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# Culture in Mind: Fostering a Sense of Belonging for Students of Color in Wellness-Affiliated Spaces

Mandy Mekhail

University of San Diego, amekhail@sandiego.edu

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Culture in Mind:

Fostering a Sense of Belonging for Students of Color in Wellness-Affiliated Spaces

Mandy Mekhail

University of San Diego

## **Culture in Mind:**

### **Fostering a Sense of Belonging for Students of Color in Wellness-Affiliated Spaces**

#### **Abstract**

The purpose of this study was to bridge the gap between students of color and mental health resources at a predominantly white institution. Previous research demonstrates that negative mental health outcomes are positively correlated with students who feel a lack of belonging while on campus. These negative outcomes are felt more pronouncedly by students of color. Furthermore, students of color are shown to underutilize mental health resources relative to their white-identifying peers. Utilizing my positionality as a person of color working within a wellness office, I worked with students of color, wellness professionals, and multicultural professionals to ask what more can be done to serve students of color. Through surveys, interviews, and interactive activities, we found that increased and intentional collaboration between wellness and multicultural services is needed. Further, it was found that increased visibility, relationship-building, and co-created practices with wellness staff helps students connect with wellness services.

#### **Introduction**

If asked to recount the things I was *taught* in my elementary school classroom, I could list numbers and figures, book reports and historic events. If asked to recount the things I *learned* in elementary school, however, I would remember that my frizzy, unruly hair earned more stares than compliments and that my occasional stutter invited more belittling smiles than kind ones. I would recall the shame I felt for eating lentils in the presence of peers who had never seen something so foreign. I would recall the shame I felt for being different.

Thoughts like these plagued me relentlessly from about the age of 10, the age when I first began to realize that laughing felt like an act of force rather than an act of nature. Every day was an experience of fear. Every second that passed felt like was I under a microscope, with everyone able to see me, flaw by flaw, down to the very core of my being. Though I didn't know it at the time, I was struggling with Major Depressive Disorder, joining my parents, grandparents, and four aunts and uncles who were also diagnosed.

In high school, I learned to brave the world with a smile as my mask and laughter as my perfume. Despite being a bit timid, I was well-liked and known as kind, reliable, and overachieving by students and teachers alike. My friends were vibrant, charming, and passionate. Extracurricular after extracurricular filled my time and preoccupied my thoughts. Though my life sounded perfect, it rang hollow. For most of my life, depression was both my closest companion and my most closely guarded secret. Through the lens of Middle Eastern culture, mental illness was seen as both a weakness and at taboo. Before all else, my parents would stress to me the important of keeping this secret to everyone, even doctors. So for most of my life, I remained silent.

Different cultures possess differing relationships to the stigma associated with mental health and encounter different barriers when seeking to utilize mental health resources. All in all, research demonstrates that mental health services are underutilized by ethnic minorities both on college campuses and within the nation as a whole (Hwang & Goto, 2009; Museus, Yi, & Saelua, 2017; Ruzek, Nguyen, & Herzog, 2011). For students, feelings of belonging are positively correlated with increased academic success, retention rates, and positive mental health outcomes for student (Freeman et al., 2007). In contrast, a lack of belonging is positively correlated with poorer academics, retention rates, and negative mental health outcomes (Museus

et al., 2017). Students of color tend to experience greater feelings of isolation relative to those of their white-identifying peers (Pewewardy & Frey, 2002).

The University of San Diego (USD) is considered a predominantly white institution. The Huron study conducted on the USD campus in Spring 2017 demonstrated that “Belonging” and “Wellness” are two pillars upon which the University of San Diego must become further established (Huron, 2017). The negative effects of lacking a sense of belonging are likely to be experienced more intensely by students of color attending USD due to its status as a predominantly white institution (Pewewardy & Frey, 2002). Therefore, more work needs to be done to listen to the needs of students of color at USD in order to create a greater sense of belonging for students of color at USD especially in regards to using on-campus wellness resources and interacting with on-campus wellness professionals.

From a very early age, three of my most salient values have been those of inclusion, kindness, and respect. Growing up as a first-generation American and an old soul often left me feeling disconnected from my peers. At the age of 5, I can remember much preferring to talk to my classmates' parents than my actual classmates. While I had friends, I knew all too well what it felt like to be alone in a crowded room. As a result, I made it my purpose to do everything I could so that the people around wouldn't even happen to feel an iota of the pain and loneliness I encountered growing up. As such, I developed something of a gentle approach in my interactions with others in order to ensure that they knew that at the very least, one person made them feel like they belonged. As I grew older, my passion to help others became more explicit with mental health. With all this being said, it seemed natural to combine one of my identities--a student of color--with my values--inclusion, kindness, and respect--and my passion--mental health.

To accomplish this, I partnered with students of color, wellness staff, and diversity, equity, and inclusion staff through a variety of methods. With their help I was able to both ask and answer the following question: How can I work with pre-existing systems to better foster a sense of belonging for students of color in Wellness-affiliated spaces?

### **Background**

Research has demonstrated that students of color feel less of a sense of belonging relative to their white-identifying peers and suffer more negative mental health outcomes, lower levels of academic success, and decreased retention rates as a result. For example, the research of Freeman et al. (2007) indicated that a sense of belonging and academic motivation were positively correlated for college students, both for white-identifying students and students of color who were in their first year of college. However, no intervention was made or attempted to increase a sense of belonging in this study. In contrast, Hausmann et al. (2009) launched an intervention aimed at increasing a sense of belonging for first-year college students who identified as either white or black by placing a certain amount of students in a group meant to increase a sense of belonging. These students received letters of encouragement from university officials and were given free gifts to wear or use so as to identify more strongly with the group. The most interesting finding of this study, however, is that while students in the enhanced sense of belonging group reported feeling a greater sense of belonging on campus, black students did not (Hausmann, Ye, Schofield, & Woods, 2009). I hypothesize that such a momentary intervention cannot unravel years of lacking a sense of belonging as it relates to students of color in education. Moreover, the composition of these enhanced sense of belonging groups was predominantly white due to the composition of the survey respondents, which could unwittingly have created a microcosm of the effects of a predominantly white institution on students of color.

When researching the effects of a predominantly white institution on students of color, Pewewardy and Frey (2002) found that students of color were more likely to feel excluded, and label themselves as “inferior” in comparison to their white peers.

As previously stated, a lack of belonging also negatively impacts a student’s mental health, particularly the mental health of a student of color. Musesus et al. (2017) found that students of color not only felt less of a sense of collegiate belonging in comparison to their white peers, but also that students of color tended to exhibit lower levels of graduation and retention rates. They also noted that a lack of belonging contributes negatively to a student’s mental health which then negatively contributes to the student’s overall success in college (Museus, Yi, & Saelua, 2017). In a similar fashion, Hefner and Eisenberg (2009) found that students with minoritized identities tended to receive lower levels of social support relative to that of their peers in both frequency and quality. Students with lower levels of social support in regards to quality were also found to be at a greater risk to experience mental health concerns (Hefner & Eisenberg, 2009). Bernard et al. (2017) went a step further to suggest that the feeling of imposter syndrome that arose from a lack of belonging was the source of student’s malaise. In alignment with the researchers’ hypothesis, it was found that black women encountered more experiences of discrimination both on and off campus relative to their peers. In sharp contrast to their hypothesis, however, it was found that black women who felt less distress as a result of racially-charged discrimination actually experienced worse mental health outcomes than black women who felt more distress as a result of racially-charged discrimination (Bernard, Lige, Willis, Sosoo, & Neblett, 2017). I hypothesize that the students who exhibited less distress also tend to exhibit less help-seeking behavior, a tendency that is crucial to seeking mental health services in most cases.

On the whole, research has demonstrated that students of color utilize mental health resources far less than their white-identifying peers despite generally experiencing poorer mental health outcomes. Hwang and Goto (2009) found that Latinx and Asian American individuals are more likely to exhibit poorer mental health outcomes relative to their white-identifying peers, and hypothesized that the cultural values of these two groups reduce their tendencies to seek professional help. In accordance with this, Ruzek et al. (2011) found that Asian American students were less likely to exhibit signs of distress if they possessed European values, meaning that they possessed greater levels of acculturation; moreover, it was found that these students were more likely to seek professional mental health treatment as needed. Conversely, Asian American individuals who maintained higher levels of enculturation--that is, the learning of one's own culture--were less likely to seek professional mental health treatment despite being more likely to exhibit higher levels of distress (Ruzek, Nguyen, & Herzog, 2011). The researchers' hypothesized that acculturation--that is, the taking on of another's culture--leads to better outcomes in Asian American students because it allows them to negotiate their values and beliefs in a more open-minded manner. However, this hypothesis is problematic in that it ultimately places the blame within Asian American culture rather than addressing the lack of directed interventions or initiatives to meet the needs of that population.

Del Pilar (2009) also found that while Latinx students were more likely to report having past experiences of depression and/or suicidal ideation relative to their white-identifying peers, they were less likely to seek professional resources. In order to expand upon these preexisting findings, Turner and Llamas (2017) explored the relationship between spirituality and Latinx identity with students' willingness to utilize mental health resources on a college campus. They found that Latinx students who exhibited higher levels of spirituality--operationalized as the



belief that a higher entity exists and impacts that individual's life--actually exhibited less of a willingness to utilize mental health resources even when experiencing mental health concerns (Turner & Llamas, 2017). While many other cultural and structural barriers are also at play, the researchers hypothesize that Latinx culture contains the notion that illness is something that only God places upon an individual and only something that God can take away (Turner & Llamas, 2017). As such, more work needs to be done to include greater cultural competency within treatment of Latinx individuals so that spirituality and care for mental health do not appear to be in direct conflict.

With all this in mind, this action research project bridges the gap between students of color, their help-seeking tendencies, and wellness resources at University of San Diego, a predominantly white institution.

### **Context**

My positionality as a graduate student of color working at the Center for Health and Wellness Promotion was central to my action research project in regards to serving as a liaison between other students of color and my colleagues in Wellness-affiliated spaces. For clarity, I define Wellness-affiliated spaces as those which fall under the purview of the University of San Diego's Assistant Vice President (AVP) of Wellness and contain mental health professionals. These offices include the Center for Health and Wellness Promotion, the Counseling Center, and the Student Health Center. The director of all of these offices, including the AVP, are white-identifying females. During the time of this study, there were only four counselors of color, only one of whom identified as male. I hypothesized that the lack of representation in these spaces, especially for men of color, was one of the factors that contributed to an initial sense of disconnect for students of color as they encountered these resources in their educational journey

at USD. The totality of this knowledge, coupled with my personal experiences, motivated me to pursue this topic in particular.

### **Theoretical Frameworks**

Student development theory, teaching pedagogy, and sociological theory also helped lay the foundations for the approaches taken within this research. More specifically, Schlossberg's Theory of Marginality and Mattering (Schlossberg, 1989), Zaretta Hammond's (Hammond, 2015) approach on Culturally Responsive Practices, and Tara Yosso's (Yosso, 2005) Community Cultural Wealth Model were utilized to contextualize the importance of mattering for students of color at a predominantly white institution, the ways by which to co-create spaces that maximize their learning and sense of community, and the significance of maintaining an assets-based lens throughout this work.

Schlossberg's Theory of Marginality and Mattering holds that when students undergo periods of transition, they undergo feelings of marginality, experience cognitive dissonance regarding their worth, and question whether or not they matter (Schlossberg, 1989). Needless to say, such a phenomena has profound implications on the well-being of all students, given that the transitions to and within a collegiate experience are many and multi-faceted. Furthermore, as demonstrated in the literature review above, these feelings of marginality and feelings of not mattering are exacerbated among students of color, especially at predominantly white institutions. Therefore, work needs to be done to recognize the moments of transition and marginality most salient to students of minoritized backgrounds in order to truly provide them with a sense of community and belonging.

In Zaretta Hammond's book, *Culturally Responsive Teaching and the Brain*, she states that educators must engage in internal reflection on cultural bias, strive towards increased

cultural competency, use this knowledge to inform relationship-building, and develop co-created practices with students of minoritized identities in order to truly maximize their learning (Hammond, 2015). Existing structures in education were not built with students of color in mind. It then follows that existing structures do not take into account the needs of students of color. Therefore, in order to improve upon these systems and truly meet students of color where they are at, we must foster spaces of trust by which they are able, both structurally and individually, to share their needs and have a say in the resulting approaches that ensue.

Finally, Tara Yosso's Community Cultural Wealth Model puts forth an assets-based lens when thinking about the contributions of students of minoritized backgrounds carry by virtue of their identities rather than the traditional approach of thinking about what these populations lack (Yosso, 2005). Within a culture of care, it can be easy to fall into the trap of coddling or even unintentionally lowering expectations for students of minoritized backgrounds. What ultimately ensues, however, is a lowered sense of self-worth and ability to contribute and succeed for these students. Therefore, by valuing the wealth that students from these backgrounds bring such as increased levels of resilience, the ability to persevere against insurmountable odds, and the willingness to navigate and forge a path yet uncharted are just a few examples of strengths to prioritize, rather than disadvantages to lament (Yosso, 2005).

### **Methodology**

I incorporated O'Leary's action research model as my methodological approach when doing my own action research project. Her cycles were simple yet still capture the important characteristics of action research which are observation, reflection, planning, and action. Each of these steps helped ground my research with gathered data, personal and empirical reflection, planning based on this reflection, and finally, informed and intentional action, respectively.

Prior to beginning any of my cycles, however, I wanted to conduct a pre-cycle that involved gathering research about these topic from different institutions and pairing it with intentional observations at community events for USD students of color.

The collected data helped inform Cycle 1 of my project and motivated my desire to conduct a baseline survey for USD students of color to reflect on their sense of belonging and knowledge as it relates to the University of San Diego and the Wellness offices that provide mental health resources—the Counseling Center, the Center for Health and Wellness Promotion, and the Student Health Center—respectively. A total of seven undergraduate students of color responded to this survey.

The reoccurring themes of lacking a sense of belonging and an unwillingness to personally utilize mental health services if needed inspired Cycles 2 and 3. In Cycle 2, the same seven undergraduate students of color were asked to engage in a semi-structured interview consisting of ten questions. In Cycle 3, staff from Wellness, both clinical and non-clinical, as well as staff from Diversity, Equity, and Inclusion initiatives on campus were also asked to engage in a semi-structured interview consisting of eight questions. While the questions asked of these staff members largely mirrored what was asked of the students, questions asked respondents to utilize their own undergraduate experience as well as their professional experience at USD to frame their responses.

Respondents in Cycles 2 and 3 spoke to the importance of relationship-building, trust, and humanization in order for students of color to feel comfortable with Wellness services and providers as well as the need to greater enhance integration between Wellness and Diversity, Inclusion, and Equity spaces on campus. As a result, collaboration with an existing United Front Multicultural Commons wellness initiative—the Breather Series—became Cycle 4 of this

project. Participants were able to generate individual art pieces in a space that they felt comfortable while also contributing to a communal art piece that asked them to depict what a sense of belonging meant to them. A post-survey was also conducted. As a result, several artifacts, written responses, and qualitative data supported the importance of greater integration between Wellness and Diversity, Inclusion, and Equity infrastructures as well as the students' vocalized desire to play a role in helping these partnerships continue to improve for the future.

### **Pre-Cycle: Collecting Data from Similar Institutions, Anecdotes, and Community Events**

Prior to formally beginning this project, I wanted to immerse myself in the existing literature on the experiences of students of color at predominantly white institutions with particular emphasis on their sense of belonging, student success, and mental health outcomes. I also wanted to collect anecdotal and experiential insights from University of San Diego students and staff while also assessing my own experiences and mental health journey as a woman of color. I went about collecting this information by conducting formal literature reviews, attending culturally-based community and campus events, conversing with University of San Diego staff of different departments, and, finally, reflecting upon the influences of my cultural upbringing on my current perspective on mental health.

However, examples of the necessity of this work for students at the University of San Diego emerged during my work as a member of Wellness as well, most saliently visible when we would coordinate our Mental Health Check-Ins event, an opportunity for students to have a quick wellness check with a mental health clinician while also engaging in free food and activities. One of my responsibilities during the Spring 2018 Mental Health Check-In was to greet folks as they were entering the space and explain the process to them. I was assisted by three other employees of the Center for Health and Wellness Promotion, all of whom identify as

white females. Around 30 minutes into the program, a black student appeared hesitant to approach our table, but remained watchful. I welcomed her over and asked if she would be interested in participating in the event. Despite a detailed explanation of the event, the student still appeared hesitant. After taking a breath, she began rubbing her wrist and asked, “Are there counselors...?” One of my colleagues immediately jumped to answer that yes, there were in fact counselors present at the event. Still the student persisted, “No, are there counselors?” and continued to tap at her wrist. My colleagues looked at one another in absolute in confusion. It was only me, a person of color, that seemed to realize that the student had been asking all along whether or not there was a counselor of color available that she could see.

Something similar happened during the Mental Health Check-Ins of Spring 2019 when a black student approached our table expressing concern that an event like this was too visible and people would recognize him if he were to take advantage of it; while he ultimately decided to take part, he vocalized his concern to several staff members at multiple points in the process.

These situations demonstrated need for increased competency and exposure regarding the needs of students of color as they relate to wellness resources and outreach. As the University of San Diego is a predominantly white institution, the negative effects incurred by a lack of belonging are exacerbated for students of color.

### **Cycle 1: Surveying a Self-Selected Cohort of Students**

#### **Cycle 1: Overview**

To collect participants, I initially emailed all the relevant advisors and supervisors associated with various multicultural initiatives on campus such as The Commons, Office of Diversity and Inclusion, Office of the Tribal Liaison, and different multicultural student organizations. This was done with the intent to start this project with the knowledge and

collaboration of all involved stakeholders in the hopes of sustaining any positive outcomes that may arise from the project. After receiving the advisors' approval and support, I then reached out to the presidents of different student organizations. In addition to explaining my study, I asked each of these presidents if they would forward the message to the rest of the members of their organization and if they would feel comfortable with me attending a meeting or event of theirs to outreach to the rest of their group. Some groups agreed to send the message for me, while others asked me to send it to their list of members found on Torero Orgs. Only three groups agreed to have me come to their meetings; the rest either indicated that they could not accommodate due to scheduling issues or simply did not reply to the later request. Ultimately, however, I only heard back from participants with whom I had emailed directly through their organization's email list.

The baseline survey contained a total of twelve questions (see Appendix A) and consisted of demographic, quantitative, and qualitative questions. Prompts regarding demographics utilized a single line response rather than a forced multiple-choice response so as to allow the utmost ability for the respondent to self-identify without coercion or externally negative impetus. Students were then prompted to define a sense of belonging in a multiple line response to prime their following answers on belonging. Following this, a mix of qualitative and quantitative questions asked respondents to describe their sense of belonging at the University of San Diego. They were then asked to indicate which University of San Diego Wellness offices (Counseling Center, Center for Health and Wellness Promotion, and Student Health Center) they had utilized in the past. Finally, students responded to a mix of qualitative and quantitative questions that asked them to describe their sense of belonging towards these Wellness offices that they have either utilized or had exposure to through social media, programming, or other means.

### **Cycle 1 Results**

Seven respondents ultimately opted to participate in the project and committed to participate in the survey, a semi-structured interview, and a focus group (though this last piece did not ultimately take place). Of these respondents, 5 individuals identified as female and 2 individuals identified as male; 1 individual identified as a first-year undergraduate student, 4 individuals identified as second-year undergraduate students, and 2 individuals identified as fourth-year undergraduate students; finally, 3 individuals identified as being Indian, 1 individual identified as being Iranian, 1 individual identified as being Korean, 1 individual identified as being Latino, and 1 individual identified as being Mixed. All were involved in at least one multicultural student organization and all also listed at one organization that either connected to their major/future career aspirations or to the larger USD community.

After submitting demographic information, respondents were asked to describe how they would define a sense of belonging. Figure 1 is a visual representation of the answers by the



Figure 1: Word Cloud for Sense of Belonging

respondent.

Words that were repeated multiple times appear in larger fonts; words that were shared but came up less frequently appear in smaller font. All words provided by the



respondents were included in the visual generation of the Word Cloud. The most frequently used word--one that was used by each individual, in fact--was the word "community." Other frequent responses included ideas of safety, comfort, and feeling both understood and recognized for one's thoughts, behaviors, and identity.

Once grounded in their own definitions of belonging, each respondent was asked to respond to a mixed methods survey containing questions assessing their sense of belonging towards the University of San Diego. In regards to the quantitative data, the majority of respondents (5 out of 7) expressed having a slightly high sense of belonging at USD (see Appendix B). One respondent indicated that they felt a low sense of belonging at USD while the final respondent indicated that they felt a slightly low sense of belonging at USD. It is interesting to note that when the data is disaggregated to reflect the academic year of the respondent, we see a slight shift in the narrative of the data (see Appendix C). The two respondents who marked feeling a low sense of belonging and a slightly low sense of belonging at USD both happened to identify as second-year undergraduate students.

In order to provide a chance for respondents to provide further clarity to their answers, they were prompted to elaborate their answer in a free response box. Interestingly, many students were more likely to allude towards experiencing a lack of belonging rather than definitively marking it as such in the quantitative section. Despite most of the respondents quantitatively indicating that they felt a slightly high sense of belonging at USD, all elaborated responses indicated that they had a significant lack of belonging at some point of their time as a student. For example, Miki wrote that "while I have a wide range of involvement, in general, I do not feel particularly connected with the majority of students, staff, or faculty on this campus." Zeki

echoed these sentiments by writing that “there are not many Iranian Muslim students at USD so I feel as if my culture is not very represented on campus.”

Some students reflected upon the fact that their sense of belonging had grown as they “found their people” or continued on at USD. To this end, Isaac shared “my sense of belonging has evolved throughout the years. When I was a freshman, I would have answered 1) a very low sense of belonging. However, my involvement in organizations has allowed me the opportunity to feel more included.” Similarly, Margaret wrote that “there doesn't seem to be much diversity within USD and when there is, the individuals tend to come from a foreign country” thereby making it “difficult for a Korean American like me to find community here other than FUSO [the Filipino Ugnayan Student Organization].” Finally, Zara wrote “As a POC, I definitely found it hard in my first year because there weren't many POC's on campus at a first glance.” Due to this, “I felt very isolated and almost targeted when I wasn't able to connect and integrate with my fellow white peers. Now, I have since found my place on campus with the people that are the same ethnicity to me, or those that have a willingness to expand their friend groups to include someone different like me.”

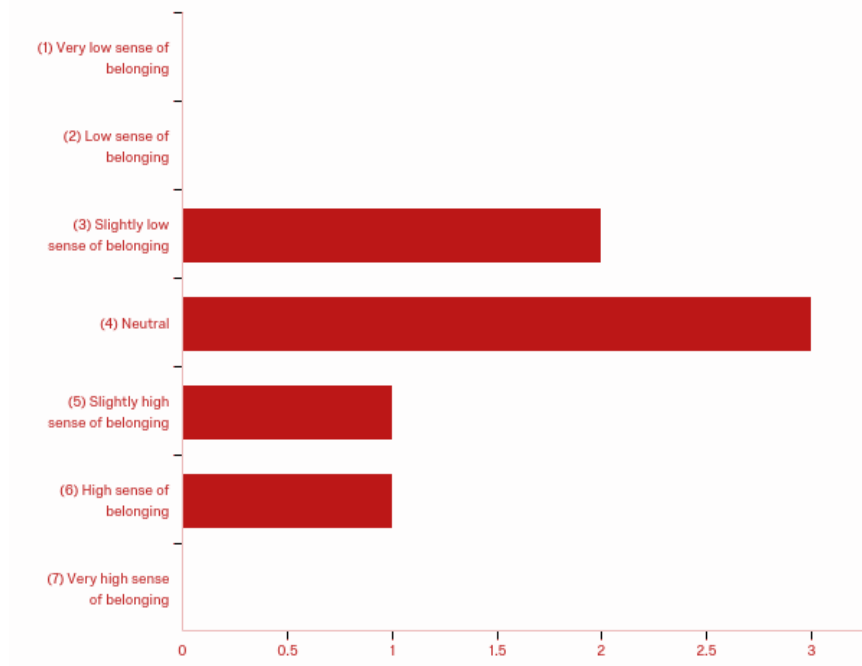
Finally, some students acknowledged that while they feel belonging in certain contexts, they also recognized the lack representation on campus. For example, Jasmine shared that she does “feel like I belong when I meet people with similar backgrounds, ethnicities, or classes but it is not very often that that happens.” Similarly, Maya wrote that while “there is not a wider variety of people with the same ethnicity or appearance as me, at least most people are caring and considerate when it comes to my opinion.”

Once their sense of belonging at USD had been shared, respondents were requested to share which of the listed Wellness offices--Counseling Center, Center for Health and Wellness

Promotion, and Student Health Center--they had either utilized or been exposed via social media, programs, marketing, etc. This purpose of this question was multi-purpose. Firstly, it operationalized the scope of Wellness offices available to the participants for the subsequent questions. Secondly, it provided an idea of whether or not these students were even familiar with the Wellness offices or services provided. Finally, it protected the anonymity of the respondent's reasons for knowing the centers by allowing the response to include general knowledge or personal utilization.

The majority of respondents had either utilized or been exposed to each of the three offices that provide mental health services on campus, namely the Counseling Center, the Student Health Center, and the Center for Health and Wellness Promotion (See Appendix D). While the Student Health Center and Center of Health and Wellness were both marked by 71.43% of responses, the Counseling Center was only marked by 57.14%.

On a scale of 1 to 7, how would you describe your sense of belonging within University of San Diego Wellness offices that you have utilized or had exposure via programs, social media, etc?



Respondents were also asked to assess their sense of belonging in the aforementioned Wellness spaces. As seen in Figure 2, the majority of respondents expressed neutrality towards the Wellness spaces with

Figure 2: Sense of Belonging within USD Wellness Offices

the remaining four participants being split evenly between the lower and higher planes of belonging.

For those familiar with the wellness services on campus, many expressed positive sentiment. For example, Jasmine wrote that “the Center for Health and Wellness Promotion was great when I met with them” and that the “few times I met with the Counseling Center, they were fairly helpful.” Similarly, Isaac wrote that he has “had good experiences at the wellness center and [feels] like they are there to help.”

For some students, however, positive sentiments towards the services overlaid a theme of unwillingness to consider utilizing or re-utilizing the services on campus for themselves. To this point, Miki shared that “these programs encourage all students, regardless of their background, to obtain resources and support. After my first few times using the Counseling Center, though, I felt like I wasn’t getting what I needed from USD in order to feel better.” Zara expressed similar sentiments by saying “I went to the Counseling Center and it wasn't my cup of tea, but I respect what they do and I am sure it would work for others.”

Some other students expressed not really knowing about the services offered. Zeki wrote “I am not fully aware of the wellness programs at USD, especially the counseling ones which I can be useful for everyone.” Similarly, Maya wrote “I don’t know the Wellness offices very much, but my floor had a mandatory meeting with a member from the Center for Health and Wellness Promotion.”

Finally, Margaret related her perception of the wellness services to her overarching perception of USD by sharing that “I feel like these centers/offices reflect the general population of the students at USD and isn't very diverse”.

### **Cycle 1: Reflection**

Contrary to what is indicated within the research regarding students of color as they relate to wellness services and a sense of belonging, I suspected that a number of student participants would indicate at least some comfort regarding wellness services on campus. I based this hypothesis on two assumptions: firstly, that I would be asking as a representative of these spaces, and secondly, that the respondents may have wanted to give an answer that they think will be positively viewed by me. However, when asked to dive into their experiences within both the survey and the semi-structured interviews, I anticipated that the students' answers may reflect a more holistic view of their perceptions regarding Wellness services. At the very least, I suspected that some of these answers might contain their lack of having utilized Wellness services on campus. Ultimately, I suspected that very few will explicitly state their lack of feeling a sense of belonging within Wellness spaces but allude to it.

### **Cycle 2: Individual Interviews with Students**

#### **Cycle 2: Overview**

After completing the survey from Cycle 1, the same participants were asked to participate in a semi-structured interview. While ten questions were asked of each participant (see Appendix E), the semi-structured interview format was utilized to allow space for organic, authentic, and co-created dialogue. Each interview was scheduled to last for a total of one hour; some participants spoke for the full hour while others spoke for as little as twenty-five minutes.

Given the students' emphasis on storytelling as well as my firm value and belief of co-created knowledge, I would be remiss if I did not, in some way, share the narratives of the students with whom I interviewed. As such, I will be sharing portions of each student's story coupled with some analysis and potential implications. It is important to note, however, that due to the small amount of USD students that possess the specific characteristics of some of these

testimonials, I will ultimately have to omit pieces of identifying information that would infringe upon the individual's anonymity. Despite the lack of certain identifying characteristics, however, these narratives depicted the struggles of belonging at a predominantly white institution as a person of color and the negative impact that such realities have on overall well-being and mental health. Above all else, the students' resilience and demonstrated interest and initiative in creating spaces of belonging for folks like them highlighted the need and next steps for this work.

### **Cycle 2: Zeki's Story**

To Zeki, a sense of belonging “is feeling recognized by the entire community, feeling represented, and [feeling] recognized in that your values, beliefs, and things that you hold dear are taken seriously by the community.” Now in his second year of studies at USD, Zeki shared that while he has ultimately found belonging through many involvements on campus, his journey has not been without turbulence. All throughout his first year, Zeki felt frustration because he found no space for his cultural identities, both ethnically and religiously. This frustration was especially pronounced during his transition to the University of San Diego because even his high school had a student association for these identities. Zeki shared that he spent his first year feeling isolated because he could not find “my people” and felt a lack of acknowledgement for the most salient pieces of his identity.

While Zeki expressed improvement in feeling a sense of belonging in his second year, much of the improvement stemmed from his own initiative. For one, he became involved with several commitments on campus with the intent to “do programming that properly represents cultures.” To illustrate this point, one of the largest sources of his newfound belonging stemmed from a student association he helped found to give a home to students with similar minoritized identities. Even though he was proud to create a “safe environment” for himself and his peers, he

acknowledged that it was “hard because I wasn’t sure if I was able to take it all on.” While Zeki was often the sole representative of his culture in the classroom, it was not until a professor largely mischaracterized his religious beliefs that he felt obligated to start a group on campus, both for the well-being of himself and others as well as for the destigmatization of his religion and culture to others.

According to Zeki, being a person of minoritized identity at a predominantly white institution has profound impacts on his well-being. Throughout his narrative, Zeki shared the stress and isolation that comes with carrying a minoritized identity on campus. When citing his experiences in the classroom, for example, he said being the only person of his cultural background in a space “is stressful because it falls on only me to talk, correct, or advocate to other professors or students.” Even if he weren’t to speak up, he shared that his classmates will often have their eyes on him as if to see if he’ll react; “reacting and advocating for my culture in the classroom shouldn’t have to fall only on me,” he stated. Zeki closed this memory by saying that “no one wants to feel ostracized because of who they are, what they look like, and what they hold dear.”

When asked what, if anything, could do done to improve upon student mental health and mental health services, Zeki spoke to the importance of cross-campus collaboration, integrative advertising, and focusing on barriers to frequently present for students of color, such as confidentiality and pricing concerns. When sharing his thoughts, Zeki mentioned that “it’s great that we have the wellness centers, but it’s not broadcasted enough, and needs to be more integrated into the fabric of USD like University Ministry or the Torero Program Board.” He also mentioned that while Wellness can do a better job of connecting students to the United Front Multicultural Commons, he shared that even the UFMC was the a difficult space for him to

interact with because they didn't have representation for his identities until he started his own organization. All in all, however, Zeki believe that greater integration of services and departments would be able to better serve students holistically and encourage them to share their needs or play a role in creating structures to meet those needs with staff.

### **Cycle 2: Margaret's Story**

Margaret defined a sense of belonging as "familial" and "feeling welcomed into the community." Currently in her second year of undergraduate studies, Margaret recounted the difficulty that she encountered during her first year at USD. For one, she found it very difficult to be away from her family. For another, she was struck by the abrupt changes that came with moving from a very diverse hometown to a school that was "very Caucasian dominated and made me feel distant based on my ethics and beliefs." Throughout her first year, USD never felt like a home; rather, it served as a reminder that a sense of home was out of reach. While she acknowledged that there were a lot of campus events geared towards instilling a sense of community at USD, she "wished that they had more resources and avenues for belonging for students of color in their freshman year" as their experiences tend to be rather different than the general USD population.

These feelings of displacement led to increasing distress for Margaret, and she felt her mental health declining. While seeking out mental health resources might seem to be the obvious next step for some, Margaret had a multitude of barriers standing in her way to seeking help. According to her, "mental health is a stigmatized thing in Asian culture. [One doesn't] want to bother anybody, and privacy is important. Sharing is weakness. I didn't want to be labeled as someone who has mental health issues by everyone I knew." After many months of struggling through the various aspects of her life, Margaret decided to seek help from an on-campus



provider, a decision she likened towards her ultimately being “Asian-American rather than just Asian.” While Margaret acknowledged the help to be beneficial, she quickly made the decision to stop seeing the on-campus clinician because she “did not feel fully seen.”

Margaret described the true improving moment of her USD career when she joined FUSO, the Filipino Ugnayan Student Organization, which she described as “the first feeling of family and safety away from my own family.” When asked what else could be done about helping students of color through their journey with mental health, Margaret shared that “a sense of belonging is the key to connecting students of color and mental health services.” She went further to say that she wasn’t even aware of most mental health resources until the end of her first year of college. With this in mind, Margaret suggested monthly emails or more cross-campus events with wellness staff, “anything to make the Counseling Center seem less distant.” She also acknowledged that while it would be greatly beneficial “to have a counselor who was either Asian-American or had knowledge of that community because the mental processes are different,” she would rather have a pre-existing relationship with folks in Wellness so that she could make that decision for herself.

### **Cycle 2: Miki’s Story**

According to Miki, a “sense of belonging is a feeling of comfortability and authenticity and feeling accepted by other groups.” Like many of the other narratives shared so far, Miki felt a significant lack of belonging during her first year at USD. She shared that she didn’t even feel comfortable “walking down campus or showing up to class” because “most people were confused about my ethnic identity.” This lack of belonging was so profound that Miki actually wanted to transfer after her first semester. Given the hoops that such a decision would create, Miki had to instead find other ways to cope, “I learned how to suppress my identity to fit in.”

While this approach enabled her to join more clubs and get more involved, Miki experienced an increasing amount of mental health concerns. Miki heartbreakingly shared that the occurrence she most looked forward to during this time was when “my roommate wouldn’t be back in the room until late evening so I] could cry into her pillow before having to recompose myself for the next act.” It was also during this time that Miki would call her mom and tell her about how sharply her mental health was declining. After each conversation, Miki’s mother would end with the same advice: “whatever you do, do not seek counseling. You’ll get over it.” According to Miki, this advice wasn’t because of any lack of love on her mother’s part; in fact, such advice was because of how much her mother loved her. As Miki puts it, “in Asian culture, mental health isn’t talked about, and to do so is focusing on weakness.” Instead the emphasis is about “focusing on schoolwork, getting A’s, and getting over it.”

Miki described the Empower Retreat as her biggest source of belonging at USD, saying that she “appreciated the authentic dialogue and enjoyed talking about things like diversity, identity, and intersectionality.” It was during this experience that she was able to connect with more women of color, an experience that allowed her to “feel more on the same page with peers than [her] general interactions on campus.”

The totality of her experiences with cultural stigma, a lack of belonging, and subsequent empowerment have empowered Miki to be a “a huge advocate of mental health and people of color.” However, when asked about what can be done, if anything, to improve mental health services, Miki shared that the difficulty centered around the stigma associated with it. She admitted that she used to “rush to the Counseling Center, especially when classes are going, because I was ashamed of being seen by someone I knew” and noticed other students doing the same. As such, she shared that open conversations about mental health need to happen more

frequently and in more settings on campus. She also mentioned that “students of color want a counselor that they have a relationship with, whether that means that they share their identities or otherwise” and suggested an event that allows students to meet counselors in a non-clinical setting to get to know them as people first.

### **Cycle 2: Zara’s Story**

According to Zara, a sense of belonging is “a space where everyone feels comfortable to be themselves and voice their beliefs without fear of judgment or negative comeback to it.” Zara attributes her current sense of belonging to the group of friends that she has since been able to find; in contrast, she encountered a much harder first year at USD. To her recollection, “I didn’t really know anyone during most of my first year and had never been in a school or space with so little students of color.” Her unhappiness and even “culture shock,” as she put it, was so intense that she was “seriously considering transferring during my first year.” According to Zara, she was “raised with diversity and white individuals who were exposed to people and cultures and more culturally competent; here, white individuals tend to avoid people of color and seem less understanding of difference.”

Like with many others, she found herself needing to seek mental health services, but did not feel like her needs were met. After trying therapy from an on-campus provider, she decided “I didn’t like it because things that I didn’t want to talk about were brought up” and “I had to spend time explaining my culture to someone who didn’t fully grasp it.” After meeting with an individual clinician didn’t seem to work, Zara even signed up for therapy groups, but ended up not showing up to any of them.

One of the largest contributors to her difficult relationship with mental health and mental health resources stemmed from her cultural upbringing. According to Zara, “Indians don’t view

mental illness and mental health concerns as real things. That's what I was told and exposed to throughout my whole life. My parents' immediate response to any of my struggles was to 'snap out of it'." Needless to say, the pervasive stigma against mental health in Southeast Asian culture encourages folks to internalize their distress rather than seek out help.

According to Zara, however, more could be done by USD to reach students of color experiencing mental health concerns. For one, she suggested that should be "more support groups for people of color and more targeted outreach for students of color." On the promotion side of the house, she felt that Wellness could "provide more education about mental health, host panels regarding mental health and student body, and provide more knowledge on symptoms." Finally, she concluded that "clubs are a good way to continue the conversation and build the whole community together" and suggested an event featuring the intersections between culture and mental health.

### **Cycle 2: Isaac's Story**

Isaac defined a sense of belonging as "feeling welcomed and well-received on campus and being approached by student orgs that have made me feel like I belong." The importance of student organizations was mentioned throughout Isaac's narrative due to a tumultuous journey both with and without them. Prior to getting connected to clubs on campus through the Alcala Bazaar--the university's largest involvement fair--during his first year, Isaac was actively bullied within his residential hall due to his identity as a gay, Latino man. In fact, he was regularly called derogatory slurs by his hallmates. Though his RA was aware of the situation and promised to handle it, Isaac never received "a follow-up from his RA or an apology from his abusers." Since he felt unsupported by his living community, he avoided the programs in his building because it was "not a space where all of my identities were validated or even safe."

Once he had the chance to be exposed to other on-campus student organizations, Isaac jumped at the chance to join MECHA and PRIDE, two organizations that reflected an aspect of his identity. While he found some comfort and belonging in these groups, he still didn't feel seen as a whole person. In his account of PRIDE, for example, he shared that "it had historically catered to a white audience and white leadership" so that his identity "as a gay, Latino made him an outcast even among an LGBTQ group." With MECHA, he found the space too cliquey. These experiences prompted Isaac to "take it upon myself to make others feel welcome and pass on that legacy and belonging that I lacked." Over time, he was able to join another group that provided a greater sense of family and safety to the totality of his identities and even co-founded his own group for students of similar minoritized identities. In Isaac's mind, "when identities are not validated, a person feels uncomfortable and like a complete outsider."

Isaac shared that coming from a Latinx family and being the child of immigrants from Mexico played a large role in his relationship with mental health while he was growing up. As a first-generation student as well. Isaac admitted that his parents didn't understand the interplay of academics, extracurriculars, identity development, and stress that come with college. When speaking about his feelings of isolation and the negative outcomes that inevitability accompanied them, he shared that "my parents don't understand why I'm having anxious thoughts or why it's so hard to wake up and go to class and that if I just thought happy thoughts, I'd be fine." Isaac shared that he knew his parents meant well and were trying to show him support in the only way they knew. However, such messaging caused him to initially "put mental health on the backburner." It was only when things got so insurmountable for academics and well-being that Isaac finally started to seek help from the Counseling Center, a practice he still continues to this day despite the busyness of his schedule as a student leader.

When asked what, if anything, could help improve mental health services on campus, Isaac emphasized the importance of increased publicity of resources specifically directed to individuals of minoritized communities, visibility and increased hiring of clinicians of color, and collaboration between Wellness and cultural spaces on campus. As a student of color and first generation student and American, Isaac shared that “people like me don’t have the same exposure in regards to the capital of being exposed to professions, businesses, or resources that other students might get from their parents or socialization” and that “I felt like I was never reached out to in the way that he needed by wellness and other campus resources.” Due to the lack of being asked about what he or other students of minoritized backgrounds need, Isaac believed that “we’re seeing students having to educate people who are already educated about how to proper educate and it’s exhausting.” To that end, he believed that there is a need to share knowledge and approaches among departments on campus, particularly Wellness and cultural spaces, with students included in its creation. Finally, Isaac shared that “this project is one of the first great steps in realizing what students of color need in regards to mental health and marketing.”

### **Cycle 2: Jasmine’s Story**

Jasmine believes a sense of belonging is felt with “individuals finding solace within each other and being part of something bigger than yourself.” Jasmine identifies as being culturally and ethnically Indian and feels that “my culture and experiences have made me who I am.” One of spaces that she found the most solace in as a first-year was having a roommate who was also Indian. Jasmine described it as “coming home to a person who can empathize and understand where I’m coming from without a thirty minute explanation.” According to Jasmine, these conversations with her roommate needed to happen often--she didn’t feel comfortable even

walking on campus during her first year at USD. She recalled the stares she would get because of how much she stuck out to the rest of people on campus. When elaborating on the experience, she remarked that “everyone was so white and gorgeous...and I was just not that. People would hang out with people who looked like them, but no one looked like me. I didn’t belong so why even bother trying?”

It was only towards the end of her first year that that Jasmine found friends in unexpected places through her LLC due to their shared interests. While she didn’t become best friends with any of the peers in her LLC, Jasmine stated it made navigating campus so much to know and be known by others in various involvements on campus. In her own words, “I was surprised that I was able to be friends with people that I thought would never want to be friends with me because of how I look.”

Jasmine shared that her first year was riddled with pitfalls for her mental health and found addressing it to be filled with obstacles. To elaborate, Jasmine mentioned that “Indians don’t acknowledge mental health at all; if [a person has] mental health problems [they] are crazy or not strong and should ignore it.” Jasmine described growing up in a sense of limbo, between American society’s slowly improving emphasis on the importance of mental health and her Indian upbringing reinforcing that one should just work hard and ignore it. Her parents immigrated to the United States and encountered far harder trials than Jasmine so she found herself having a hard time “justifying” her struggles when even they told her to “just shake it off, you’re too young to feel this, and this is nothing major.” Over time, Jasmine found that “no matter what I achieved or struggled with would meet the standards of my parents because of different values and I had to become comfortable with mental health for my own sake.”

When describing USD's mental health services, Jasmine's opinion was largely positive, but also contained some feedback regarding more culturally responsive practices. In fact, she shared that her initial appointment at USD contained "a sense of disconnect where I would want to address certain issues but the counselor was still trying to unpack a thirty minute explanation of my culture and could not get to the root of the issue." Despite this, she still cited how well-intentioned the counselor she met seemed. With great joy, she even shared that this clinician did "a friendly hand-off" immediately after their appointment and was able to get Jasmine an off-campus clinician who was Indian.

When asked what, if anything, could be done to improve mental health services on campus, Jasmine focused on increasing diversity among clinicians, promoting the cultural diversity of clinicians on campus, and facilitating spaces where students of color can publicly share their journeys with mental health. Jasmine shared that when she was really struggling with her mental health and sense of belonging during her first year that she "didn't have the capacity to see what mental health services even existed on campus." Therefore, she believed that the publicization of such resources through programming, dialogue, and campaigns would greatly benefit students of color in need. Finally, Jasmine closed by thanking me for involving her in this process and engaging in this work. More specifically, she said, "I'm very happy that this project is happening and feels that it's so important and so needed for so many people on campus."

### **Cycle 2: Maya's Story**

According to Maya, a sense of belonging is "a place where you can interact with other people and be yourself, your true self, and are constantly thriving." Currently in her first year at USD, Maya cited her LLC and having a roommate who is "also influenced by their own culture and is willing to speak and share their culture often despite being ethnically different" as being



key contributors to her sense of belonging. Before coming to campus, however, Maya was nervous. As a non-Catholic coming to a “predominantly Catholic” school, in her mind, she was uncertain if she would fit in or be accepted. Fortunately, her LLC featured a guest speaker from a local church that gave her better insight into all of the work that the church community does. It moved her to the point that she even went to a local church with friends to learn more.

According to Maya, “there has not been a time where I haven’t felt sense of belonging here at USD.” When asked to describe any sense of lacking belonging in her life at all, she recounted a time in middle school where she was in a “group of mean girls” that would put others down for fun. The bad feelings that arose from that involvement have now encouraged her to “make an effort to be really nice to people and never make a judgment about another.” As a result, she tries not to think negatively or “look for problems” in the systems surrounding her.

When asked about how her cultural upbringing influences her view of mental health, Maya didn’t quite address mental health, but addressed the high levels of poverty and homelessness in India. She then connected these findings back to what she has been learning in her LLC. When re-asked if there was anything specific to mental health that she had observed growing up, she spoke briefly that she was taught to “only rely on family or friends because you don’t want to get labeled with an issue.” To this end, Maya shared that she would “have to really think about whether I would feel comfortable seeing a clinician if I needed it because letting someone into your brain is super difficult, and there are locks on your brain for a reason.” She concluded, “is it that big of a problem that I’d need to share?”

However, when asked to describe what barriers, if any, might impact students of color as they navigate the use of mental health services, Maya shared the following: “Personally, I don’t feel like there’s much of a problem for students of color; if I were to need it, I would just use it.

Personally, I would be more concerned about out-of-state students.” To alleviate any many barriers that might exist for students of color, Maya suggested more “tangible representation” of various cultures in public spaces such as “food or flags”.

### **Cycle 2: Summary**

Several trends emerged while analyzing the interviews of all seven student participants. In regards to belonging, the majority of respondents (six out of seven, in fact) identified feeling a significant lack of community at some point of their time at University of San Diego. These same respondents then indicated that they felt the burden of finding community was on them due to their “outsider” status; moreover, it was not until they worked to find people or structures that resonated with them that they felt a sense of belonging. Interestingly, five of the seven respondents actually took it upon themselves to actively create structures at USD for folks of similar cultural backgrounds to have an easier time finding a sense of community.

Several trends regarding mental health also emerged among these students. The majority of respondents (six out of seven) indicated a lack of belonging as being a major contributor to their overall well-being. In addition to the trends noted above, students also shared that culture shock, lack of acceptance for their full identities, and feeling as though they had to be sole representative for their culture and beliefs added a great amount of stress to their daily lives; some students noted that these feelings even inhibited them from wanting to walk across campus, eat in the dining halls, or leave their rooms--components necessary to meet their basic needs. When asked about the biggest barrier existing between students of color and seeking mental health services on campus, the majority of students cited the cultural stigma surrounding mental health, and cited their own cultures and upbringing as points of reference.

Finally, trends emerged when the respondents were invited to imagine what would most effectively bridge the gap between students of color at the University of San Diego and mental health. Most respondents shared that greater integration of wellness services was needed in other departments of campus, particularly in spaces that worked closely with students of color. The visibility of such collaboration was also emphasized by the majority of respondents. Finally, the major of respondents indicated that the need for greater humanization of mental health clinicians and services, though they differed in ways by which to achieve this goal. Some students focused on the hiring on clinicians that looked like them while others wanted to have exposure to pre-existing clinicians in a non-clinical setting so as to know them as a person first. Ultimately, however, the most popular avenue of humanization centered around narratives and storytelling, especially in regards to students of color sharing their journey with mental health to others in the campus community.

### **Cycle 3: Individual Interviews with Staff**

#### **Cycle 3: Overview**

The original rendition of Cycle 3 actually ran simultaneously with Cycle 2 and included semi-structured interviews with clinicians of color at USD. A series of eight questions were asked (See Appendix F) and answered by each interviewee, but the semi-structured interview structure was put in place to allow for authentic storytelling and co-creation. As with the student interviews, these interviews were scheduled to last a maximum of one hour and ran a ran of times.

While recruiting for these cycle, it came to my attention that there was concern among clinicians about maintaining anonymity due to the extremely small pool of mental health clinicians of color at the University of San Diego--at the start of interview recruitment, in fact,

there were only four individuals who identified as people of color. To further complicate matters, each of these four individuals belonged to one of three wellness offices--The Center for Health and Wellness Promotion, The Counseling Center, and the Student Health Center--thus greater diminishing their anonymity.

After hearing these concerns in addition to the recurring themes of humanization, integration, and collaboration brought up by the students and clinicians during their interviews, I decided to expand Cycle 3 to include any Wellness staff members and any Diversity, Inclusion, Equity staff members. These folks were asked the same set of eight questions asked to the clinicians of color (see Appendix F). To maintain as much privacy for these individuals as possible, findings will be shared broadly and within two categories: “Wellness Staff” and “Diversity, Inclusion, Equity Staff”.

### **Cycle 3 Results: Wellness Staff**

A total of three Wellness staff members were interviewed for this project. Across the three interviews, themes of minority stress, increased barriers to students of color needing mental health services, and the need for intentional, cross-campus partnerships emerged. Respondents also shared areas of strength for USD’s mental health services as well as areas of growth.

Minority stress refers to the increased cognitive load and stress possessed by individuals of minoritized identities. Research has demonstrated that minority stress is correlated with poorer mental health outcomes, lowered academic success, and decreased retention rates (Museus, Yi, & Saelua, 2017). Moreover, minority stress increases in spaces of greater minoritization, such as being a person of minoritized racial, cultural, or religious identities at a predominantly white, Catholic institution such as USD. When speaking about general trends observed by students of color who seek services at USD, clinical respondents shared that some general trends brought up

by these students included feeling “isolated,” being “the sole voice” for their identity, “feeling different,” and “feeling discouraged to speak in class.” Other respondents noted that “not every student of color in distress seeks services for a variety of reasons.” It is by virtue of these feelings of isolation that some of the most vulnerable members of our community are actually never brought to light or able to be given the support they need to thrive.

As just articulated, there are a multitude of barriers that may interfere with a student of color’s ability to seek mental health resources. Drawing from some of their own experiences, respondents shared that cultural upbringing and the perspective of mental health by their primary caregivers had a large impact on how they initially navigated mental health. For those respondents who came from backgrounds that did not favorably or openly speak about mental health, they “didn’t go to therapy, when [they] probably should have” or were “not comfortable seeing a mental health clinician at all” because they were socialized to think that “going to a clinician meant you were crazy or weak.” For respondents who had an upbringing that positively impacted their relationship with mental health, they described that having a “family openly talk” about the various mental health concerns happening in the family unit made the topic more “approachable.”

Referring to students at USD, respondents once again brought up feelings of isolation as being a factor in not wanting to navigate a potentially foreign system, particular in moments of distress. Issues of general accessibility, such as wait times, confidentiality, and pricing, as well as representation among staff, or lack thereof, were also brought up as deterrents for students of color seeking or requiring mental health services. One respondent even went so far as to say that “therapy was originally built with white men and white women in mind” and “research practices have not always been historically kind to people of color” so the uncertainty that students of

color feel when considering these services is to be expected. The true task, all three respondents seemed to agree, was working collaboratively with Wellness units and other cross-campus partners to identify students in need, connect them to the individuals who could best help them, “catch students before they fall through the crack,” and “make our messaging and materials reach...students who don’t have the identities predominantly found on campus.”

Finally, the necessity of cross-campus collaboration was a theme found throughout each of the narratives shared by the respondents. As one respondent remarked, “the best way to reach out to people of color is to do it individually and build that trust, and make them feel safe enough to come in on their own, but the limited amount of resources make that unrealistic. Therefore, we have to get creative and take advantage of the resources and people already on campus.” A finite amount of mental health services is not a phenomenon unique to USD; in fact, it is a challenge faced by every institution in the country. For clinicians of color at USD, this challenge appears to weigh even heavier--as one clinician shared, they have a “very high-workload beyond that of just seeing students” and are often the one specifically requested to be seen by students of minoritized identities because of their shared identities with these students. Given the limited amount of time in a day and bandwidth that a team of fifteen clinical providers can give to a campus population of over 9,000 students, it makes sense that the need to reach other departments and allies is necessary. According to one of the clinicians, USD is doing strides better to provide traditional mental health services relative to any other university in San Diego, saying “we have the best ratio of clinicians to students here, we have an integrated model of referrals between wellness offices, and we have a center for wellness promotion so that clinicians are tapped more for their clinical skills.” The same clinician went on to say that while they “would not want to know or be more involved in programming put on by other departments

because they already tend to take too much on,” it presents an opportunity for Center for Health and Wellness Promotion staff to serve as a liaison with those events and spaces. To this end, another respondent shared that CHWP relies upon its partners as “receptors” to share “what students are saying and experiencing” as well “partners in solutions and programming”. The respondent admitted that “sometimes [CHWP’s] partnerships are better than others, but it is [CHWP’s] role to provide education to campus partners. Finally, another respondent expressed their reliance on the multicultural spaces of campus being a stable place they can refer students looking for community, but was uncertain if the relationship was mutually as comfortable for professionals on the diversity, equity, and inclusion side of the house. To accomplish this, the respondent suggested that wellness and diversity, equity, and inclusion professionals should “have a joint breakfast like we did with University Ministry” in order to understand “how to best support and work together.”

### **Cycle 3 Results: Diversity, Inclusion, Equity Staff**

A total of two diversity, inclusion, equity staff members were interviewed for this project. Recurring themes included the significance of belonging and its intertwined relationship with freedom, safety, and acceptance, the need for diversity, inclusion, and equity work to be embedded in the framework of USD, and the significance of trust and relationship-building with students of minoritized identities, particularly from a cross-cultural perspective.

Both respondents stressed the need for belonging as being a significant barrier for students of minoritized identities at a predominantly white institution such as USD. As one respondent remarked, one “can’t separate belonging and liberation; if you are in a space that’s not letting you be your full self, you don’t belong and until we create spaces without discrimination, belonging is tough.” The same respondent went on to provide a powerful analogy

about how we treat students of color at USD as guests at a party rather than co-hosts; they are invited into a space with certain unstated restrictions placed upon them: “they can’t speak too loudly or move any of the furniture” and they are shepherded in and out in time and way not of their choosing. Interestingly enough, the other respondent made a remark that went rather with this invited guest analogy: “systematically, the university erases the narratives of people of color. The furniture, buildings, and artwork cater to an audience rather than a living, diverse population. It feels more museum-like rather than student-centered.”

The need for diversity, equity, and inclusion to be the responsibility of all rather than a few was another powerful theme that emerged during these conversations. As one respondent put it, the shift towards “The Commons (a nexus of four multicultural offices) is not enough to change a system or systems that historically worked to exclude people of underrepresented identities. Historically, the folks that take up this work tend to be folks of underrepresented backgrounds and that simply isn’t enough.” The other respondent agreed by saying the responsibility cannot be placed on “reactive” spaces that exist solely because of inequities within the system. Instead, “diversity work needs to be embedded in everything, from job descriptions, to tasks, to hiring more people of color.” To this end, both suggested that an easy way to begin support this work would be to take advantage of the knowledge and opportunities for knowledge being offered by folks who are already doing the work, such as attending a Rainbow Educator session or inviting them to present at a departmental meeting. All in all, the consensus remained that all departments must work to bolster the resources already being put forth in diversity work rather than creating so many of their offshoots that it weakens the collective.

Finally, the importance of trust and relationship-building was brought up as a key theme when speaking about actionable next steps. One respondent remarked that “there is so little



representation in Wellness right now” that the students this individual interacts with “only go to see one counselor” because of their shared identities. As shared during the student narratives, relationship-building and seeing an individual as a person rather than simply their role are key aspects of developing trust for students of color. Help-seeking involves a level of vulnerability; therefore, it follows that in order to feel safe enough to express that vulnerability, students must feel a sense of trust, belonging, and companionship.

### **Cycle 3: Planning and Action**

This project was originally slated to conclude with a restorative dialogue between students of color and mental health clinicians of color to allow for co-created solutions, healing, and humanization; however, given the data generated over the last three cycles, I knew that I needed to not only create *solutions* with students of color, but the *processes* by which to achieve those solutions as well. I also knew that I needed to model what a more intentional method of proactive collaboration between Wellness and Diversity, Equity, and Inclusion might look like to the variety of involved stakeholders.

With all this in mind, I reached out to the United Front Multicultural Center (UFMC) to see if they would be interested in having me collaborate with them on their Breather Series initiative, a recurring set of wellness events put on in the UFMC’s space to encourage students of that community to take a breath from the daily that comes with being a student, particularly when holding minoritized identities in predominantly white spaces. To my knowledge, my office, the Center for Health and Wellness Promotion, never directly helped with any of the Breather Series’ programming or publicity, though we did give supplies to it at least once in the 2017-2018 academic school year. The UFMC approved of this request almost immediately, and I was introduced to a wonderful student intern in that space who would serve as my main collaborator.

While CHWP did not initially approve of my collaboration with the UFMC as being included within my work hours, it was eventually given the green light.

### **Cycle 4: Breather Series Initiative**

#### **Cycle 4: Overview**

Heeding the insight from one of the diversity, equity, and inclusion professionals that one of the best ways to support these spaces is to acknowledge and utilize the work that they are already doing, I wanted to use my positionality to support the next Breather Series initiative, a pre-existing event put on by the United Front Multicultural Commons. During this process, I had the honor of collaborating with a student intern at the United Front Multicultural Commons over a period of two months. We met biweekly, for a total of four planning sessions, and maintained contact over email or Google Documents as needed.

It was during this time that we identified four themes that we wanted to address, even directly or indirectly, with our collaboration. These four themes included:

1. What it meant to belong at USD
2. Relationship-building
3. The exhaustion of being a person of color at a predominantly white institution
4. Wanting to have a say in what goes on in a space, rather than just being told what to do

With these learning outcomes in mind, we created the framework for our collaboration, entitled “Breather Series: Drawing Connections.” During this event, participants could paint whatever they wanted (and were provided with the general theme of “what evokes a sense belonging for you?” when stuck) on small pieces of tapestry that they could take home and would have the opportunity to contribute to a communal tapestry that would later be displayed

publicly outside of Tu Mercado for a week. The question for the larger tapestry was, “What does community mean to you?”

Conversation was encouraged by having supplies and snacks inclusive of dietary restrictions held at two main tables where participants would also do their painting. Participants were also encouraged to write a positive affirmation on a sheet of paper and give it to another participant at the event, preferably someone they didn’t know too well, to also create a sense of community among the participants. Finally, the Breather Series event took place on Monday, March 18th from 5-7 PM. Breather Serie: Drawing Connections was strategically placed a few day before major events from the UFMC and Wellness, such as the Formal and Mental Health Check-Ins, respectively, to allow participants to be exposed to these events and have a sense of the individuals who have either helped plan the events or might be going to reduce any barriers that might go into avoiding community-based and wellness-based initiatives.

#### **Cycle 4: Results**

A total of eighteen participants attended and painted pieces during Breather Series: Drawing Connections. A few administrators from the Commons and Student Life also decided to attend; excluding these individuals from the count, there were a total of fifteen students in attendance. While exact numbers of previous Breather Series initiatives could not be found on Salesforce, the University of San Diego’s system for tracking attendance at events, a member of the UFMC staff said that this was one of the better turnouts for this type of event.

To respect the privacy of individuals who attended the event, I will not be including any pictures that contain recognizable people within them for the sake of this project; to help analyze themes and success of learning outcomes, however, I am able to provide artifacts of what was created in the space as well as post-survey data.

Figure 3 provides a visual representation of what the communal tapestry came to appear.

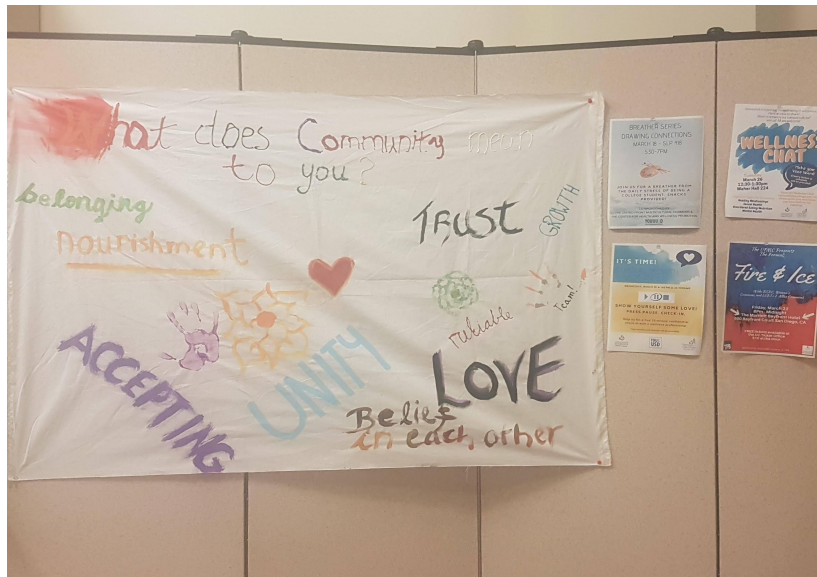
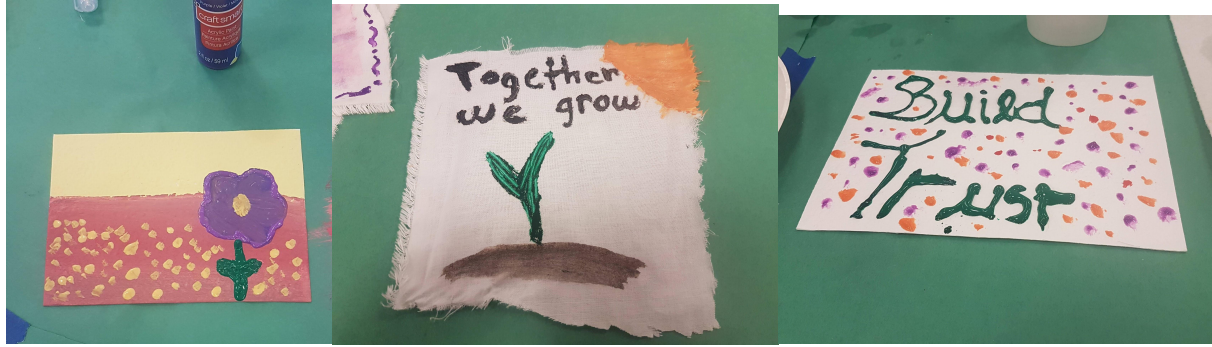


Figure 3: Breather Series Communal Artpiece of Belonging

It also depicts the tapestry after being displayed publicly outside of Tu Mercado with UFMC and CHWP flyers, respectively, to begin providing visible artifacts of the two spaces' collaboration and partnership to the larger campus community. Beyond the initial prompt of "What does community mean to

you?" at the top, individuals were encouraged to contribute whatever they wanted in whatever fashion they wanted. Words like "accepting, unity, love, and trust" appear largest. Visually, images such as flowers, handprints, and a heart also decorate the mural.

When paired with individual tapestry pieces, recurring themes of growth, nourishment, and cultivation seem to arise. As seen in Figures 4 and 5, for example, individuals painted a sprout and a flower as their object to take home. In Figure 6, the individual wrote "Build Trust" rather than simply "Trust." In addition to creating their painted pieces about belonging, these individuals were actively nourishing and building the space to create community amongst themselves.



Figures 4, 5 and 6: Breather Series Individual Artpieces

To better assess any emergent themes, data, and feedback, a six-question assessment (Appendix G) was emailed to all student participants the day after the event. A total of six students responded.

When asked to gauge their sense of belonging while at Breather Series: Drawing Connections, 100% of respondents indicated that they felt at least a slightly high sense of belonging, with five respondents indicating that they felt a high sense of belonging or a very high sense of belonging at the event (see Appendix H). When asked to elaborate on their experience in regards to belonging, students expressed a range of positive experiences including descriptions such as “fun and relaxing,” “an amazing time to meet new people to further my sense of belonging,” and “an amalgamation of everyone’s idea of community and we honored that.”

Participants were then asked to reflect upon their sense of well-being after participating in Breather Series: Drawing Connections. Five out of six respondents responded feeling a sense of improved well-being after attending the event; the sixth respondent stated a sense of neutrality (see Appendix I). When asked to elaborate on their sense of wellness following their participation in the event, respondents shared that they found the event to be “relaxing and fun, calming and a good way to end Monday which can be pretty stressful,” and an opportunity that made one respondent “feel wholesome.”

Finally, respondents were asked what could be done to improve future collaborations between the UFMC and Wellness. Responses varied, with a few individuals requesting better paint brushes and one respondent saying “nothing, we were perfect.” However, two responses spoke to continued need for collaboration between these two spaces in the future. According to one respondent, an improvement would be “just doing more collaborations and seeing more folks from wellness.” To the other, an improvement would be “continuing to do events like this, and maybe even consider doing them outside as well so we can enjoy the sunshine and the beautiful campus.”

These last two responses are powerful for several reasons. Firstly, the desire for increased visibility and relationship-building with Wellness-affiliated individuals was identified. The interest was not just in the event or activity, but the community-building and collaborative aspect between these two spaces as well. Secondly, the responses highlight the desire to continue these events more visibly and beyond the walls of the UFMC. While a sense of safety is needed before one can find a sense of belonging, it is important to find safety beyond walls and within a greater community. Finally, there is an unrequired sharing of needs on behalf of the respondents. This question was specifically coded as an optional response so as to ensure that any feedback provided was on the terms of the student, not my own. The students took the time to share their opinion and even provide a suggestion for what to do next. There is an invitation for us to acknowledge and accept that we are listening; it is our duty to respond.

#### **Cycle 4: Reflection**

Over the course of two hours, individuals had the opportunity to *create*. This creation came not only from the paintings that they put forth, but from the aspects of themselves that they put forth. They were not invited guests who were tip-toeing on eggshells to fit someone else's

decision for how the night would go; they were co-hosts. The data and descriptions provided a small insight into the sense of community created by the individuals gathered in that room.

Personally, I even had a fellow participant that I had never encountered prior to this event stop me while I walking across campus to say hello and share about her day. As stated above, the suggestions on how to improve this collaboration demonstrate that there is not only a *need* for such programming, but a desire for the students themselves to co-create how those needs are meet with the entirety of the campus community.

#### **Cycle 4: Planning and Action**

Though Cycle 4 marked the end of my formal data-collection for this project, the findings and experiences that I've been honored to share with these wonderful campus partners has informed my practice, both in my current role and for future endeavors. It is my duty, as is everyone else's, to bridge the gap between students of minoritized identities and wellness by maintaining a high level of visibility, accessibility, and authenticity in spaces in which they already feel a sense of belonging. It is our responsibility to continue advocating for their voices to be heard and grant these students a seat at the table rather than simply inviting them to come by means of a flyer. It is my duty, as is everyone else's, to hold wellness as a social justice issue, both in regards to our students and our society as a whole.

#### **Study Limitations**

While the findings of this Action Research project were profound, they were not without their limitations. First, this project exhibited a fairly small size of both students and staff participants. Furthermore, the lack of cultural diversity among students and staff at the University of San Diego also limited the sharing of key characteristics of particular respondent narratives or opinions because it might compromise their anonymity and feelings of safety on

campus given that they too were minoritized individuals on campus. Second, this study recruited and progressed with students who either openly stated that they found a sense of belonging through multicultural student organizations or found comfort in going to the United Front Multicultural Commons. With these facts in mind, it follows that students of color who do not belong to these spaces are a missing voice in this project; given the findings, it is also likely that these students might experience even greater levels of distress, isolation, and mental health disparities. Finally, it is worth noting that no international students took part in this study. As the topic of international students and culturally competent mental health services continues to emerge, the examination of such an intersection would be timely for future studies.

### **Future Recommendations**

The process of conducting this research and the findings that it produced have resulted in the co-creation of several recommendations. First, Wellness and Diversity, Inclusion, Equity spaces must establish processes by which to more seamlessly integrate their work. There are many suggested avenues to help ensure this. For one, Wellness staff, both clinical and non-clinical, must maintain high levels of visibility and accessibility in multicultural spaces--or any identified spaces that minoritized students feel a sense of belonging. This can be done by more readily collaborating on programs, attending events, establishing either announced or unannounced drop-in hours, or even just visiting the spaces on occasion. Utilizing existing structures such as the Breather Series is a very actionable first step on process. In time, however, both departments should regularly establish meetings or get-togethers--such as the yearly Wellness and University Ministry Breakfast--to foster relationships and lay the foundation for more regular consultation and integration. The traditional model of waiting for students of color to seek mental health resources on their own is a failing one. As demonstrated by most of the



students, they only sought help once their negative mental health outcomes were at an insurmountable low. While they sought help, however, there are many students in their position who do not. By meeting students of color where they already feel a sense of belonging, Wellness staff are made visible, accessible, and more personally known by students so that they have a connection to assist them when they are ready for the step of finding their way to Wellness services.

Second, Wellness offering must create avenues by which to give students of color--and representatives of multicultural spaces in general--a seat at the table for the creation of wellness programming, marketing, and resources rather than simply providing them a flyer with the information. During the process of this project, this suggestion was actually shared when difficulties with the Student Wellness Advisory Board emerged, such as poor attendance and lack of feedback regarding topics to discuss which contributed to delays in holding a forum for several months; unfortunately, however, the suggestion was not taken up. However, as demonstrated with the Breather Series collaboration, students of color have a demonstrated desire to come together and share their needs regarding well-being. What is needed in the Student Wellness Advisory Board is a component where students of color or representatives of these spaces feel embedded and heard during the process of its creation rather than simply being invited to be heard at the event itself.

Finally, a longer-term recommendation is to increase the amount of cultural diversity among mental health clinicians at USD. At the beginning of the data collection portion of this project in September 2018, there were only four clinicians of color split among three different offices on campus. The majority of interviewed students shared that the lack of clinicians of color provided a large barrier to seek or continue seeking services. Interviewed staff also shared

these sentiments and added that this unfortunate reality led to more pronounced caseloads for existing clinicians of color. Furthermore, the lack of clinicians of color also led to complications and concern regarding anonymity for the sake of this research and is what ultimately led to the expansion of interviewing non-clinical Wellness staff members as well. While we are tasked to meet the wellness needs of our students of color in the recommendations outlined above, we cannot ignore their need for increased representation in Wellness as well.

### **Personal Growth and Reflection**

Having the opportunity and privilege to engage with students of color and campus partners for this project allowed me to reflect upon ways to improve my own practice as well. As a Student Affairs professional with a desire to advocate for social justice and mental health, it remains my calling to place minoritized populations at the focus of my approach. Rather than continue to do things for the sake of tradition, I must critically analyze their origins, purpose, and implications for all stakeholders, particularly stakeholders from minoritized backgrounds, and advocate when these populations' needs are not being served. However, engaging in this work opened my eyes to the fact that I am actually doing all involved parties a disservice, including myself, if I attempt to do this work alone. Co-creation is at the heart of meeting the needs of students of minoritized backgrounds. I am not doing enough if I am simply trying to make events or programs more inclusive; I need to use my positionality and privilege to establish space for them at the table to determine how we can collaboratively work to meet their needs.

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## Appendix A

### Baseline Survey Questions

Sense of Belonging Inventory						
Name						
<input type="text"/>						
Academic Year						
<input type="text"/>						
Ethnicity						
<input type="text"/>						
Gender Identity						
<input type="text"/>						
Which organizations do you belong to at the University of San Diego?						
<input type="text"/>						
<input type="button" value="→"/>						

In a few words, how do you define a sense of belonging?						
<input type="text"/>						
<input type="button" value="→"/>						

On a scale of 1 to 7, how would you describe your sense of belonging at the University of San Diego?						
(1) Very low sense of belonging	(2) Low sense of belonging	(3) Slightly low sense of belonging	(4) Neutral	(5) Slightly high sense of belonging	(6) High sense of belonging	(7) Very high sense of belonging
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Please elaborate on your answer.						
<input type="text"/>						
<input type="button" value="→"/>						

During your time as a student of the University of San Diego, which of the following University of San Diego Wellness offices have you either utilized or had exposure via programs, social media, etc?

- ☐ Center for Health and Wellness Promotion
- ☐ Counseling Center
- ☐ Student Health Center

On a scale of 1 to 7, how would you describe your sense of belonging within University of San Diego Wellness offices that you have utilized or had exposure via programs, social media, etc?

(1) Very low sense of belonging	(2) Low sense of belonging	(3) Slightly low sense of belonging	(4) Neutral	(5) Slightly high sense of belonging	(6) High sense of belonging	(7) Very high sense of belonging
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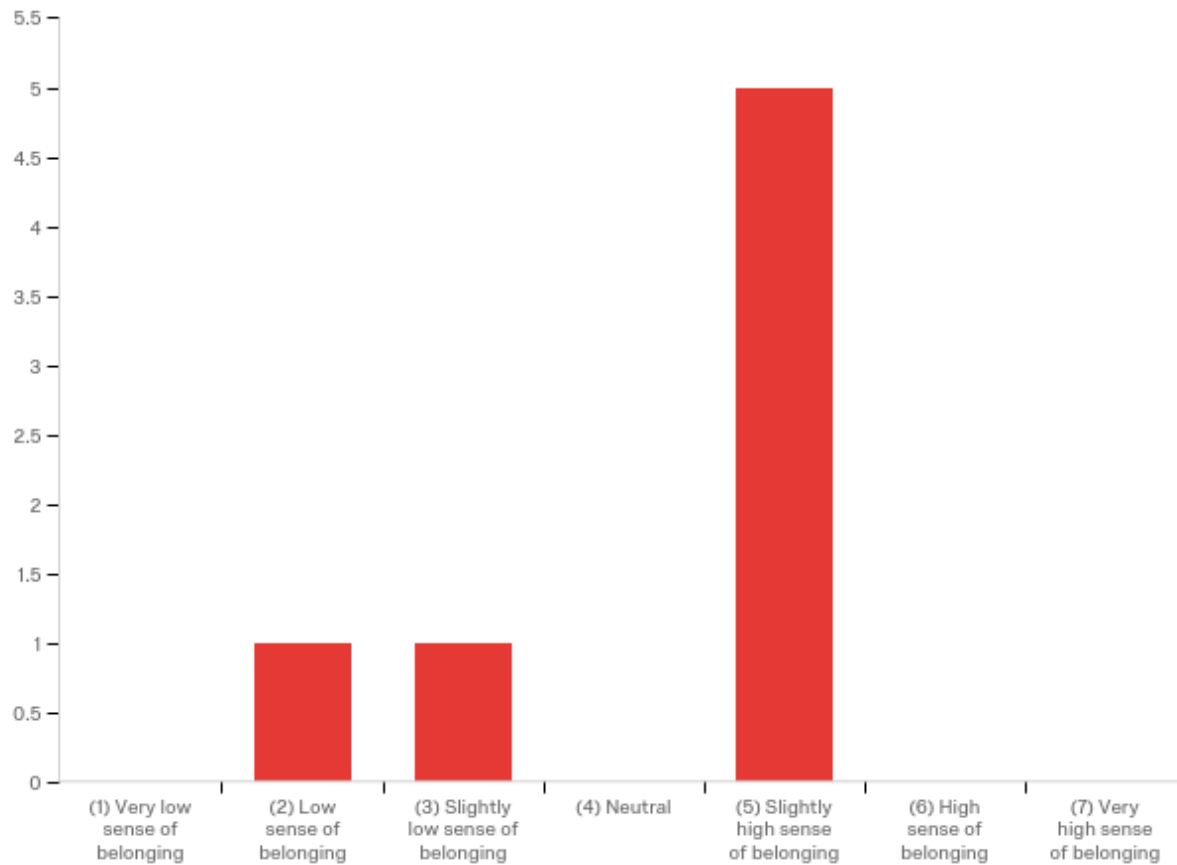
Please elaborate on your answer.



We thank you for your time spent taking this survey.  
Your response has been recorded.

**Appendix B**  
**Quantitative Survey Responses to Sense of Belonging at USD**

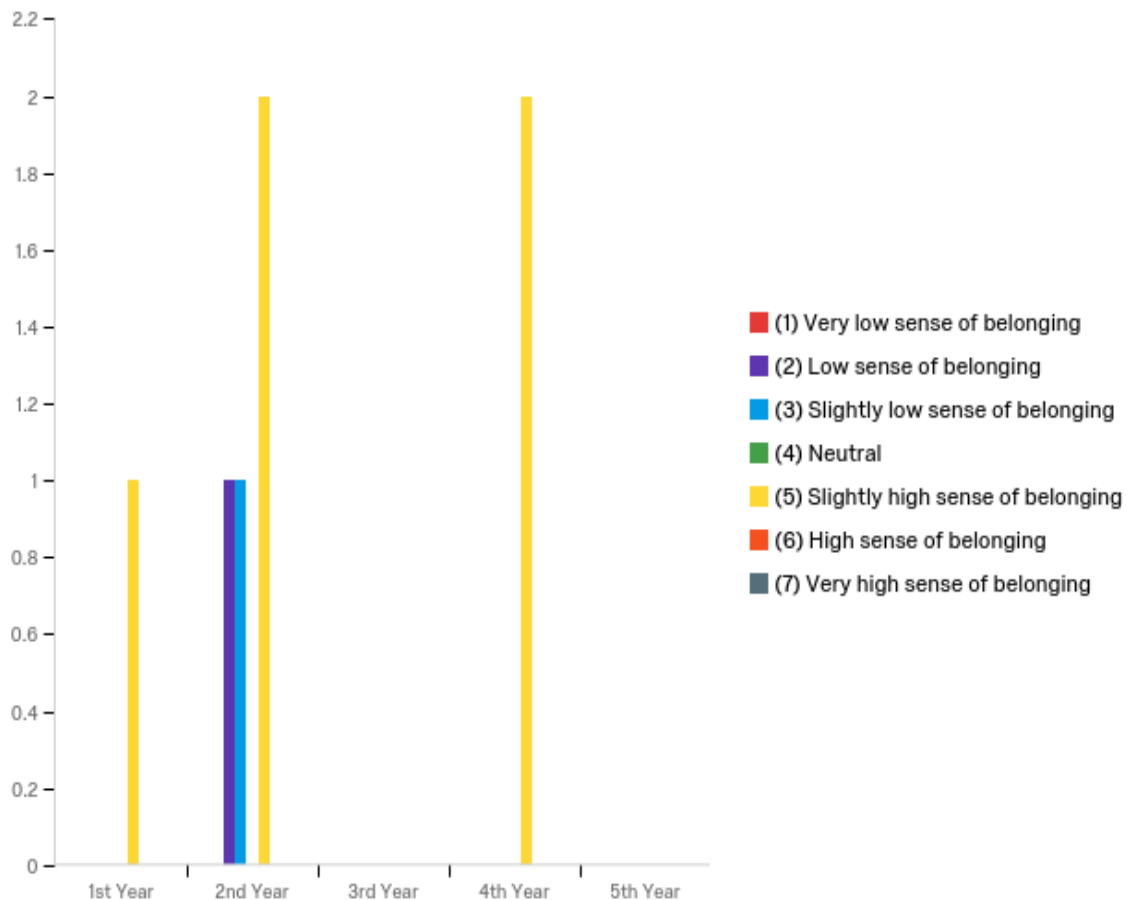
On a scale of 1 to 7, how would you describe your sense of belonging at the University of San Diego?





**Appendix C**  
**Quantitative Survey Responses to Sense of Belonging at USD by Academic Year**

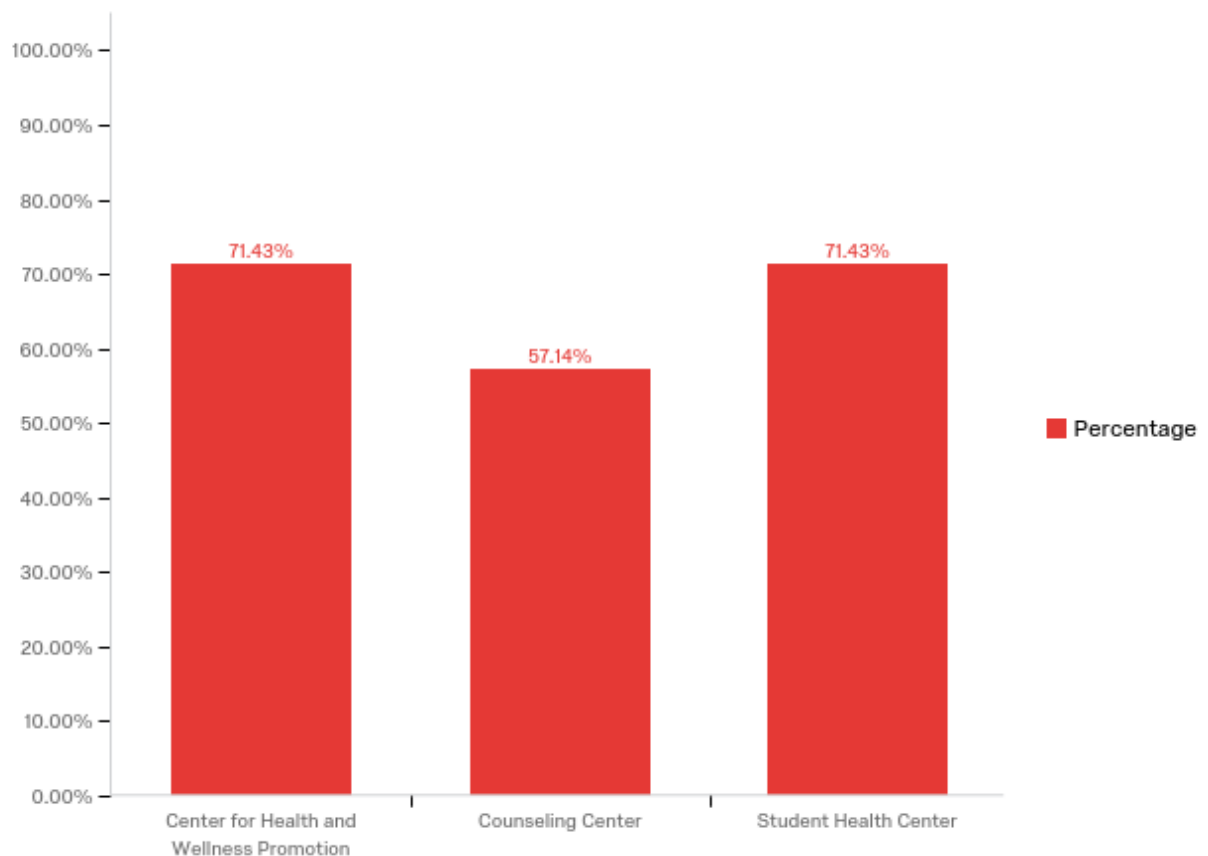
On a scale of 1 to 7, how would you describe your sense of belonging at the University of San Diego?



### Appendix D

#### Quantitative Survey Responses to Familiarity with USD Wellness Spaces

During your time as a student of the University of San Diego, which of the following University of San Diego Wellness offices have you either utilized or had exposure via programs, social media, etc?



**Appendix E**  
**Semi-structured Interview Questions for Students**

1. How do you define a sense of belonging?
2. Please tell me about a time when you felt a sense of belonging on campus.
3. What effects did this sense of belonging have on your overall well-being?
4. Please tell me about a time when you did not feel a sense of belonging campus.
5. What effects did this lack of belonging have on your overall well-being?
6. How would you say that your cultural identity or upbringing has impacted your view of mental health?
7. How comfortable do you feel about seeing a mental health professional on campus if needed?
8. What are some factors that might have deterred you or currently deter you from seeking a mental health professional, if any?
9. What would encourage you to seek a mental health professional on campus if needed?
10. How can we work together to foster a better sense of belonging for students of color in spaces that provide mental health services on campus?

**Appendix F**  
**Semi-structured Interview Questions for Staff**

1. How do you define a sense of belonging?
2. How would you describe your sense of belonging at USD?
3. How would you say that your cultural identity or upbringing has impacted your view of mental health?
4. When you were an undergraduate student, what were some factors that might have deterred you from seeking a mental health professional in the past, if any?
5. When you were an undergraduate student, what encouraged or would have encouraged you to seek a mental health professional on campus?
6. How do you feel about the existing mental health services at USD?
7. What are some barriers that you feel students of color face at USD in seeking out mental health services?
8. How can we work together to foster a better sense of belonging for students of color in spaces that provide mental health services on campus?

## Appendix G

### Breather Series Post-Survey

In a few words, how do you define a sense of belonging?



On a scale of 1 to 7, how would you describe your sense of belonging during Breather Series: Drawing Connections?

(1) Very low sense of belonging   (2) Low sense of belonging   (3) Slightly low sense of belonging   (4) Neutral   (5) Slightly high sense of belonging   (6) High sense of belonging   (7) Very high sense of belonging

☐   ☐   ☐   ☐   ☐   ☐   ☐

Please elaborate on your answer.



On a scale of 1 to 7, how would you describe your well-being after participating in Breather Series: Drawing Connections?

(1) Very low well-being   (2) Low well-being   (3) Slightly low well-being   (4) Neutral   (5) Slightly high well-being   (6) High well-being   (7) Very high sense of well-being

☐   ☐   ☐   ☐   ☐   ☐   ☐

Please elaborate on your answer.



What, if anything, can be improved for future UFMC/Wellness collaborations?



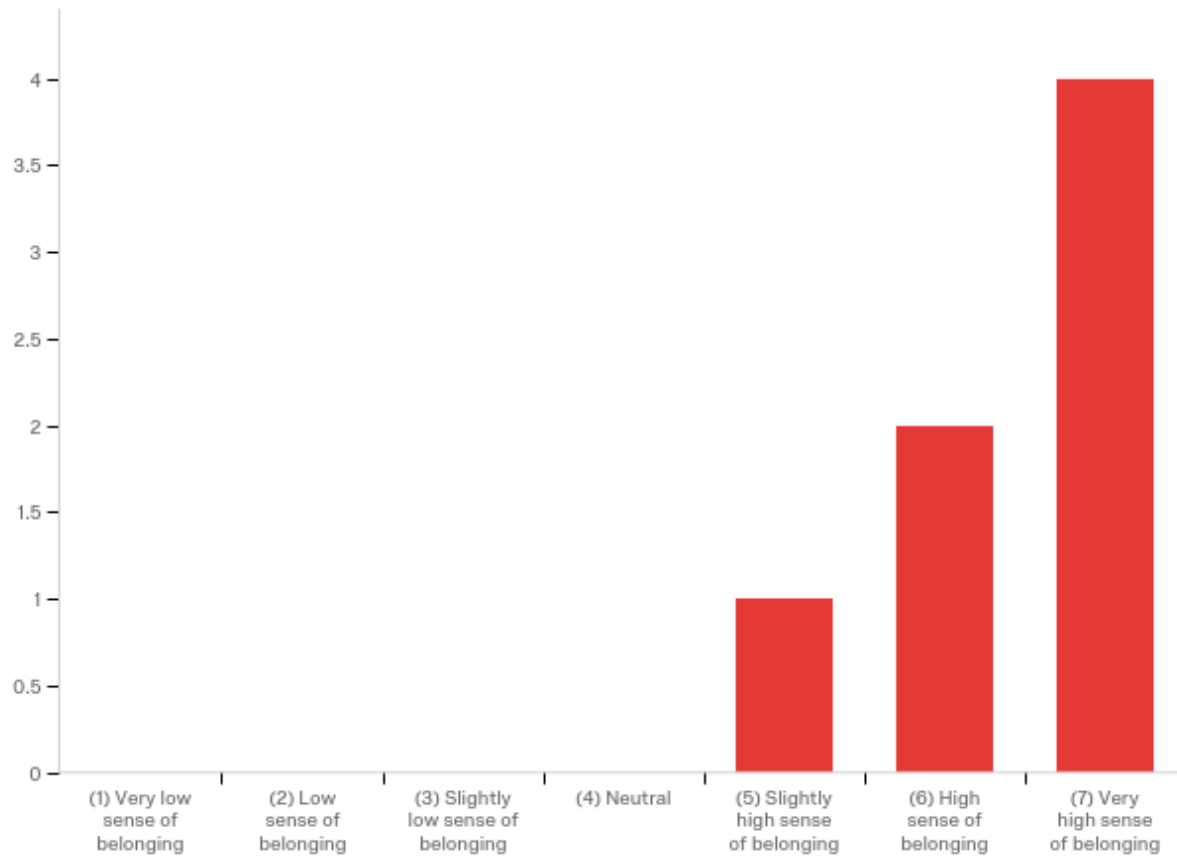
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We thank you for your time spent taking this survey.  
Your response has been recorded.

## Appendix H

### Quantitative Survey Responses to Sense of Belonging at Breather Series Collaboration

On a scale of 1 to 7, how would you describe your sense of belonging during Breather Series: Drawing Connections?



## Appendix I

### Quantitative Survey Responses to Sense of Well-Being at Breather Series Collaboration

On a scale of 1 to 7, how would you describe your well-being after participating in Breather Series: Drawing Connections?

