

NARRATOR: As our society reckons with issues of racial disparity and mental health, RIT's Counseling and Psychological Services is working to address some of the unique mental health challenges facing RIT's students of color. In today's episode of Intersections: the RIT Podcast, three mental health therapists who identify as people of color—Odessa Despot, Isabel Chandler, and Jaime Castillo—discuss issues related to mental health stigma, the impacts of racism and racial trauma, and ways to support those experiencing mental health issues.

ISABEL: What is it about mental health specifically in Black and brown communities that is so important to address? Or why is there so much stigma? Why is it so important that we specifically address mental health in these communities?

ODESSA: So, when we talk about mental health, we are talking about parts of ourselves, our identities, our self-esteem, our feelings of belongingness. When I think about mental health, I think about all of these pieces of self that people bring into the room of belonging, of how that experience is then talked about. What do we do with that? And we've talked about this, each of us has talked about how we've been micro-aggressed, racial trauma that we've experienced. I mean I think people of color bring that into a room when you're with them.

ISABEL: Yeah, and especially now to add to the students, the stress of having the typical college student experience, which is stressful enough and then also a lot of students, especially students of color, who are feeling the need to have to be activists. Right? Like how do you balance school work with also trying to – like this summer – be out there for the protests or actively do things within their clubs, their school, their dorms, whatever, to actively dismantle a lot of racist systems that are still in place.

JAIME: Isabel, one of the things you asked – or one of the questions was, “Why is it important to address this with our Black and brown communities?” So here at RIT because the students literally wrote it on the Quarter Mile, right? It matters. We matter. Right? And that's right in front of us. And we're in a really unique position as therapists here, as outreach people, as people who are embedded in different spaces on campus, that we have a privilege of being able to understand some of these really complex sociocultural experiences because we've experienced them first hand growing up. I'm first-generation American, but I have a distinct memory in first grade writing my name on a piece of paper when we were learning our middle names and looking around the room like nobody's middle name here looks like mine, has the letters in this order like mine does. And I remember pretending like I didn't know what my middle name was because it wasn't John or Paul or Michael, and being like, “I don't know what my middle name is.” And I didn't think about that until it came back to me years later. These are things that we develop and it kind of comes back into the present moment of being in a unique position being able to say, I hear these stories of students. They're telling us these things in their most vulnerable places. We also have a skill set to take that information and be able to make it something in the community, to be able to make a difference, right? To be able to organize, be able to use resources, to be able to say, “We see that, we hear that, we want to make a difference here.” And that's not easy. Organizing Black

Mental Health Matters with Isabel, Grace, and Odessa being part of that, that wasn't easy either. But we had to recognize we've had unique experiences, our students are calling for this, and we have to break out of our comfort zones and create something that was never here before because the students are asking for it. They put that work in already and they're kind of like saying, hey, we started this foundation. Yeah, we're listening, we can help you here. We hope it kind of connects us to the community and working with the students, hearing what they've experienced, and feeling so quickly, oh my gosh, how much we have had similar experiences that, no, other students who don't identify as Black or Brown don't have to deal with, like you mentioned Isabel, like never had to worry about if I don't protest, this could negatively impact my life, this could lead to further discrimination. So, it's a completely different stress added onto the pandemic, added onto finding a co-op, added onto everything else.

ISABEL: Yeah, and I would even add to that, even on a larger scale, when we talk about why is it so important specific to this community, especially the Black community, I would be remised if we didn't talk about trauma, right? Being a therapist, we're all trained to know that trauma can be unique in a very individual experience. But also, trauma can be intergenerational and happen on a wide scale. And if you just look at the history of people, especially Black people in this country, there has been just a history filled with violence, with discrimination, with inequality, and also more currently, it being all televised. So now the world can see it, regularly. Right? And that adds a lot of stress and anxiety. We know – there is research that says that Black and African-American people are more likely to express feeling more stress, more anxiety, and oppression, but also the least likely to get help. And obviously we talk about stigma – getting help is still seen as a weakness. And we can address that there's been a long history of some really unethical practices within the medical and mental health field within Black and brown communities. And sometimes even when Black and brown people go get help there is a likelihood of being discriminated or experiencing a microaggression from your therapist. So, often it can feel like the odds are against you and that's why, as we're talking about, it's so important to talk about mental health specific to these communities. What are some of the things that you both have noticed when it comes to yourself and even when you talk to students who have experienced racism, like how does that really affect our mental health?

ODESSA: What does it feel like to feel unsafe? It does not feel good. I think it can contribute to all kinds of detrimental effects to mental health – anxiety, depression. You've heard Black people say this: "Can I run? Can I jog while being Black? Can I sleep while being Black?" And I think it's really scary to think that your everyday life could be affected by racism, and that is a harsh reality. And I think Black and brown communities have known this for a long time. And I think we are waking up and we have been trying to wake up. I just hope it sticks because it just has such negative effects for our mental health for Black and brown people. And also white communities as well. What is that like to know that your colleagues, your friends, your staff – that there's a community of people who are suffering? And that you may actually be contributing to that in some ways? History has not done us any justice here in the United States, and

we've done a really poor job. We've erased the narratives of Black and brown people in this country.

JAI ME: Those that don't experience that day to day. Just physiologically, when you experience a traumatic incident your brain changes. Adrenaline gets pumped, cortisol gets dumped, all that impacts you, which is why if you don't adequately address it through therapy or your own kind of healthy processing, that reshapes how you think, how you react, how you engage, your confidence in connecting with other people. It reshapes – literally reshapes your brain. The neurochemistry of your brain changes. So intergenerational trauma, the same kind of thing. Imagine being microaggressed on a regular basis, even if it's weekly, monthly, whatever that is and that goes unaddressed. You don't realize the amount of the stress hormone in your body and how that impacts your heart, how that impacts your ability to function, your whole health. That's the kind of stuff I feel like as a therapist, if you're not aware of that you can overlook something like anxiety or depression and not realize that what is an underlying feature of ongoing chronic health issues is grounded in racism or being microaggressed over time. And I feel like that's a really important part of maybe hesitations of people seeking treatment. Not only because of the history of being used as literally experimental subjects. But also is my therapist, is my doctor really going to be able to hear me and understand that it's not just high blood pressure? It's high blood pressure because of these ongoing chronic sociocultural issues that are happening that I've had to endure. How is that a comorbid issue with my health. For students right now, being able to see and hear that people are beginning to recognize the impact of that. And they recognize their own health. I feel like this generation is more cool with therapy and more cool with talking up, which is great. Maybe that's because of TikTok or Instagram. But I feel like that's an underlying thing of mental health - it's not just anxiety. It's years and years of this and your brain is different. Trauma impacts the brain, it's your limbic system.

ISABEL: When we talk about racism, there's this one specific memory. I have a lot of specific memories of my dad. But I remember one time he and I were talking, and I was just asking him about what it was like for him coming into this country. And he came to the U.S. when he was like 14 or 15 and that was like the mid-'70s. And I remember he was telling me that his first introduction to understanding what it meant to be Black in the U.S. And he was a grade behind from where he was in Panama. So, he came to the U.S., he's a grade behind, so he's already older than all the other kids in his grade. He can't really - kind of can get through the language and he gets assigned this partner for whatever project and the plan is to go to her house. And he shows up with her and her mom is like, "This n-word can't come into my house." And he can't get the project done because he's not allowed to work with her. And I just imagine now how traumatic that could have been or was in your self-identity, just your self-esteem. Already it's hard enough. I don't speak this language. Whatever the project is, that's difficult. And then on top of that now I have to worry about who I can be around. The minute you experience racism, it's that reminder that you don't belong. And when you continue it's just always that reminder that you don't belong. It hurts every single time and it wears on you and it gets harder and harder to put on your shield or your armor to get through the day. I'm going to ask, probably a controversial question. How might you respond to somebody

who would say, “Doesn’t everybody’s mental health matter?” What is it specifically about being a person of color that’s important to recognize those specific challenges as it relates to mental health?

ODESSA: I don’t think any of us here would disagree that mental health matters. Mental health matters for everyone. I think what we’re talking about with Black and brown communities is there’s an invisible layer of stress that Black and brown communities carry with them every day. And sometimes we can compartmentalize it and sort of go about our business. But sometimes it is in our face and it is blatant. Whether it’s in the media with someone being killed. Whether it’s hearing a friend being microaggressed. Whether it’s yourself being microaggressed. Whether you’re in class and you’re like, the professor’s not calling on me. Is it because of the color of my skin? That’s what racism does. It puts into us that we are somehow wrong or bad. And I think that is dehumanizing in a way that you’d have to experience it to understand. Yes, mental health matters for everyone. And Black and brown students, people, communities are walking around with this invisible layer of stress. Stress that is derived from racism and racist practices and structural racism. It is affecting you at the core level and physiologically. When I am discriminated against, I cannot describe enough to you what that feels like in my body or the questioning - what just happened here? The shock, the disbelief, the confusion. Imagine if you had to walk around with that and write a 10-page paper.

JAIME: So then, what if someone is experiencing mental health and they want to reach out? Or what can they do if it’s a friend? That’s question number one to both of you. And number two, what are we trying to do here at RIT to support students who are experiencing these stresses to try and close that gap to ensure we’re paying special attention to meeting the needs of our Black and brown students or BIPOC students or ALANA students? What are we trying to do here?

ISABEL: To address the first part, what do you do? The first thing would be to listen. And I don’t mean that in a sense of being their therapist. I mean quite literally listening to them. If they are trying to talk to you about an experience that they had, especially as it relates to racism or microaggressions, listening to them and just validating them, being able to say, “Man, that does suck. I’m sorry that you experienced that.” That can be so healing and validating just to begin with because oftentimes when you try to explain to somebody or try to talk about a microaggression, oftentimes you’re met with, “Are you sure that’s the way they meant it? Maybe you’re just taking it the wrong way.” And sometimes people say that to us because they want to make things better for us. They don’t want to see us hurt, so they’re coming up with other scenarios so that we don’t take it the “wrong way.” Thinking specifically to microaggressions - we know. We know the maliciousness sometimes behind it. And it can be really healing just to be heard and somebody saying, “Dang. I’m really sorry that happened to you. What do you need from me? You want to just talk about it? You want to go take a walk? You want to do something to distract yourself from it?” So, that’s one. And the other thing is, too, we’re talking about stigma. You are not weak to take care of your emotional health. That is one of the most resilient things you can do. So, actively breaking stigma by saying

things like, “You should go talk to somebody. Talk to somebody more. It seems like you need a higher level of care that me as your friend cannot provide. Go talk to somebody. It’s not weak.” And then what we’re specifically doing is Odessa and I help run Real Talk. That is a student-facilitated connection group where if you are a student of color on the RIT campus, you are more than welcome to join and build community. Because we know that part of what helps with your mental health is building community. Odessa and I run Sisterhood of Healing for women of color. Jaime, you’ve done a whole lot of stuff for the College of Science just to help students even be aware, and professors too, of what it looks like when somebody is experiencing difficulties in mental health. So, I think I feel like the three of us have been on this journey to really have everybody else see and gain more insight of why we need to pay attention to mental health and why we need to pay attention to Black and brown mental health.

ODESSA: We need representation. And that’s part of what we’re doing here. We have three people of color who are saying, “Hey, we want you to come talk to us.” We understand some of what is going on. We are going to help you name some of the racial trauma. We’re going to help you name the complexity of being a college student on a campus. It is so multifaceted, so multilayered. There are these diverse experiences that people have here. And bring your different parts of yourself to this meeting when you come to see us. It is okay. We’ve really tried to challenge some of the stereotypes associated with seeking mental health. For a lot of people it’s still seen as weak. And the private stays private in a lot of immigrant communities and a lot of Black and brown communities. You don’t talk about private matters. It’s like mental health is for white people, not for us. It’s for everyone. Come talk to us. Come tell us what’s going on. Let us help you help you get better.

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