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As a toddler growing up in the Bronx, Courtney Reynolds repeatedly asked her Jamaican mom to read from a book about the human body. By age 5, she had a play doctor’s kit with a stethoscope to use to check her grandmother’s heart. By her mid-20s, Reynolds had completed a public health degree from Johns Hopkins, where she solidified her passion for pursuing a pediatric medicine career.

It was not until she attended the Young, Gifted, & Advancing conference in November 2019 at Georgetown University, though, that the first-generation American recognized the toll of her educational trajectory. “I didn’t realize as a student of color in higher education how much weight I was carrying with me,” said the third-year medical student at Georgetown University, at the event sponsored by The Steve Fund and the university. “During the morning’s talks, I felt the tension all leave me. It was a relief to hear someone say, for me, that I carry an extra burden; it was empowering to hear that said out loud – that I had been bending and breaking to fit in.”

That revelation came to Reynolds during the Nov. 1 conference in which hundreds of attendees heard from experts on issues affecting the mental health and well-being of students of color and steps to overcome challenges. Gordon Bell, a graduate of Harvard College and the Graduate School of Business, served as the master of ceremonies for the D.C. conference, which emphasized support for marginalized students in accomplishing their educational goals and graduating.

Dr. Annelle Primm, senior medical director, presents on The Steve Fund’s Equity In Mental Health Framework
“There is a direct connection between mental health and students’ abilities to persist and succeed, whether it’s success in academics, work-related success, or success in your private life,” said Anuja Khemka, executive director of The Steve Fund, about the value of the eighth conference of its kind that the non-profit has spearheaded. “We at The Steve Fund look to find and provide resources so students of color can ultimately have greater academic gains and life achievements.”

Dr. Annelle Primm, senior medical director of The Steve Fund, added that, “This event in collaboration with President Dr. John DeGioia and his team at Georgetown University is a wonderful example of how The Steve Fund and universities delve into common themes such as belonging and examine the impact of campus climate and other factors on the mental health of students of color, towards the goal of developing and implementing interventions.”

Macro and Micro Climates: Challenges to and Protectors of Mental Health for Students of Color

The morning’s keynote about Challenges to and Protectors of Mental Health provided an opportunity for the mental health researchers, scholars, students, mental health practitioners, and administrators present to understand macro and micro threats to the well-being of marginalized students. Dr. David Rivera, a Steve Fund advisor, led the keynote discussion with Dr. Sherry Molock, a pastor and an associate professor of clinical psychology at The George Washington University.

Rivera recap a model of the factors affecting students’ well-being, including biases in the community surrounding a higher education campus, and national conversations around discrimination. He also noted that, on campus, marginalized students have traditionally carried the burden of addressing their well-being. “What we’ve been doing is inviting them into these institutions that don’t have the systems and policies and procedures embedded to provide the adequate, and appropriate, supports for our students of color, for our women, for our...
LGBTQ students, for our students with disabilities,” said Rivera, who is an associate professor of counseling education at the Queens College-City University of New York.

Consideration of the mental health needs of marginalized students should reach beyond educational campuses, Molock noted, citing students’ life off campus during breaks and otherwise. In addition, she noted the impact of “a political climate right now where there’s a lot of rhetoric that is very polarizing and really makes students scared.”

Among the stories the speakers shared were those about students who are afraid that they, or a loved one, will be deported, and students who have had to distance themselves from family members due to ideological or political differences since the 2016 election. However, Rivera noted one benefit of the greater national conversation on bias; it has meant some instructors have become more open about their marginalizing beliefs, which offers opportunities for schools to educate them.

For instance, Molock once advocated for a graduate student whose advisor may have been thwarting her training as a therapist because of her accent (Rivera’s dissertation research suggested that Latinos are more likely to be viewed as unintelligent due to their accents). Molock helped the student become comfortable with Molock addressing the unsupportive behavior with the advisor; the student went on to earn the most prestigious externship of her graduating class. “What would have happened to that student if she didn’t have a good support system?” Molock asked.

Microaggressions (i.e., indirect, subtle, or unintentional statements or actions of discrimination against members of a marginalized group) can have a cumulative toll as well. Rivera referenced research that suggests stress from multiple microaggressions could short-circuit students’ well-being or academic engagement. He also defined macroaggressions as being organizational policies or procedures that discriminate against a large group of people.

Molock noted that expecting students to accommodate a culturally unresponsive campus is akin to asking someone at a lynching to run faster from a mob, rather than addressing the mob mentality. “[Students are] watching very carefully not just what we say, but what we do,” Molock said. “And part of their anger and frustration is, we don’t follow up on what we say.”

Molock added that more and more students are arriving at higher education institutions with identified mental health care needs. Yet, she said, “We have the same numbers of counselors trying to see three times the number of students, which can’t work. So, we have to change systems — we have to be more preventive.”

Among other recommendations the speakers shared were:

- Learning to be culturally humble, which Rivera defined as not assuming anything about a students’ worldview, including how they approach mental wellness, or career goals.
- Helping marginalized students understand what they can control, such as the way they process a microaggression, and the choice to support efforts to build a healthier campus environment.
- Developing culturally competent campuses to foster students’ sense of belonging. “You really have to
look at this systemically,” Molock said. “What’s going on in the environment that makes students feel not welcome, that makes them feel they don’t matter? What goes on that makes them feel like they’re guests — nicely treated guests — but still guests? And the way that we know that is [true is], their culture is not reflected in the institutional culture.”

• Teaching faculty and staff to discuss mental health, such as openly talking about dealing with their own mental health challenges, and discussing recent bias incidents that students may need to have addressed.

“It sends a message when you don’t address something head on that you know is harming somebody,” Rivera said. “If … you remain silent, it often communicates complicity … . So, we kind of need to be more alert about having these conversations and dialogues, which is part of the reason The Steve Fund exists.”

Response Panel

Dr. Adanna J. Johnson, Georgetown’s associate vice president for student equity and inclusion, then led a responsive discussion of the Keynote. Tawara Goode, an assistant professor in the pediatrics department of Georgetown’s Medical Center, clarified Rivera’s earlier definition of cultural competence: “It’s not that we need to know everything about one’s bigger culture. That’s not it. It’s really about, how do we take culture and language into consideration in the work we do for and about students, and staff as well.”

Goode noted that cultural competence needs to be woven into every area on campus, including the way research is conducted, and community engagement. She pointed out that culturally related policies do not replace buy-in by campus personnel, but provide a “way to begin to address the differences that we struggle with in a systematic way.”

Panelists also discussed the disconnect some students of color experience with one-on-one therapy approaches, which Rivera had noted in the earlier Keynote diverge from approaches in collectivist communities. Regarding students’ discomfort with counseling, Dr. Daniel Phillip, a former Georgetown staff psychologist, asked, “How do we normalize that and reduce the stigma associated with help seeking? What does it mean for me to be a black person and be sitting across from a person who’s also a student of color, talking about some of these [personal identities] where, in our communities, it can be stigmatized, or even, truly, met with violence. I think about not racial identity, but the other intersectionalities for queer students; queer students of color have a particular, multi-minority stress experience that impacts how they access care.”

Other ways that the panelists noted marginalized students can be supported included:

• Addressing discrimination in student-occupied areas near campus, and following through with tangible steps after an act of bias occurs. Panelist Jay Yang, chair of Steve Fund’s Youth Advisory Board, shared these questions to guide follow-up approaches: “What are you doing afterwards to ensure that doesn’t happen again, and [about] ensuring that the students are feeling safe, that they belong, and that they can thrive and flourish on your college campus?”

• Showing you care by asking marginalized students about their mental health. As Goode noted, “You don’t have to be an expert in mental health to be able to reach out, engage, and be able to make a referral.”

• Helping students consider their options for responding to a personal experience of bias. “Emotionally and mentally, some students may not be at that level to be
able to advocate for themselves, to be empowered to speak...” Yang said. “That’s when you can step in, talk to the student, and be like, ‘Where do you feel most comfortable in this step and procedure? Do you want me to go ahead and advocate for you, or do you just want to go ahead and process this?’ ”

Over lunch, attendees who had traveled from as far away as Michigan and Texas had time to review the morning’s offerings. For Carolina Regalado, a master’s degree student in public health at Grand Canyon University, the idea of all students deserving mental health support struck a chord. “Being a first-generation college student myself, mental health was kind of taboo,” said Regalado, who grew up in rural Oregon of Mexican descent, and works between semesters with underserved Hispanic high school girls through a Phoenix, Arizona, tech program. “A lot of them come from trauma, so it’s really important for me to provide them with tools that I didn’t have growing up.”

Cholanayakanahalli (C.R.) Vinayaka, an assistant professor of bioinformatics, said that he works with many international students in Georgetown’s biochemistry department. Previously, he only knew about their psychological struggles after he heard that a student had returned home. The conference meant he could do more than just feel sad about that, he said. “I now know all the resources I can send students to.”

The afternoon offered breakout sessions that focused on faculty or staff engagement, graduate student isolation, mental health approaches at locations such as community colleges, or specific aspects of mental health for students of color. Among the first series of breakouts about institutional topics was one on The Classroom Experience and instructors’ influence on learning by marginalized students.

Dr. Edilma Yearwood, an associate professor of nursing at Georgetown, moderated the discussion that emphasized the need to take the mental, physical, emotional, and spiritual well-being needs of students of color in mind. The panelists emphasized cultural competency in the classroom in order to increase students’ connection to the learning experience. Goode provided a list of factors that influence someone’s cultural perspective and experiences of educational bias, which affect their capacity to participate intellectually in a learning setting: race, ethnicity, socioeconomic status, gender identity and expression, age, physical disability, mental illness, religious or faith beliefs, English as a second language, and academic preparedness. An individual’s classroom experiences are also influenced by outside factors, she noted, including the historic climate toward marginalized identities on a campus.
Dr. Debra Roberts, chair of the psychology department of Howard University and founding director of their Cultural Socialization Lab, said that part of an instructor’s job is to offset the impact of “psychosocially toxic environments” in academic settings by understanding the student’s perspective. Cultural competence, she noted, requires effort and “is different than just using politically correct terms or sort of giving superficial … voice to where you think somebody is coming from, but really just understanding what is important to that person from a cultural perspective.”

A culturally responsive teacher, for instance, may incorporate multiple approaches to learning, such as group projects in a class with many students from a collectivist culture, Goode said. Instructors can also create behavioral boundaries that ensure everyone feels safe and is heard. Yearwood echoed that advice, saying, “I will not tolerate disrespect in the classroom. But I will tolerate a level of … disagreement — as long as it is respectfully done and as long as people can call each other out in a supportive, helpful way.”

As part of valuing all students, Yearwood recommended helping students develop listening skills and an ability to assume best intentions of others. “Check it out with the person who said something that may have been offensive,” she said: “Here is what I heard you say; can you help me understand what you meant by that?”

Yearwood, who teaches classes of 30 students or less, also recommended learning all students’ names, giving hugs as allowed, and providing a mental health check-in during class. “One of my first questions [during class] is, ‘How is everybody doing?’ … I am looking at faces and I know your name, so I am going to say, ‘Joe, you do not look so happy today. What is going on?’ ”

The panel also covered the Engelhard Project, which Georgetown faculty have used since the mid-2000s. In this approach, mental health topics are incorporated into non-traditional lessons, such as a math lesson about calculating body mass that incorporates information from a visiting psychologist about how alcoholism develops. Such discussions, Yearwood noted, help improve students’ comfort level with accessing mental health services on campus.

Among the other six breakouts was one on Place and Proximity that Jessica Pierre-Chery, a psychologist at a Massachusetts boarding school, attended. She said the session “gave me creative ideas about things to talk with my colleagues about; we often wait for students to come to us, but we need to do more outreach to them, and there’s room for more interactions with colleagues on campus.”

In a session about The Residential Campus Climate, topics discussed included the need to think about how mid-week Move-In programs for students exclude working parents, and ways to “flip the narrative” and consider the assets that students of color bring to campuses, such as their emotional agility.

Breakouts about Peer Connections

Given that students are more likely to open up to peers, a session about Student Peer-To-Peer counseling models was among seven late-afternoon breakouts. Kenna Chick, a Georgetown senior who directs one such counseling option, moderated the panel, which included Dr. Glenn Albright, who oversees research about Kognito.

Kognito is a virtual reality program that teaches how to role play and discuss mental health needs with peers. Users converse with an emotionally responsive virtual “friend” to prepare for real-life counseling. “A student is in an excellent position to identify when a fellow student...
is struggling because they’re seeing that person over a period of time,” Albright noted. “They can see changes in terms of being isolated or depressed, missing classes and so on, and declining academic performance.”

The Kognito user receives feedback and opportunities to redo their behavior in a low-pressure setting that enhances the development of counseling skills, said Albright, a clinical psychologist and associate professor at Baruch College - The City University of New York. “They become more prepared and self-confident in recognizing a fellow student in psychological distress, talking with them, and making a referral,” he said, based on data that includes 6,000 Latinx students.

As a side benefit, he noted, Kognito-trained students are more likely to seek help for mental health challenges themselves. And, like the direct peer counseling programs discussed, Kognito produces more referrals to campus counseling services.

In-person support programs that student panelists discussed included:

- Georgetown’s Project Lighthouse, which Chick presides over. Students developed the peer-to-peer counseling program with input from the university’s Counseling and Psychiatric Services office (which teaches student participants) and the Division of Student Affairs. Among the skills student counselors learn is when to refer a case to EMS or other support, and how to identify students who are actively considering suicide and need immediate intervention, versus passive ideation.

- University of Virginia programs developed under the auspices of Project Rise, which is supported by the university’s Office of African-American Affairs. As part of the program initially developed for peer advisors in that office and expanded to all students in 2014, volunteers undertake two classes and are supervised by the office’s Associate Dean, Dr. Michael Mason. A licensed clinician who directs the project and is overseeing its expansion to include assisting black athletes, Mason also developed and oversees student training. The peer-to-peer approach students provide, panelist Seher Raza noted, gives troubled students a way to get their foot in the door if they are apprehensive about counseling.

In addition, Raza said, just having a place to discuss concerns with like-minded students is beneficial: “Feeling like you have that safe space where you can relate to other students — I think that’s really important, that inclusivity, when you’re looking at students of color and mental health.”

Under Project Rise, Raza developed a counseling option called Write Direction. With it, a student leaves a peer counseling session with a prompt about a topic to write about regarding goals for moving forward. Raza, who graduated in 2017, said early data suggests that Write Direction has “helped [students] increase GPA and in reducing stress.”
Other Project Rise programs were discussed by Jonea Abouissoussi, such as one that counseled black females about navigating identity-related difficulties on campus. Abouissoussi developed another subprogram, Success at SEA, which addresses the social, emotional, and academic concerns of seniors about life after university; the emotional aspects were supported through the program Reorientation, for instance, which helps university seniors consider topics such as how to navigate the workforce as a person of color.

An aim of Project Rise, Abouissoussi said, is helping overcome stigma within the black community about seeking help with mental health needs. “Through raising awareness and just educating the student population,” she said, “we were able to break those barriers [to seeking care].”

Panelists also outlined how campus counseling centers addressed the increased number of referrals brought about by their efforts. Chick noted that Georgetown’s counseling options are short-term, and students are often sent to community services. For those who need financial help to do so, Georgetown established a Student Mental Health Fund. At the University of Virginia, referrals are made to community providers such as Charlottesville’s Women’s Center, which offers free counseling.

Chick closed the breakout by reiterating the value of peer-to-peer approaches: “There are so many barriers that students of color face when it comes to accessing services in the first place. And so alternative means like peer supports are definitely playing a huge role.”

In one of six other afternoon breakouts, Religion and Spirituality among students of color in higher education was discussed. The value of interfaith collaborations and being available outside of traditional church hours was noted by Rev. Ebony Grisom from Georgetown. Other speakers pointed out that a student praying alone a lot could indicate that they are experiencing a mental health challenge. On the flip side, noticing this tendency is something that spiritual support staff can provide as adults who “consistently have eyes on students,” Molock said.
Final Reflections

In the closing session, Khemka of The Steve Fund brought the conversation full circle by reminding attendees why addressing marginalized students’ mental health needs matters. Students of color represent 45% of pupils today at universities and colleges. Of those students, she noted, a 2017 survey by Nielsen suggests that less than one third — 28% — reported feeling that their campus is inclusive. In addition, a Harris poll of 1,000 college freshmen in 2015 revealed that 51% of black students reported feeling overwhelmed most of the time and 75% reported keeping feelings about difficulties with college to themselves.

Khemka then described a program unveiled in November 2017 by The Steve Fund and the JED Foundation to address such mental health stressors: the Equity in Mental Health Framework, which provides ten recommendations schools can implement to support student-of-color mental health.

Khemka recapped several recommendations of the Framework, which is currently being evaluated as a pilot project at diverse universities and colleges nationally. The first recommendation, she noted, is a priority, and involves identifying and promoting the mental health and well-being of students of color as a campus-wide priority. “It has to start at the top,” Khemka said, referring in part to schools’ strategic plans.

Engaging students to provide guidance and feedback on their needs and wishes regarding mental health and emotional well-being is the second recommendation. As Khemka asked, “How can you get their voices [included] to inform campus programming? You can do this in several formats: One is through creating safe spaces on campus where students can go and have the courageous conversations we want them to have, and really tell us what they need. The second way to do this, which The Steve Fund already has, is through doing [student] advisory boards on campuses.”

Buzz about the value of the Equity in Mental Health Framework led to developing that toolkit. Moreover, general interest has led to nearly 5,000 downloads of the Framework and the accompanying toolkit from www.steefund.org. “The problem we’re trying to solve is great,” Khemka said, “but it is exciting to know that many administrators, school counselors, student groups, app developers, and so many others, are invested in working together to make the greatest impact.”

By Barbra A. Rodriguez
The Steve Fund is partnering with Crisis Text Line to spread the word amongst young people of color on using text messaging as a means to provide crisis counseling. Through this partnership, we recruit, select, and train young people of color to become Crisis Counselors with Crisis Text Line and educate the public that there is an easy-to-use service in times of crisis.

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