in trainees were found in 2024 but not 2022.

Table 10. Difference in responses to the role-specific climate statements between the 2022 and 2024 surveys.

Statement	Change in % agree or strongly agree, 2022 to 2024	Change in % disagree or strongly disagree, 2022 to 2024	Comparison of group differences between the 2022 and 2024 surveys
I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department/ unit and level of study (trainees only).	Decrease of 12% (85% to 73%)	Increase of 14% (7% to 21%)	In both years, trainees who self-identified in at least one designated equity group were less likely to agree than respondents who did not self-identify in any equity groups. In both years, women were less likely to agree / more likely to disagree compared to respondents who are not women. In both years, racialized persons were less likely to agree than respondents who are not racialized persons. In both years, respondents who experienced mental health conditions in the previous year were less likely to agree / more likely to disagree than respondents who did not experience recent mental health conditions. Differences related to LGBTQI2S+ identity and physical health were found in 2022 but not 2024. Differences related to first-generation status were found in 2024 but not 2022.
I have similar access to training opportunities (e.g. conferences, workshops) as other trainees who work under my supervisor (trainees only).	Decrease of 12% (96% to 84%)	<5 in 2022, 12% in 2024	Group differences not analyzed in 2022 due to too few respondents who disagreed.

Statement	Change in % agree or strongly agree, 2022 to 2024	Change in % disagree or strongly disagree, 2022 to 2024	Comparison of group differences between the 2022 and 2024 surveys
I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other individuals in the same department/unit and level of study (trainees only).	Decrease of 7% (78% to 71%)	Increase of 8% (13% to 21%)	In both years, trainees who experienced mental health conditions in the previous year were more likely to disagree / less likely to agree. Differences related to LGBTQI2S+ identity and first-generation status were found in 2022 but not 2024. Differences related to the number of equity groups identified in, race, and citizenship were found in 2024 but not 2022.
I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other trainees who work under my supervisor (trainees only).	Decrease of 7% (86% to 79%)	<5 in 2022, 13% in 2024	Group differences not analyzed in 2022 due to too few respondents who disagreed.
I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department/unit and type of position (staff only).	Decrease of 9% (77% to 68%)	<5 in 2022, 13% in 2024	Group differences not analyzed in 2022 due to too few respondents who disagreed.
I have similar access to advancement opportunities (e.g. publicity, promotions, funding, publications) as other individuals in the same department/unit and type of position (staff only).	Decrease of 6% (65% to 59%)	Decrease of 1% (16% to 15%)	In 2022, women were less likely to agree. The opposite direction of gender difference was found in 2024. In both years, respondents who are/were first-generation students were less likely to agree compared to staff who are/were not first-generation students. The gap grew from 13 percentage points in 2022 to 17 in 2024. Differences related to race were found in 2022 but not 2024.
I have similar access to training opportunities (e.g. conferences, workshops) as other individuals in the same department and rank (faculty only).	Increase of 10% (86% to 96%)	<5 both years	Group differences not analyzed in either year due to too few respondents who disagreed.
I have similar access to advancement opportunities (e.g. funding, publications, publicity, promotions) as other individuals in the same department and rank (faculty only).	Increase of 6% (73% to 79%)	14% in 2022, <5 in 2024	Group differences not analyzed in 2024 due to too few respondents who disagreed.
I am satisfied with my balance of research, teaching and administrative work (faculty only).	Decrease of 26% (65% to 39%)	Increase of 9% (20% to 29%)	In both years, women were less likely to agree compared to respondents who are not women. While agreement dropped overall, the gender gap shrunk from 17 percentage points in 2022 to 13 in 2024. Differences related to the number of equity groups identified in, caregiving, and age were found in 2022 but not 2024.
My balance of research, teaching and administrative work is similar to that of others in the same rank and department (faculty only).	Increase of 12% (50% to 62%)	Increase of 8% (27% to 35%)	In both years, women were less likely to agree compared to respondents who are not women. The gap shrunk from 23 percentage points in 2022 to 10 in 2024.

Harassment and discrimination

The proportion of respondents who indicated experiencing harassment at least once within the McGill environment was 16% in 2022 and 21% in 2024. The proportion of respondents who indicated witnessing harassment at least once within the McGill environment was 25% in 2022 and 35% in 2024.

The proportion of respondents who indicated experiencing discrimination at least once within the McGill environment was 21% in 2022 and 26% in 2024. The proportion of respondents who indicated witnessing discrimination at least once within the McGill environment was 31% in 2022 and 35% in 2024.

In both surveys, sexism, racism, and religious intolerance were the forms of harassment/discrimination most frequently experienced. In both surveys, harassment/discrimination related to gender, race, religion, and sexual orientation were the most commonly witnessed. In 2024, observations of harmful conduct related to power dynamics were also noted.

In both surveys, higher prevalence of experiences of harassment and/or discrimination were found among LGBTQI2S+ respondents (25% in 2022, 32% in 2024), women faculty (48-52% both years), respondents aged 55+ (36-44% in 2022, 28-32% in 2024), and respondents who experienced mental health conditions in the previous year (26-31% both years). However, the pattern of these findings differs between years. In 2024, higher prevalence of both harassment and discrimination was observed among LGBTQI2S+ respondents, compared to harassment only in 2022. In 2022, higher prevalence of experiences among women faculty were observed across both harassment and discrimination, while in 2024 the gender difference remained only related to discrimination. Further, in 2022 only, higher prevalence of such experiences was also found among racialized faculty. In 2024 only, higher prevalence of such experiences was also found among trainees who are not Canadian citizens or permanent residents, staff who are not women, and respondents in the 45-54 age group.

In both surveys, the questions related to harassment and discrimination did not provide a time frame for the experiences and observations. The observations and experiences that participants indicate may have happened since the 2022 survey and/or before the 2022 survey. Therefore, the 2024 findings related to harassment and discrimination cannot be interpreted as a change from 2022 as some of the same past experiences and observations may be counted in both surveys. In addition, a change in the HBHL-affiliated population invited to the survey, and differences in who chooses to respond to the survey each time, may lead to past experiences of some individuals (including experiences prior to the HBHL surveys) being counted in one survey but not the other.