

Race and Ethnicity in Higher Education: 2020 Supplement  
INVITED ESSAY



**An Early Warning in the Academy: Mental Health and  
Racial Equity in Graduate Education**

Julie Posselt

## Race and Ethnicity in Higher Education: 2020 Supplement

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This chapter is part of a larger report by the American Council on Education (ACE) titled *Race and Ethnicity in Higher Education: 2020 Supplement*, which follows ACE's 2019 release of *Race and Ethnicity in Higher Education: A Status Report*. These reports, along with their accompanying microsite, provide a data-informed foundation for those working to close persistent equity gaps by providing a comprehensive review of the educational pathways of today's college students and the educators who serve them.

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Visit [www.equityinhighered.org](http://www.equityinhighered.org) to learn more about the project and to download the full report, figures, detailed data tables, and other resources on race and ethnicity in higher education.

The screenshot shows the homepage of the ACE website. At the top left is the ACE logo with the text "American Council on Education" and "RACE AND ETHNICITY IN HIGHER EDUCATION". To the right of the logo is a navigation menu with links for HOME, ABOUT, INDICATORS, DATA SOURCES, DATA TABLES, and RESOURCES. Further right are social media icons for Twitter, Facebook, LinkedIn, YouTube, and a search icon. The main content area features a large image of a smiling Black woman with a backpack. Overlaid on the image is a "Featured Findings" box with two statistics: "40.1% of Associate Degrees were Earned by Students of Color" and "31.5% of Bachelor's Degrees were Earned by Students of Color". Below the image are two buttons: "EXPLORE THE FINDINGS" and "DOWNLOAD THE REPORT". At the bottom left, there is a section titled "Explore the Findings" with a short paragraph of text. At the bottom right, there is a blue box titled "NEW: IDEAS AND INSIGHTS" with the text "View essays, videos, podcasts, and more >" and a speech bubble icon.

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# An Early Warning in the Academy: Mental Health and Racial Equity in Graduate Education

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Racial and ethnic equity in graduate education has taken on new prominence within higher education as students of color with bachelor's degrees are enrolling in graduate education at rates similar to or in some cases even higher than that of college graduates overall (Espinosa et al. 2019). However, this growth is uneven. Black, Latinx, Native American, and Asian American students of Southeast Asian origin are overrepresented in professional master's degree programs in fields like education and social work (Posselt and Grodsky 2017), while they remain severely underrepresented in many PhD programs and fields of study. For example, in 2017, in 20 science, technology, engineering, and mathematics (STEM) subfields, not a single PhD was awarded to Black students (National Science Foundation 2018).

At the same time, a study in *Nature Biotechnology* found that graduate students are more than six times as likely to experience depression and anxiety as compared with the general population (Evans et al. 2018). And this reality is noticeable to administrators: nearly two-thirds of deans agreed that today's graduate students struggle more with mental health compared with five years ago, according to a survey by the Council of Graduate Schools (Okahana 2018). Graduate students are a relatively vulnerable population within universities, and graduate students of color experience vulnerability on multiple levels. They rarely have access to the infrastructure of support services that undergraduate students have, for example, and social dynamics within graduate learning environments that exacerbate mental health risks are felt most profoundly by minoritized students.

This combination of persistent underrepresentation and threats to the well-being of those who do enroll are consequential for both current students and the future professoriate. This is no small matter when Black, Latinx, and Native American full-time faculty collectively represent only approximately 11 percent of the professoriate (Espinosa et al. 2019). Improving the mental health of graduate students of color will not only create healthier campus communities, but can be part of a comprehensive set of efforts to create a more diverse and inclusive professoriate.

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## Social Dynamics of Student Well-Being

The same qualities of learning environments that maintain inequalities in enrollment also affect the well-being of those who do enroll. A robust conception of racial equity needs to therefore consider not only who is present and absent, but also their well-being, and attend to sociocultural dynamics in academe that affect both access and success. Competition for admission, recognitions, and opportunities, for example, may look neutral to some observers,<sup>1</sup> but the logics, rules, and effects of many academic competitions disproportionately harm racially minoritized members of our community (Posselt 2016).

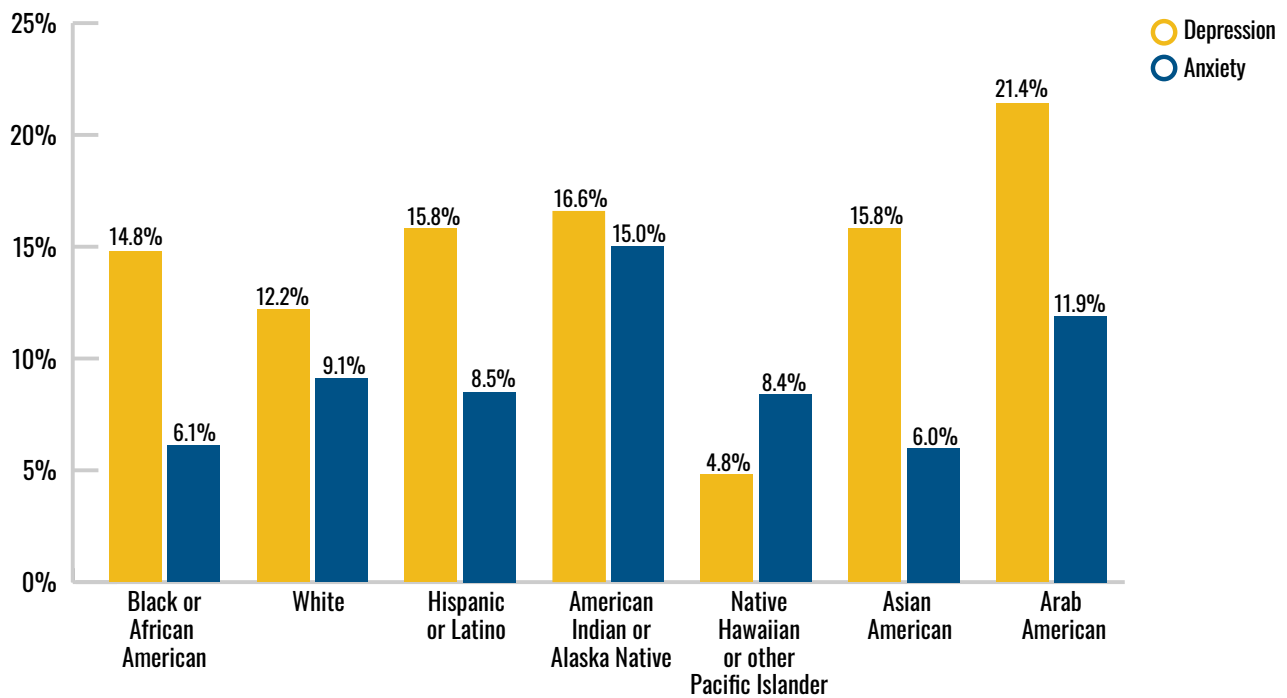
To understand how to create more inclusive research and learning environments, I analyzed five cohorts of graduate and professional student data from the Healthy Minds Study (HMS) (2018). I specifically focused on social dynamics within the academy and their relationships with depression and anxiety for racially minoritized students. With this multi-year, multi-institutional, multi-disciplinary data, I focused on three dynamics that affect all students, but perhaps minoritized populations most acutely: discrimination, competition, and support. These dynamics are forces in the higher education system—a system that produces not only knowledge, but also the next generation of professors. Failure to name or engage with these forces contributes to continued racial inequities in both participation levels and overall well-being.

<sup>1</sup> Inequitable distributions of access and success in these competitions can seem neutral in appearance because our own socialization has desensitized us to them, because they are so entrenched that we take them for granted, or because they personally benefit us.

The data represent over 20,000 graduate and professional students across 89 institutions and a variety of fields of study (Healthy Minds Network 2018). One strength of the survey is its clinically validated measures of depression and anxiety.<sup>2</sup> I looked at the prevalence of depression and anxiety by race and ethnicity and across graduate fields of study. I also analyzed how experiences with discrimination and competitiveness associate with depression and anxiety and how these relationships varied by social identities and the availability of support from family, friends, and faculty.<sup>3</sup>

Figure 1 displays the prevalence of depression and anxiety among graduate and professional students by race and ethnicity. The highest prevalence of depression was observed among Arab American, American Indian, and Asian American graduate students. Of all groups, Arab Americans have the highest risk of a positive screen for depression.<sup>4</sup> In general, students from minoritized groups had a higher prevalence of depression than White students.

**Figure 1: Prevalence of Depression and Anxiety Among Graduate and Professional Students, by Race and Ethnicity**



Source: Healthy Minds Network, Healthy Minds Study, 2018

## Discrimination: The Most Potent Risk Factor

We know that everyday forms of discrimination mean that graduate students from minoritized backgrounds face mental health threats above and beyond those faced by White students (Lui and Quezada 2019). Indeed, among the many risk factors I analyzed in the HMS data—including social identity characteristics, fields of study, and health behaviors—the single most potent risk factor for depression was frequently experiencing racial discrimination. Black students are more likely than

2 Clinically validated measures using the Patient Health Questionnaire are superior to survey items on subjective well-being, which is an important but less-reliable measure.

3 Analyses included simple descriptive analyses, hierarchical cluster analyses, and multivariate regression analytic methods. Unlike the hierarchical cluster analysis and other descriptive analyses, which capture prevalence, the multivariate models estimate the odds that students in a particular field of study will have a positive anxiety or depression screen. For full details of the methodology, please contact the author.

4 A notable finding because the small number of Arab American students in this sample (n=385) depresses the likelihood of finding a significant relationship.

any other racial and ethnic group to report frequent discrimination. Students who report they “often” experienced discrimination over the last year were 2.3 times more likely to report they were depressed compared with students who report they “never” experienced discrimination.<sup>5</sup>

Discrimination is an even stronger risk factor for anxiety. Compared with those who never experience racial discrimination, graduate students who often endure discrimination have a three times higher risk of reporting clinical symptoms of anxiety. The risk is nearly two times higher for those who experience it sometimes than for those who never do. These findings are consistent with other recent studies: in a national sample of African American<sup>6</sup> and Latinx graduate students, the Council of Graduate Schools found a little over 60 percent reported frequent or occasional worries about their mental or physical health (Sowell, Allum, and Okahana 2015). A 2011 study summarized this finding in a simple question—“Am I going crazy?”—the refrain Black and Latinx doctoral students expressed as they sought to make sense of racial microaggressions encountered in predominantly White graduate programs (Gildersleeve et al. 2011).

## Competitiveness: Creating Producers

Graduate education prepares students for careers where career survival may be determined by intellectual output, which is tied to research productivity and the size and prominence of one’s networks, to name two factors. The overt and subtle competitions for resources that enable this output (e.g., competitions for funding, faculty attention, and special training opportunities) have become an aspect of the “professionalization process.” The relationship of this process to graduate student well-being merits closer attention (Margolis and Romero 1998). One recent survey found that perceived competitiveness was the number one reason that graduate students cited for *not* pursuing a career as a professor (Russo 2011).

In other words, intense competitiveness, while emotionally challenging to most graduate students, is especially salient to the mental health of minoritized students.

Furthering this illustration, graduate students in HMS who described their classes as “very competitive” were more likely to screen positive for depression and anxiety than those who saw their classes as less competitive.<sup>7</sup> This pattern is consistent with other research on graduate students (Hyun et al. 2006), and it intersects with race and ethnicity. Specifically, in a recent study, we found that undergraduates who identified as Black, Latinx, and Asian and who perceived their classes as very competitive also have significantly higher probabilities of anxiety and depression than students from those same groups who did not experience classes as highly competitive (Posselt and Lipson 2016). In other words, intense competitiveness, while emotionally challenging to most graduate students, is especially salient to the mental health of minoritized students.

## Support: A Critical Buffer

Unsurprisingly, social support provides a buffer to threats to well-being and is also a well-established resource for persistence to degree completion. Family, friends, and faculty present potential sources of support for graduate students, so I examined the interactions of each of these forms of support with discrimination and competitiveness. I hypothesized strong support would mitigate the mental health risks that come with experiencing either frequent discrimination or intense competitiveness. Weak social support, on the other hand, might be associated with even higher probabilities of mental illness—either as a primary driver or an effect of the self-isolation that can come with depression and anxiety.

And indeed, among students who report the lowest level of support from friends, frequent racial discrimination is associated with an increase in the probability of screening positive for anxiety and depression—over and above the risks that already

<sup>5</sup> All else in a multivariate model held equal.

<sup>6</sup> Black and African American are used interchangeably.

<sup>7</sup> Perceived competitiveness in undergraduate classes is also associated in Healthy Minds Study data with significantly higher probability of screening positive for anxiety and depression. Students had 67 percent higher odds of screening for anxiety and 34 percent higher odds of screening for depression.

come with frequent racial discrimination.<sup>8</sup> Similarly, graduate students reporting the lowest levels of family support have an increase in the probability of screening positive for both anxiety and depression when they experience frequent racial discrimination.<sup>9</sup> However, at the highest levels of family support, the mental health risks of frequent racial discrimination are significantly reduced. These findings suggest that support from family and friends may protect the mental health of students experiencing racial discrimination.

What does this support look like in practice? A recent study looked at what facilitated Black men's persistence to a PhD in engineering and found that social supports within the Black community are critical. Family members, faith-based communities, and faculty mentors "can reduce the strains that students experience in an academic environment. Furthermore, they can foster behaviors that help students respond to difficult circumstances in productive or adaptive ways" (Burt, Williams, and Palmer 2019).

## Implications for Higher Education Institutions and Faculty

Students' interest in pursuing academic careers decreases as their doctoral programs continue (Fuhrmann et al. 2011; Sauer- mann and Roach 2012), and those declines are greater for Black, Latinx, and Native American graduate students. Women who identify with these three racial/ethnic groups show the lowest interest in faculty careers by the end of their graduate program (Gibbs et al. 2014).<sup>10</sup> Preserving—even enhancing—desire for academic careers among graduate students from groups who are also underrepresented in the professoriate will take a variety of strategies. Among them, institutional leaders should attend to social dynamics that both undermine interest and compromise well-being. Administrators and faculty members can work together toward equity and improved mental health for their graduate students in the following, specific ways:

**Document and disrupt patterns of discrimination.** At a basic level, academic institutions need structures to document patterns of mistreatment and discrimination that students of color experience. Schools and colleges without an ombudsperson in place should consider appointing someone to this role. Second, although graduate programs may not be able to assert control over discrimination that students experience outside the program or university, they should act to ensure protection from bias and discrimination in labs, classrooms, research sites, and faculty offices. Institutional policy should hold faculty accountable to one another, their institutions, and their students for eliminating forms of discrimination that are within their control.

**Select and train faculty for support.** Research shows that most faculty need a more nuanced understanding about the varied ways that racism manifests, and Healthy Minds data revealed the importance of raising awareness about the ties between discrimination and graduate student health. Thus, developing faculty competencies for serving diverse students—competencies that Twine (2004) and Harper and Davis (2016) refer to as *racial literacy*—should also include developing their ability to initiate discussions about well-being and mental health. Examples of this practice are in the current effort by the California Consortium for Inclusive Doctoral Education and the NSF-INCLUDES Inclusive Graduate Education Network that provide STEM faculty with professional development opportunities in discussing race and in mentoring with an eye to graduate student well-being.

Faculty relationships are not only a critical site of intellectual development and professional sponsorship for graduate students; they also make students' connection to the institution personal. Yet 70 percent of respondents in the Healthy Minds survey expressed unwillingness to discuss mental health with their advisor, with rates higher for students of color. Graduate education must destigmatize mental health, and this begins on campus, in individual programs, and with faculty.

Institutional policy should hold faculty accountable to one another, their institutions, and their students for eliminating forms of discrimination that are within their control.

8 Ten and 12 percentage point probability increase.

9 Fifteen percentage point probability increase.

10 The implications of this research on faculty hiring practices and other aspects of the professoriate are explored in Kimberly A. Griffin's essay "Redoubling Our Efforts: How Institutions Can Affect Faculty Diversity," in *Race and Ethnicity in Higher Education: A Status Report* (Espinoza et al. 2019).



**Interrogating a competitive culture.** In addition to eliminating structural discrimination and improving the capacity of faculty to support mental health, we need to question ingrained cultural norms of the academy that have a disparate impact for students of color. Overlaid on everyday experiences with discrimination, graduate students of color experience academia's culture of competitiveness as racialized on multiple dimensions. It can threaten their sense of belonging, raise doubts about their sufficiency, and ultimately prompt impostorism, or the feeling that they are a fraud—all of which are negatively associated with well-being and persistence (Posselt 2018; Cohen et al. 2009; Field, Duffy, and Huggins 2013; McClain et al. 2016). Mentoring relationships may be one site to shift these perceptions; at their best, structured mentoring can both acquaint graduate students to existing professional norms and become a setting in which norms are negotiated, reconciled, and even reimagined toward creating a more equitable, diverse, and inclusive academy (Antony 2002; Antony and Taylor 2000; Gopaul 2011).

These recommendations—addressing discrimination, expecting racial literacy from faculty, and taking a step back to question whether academic norms serve the health of our communities—are three actions higher education institutions can take now. Alongside strengthening structures of support for students who are struggling and creating more supportive environments for the next generation of students, systemic change that reduces the odds that students of color will disproportionately struggle is nothing less than an equity imperative.

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