

How do we talk about race...and mental health?

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Abstract This paper reports research undertaken with Access students at the UK Open University which sought to address the Black awarding gap through an intersectional approach. Noting Black students were less likely than White students to declare a mental health disability (for which institutional support would be triggered), the authors explored Black students' reasons for non-disclosure using an ethically sensitive methodology. A self-selecting sample of Black students were interviewed by Black tutors, resulting in deep insights into the lived experiences of Black students. Due to the challenging personal stories elicited, these were presented as five composite personas.

Institutional recommendations around the need for enhanced cultural competence amongst staff, and more inclusive language in policy implementation may also address issues across the sector.

Key words Intersectional disadvantage; race; mental health; personas

Introduction

Researchers interested in widening participation are becoming increasingly aware of the importance of understanding intersectional disadvantage (Crenshaw, 1990; Collins and Bilge, 2016) in addressing inequitable access and success in higher education (HE). Intersectionality can make analysis of issues and the development of potential solutions more complex by complicating the work of institutional data analysts, for whom robust quantitative data is required by both evaluators and policy makers. However, solving problems through an intersectional approach (as opposed to the lens of a single characteristic like ethnicity) requires a more inclusive approach to understanding the student experience. This Research Note reports a small-scale qualitative study which illuminated an important intersectional issue and generated a series of outputs which may be useful

beyond the confines of the university in which the scholarship took place.

The first issue concerns the extent to which Black students are less likely than White students to be awarded the highest grades in assessments and final degree classifications. The last decade has seen a plethora of data identifying the stubbornly persistent awarding gap in higher education between Black and White students across universities in the United Kingdom (UK). The Office for Students (OfS), a crucial regulator of the student experience in England, has remonstrated with the sector to close the gap in outcomes as a matter of urgency. The OfS requires all universities charging above a minimum annual tuition fee of £6K to submit an Access and Participation Plan (APP) detailing how additional fee income is being utilised to support initiatives aimed at widening access, participation and success. As a regulator, the OfS has significant leverage with which to challenge universities not perceived as doing enough to facilitate equitable participation. For the last two years they have prioritised the awarding gap, insisting institutions introduce robust interventions to reduce the gap (and ultimately remove it altogether).

The UK Open University (OU) is a distance-education institution which, for its 50-year existence, has had an explicit social justice mission and a commitment to open access. Despite this, it has not been immune to this inequitable and indefensible awarding gap. As partial mitigation, the OU has strategically committed to reducing the gap to 11.1% from its current 31.1% by a series of targeted measures embedded in University practice through to 2024/25. These are captured and committed to in its APP.

The second issue concerns the extent to which mental health issues have begun to stretch university support systems across the UK. The last few years (amplified and exacerbated by the impact of lockdowns on student experiences and exam disruption during the Covid pandemic) have seen significantly increased sector interest in mental wellbeing. The OU has a long history of providing high quality and innovative accessibility support to enable learners with physical disabilities to succeed, but it too has seen a dramatic spike in students declaring mental health conditions, with related expectations that appropriate support will be provided to enable all students to succeed. At the OU, support

for mental health is reactive: educational and mental health advisors respond to self-declarations by students or referrals by tutors.

Internal institutional data for the last two years have identified that Black students (3%) are far less likely to declare a mental health condition than White students (5.1%). This is of critical importance, because it impacts on the likelihood of Black students receiving relevant support if they have undeclared mental conditions. We therefore designed an institutional scholarship proposal, which received internal funding: 'How do we talk about race and mental health' as one approach to explore ways of closing the Black awarding gap (NUS/UUK, 2019).

Literature

In order to scope the boundaries of the study, we employed an experienced consultant to explore the research literature. We were unsurprised that, in 2020, there was relatively little published in the UK bringing together the awarding gap in relation to Black students and the barrier of mental health declarations for Black students. Casting our literature review wider than originally envisaged, we did identify four broad themes:

- The urgent need for all universities to better understand the complex lives of Black students (Arday, 2018)
- The imperative for the sector to move away from treating Black students (or indeed students from any under-represented groups) as a homogeneous cohort (NUS/UUK, 2019)
- The important training requirement that lecturers and professional staff need support in developing cultural competence (Kiely and Clarke, 2008; Arday, 2018)
- The continuing necessity that universities foreground representations of successful Black students as role models (Frumkin and Koutsoubou, 2013; NUS/UUK, 2019)

In addition, our exploration of potential approaches to this research was informed by previous internal scholarship with Black students on the OU Access programme which concluded White people in universities avoided talking about race. This impacted on our methodological decisions.

Internal context

Our scholarship proposal was based on discussing mental health with Black students on the part-time distance-learning Access module *People, work and society* (presented three times per year). We chose this module for its scale (around 2500 students per year register on this module) and for demographic fit, as it is the University's most popular Access module, attracting a higher proportion of students from disadvantaged backgrounds than other modules. This 30-credit preparatory module is assessed at Level 0, and since its first presentation in 2013, up to 70% of learners have qualified for a full fee waiver based on a household income of under £25K. Thus the 10% Black students on the sample presentation of the module, and the 40% students who declare a disability, are also likely to face intersectional obstacles in relation to low socio-economic status.

Methodology

The research team (two of whom are White) were acutely conscious of the ethical challenges in a predominantly White university of conducting scholarship around sensitive and personal issues with Black students. Because of the nature of the topics to be raised, we developed a set of semi-structured interview prompts designed to stimulate a conversation rather than limit answers to closed questions. We took advice from University experts in the ethics of educational research methods and responded to helpful guidance from the OU Student Research Panel on drafts of our proposal. We designed an approach which created, as far as possible, an inclusive environment which was intended to be open to discussing difficult and challenging subjects with a view to supporting a better student experience (a key aspect of OfS guidance).

The intention was to gather qualitative evidence to better understand Black students' experiences of OU policies, practices and culture – all of which might disadvantage students – in relation to mental health declarations. We intended that together we might identify solutions to minimise or mitigate these barriers. We also intended to foreground recognition that the gap is due to

institutional/structural barriers/racism, avoiding conceptualising the issue as a deficit model which places the blame on the individual rather than institution for making poor course choices or individuals lacking in ability (Singh, 2011; Cotton et al., 2016; NUS/UUK, 2019; Stevenson et al., 2019).

As a result, a call went out (in an online student forum and by email via tutors on the module) to all students on the October 2020 presentation of the module, asking those who self-identified as Black African or Black Caribbean (whether of British or other national origin) to respond if they were willing to be interviewed for our research.

Associate Lecturers also told students in their groups who they knew were from these ethnic groups about the project. Initially, seven students came forward. One student did not attend the scheduled interview date and time; the interview was rearranged, but they still were unable to attend. Another student had family issues which prevented their involvement with the project. After a series of iterative discussions, five students were interviewed. Simultaneously, an expression of interest went out to Associate Lecturers teaching on the module who self-identified as Black or Brown to contribute to our scholarship as interviewers. Two colleagues were appointed and between them they interviewed the five student participants online via Microsoft Teams video. Each interview, effectively a rich and honest two-way dialogue, lasted approximately an hour, with recordings transcribed, resulting in 100+ pages of qualitative data.

The interview script data were initially reviewed by the project team (including the interviewers), who worked iteratively to refine the qualitative data into a series of categories, coded according to key themes and commonalities identified in the literature. These were re-analysed to produce a series of personas which were then validated in consultation with two of the five student participants who had been recruited through an expression of interest for further involvement in co-creating outputs from the interviews.

Originally, the plan was to produce six personas as a way of anonymising the data, but upon analysing the commonalities and stories of the students, five seemed a more cogent way of synthesising the data without diluting the essence and sentiments

of the stories. It was important to share the key messages, including mental health, talking about race, representation and the importance of the tutor-student relationship. However, we were aware of the need to avoid stereotypes whilst doing justice to the individual students and the information they shared, particularly because they had opened up so freely with the interviewers. It was also important to ensure we reflected some of the intersectional disadvantages the students reported. Hence a persona was constructed around a person with physical disabilities, one with a diagnosed mental health condition and others including students in receipt of the fee waiver bursary to represent low socio-economic status. There were other significant parts of the student stories we wanted others to hear, such as the journey and impact of being a forced migrant or experiencing direct racism. Finally, we wanted to mirror the more subtle elements of the lives and/or lifestyles of the interviewees like having a less racialised view of the world, or being in an interracial relationship, as this highlights the individual and different lives our students lead.

The critical decision to present the findings through a series of composite personas (Van Rooij, 2012; Friis Dam and Yu Siang, 2020), was taken in order to depersonalise some of the individual traumas which had been shared, very openly, with us. We considered presenting the findings as profiles (Rogiers et al., 2019) to acknowledge the self-reporting, or archetypes (Walker, 2018) to better represent the emotional resonance of individuals' cultural histories, but came to the view that 'engaging' personas would help colleagues in the sector understand the students' lived experiences.

By creating a range of culturally specific personas (Black British female, Black African male, Black mature female with a disability, Black forced migrant male, Black female with a disability), we were conscious we were identifying sensitive issues, both for the participants and potential audiences for the scholarship. Personas thus enabled the breadth and commonalities of participants' experiences to be represented holistically.

The five personas identified a wide range of key findings.

Figure 1 'Kaye' persona



Figure 2 'Joshua' persona



Figure 3 'Brenda' persona



Figure 4 'Zaahra' persona



Figure 5 'Abdo' persona

Identity: 'Black man – not sure where I belong. My family were forced migrants. I came to England from Sudan in 2015'

Age: 47 | **Name: Abdo** | **First language: Arabic/English**

Educational experience
Lacks confidence, used the bursary to study

Talking about mental health
I was struggling with my studies, with life in general I was tired all the time and felt unwell. I don't want to be labelled with a mental health condition. I don't want to be called crazy. I was worried about telling the OU because of the impact on my family and studies being labelled with a mental health condition. I also thought they'd make me get a letter or certificate from my Dr and that it would cost me money to do.
My tutor is amazing though, I've had fantastic support. I confided in my tutor about how I was feeling and they sent me links to a website, some videos and to the help centre. I wish there was a dedicated wellbeing service that I could pick up the phone and call and speak to someone. Someone who would be able to understand my past and my journey.

Talking about race
White people don't like talking about race because they feel guilty about their colonial past and the problems they created which impact on people who have come to this country.

Disability
I wouldn't call it that

Representation
I don't feel isolated but I don't have much contact with other students. I know to go to my tutor if I'm struggling. The reflective parts in the module is good but I don't really see myself in the materials but I am having the same experience as other students. I belong because my work is ok. It would be nice to have a Black tutor.



Discussion

As represented across the personas, our Black students' perspectives identified insightful views on mental health. First, students suggested institutional messaging needs, as a matter of urgency, to reassure students that there is nothing to fear or be embarrassed about by talking to us, that they will not be treated any differently and that the information is confidential. Second, the University needs to tell students *how* they need to speak out to get help, and that with help they are more likely to persevere with their studies. Third, a concerted strategic effort is required to make it easy for students to find the information they need, whether supported by their tutors, by embedding in module design or on *StudentHome* (the OU virtual support centre). Fourth, authors should build more reflective tasks into modules, thereby allowing students to think about how they are feeling at critical points in their study, accompanied by signposts to support materials.

Students need help to understand what declaring a disability means, how to complete the forms, what the different levels of support are and that they do not necessarily need a note or certificate from their GP to access support from the university.

As a university committed to closing the Black awarding gap, the OU needs to review the way in which mental health is

declared as a disability and consider how we can uncouple these terms for students despite the constraints of OfS reporting requirements. The language we use to describe mental wellbeing may need to be far more subtle and inclusive for Black students, resulting in tutors and advisors listening for cues such as feeling unwell or tired, having a bad day or not feeling too good.

In addition, we concluded from the data that University staff should be trained in how to support Black people with mental health conditions, having cultural competence and empathy with the individual's journey. A wellbeing helpline would make it easy for students to have direct contact with someone they can speak to. Teaming up with an existing provider that provides culturally competent support could also help. Having empathy when speaking to students can help with recognising the different journeys students may have had. Our frontline staff need to be able to empathise with, for example, the mental health impact on a forced migrant, as well as with people who experience or have experienced racism on a regular basis, whether direct or indirect. The need to diversify support staff at the OU could easily address the need for cultural competence, as staff from diverse backgrounds are more likely to have common lived experiences with Black students.

At the OU, tutors are critical in the student relationship, as they are trusted individuals and are spoken of highly in student evaluations. Our participants encouraged tutors to have high expectations for all students and encourage attendance at online learning events, whether synchronous or asynchronous. As learning goes increasingly online, universities need to support students' anxieties about posting in forums and attending live virtual tutorials. Tutors can support students to create a tutor group identity and community so that students can see each other and get to know each other and feel psychologically safe. Tutors should reinforce students' expectations about tutor contact and support and be proactive with contact. Signposting students to support is also key. Ensuring tutors are aware of resources and support through training and development is therefore also necessary.

Important issues also emerged around the hidden curriculum and the need to enabling students to develop social and cultural

capital. Universities cannot assume students will know where or how to get the information they need to support them with their studies. Students need on-going guidance and support with finding this out (for example, how to fill in byzantine finance forms or when they should contact their tutor). Far clearer on-going induction processes should replace one-off induction events to build student confidence as well as knowledge about the support mechanisms (Hassel and Ridout, 2018). Ongoing support needs to be evaluated to provide evidence for enhancing interventions like study buddies, student partnerships, peer mentors or Personal Learning Advisors.

Issues of student finance were also raised. Black students tend to be from lower socio-economic groups and therefore are more likely to need to work while studying. The cost of a module may be prohibitive. Bursaries can support students by absorbing this cost and potentially go towards reducing the hours that a student may need to work to enable them to have more time to study.

Finally, and importantly, it became very apparent that our participants believed empowering Black students will enable them to succeed. This may include embedding support (for example, how to be resilient or where to find the BAME OU Student Association network) into module design. Seeing other Black students, staff and themselves reflected positively in the curriculum are all enablers. This requires the OU to increase the number of Black academics.

Conclusion

In universities, we need to talk about racism openly, challenge our understanding and speak with and learn from those with lived experience. We need to interrogate our own unconscious checklist to avoid biases, stereotypes and stereotyping and to pro-actively develop cultural competence. This is as much an individual's responsibility as it is a university's and would support colleagues with using appropriate language. We need a terminology with which to talk about race and racism as a matter of urgency. This would help address intersectional challenges and institutional barriers around the unwillingness of some Black students to

discuss (and declare) issues around mental health which prevent provision of appropriate and equitable support.

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