The Utilization of Mental Health Counseling Centers by Black Women at Predominantly White Institutions.

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The Utilization of Mental Health Counseling Centers by Black Women at Predominantly White Institutions.

A Senior Comprehensive Project

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Abstract

Black women often experience many hardships in their lives and in college, leading them to need counseling services. Black people are often expected to navigate through White spaces and process traumatic events without the proper support, and this can lead many Black people to suffer in silence. Predominantly White Institutions (PWI) can have a significant toll on the mental health of Black students. The current study aims to examine to what extent Black women are utilizing the counseling center here at Allegheny College, a PWI. I hypothesized that Black women are not using the counseling centers at PWIs because the resources provided do not meet the students' needs. Results indicated that 91.7% of participants felt that Allegheny has not made sufficient efforts to make its Black students feel more comfortable utilizing the counseling center nor does it provide adequate resources for Black students who do need these resources. For this research, the term “adequate” will mean “barely sufficient or suitable.” This term will describe the effectiveness of Allegheny’s resources for its students of color.

Key Words: *Black Women, Predominantly White Institutions, Counseling Center, Therapy, Microaggressions*

The Utilization of Mental Health Counseling Centers by Black Women at Predominantly White Institutions.

"The most disrespected person in America is the Black woman." (Malcolm X, 1962). She is told to be seen, not heard, and is deemed too aggressive for simply speaking her mind. She is stripped of her creativity and left to pick up the pieces. Mental health is not discussed in Black/African American households due to the stigma surrounding mental illness. The research on Black people's mental health is also minimal. Spates (2012, p.1) found that "research reveals that Blacks {people} are more likely to suffer from a mental illness yet less likely to seek treatment, and when they do seek treatment, they are more likely to use emergency rooms for mental health care and thus are more likely to require inpatient care." (p.1) This article discusses the importance of having Black women in science. This inclusion is critical to equip mental health clinicians better to handle the unique needs of this population (Spates, 2012, p.1). It also addresses the importance of allowing Black women to cope with stress in healthy ways. Many of these experiences are problems that Black women will continue to face at different stages of their life. This experience only worsens as Black women enter the real world. One aspect of the real world happens to be Predominantly White Institutions (PWIs). Black women arrive at PWIs and are met with racism and microaggressions. They are forced to deal with these problems alone or go to counseling centers/therapy. The counseling centers at PWIs are usually full of undertrained, culturally incompetent, White therapists that do not know how to deal with racial trauma. So, many women choose to deal with these problems independently, which often leads to them suffering in silence, seeking outside therapeutic/religious services, or substance abuse.

Therefore, the goal of the current study is to examine the factors that affect Black women's utilization of the counseling center at PWIs.

Previous Research

There is minimal scholarly literature on the study of Black women's mental health. Kam (2018) discussed whether there were ethnic group differences in direct and indirect mental health help-seeking behavior. Researchers recruited participants of many ethnicities and races who were all 20 years old. Participants were asked to complete an online survey. Racial and ethnic minority (REM) college students are consistently found to be less likely to seek professional psychological services than their White college student counterparts (Kam, 2018, p.493). The results of this study implied that White people are more likely to seek help than any other racial group. This is one reason why there is so little research on Black mental health. This article is relevant to this study because it discusses the help-seeking behaviors of Black American women when compared to other races/ethnicities. This article includes statistical data to prove that even when Black college students show higher distress levels than White students, they still choose not to seek out professional services. Black students would rather suffer in silence than get help. Why is this?

One reason for this might be that the students are not receiving counseling services that they feel are adequate. Davidson (2004) studied how often minority students use counseling services. Researchers collected data from 242 students. Participants were expected to attend therapy sessions in person and participate in group therapy sessions. Results indicated that 85 participants ended their counseling services with a no-show. The brevity of minority students' counseling experiences found in this study may be related to dissatisfaction with the counselor or

counseling center characteristics. (Davidson, 2004, p. 267-68) The implications of this are that many people stop going to the counseling centers on campus if they feel that they are not getting adequate services. Researchers found that some students used the counseling services for short periods, but they did not continue to use them, implying that they were willing to receive help, but the support was inadequate. Therefore, in the proposed study, participants will be surveyed to determine why they may not be utilizing the counseling services at this PWI or if they stopped using these services after some time.

Another reason students may suffer in silence is the fear of being shunned by peers and family. Whaley (2018) discussed whether the idiographic and idiothetic approaches using MDS analyses would reveal gender differences among African Americans versus European American students in implicit cognitive processes underlying the 16 clinical problems. Researchers recruited 322 participants for this study. The methodology of this study was a self-assessment. Researchers found that African Americans had less counseling experience than European Americans and showed less help-seeking behavior. Depression is often overlooked when it is comorbid with substance abuse among African Americans due to racial bias (Whaley, 2018, p.292) This is very true within the Black community. Black women and men are drowning in substance abuse that stems from mental illness and do not know how to ask for help; instead, their families shun them. Substance abuse is treated as a separate issue from mental illness when the two go hand in hand. This study implied that Black students are suffering and not seeking help. I chose this article because it incorporates how different intersecting identities can contribute to help-seeking behavior.

Students may also avoid seeking help due to the stigma surrounding mental health. Barksdale (2008) examined the influence that family and peers have on the help-seeking behavior of African American college students. This study involved 219 participants, all of whom identified as African American. The study was conducted by using a survey that totaled 93 questions. Researchers found that familial norms highly influence the help-seeking attitudes of African American college students. This study also noted that a critical factor in African American underutilization of mental health care is primarily the negative perceptions and perspectives from families about mental health care. Black youth grow up surrounded by negative connotations of mental health care, which does not stop once they reach the real world. Between not having access to Black mental health counselors and having negative experiences with White counselors, it's no wonder mental health is frowned upon in Black households. This study is relevant to my research because it names one factor for why students may not be using the counseling services, and it may help back up my data.

Students may want to get help but lack the emotional support to seek help. Constantine (2003) tested the moderating effects of social support resources on the relationship between psychological distress and willingness to seek mental health counseling among Black and Latinx students attending a PWI. This study involved 158 Black and Latinx participants and used surveys to collect data. Researchers found that a support network served as a solid positive reinforcer for the Black students to seek counseling services. It is easier for a person to want to get better if they have others cheering them on. Sometimes a person's biggest enemy is themselves. We tend to overthink, and that is usually our downfall. This article is relevant to my research because it may support my data and support my argument that Black students rely

heavily on the opinions of others for making decisions on mental health because of the stigma surrounding mental health.

A significant reason students may not seek help is that they do not feel comfortable with the counselor. Sometimes, the students take all the necessary steps, but the connection is not there. Giuffrida (2010) aimed to inform college counselors of this hesitancy so they can better understand things from a student's point of view. This article discusses why Black students do not connect with White faculty. It also talked about the experience that students have with transitioning, from leaving family and friends behind to the experience of finding a safe space on campus within Black student organizations. Being a Black student at a PWI is hard enough as it is; the trial and error of finding a safe space on campus does not make it any better for students. If anything, it has the possibility of causing more trauma. This article supports my research because it discusses the many things that can lead a student to suffer from mental illness. Without suitable support systems, it sets a student up for failure, especially students of color.

Students often feel the need to conceal their genuine emotions due to potential adverse reactions from everyone surrounding them. Masuda (2012) investigated whether mental health stigma and self-concealment were associated with negative attitudes toward seeking professional psychological services in Black college students. For this study, researchers used 163 participants, 127 identified as women. Researchers found that mental health stigma and self-concealment were negatively associated with help-seeking attitudes. The stigma surrounding mental health is one of the leading causes for people choosing not to seek help. The "strong Black woman" trope follows Black women and has made it very difficult for Black women to seek help when they are drowning in mental illnesses because they are so attached to being

"strong." This article is helpful in my research because it discusses self-concealment and the consequences of the stigma surrounding mental health. This supports my argument that when people do not use counseling services, they tend to find other coping mechanisms which are usually unhealthy and lead them to conceal themselves from others. It all comes down to the stigma that surrounds mental health.

On some occasions, students may require more holistic practices to deal with their mental health, and they may not need counseling services. Parham (1981) analyzed the racial identity attitudes of Black college students when put with White counselors. For this study, researchers used 29 participants that identified as women. Researchers found that Black people do not hold a preference for Black or White counselors. This indicates that sometimes Black women try therapy, but their counselor is not a suitable match. This could be for several reasons. Whatever the reason, on many occasions, these women let this interaction be their deciding factor on therapy, which may stray them away in the future. This article is helpful in my research because it helps with the argument that sometimes it may be that the student and counselor are not compatible. It may also support my data.

Some students are more spiritual or religious and prefer to find other ways to cope. Snowden (2001) aimed to identify the barriers to voluntary help-seeking services. This article lists many different reasons why Black people avoid mental health services. Many Black people use their family or their religion as an excuse. This article aimed to break down those excuses. This is relevant to my research because it lists ways of improving access to mental health providers for Black people. One of these ways includes spirituality, which is very significant to

many Black people. I can also use this because it has a section on other forms of care, which I can use for a quote on other coping mechanisms.

Microaggressions

Black women often face many forms of microaggressions while attending PWIs. West (2019) states that "Nonetheless, the core concept remains experiences of prejudice that may seem small or inconsequential, but whose cumulative effect may be very negative." (p. 1619) These different forms of microaggressions can significantly impact the mental health of Black students when experienced frequently. {The term "microaggression"} ... first applied to describe insults against Black Americans and later against women, it has now become primarily accepted as a way for people to talk about a wide range of issues related to discrimination, offense, and exclusion against any marginalized group (Jana & Baran, 2020, p. 13). Sue et al. (2014) discussed the different levels of microaggressions that POC face in their everyday lives. "Yet, as indicated previously, microaggressions are detrimental to persons of color because they impair performance in a multitude of settings by sapping the psychic and spiritual energy of recipients and by creating inequities." (p.273) These inequities create a power dynamic between the person committing the microaggressions and the person experiencing the microaggression. According to West (2019) "microaggressions have been categorized under three headings: *micro-assaults* (e.g., using derogatory terms for ethnic minorities), *micro-insults* (e.g., questioning how a person of color obtained a particular job or place at a particular university), and *micro-invalidations* (e.g., denying others' experiences of racism or accusing them of being oversensitive)." (p. 1619) These different microaggressions can often be hard to identify and

leave people with negative feelings. Black women face microaggressions like this daily in PWIs, and one of the only resources available are counselors who cannot address these issues adequately. Because Black women experience these microaggressions from many different people, it can be hard to know whom to confide in.

It may be hard to utilize the counseling services at PWI's if a student does not trust the therapist at these faculties. A distrust of White faculty may stem from the different experiences of microaggressions that students face. Ridley (1984) identifies some pros and cons of trusting versus not trusting your therapist. This article talks about the repercussions of non-disclosing Black clients and how that has carried on throughout history. If you think that your therapist is out to get you, then there's no use in going to therapy because it is very likely that that therapy session will not be very productive. This article is helpful in my work because it can go in my limitations section on why going into a session with a fixed mindset and stigma can be unproductive and lead a person to not go back to counseling centers. This also supports my data because it explains why students may not want to access the counseling center.

Hollingsworth (2017) examines whether the six dimensions of racial microaggressions were associated with increased suicide ideation among Black young adults. Researchers used 135 participants for this study. They found that the everyday experience of verbal, behavioral, and environmental racial slights or insults for Black people was associated with increased perceptions of being a burden on others, which were associated with increased thoughts of suicide. This is something that is rarely discussed. Black women face a plethora of intersecting identities. All the trauma that comes with these identities leaves Black women emotionally drained, and they often feel like they have no other choice but suicide. The feelings of being a

burden do not just disappear because they stem from something much deeper, and the microaggressions that Black women face daily at PWI only add to those feelings. This study is helpful in my research because it may help support my argument that increased suicidality is a coping method that is not discussed. It is something that students may lean towards instead of utilizing the counseling center. Therefore, Black women must have the necessary resources to cope with these feelings and experiences.

Limitations of Previous Research

Although there is a moderate amount of prior research involving the mental health of Black people and people of color, much of this research is very general. One setback that I had while researching previous studies was the lack of specific data on Black women in mental health. Many of my original findings were focused on the overall experiences of BIPOC in PWIs. It took many different searches and keywords to find studies even remotely close to the experiences of Black women at PWIs. My first guess on why this may be a problem is because mental health is very stigmatized, especially in the Black community, and Black people/women refuse to talk about it. My second guess is that researchers are not interested enough in the mental health or experiences of Black women at PWIs to complete studies on these experiences. While conducting my initial research, I witnessed how underrepresented Black women are in research.

Present Study

The present study will examine the experiences of Black women at Allegheny College to find out how often they are using the counseling center. It will also investigate the usefulness of their experiences at the counseling center. In other words, the present study aims to explore the

following question: Are Black women utilizing the counseling centers at Predominantly White Institutions? Further, what factors influence Black women's decision to use mental health resources at PWIs? In this way, the study will also examine how Black women are coping if they are not using the counseling center. I hypothesize that Black women at PWIs are not utilizing the counseling centers, as these counseling centers are not well equipped to handle the stressors that Black women face while attending PWIs. This research question will be examined through qualitative methods to identify similar themes best.

Methods

Participants

For this study, 14 participants from Allegheny College were recruited. These participants must have identified as Black/African American, college-aged, women, or non-binary individuals. Participants were recruited through college courses and extracurricular activities. In exchange for their participation, students had the option of earning one SONA credit or receiving a $5 gift card to a local business.

While conducting this study, two participants identified as White women. I chose to exclude this data because these participants did not meet the race requirements for this study. In total, 12 participants were used for data analysis. Of the data used, 91.7% *(n=11)* of participants did not identify as Hispanic or Latinx, while 8.3% *(n=1)* did. 91.7% *(n= 11)* of participants identified as women, while only 8.3% *(n=1)* identified as non-binary. The age range for participants was 18-21, with 16.7% *(n=2)* of participants being 18, 50% *(n= 6)* being 19, 8.3% *(n=1)* being 20, and 25% *(n=3)* being 21. Based on the data collected, 25% *(n=3)* of participants

were first-year students, with 50% *(n=6)* of participants being sophomores, 8.3% *(n=1)* were juniors and 16.7% *(n=2)* of participants were seniors.

Procedure

Participants were recruited through psychology courses, social media (Instagram), and extracurricular activities. The following clubs: (ABC, Queer People of Color, and the Islamic Culture Association) were contacted via email to request advertisements through their clubs. Participants completed this study virtually. Once participants signed up for the survey via SONA, a link to the study was provided. Participants began by completing an informed consent form. Once the participant consented to participate, the study was then conducted in the form of a google doc survey. Once the survey concluded, the debriefing form was attached to the end of the study. At the end of their survey, students had the option to choose if they would like a SONA credit or a $5 gift card for their participation. Once an option was selected, participants were asked to enter their SONA ID number or provide their Allegheny mailbox number for gift card delivery.

Materials

This google doc survey was comprised of a series of questions. These questions consisted of five survey questions and 12 open-ended and yes or no questions that I have created (**Appendices A-L.**) The open-ended questions consisted of 12 questions centered around the women's experiences seeking counseling services at Allegheny's Institution.

Designs and Data Analysis Plan

This was a qualitative research study. This study was performed via online surveys, and I have completed a full thematic analysis of the data collected. I also plan to analyze my findings by completing a quantitative analysis to interpret my statistical data better.

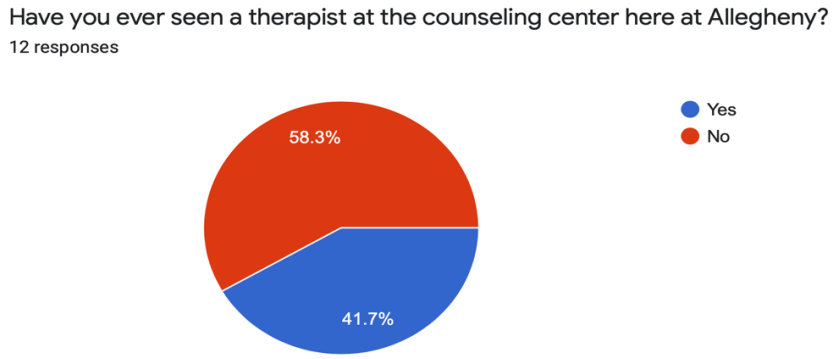
To analyze my data, I looked at the methods provided by researcher Michael Belotto (Belotto, 2018). The first step in my data analysis plan was to construct an analysis table to identify unique codes. Once this table was constructed and sorted, I then moved on to my second step, identifying words and sentences within my data that convey similar meanings and labeling this data with codes from research my questions. My third step was to identify patterns within the analysis table and cluster these patterns together into different themes. The next step was to use direct quotes from my data to support each found theme. The final stage of the process was to interpret and describe how the data and themes addressed my research questions and whether my initial suspicions were supported or challenged. In addition to comparing the themes within my data, I also analyzed the meaning of the statistical data reported.

Results

This study had a total of 12 Black participants. Questions #3, 4, 6, and 11 contained skewed results due to misunderstanding the wording. Although the results were not exactly what I suspected, my hypothesis was supported by the data collected. When asked about the location of the counseling center **Appendix A**, only 58.3% *(n=7)* of participants knew the actual place. The other 41.7% *(n=5)* of participants either did not know or were confused about the site of the counseling center. Of these 12 participants, only 41.7% *(n=5)* had been to the counseling center (**Figure #1**). Out of these 41.7% (n=5), 60% *(n=3)* said issues related to depression/anxiety,

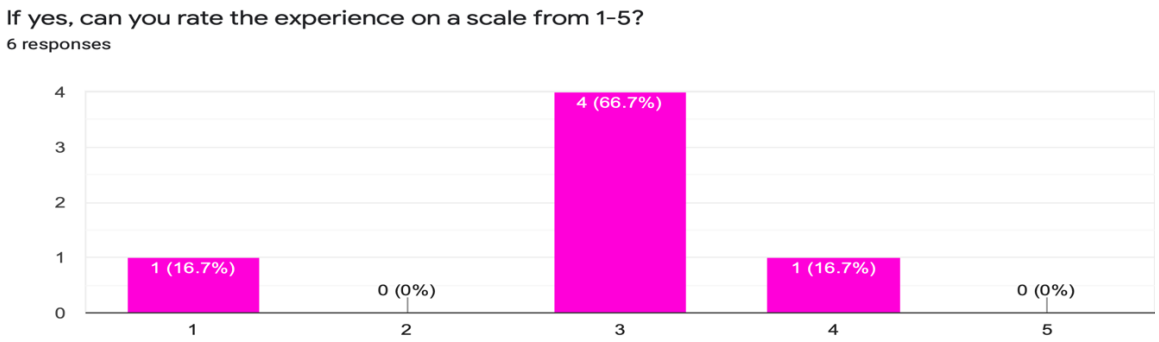
asking what made them decide to try the counseling center, **Appendix C**. At the same time, 40% *(n=2)* visited the counseling center as a last resort option.

Figure #1: *Chart of students who have seen a therapist at Allegheny College*



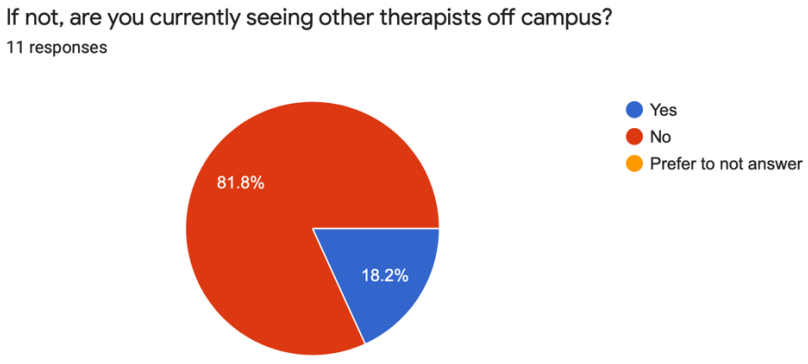
When asked to rate their experience at the counseling center on a scale of 1-5, with one being extremely unhelpful and five being extremely helpful, 60% *(n=3)* rated their experience a 3 (**Figure #2**). In this case, a rating of a three translates to neither helpful nor unhelpful. This means that 60% *(n=3)* of participants felt neutral about their experience with the faculty at the counseling center. Of the remaining participants, 16.7% *(n=1)* rated the experience a 1, which means that they found the experience at the counseling center extremely or very unhelpful, while the other 16.7% *(n=1)* rated the experience a 4. A rating of 4 translates to a somewhat helpful experience.

Figure #2: *Likert scale on the rating of experience*



For the 58.3% (n=7) who did not attend the counseling center, question #5 asks about possible reasons these students chose not to use the counseling center. 57.1% (n=4) of students did not feel that the counseling center was a valuable resource for them for many reasons. Of the remaining students, 14.2% (n=1) did not feel comfortable utilizing these resources due to the lack of diversity, another 14.2% (n=1) did not need the services provided, and 14.2% (n=1) were not aware that the counseling center was a resource to them, **Appendix E.** Question #7 (**Figure #3**) asks whether students not using the counseling center are currently seeing other therapists off-campus. 71.4% (n=5) of participants said they were not seeing any on-campus therapists, and 28.5% (n=2) reported seeing an off-campus therapist despite not using Allegheny's services.

Figure #3: Pie chart of alternative resources



When asked if the counseling center has the adequate resources needed to support its Black students, 91.7% *(n=11)* of participants said that Allegheny did not have the necessary resources required for students of color, **Appendix G**. The remaining 8.3% *(n=1)* said that Allegheny has a moderate amount of resources. Participants were also asked if they believe that Allegheny has made a sufficient effort in making people of color (POC) feel more comfortable accessing the mental health resources on campus, **Appendix H**, to which 91.7% *(n=11)* said no. The other 8.3% *(n=1)* stated that Allegheny had made a moderate amount of effort; in this case, they said that there is still more that Allegheny could be doing to support its students of color. According to my data (**Figure #4**), 91.7% *(n=11)* of students knew about the crisis line and had never used it, while 8.3% *(n=1)* did not know about it. Only 8.3% *(n=1)* of participants have used the crisis line (**Figure #5**).

Figure #4: *Awareness of crisis line*

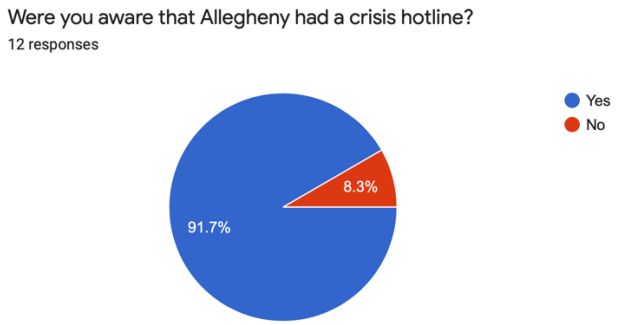
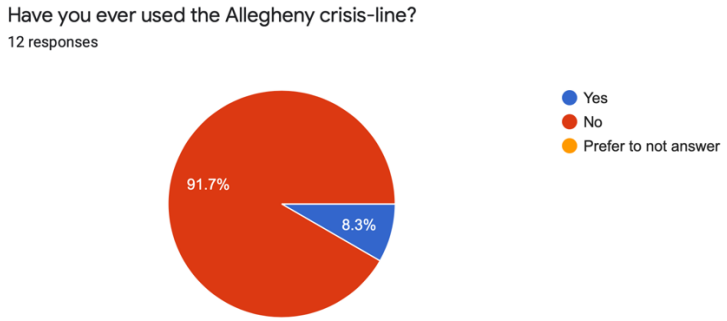
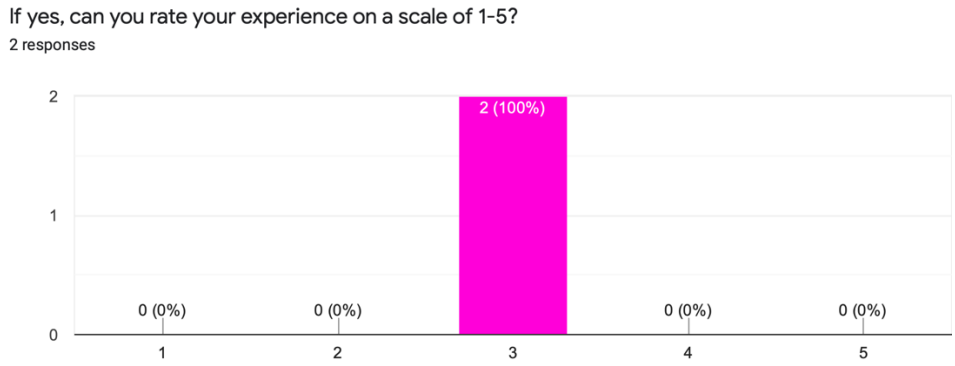


Figure #5: *Usage of the crisis line*



Of the 8.3% *(n=11)* who have used the crisis line, 100% *(n=1)* rated the experience a 3, on a scale of 1-5, with one being *not helpful at all (needs improvement)* and five being *extremely helpful (I would recommend).* Overall, the crisis line received a 3, neither beneficial nor unhelpful (**Figure #6**).

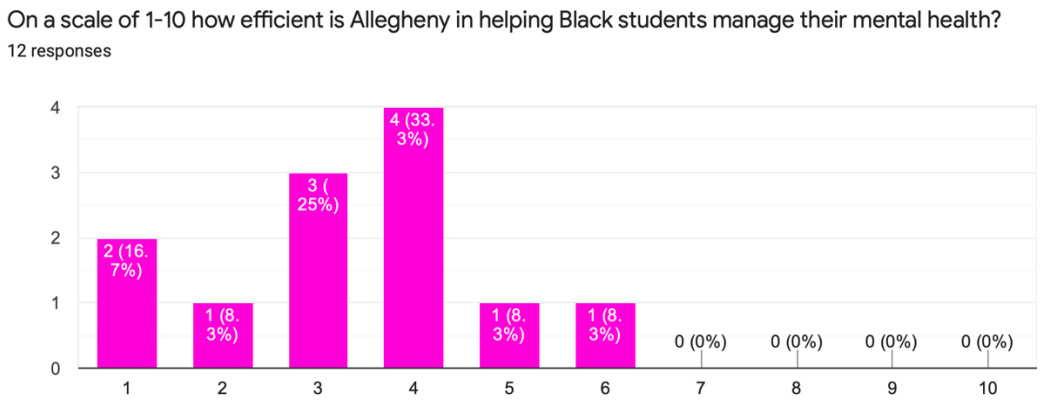
Figure #6: *Rating of crisis center experience*



My final question asks participants to rate Allegheny's efficiency in helping Black students manage their mental health, with one being *very poor (needs improvement)* and ten being *extremely helpful (I would recommend) (***Figure #7***).* On this scale, a rating of 1-5 was deemed not helpful, and 6-10 was deemed helpful. Overall, 16.7% *(n=2)* rated Allegheny a 1, 8.3% (n=1) gave a rating of 2, 25%(n=3) rated it a 3, 33.3%(n=4) rated gave a rating of 4 and

8.3% (n=1) gave a rating of 5. Only 8.3%(n=1) rated Allegheny a 6. This data showed how unsupported students at Allegheny feel while managing their mental health.

Figure #7: *Rating of Allegheny's efficiency*



Discussion

This study aimed to analyze Black women's usage of the counseling center at PWIs. I discovered just how much Black women underutilize the counseling center during my data collection. Overall, my initial hypothesis that Black women at PWIs are not utilizing the counseling centers, as these counseling centers are not well equipped to handle the stressors that Black women face, was supported by my data. While analyzing my data, I found that 41.7% (n=5) of participants did not know where the counseling center was located here at Allegheny College. This may indicate that the counseling center is not well advertised to all students or students of color. This underexposure to the counseling center may be why Black students choose not to use these resources. These results indicate a lack of knowledge/ awareness about Black students' available resources.

When looking at the data for question #5, **Appendix E**, we can see why students did not use the counseling center as a resource. The various reasons were all very similar. Participants had not used this center as a resource because they heard bad reviews from friends and peers. Due to these bad reviews, participants believed that the counseling center would not be a valuable/ helpful resource for improving their mental health.

Overall, there are a couple of similar themes in the data. One identified theme was the students' lack of knowledge/ information about the counseling center. Another theme that I quickly identified was the participant's feelings of incompetency on Allegheny's behalf. When asked whether Allegheny has the necessary resources to support Black students, 91.7% (n=11) of students said no. Many participants listed the lack of diversity as the reason for this. 33.3% (n=4) of participants said that Allegheny needs more Black therapists to cater to its Black students adequately.

There were many limitations and setbacks in this study. My first and most significant setback was that I could not recruit many participants because I was conducting a survey of Black women on a predominately White campus. The population of Black women on Allegheny's campus is tiny, which was reflected in my results. While analyzing my data, I encountered a skew in my results. 50% *(n=6)* of participants answered a question that they were not required to. This led to the exclusion of specific responses for questions 3, 4, 6, and 11.

Future studies should include more Black women who have had experiences with the counseling center. By conducting a prospective study that includes more Black women, there is a greater possibility of collecting data that better reflects Black women's attitudes towards

counseling centers at PWIs. Future research should also analyze what resources are available to Black women and if those resources are being utilized.

Conclusion

Overall, my data showed that 91.7% (n=11) of participants do not believe that Allegheny College has the necessary resources to support Black students. Many participants listed the lack of diversity as the reason for this. 33.3% (n=4) of participants said that Allegheny needs more Black therapists to cater to its Black students adequately. This data is vital for making predominantly White intuitions truly inclusive of its Black students and students of color. Students of color experience many stressors while at school. They also face many microaggressions, leading to the need for culturally competent therapists to empathize with and help them properly. This data is another reason why the mental health of Black women needs to be researched and acknowledged. My data is just a tiny glimpse into a bigger problem. Though there is still much research to be done, I believe this research may impact Allegheny's community as it demonstrates a strong want and need for more counselors of color and faculty in general. To truly live by its statement of community, Allegheny must take proactive steps to ensure the safety and health of all of its students.

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Appendix A

Question#1: Where is the counseling center located on campus? 12 responses

Participant #1: Shultz

Participant #2: Murray hall

Participant #3: Winslow Center at Schultz Hall

Participant #4: In Winslow Health Center

Participant #5: In Schultz hall, where financial services used to be.

Participant #6: I don't know

Participant #7: Winslow Health Center.

Participant #8: Winslow Health Center in Schultz Hall

Participant #9: I am not sure

Participant #10: I think it is located in Winslow

Participant #11: Winslow Center near Schultz Hall

Participant #12: I don't know

Appendix B

Question#2: Have you ever seen a therapist at the counseling center here at Allegheny?

Data can be found in Figure #1

Appendix C

Question#3: If yes, what made you decide to use the Allegheny counseling center specifically?

Participant #1: I desperately needed therapy at one of my lowest times, and I've kept going ever since

Participant #2: I believed that my mental health was my priority, so I decided to make a meeting with a counselor.

Participant #3: Requirement of a doctor.

Participant #4: I was struggling with anxiety

Participant #5: I felt like I was going through serious pain, that I needed to seek help to prevent harm.

Appendix D

Question #4: If yes, can you rate the experience on a scale from 1- 5?

Data can be found in Figure #2

Appendix E

Question #5: If not, what has kept you from using the services at the counseling center?

Participant #1: The reviews I have heard from other students

Participant #2: I haven't needed counseling, and I haven’t heard good things.

Participant #3: I heard that you can only go a few times for free, and I would not want to start something I could not continue.

Participant #4: There aren't any individuals within the counseling center that share the same experiences as me. I do not feel comfortable talking to an individual about my trauma that I feel as my oppressor.

Participant #5: I personally wasn't aware that there was any available for me.

Participant #6: I've heard that it can be difficult to get a time because there are only two therapists. And one of them is really good and the other not so much.

Participant #7: I've heard they're not helpful, and seeing first-hand the experience a close friend of mine had with them has greatly discouraged me from seeing them. I prefer my therapist back in Cleveland.

Appendix F

Question #6: If not, are you currently seeing other therapists off-campus?

Data can be found in Figure #3

Appendix G

Question #7: Do you think that Allegheny's counseling center has the adequate resources needed to support Black students? Why or Why not?

Participant #1: Not necessarily; I feel like we need more Black therapist

Participant #2: I don’t really think so because I feel like you can’t talk explicitly about your experience as a Black woman at a PWI

Participant #3: No, Allegheny does not seem to show interest in providing resources for Black students here on campus.

Participant #4: I don't think the Counseling Center has adequate resources in the first place. I'm not one to actively visit counseling, but for those that do, a proper location, perhaps in a more open, easily accessible area, would be a start, alongside an adequate amount of counselors that'll be able to match the demographics being discussed, or just an amount that'll be able to support the need of these services, which isn't being met.

Participant #5: Not really because there isn't a therapist that represents the black community, and the therapists there don't seem to be completely understanding of Black issues.

Participant #6: No, because there are no therapists that can relate or sympathize with BIPOC students on campus.

Participant #7: No, because they are not advertised efficiently, and the stigma surrounding mental health has not been defeated. The school provides low resources for mental health and because if this continues stigma, especially for black students.

Participant #8: No, because they barely have individuals available for consistent meet-ups. Plus, I've heard similar stories about the poor experiences they've had with the therapists.

Participant #9: For the most part because it is a resource for us to reach out too.

Participant #10: No, because there's a lot to unpack with Black students because not only are they dealing with personal issues, but also societal issues that not every therapist is prepared for

Participant #11: No, because it seems that Allegheny doesn't seem to show any interest to provide mental health resources for Black students.

Participant #12: Unless there are Black counselors, I doubt it.

Appendix H

Question #8: Do you think Allegheny has made a sufficient effort to make POC more comfortable accessing the counseling center? Why or why not?

Participant #1: No, I haven't seen any strong efforts.

Participant #2: I think they could get try to get more POC counselors on campus

Participant #3: No, Allegheny does not seem to show care about enlisting and sharing resources towards people of color regarding mental health.

Participant #4: No, there's mention of the center but as a whole it seems like a last shot reach for whatever help someone needs. And because it is lacking the adequate investment, anecdotally, appointments are hard to get in a timely manner that meets your need. Honestly the school seems to have the counseling center for show, because I can't see the use of something so inexcusably under-supported. Though I am basing off of my experience early in the year and maybe things have changed.

Participant #5: I feel like they have worked to make a bit of an effort, but they could definitely be doing more to make POC more comfortable using the counseling center. Like it feels like they're doing the bare minimum when it comes to trying to make the counseling center more accessible for BIPOC people.

Participant #6: No, again because nothing has been done to help the BIPOC community.

Participant #7: No, because there has been no outreach or ads.

Participant #8: No, they have not because multiple people have expressed their discomfort with the individuals in the counseling center. I feel like making an effort for POC students would not start with the counseling center. There are so many areas that Allegheny is lacking in supporting this marginalized community. In all honesty, this institution does not care for their student's mental health.

Participant #9: No, because I wasn't aware there was one.

Participant #10: No, because mental health is not talked about enough at Allegheny, the norm is to overload and try to do a bunch of different things

Participant #11: No, because Allegheny doesn't make it an effort to enlist and provide resources for people of color who are struggling with mental health.

Participant #12: Again, unless there are counselors of color, I doubt it.

Appendix I

Question #9: Were you aware that Allegheny had a crisis hotline?

Data can be found in Figure #4

Appendix J

Question #10: Have you ever used the Allegheny crisis line?

Data can be found in Figure #5

Appendix K

Question #11: If yes, can you rate your experience on a scale of 1-5?

Data can be found in Figure #6

Appendix L

Question #12: On a scale of 1-10, how efficient is Allegheny in helping Black students manage their mental health?

Data can be found in Figure #7

"This work is mine unless otherwise cited."
Rina Castro