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Exploring the Lived Experiences of Racially/Ethnically Minoritized College Students with Psychiatric Disabilities

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Abstract

Research suggests that racially/ethnically minoritized (REM) students with psychiatric disabilities are less likely to receive support services, have poorer therapeutic outcomes, and experience higher levels of anxiety, depression, and suicidality than their non-REM college-aged peers without psychiatric disabilities. This study highlights how REM college students with psychiatric disabilities make meaning of their experiences and identities while navigating systemic racism and ableism in higher education. Qualitative data were obtained through semi-structured interviews, and interpretative phenomenological analysis procedures were employed to identify themes. Disability Critical Race Theory served as the theoretical framework to guide the development of the study and interpretation of results. Analyses identified four superordinate themes and 16 sub-themes: *challenges with diagnoses* (sub-themes: cultural barriers to understanding mental health concerns, disclosing diagnoses, impact of diagnosis), *belonging* (sub-themes: isolation, inclusive intersectional spaces, connection to others with similar identities, navigating predominately white spaces, inevitable discrimination), *identity development* (sub-themes: self-awareness, negotiating identity, erasure of identity, navigating multiple marginalized identities, pride), *and support* (sub-themes: family support, social support, institutional support, self-support). This study demonstrates the importance of adopting an intersectional approach by centering race/ethnicity and disability for REM students with psychiatric disabilities and that systemic racism and ableism present major challenges for students navigating institutional settings.

Keywords: racially/ethnically minoritized, college students, psychiatric disabilities, systemic racism, ableism

Many college students experience developmental and psychosocial challenges as they navigate emerging adulthood. Racially/ethnically minoritized (REM) college students with disabilities undergo unique challenges due to systemic racism and ableism that make the intersection of their identities a vehicle for vulnerability. REM college students are those from groups that have historically been underrepresented and marginalized in academic settings due to systemic racial and ethnic discrimination. Psychiatric disabilities (PDs) include disabilities such as affective, anxiety, substance use, personality, and psychosis disorders (Auerback et al., 2016).

The enrollment of college students with PDs is rapidly increasing (Snyder & Dillow, 2019), encompassing approximately 20% of all students with disabilities. Despite the increasing enrollment of students with PDs, they are significantly less likely to graduate college than students with other disability types and students without disabilities (Koch et al., 2014; McEwan & Downie, 2013). REM students with PDs experience additional challenges in college due to systemic discrimination hindering the ability of their intersecting racial/ethnic and disability identities to be centered. Overall, REM students are significantly less likely to seek mental health services (Bourdon et al., 2018; Lipson et al., 2018) and Black and Latinx/Hispanic students, specifically, are less likely to graduate compared to White and Asian students (Shapiro et al., 2017). REM college students with PDs not only have to self-advocate for disability accommodations and face internalized and external stigma related to mental health and disclosure, but they also experience prejudice, racism, ableism, and

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discrimination throughout college (Hwang & Goto, 2008). Perceived discrimination is associated with several negative mental health outcomes, including higher psychological distress, suicidal ideation, anxiety, and depression (Hwang & Goto, 2008). College represents an optimal context for investigations into the experiences of REM students with PDs due to the integration of social, academic, professional, and health planning services; thus, further research is needed to explore the lived experiences of REM students with psychiatric disabilities.

Racially/Ethnically Minoritized Students with Psychiatric Disabilities

Evidence suggests that students with disabilities face several contextual and environmental barriers in higher education including personal and disability-related factors (e.g., confidentiality in disclosing, symptomatology, internalized stigma), as well as external and systemic factors (e.g., financial and housing challenges, access to support services, ableism; Francis et al., 2019; Hong, 2015; Squires et al., 2018). Students with PDs encounter additional barriers related to the severity of their symptoms that affect adult functioning and responsibility (Megivern et al., 2003), lower motivation and concentration, fear of disclosing diagnoses due to stigma (Collins & Mowbray, 2005) and lack of integration to disability related support and lower graduation rates (McEwan & Downie, 2013). Evidence further suggests that only 16.4% of college students with PDs receive healthcare services for their disability diagnosis (Auerback et al., 2016). Moreover, students with PDs report a lower sense of belonging, peer relationships, and participation in college activities (Jones et al., 2015; Vaccaro et al., 2015), and in comparison to students with other disability types, students with PDs have been found to experience greater rates of suicide attempts, suicidal ideation, and non-suicidal self-injurious behaviors (Coduti et al., 2016).

REM students have similar prevalence rates of PDs as White non-Hispanic students, however, REM students with PDs often experience systemic racism and ableism along with interpersonal, institutional, and systemic discrimination. The impact of perceived discrimination on Latinx and Asian-American college students has been found to be directly associated with an increased risk for psychological distress, suicidal ideation, anxiety, and depression (Hwang & Goto, 2008). Additionally, African Americans are 20% more likely to experience serious mental health challenges than the general population due to their unmet needs stemming from the history of anti-Black violence, racism, and ableism in the United States (Annamma et al., 2012; CDC, 2016; Chen et al., 2019). Furthermore, REM students are less likely to seek mental health services compared to White students, which is likely connected to stigma and the legacy of racial discrimination in medical services and healthcare (Boulware et al., 2016; Chen et al., 2019; Maura & Weisman de Mamani, 2017). In addition to stigma, attitudes toward seeking professional services and family norms also predict help-seeking intentions among REM college students with PDs (Masuda et al., 2012). Despite colleges and universities offering mental health services, REM students with PDs are still less likely to attend programs and respond to service advertisements. There remains a paucity of research focused on understanding the experiences of REM students with PDs and how these experiences impact and define negotiation of students' emergent and intersectional identities. Specifically, research is warranted that explores students' lived experiences related to the meaning-making and negotiation of intersectional identities and the impact of perceived discrimination in college.

Disability Critical Race Theory

Disability Critical Race Theory (DisCrit), created by Annamma et al. (2012) engages the work of Disability Studies and Critical Race Theory and provides a lens for examining the experiences of REM students with disabilities. DisCrit is a theoretical framework that theorizes "about the ways in which race, racism, disability, and ableism are built into the interactions, procedures, discourses, and institutions of education, which affect students of color with disabilities qualitatively differently than white students with disabilities" (Annamma et al., 2012, p. 7). DisCrit supports research of how microlevel (individual) and macrolevel issues (such as racism and ableism) occur in the everyday lives of REM students with disabilities. Annamma et al. (2012) describe DisCrit as seeking to "address the structural power of ableism and racism by recognizing the historical, social, political and economic interests of limiting access to educational equity to students of color with disabilities" (p. 7). Additionally, DisCrit acknowledges that identity categories, including ability and race, are socially constructed labels that have real consequences in the lives of REM students with disabilities.

In this study, we draw upon the theoretical framework of DisCrit, which delineates seven fundamental tenets (Annamma et a., 2012). In the first tenet, DisCrit focuses on the interplay between racism and ableism, identifying their interdependency in establishing and maintaining societal norms. The second tenet highlights the complexity of identities, challenging the idea of singular or separate categories of identity like race, disability, class, or gender. In the third tenet, DisCrit emphasizes that while race and ability are socially constructed concepts, the impact of being labeled as raced or disabled carry tangible and psychological effects that deviate from Western cultural norms. The fourth tenet gives priority to the perspective and experiences of marginalized groups that have historically been excluded from research. The fifth tenet considers the legal and historical contexts of disability and race, noting how they have been used individually and in tandem to restrict the rights of particular groups. In the sixth tenet, DisCrit acknowledges Whiteness and ability as "property" (p. 16), conferring benefits to those who are able to claim Whiteness and/or normalcy and that progress for people with disabilities has often occurred when it aligned with the interest of those who are white and middle-class. Finally, the seventh tenet of DisCrit calls for active engagement in social justice and supports resistance against oppression. Throughout this paper, these tenets are revisited and interwoven as they pertain to the methodology, experiences of the participants, and implications for disability service professionals.

DisCrit is represented in research as scholars explore intersectional marginalized identities and systems (Kohli, 2018), including the intersection of racism and ableism in disciplines such as higher education (Ledesma & Calderón, 2015), psychology (Wagner, 2016), education policy (Ard & Knaus, 2013), and counseling (Peters, 2017). By centering race and disability through the framework of DisCrit, this study provides a critical lens through which the lived experiences of REM college students with PDs can be explored.

Purpose of the Study

The purpose of the current study was to understand the ways in which REM students who identify as having a PD characterize their experience through dynamic exploration of intersecting identities and the impact of perceived discrimination on intersectional identity development, negotiation, and endorsement. The following research questions were used to guide this study:

1. How do racially/ethnically minoritized college students with psychiatric disabilities describe and make meaning of the intersection of their racial/ethnic and disability identities within the context of their university?
2. What influence does perceived discrimination within their university play in shaping students' identities?

Methods

Design

The fourth tenet of DisCrit emphasizes the importance of giving priority to the voices of marginalized populations, specifically by creating space for fostering or attending to counter-narratives to understand the ways in which students navigate certain spaces and respond to injustices. Therefore, the current study utilized an interpretive phenomenological design. Interpretive phenomenology is a rigorous and systematic qualitative approach that aims to elicit participants' meaning-making—understandings, perceptions, and experiences—regarding the lived experiences participants have had with a specific phenomenon (Smith et al., 2009). Interpretive phenomenological analysis (IPA) centers analytic attention on participants' personal meaning making within a particular context (Smith et al., 2009). Themes are systematically identified and used to construct interpretive descriptions of participants' narratives and provide insight into the meanings and essences of participants' lived experiences with a phenomenon.

Participants and Procedures

Institutional Review Board approval was secured prior to participant recruitment or data collection and all participants provided written consent prior to participation. Data were collected during the 2019-2020 academic year, prior to the onset of the COVID-19 pandemic, at a large, predominantly White, research-oriented university in the United States. Participants were recruited on campus via recruitment flyers and emails and interested and eligible participants were asked to respond to an online poll to sign up for an interview. Eligibility criteria included: current enrollment as an undergraduate or graduate student, being 18 years of age or older and capable of providing informed consent, identifying as REM (also to referred to as a student of color with participants), and having a diagnosis of a PD. The decision to include REM students with PDs, as opposed to REM students and students with PDs, was rooted in the second tenet of DisCrit, which highlights multidimensional, complex identities and how the presence of multiple marginalized identities contribute to experiences of stigma and discrimination. Interviews took place in a private office located on campus for the participants' convenience and privacy. All interviews were recorded and transcribed for data collection purposes. Participants who completed the interview were provided with a $10 e-gift card as a token of appreciation for participation in the study. As DisCrit emphasizes the social constructions of race and ability, participants were not asked to complete a demographic questionnaire or survey in attempt to avoid a “checkbox approach” to quantifying identity and limiting their responses by structuring predesigned categories. Identifying terminology that participants disclosed in the interviews are presented in Table 1. All participants (*N* = 13) identified as REM; ages 19-40; three as heterosexual, five as bisexual, and one as biromantic and asexual; six as cisgender women, three as cisgender men, and one as genderfluid. One participant did not disclose their gender and two did not disclose their sexual orientation. Disability types included anxiety, depression, OCD, bipolar disorder, ADHD, and unknown psychiatric disorders. Due to the lack of demographic questionnaire, race and ethnicity are conflated as participants used multiple terms interchangeably. Participants identified as Latinx, Black, mixed race, and South Asian.

All participants engaged in one 60–90-minute semi-structured interview which consisted of 21 open-ended questions and prompts aimed at exploring participants’ lived experiences in college, disability identity, racial/ethnic identity, and perceived discrimination (Appendix A). Specifically, interview questions focused on the details of students’ current experiences and what it means for students to identify as a racially/ethnically minoritized college student with a psychiatric disability. Drawing from DisCrit’s tenets, which asserts the importance of considering race and ability in tandem (Annamma et al., 2012), questions were designed to uncover how systemic power dynamics related to these identities play out in the educational experiences of REM students. For instance, the question, “Can you tell me about your understanding of your identity as a student of color with a psychiatric disability?” was formulated to invite students to reflect on the convergence of their racial/ethnic and disability identities, a core consideration of DisCrit that posits such convergences are often overlooked in traditional disability frameworks. Moreover, the prompt, “Tell me about a time your identities have influenced your experiences in college” sought to elicit narratives that demonstrate the DisCrit tenet of how the intersection of race and disability compounds experiences of discrimination and marginalization in educational settings.

The interview protocol’s focus on eliciting rich, detailed narratives aligned with DisCrit’s methodological emphasis on storytelling and counter-storytelling as a means to challenge dominant discourses and to illuminate the subtleties of intersectional discrimination. This approach is evident in questions that encouraged participants to reconstruct specific experiences, such as, “Can you reconstruct a day in your life as a college student of color with a psychiatric disability?” and, “What is it like as a person of color at a predominately white institution?” These questions were intended to reveal the systemic barriers and supports encountered by the participants, thereby providing a nuanced understanding of their navigation through university spaces.

Data Analysis

Data analysis adhered to recognized IPA data analytic procedures (Smith et al., 2009). IPA involves interactive and inductive analyses focused on the individual’s meaning and sense making of a specific lived experience. This analysis involves both description and interpretation. This abstract style of thinking is critical in moving the analysis beyond the superficial and purely descriptive. IPA is avowedly interpretive, and the interpretation may well move away from the original text of the participant. What is important is that the interpretation was inspired by, and arose from, attending to the participant’s words, rather than being imported from outside (Smith et al., 2009). The interpretation was also guided by DisCrit, which meant highlighting instances where ableism and racism might be reinforcing each other, even if not explicitly mentioned by the participants.

First, data were transcribed verbatim, and the research team read and reread the transcripts to become familiar with their content. During this preliminary step, initial and tentative observations about the transcript were recorded in a process known as bracketing, and initial coding was done to describe the content of the interviews. It is common to record notes and interpretive thoughts throughout the data analysis process in a separate location to aid in the researchers’ deeper and more abstract understanding of the participants’ narrative. Ideas and specific thoughts pertaining to central concepts that emerged from each interview are bracketed during the analysis process, as each interview is considered on its own before commonalities and patterns between interviews are further explored (Smith et al., 2009). Researchers then worked with initial codes and original transcripts to identify and develop emergent themes and patterns. Abstraction and subsumption were used to identify patterns between and differences among identified themes to develop superordinate themes. When examining superordinate themes, there was also a recognition of the property values of Whiteness and ability as outlined by DisCrit. This theoretical perspective was essential in analyzing how certain privileges associated with these properties might be absent or negated in the narratives of our participants, thereby affecting their college experiences. These steps were repeated

Table 1

Participant Demographic Information

Participant	Gender	Race/ Ethnicity	Age	Student Status	Disability Type	Sexual Orientation
Gabriela (she/her)	Cisgender woman	Latina (Brazilian)	20	Junior	Anxiety, ADHD	Heterosexual
Arjun (he/him)	Cisgender man	Asian (Indian)	20	Junior	Bipolar Disorder, ADHD	-
Maya (she/they)	Genderfluid	Mixed Race (Chinese, Italian, Lebanese)	21	Senior	Depression, Anxiety, Undisclosed Psychiatric Disorder	Biromantic, Asexual
Julian (he/him)	Cisgender man	Hispanic	20	Sophomore	Anxiety, ADD, Language Disorder	Gay
Gina (she/her)	Cisgender woman	Black (African American, Puerto Rican, Native American)	21	Senior	Anxiety, Depression, ADHD, Unspecified Psychosis	Bisexual
Zoe (she/her)	Cisgender woman	Latina (Mexican)	23	Graduate Student	Anxiety	Bisexual
Adrian (she/her)	Cisgender woman	Black, Hispanic (Puerto Rican)	20	Sophomore	Anxiety, Depression, OCD	Bisexual
Kadian	--	Black (African American)	22	Senior	Anxiety, Depression, ADHD	Bisexual
Camila (she/her)	Cisgender woman	Hispanic	19	Sophomore	Anxiety, Depression, PTSD	Fluid
Priya (she/her)	Cisgender woman	South Asian	21	Junior	Anxiety, Unknown Psychiatric Disorder	Bisexual
Jasmine	--	Mixed Race (European, African American, Hispanic)	30	Junior	Anxiety, Depression, Chronic Migraines	--
Rishi (he/him)	Cisgender man	Indian	21	Sophomore	ADHD, Dyscalculia	Heterosexual
Eli (he/him)	Cisgender man	Black (African American)	40	Graduate Student	Anxiety, Depression, ADHD	Heterosexual

Note. Dashes indicate information not reported.

for each of the participants individually to allow for new themes to emerge by case before superordinate and sub-themes were explored and compared across participant cases corresponding to the central research questions. The interpretive work was conducted with an acute awareness of the historical and material implications of being labeled with intersecting racial and disability marginalized identities.

Throughout the data collection and analysis, several well-established methodological strategies were adopted to increase the credibility and trustworthiness of the data and findings. First, multiple coders and peer auditing of codes and themes were used to prompt further exploration into themes, patterns, and interpretations, to challenge assumptions, and provide additional insight into interpretations. This well-established strategy increases credibility in analyses in qualitative research design (Yardley, 2008). Multiple coders and peer audits served as checks against the perpetuation of normative assumptions, challenging the researchers to consider how systemic biases could influence their interpretations. Moreover, the research team conducted member checking with participants to increase trustworthiness and verify the accuracy of themes and interpretations. Member checking provides participants with the opportunity to react to the data and the interpretations, and their reactions are considered in the presentation of the descriptions and interpretations of the data (Kornbluh, 2015; Lincoln & Guba, 1985). Participant feedback on the descriptions and interpretations was not merely a step in validation, but also a critical engagement with their lived realities that allowed for a more encompassing representation of their experiences.

Researcher Positionality

The nature of qualitative research rejects the notion in which researchers detach themselves from the research process and situate themselves as neutral and unbiased researchers (Milner, 2007). The research team identifies as members of various races, ethnicities, genders, sexual orientations, ages, religions, social classes, and abilities, with each member bringing a unique perspective to the research process. To increase opportunities for candid conversations about the role of race/ethnicity and intersectionality with participants throughout the interview process, interviews were conducted by graduate student researchers who identify as racially/ethnically minoritized with multiple marginalized identities. During the interviews, one to two researchers were present, ensuring a rich and multi-faceted engagement with participants. The dynamic between participants and researchers was informed by a shared understanding of the complexities inherent in navigating racially and ethnically diverse spaces. The research team met on a weekly basis to engage in reflexive discussions about our assumptions, biases, personal worldview, questions and concerns related to our research processes, analyses, interpretations, and conclusions.

Findings

In-depth, phenomenological analysis of the 13 interviews led to identification of four superordinate themes related to the lived experiences of REM college students with PDs. Superordinate themes include challenges with diagnoses, belonging, identity development, and support. Seventeen sub-themes are nested within these superordinate themes, giving rich descriptions and depth to the participants' meaning making of their experiences. All superordinate themes and sub-themes are presented in Table 2.

Challenges with Diagnoses

The theme "Challenges with Diagnoses" highlighted the various ways the participants' psychiatric disability impacts the way they make meaning of their identity and how they navigate college. The sub-themes included participants' meaning-making surrounding cultural barriers to understanding their mental health concerns, disclosing their diagnosis, and the impact of their diagnosis on their experience as REM college students. In line with DisCrit, these challenges were not merely personal hurdles, but reflective of systemic barriers and underscored the complex interplay between racism and ableism. Cultural barriers to understanding mental health concerns were described by participants for the ways in which cultural norms hinder a learning about the presence, understanding, and meaning of their disability. Participants highlighted U.S. cultural barriers along with interpersonal barriers experienced within their specific ethnic/racial communities. For example, Priya, an Asian American student with anxiety and an unknown psychiatric disorder stated:

> At first, I thought there was something wrong with me and that all teenagers are depressed, and then I started reading and realizing, "Oh, there is something seriously wrong." … And my culture doesn't believe in doctors in general. So, it was a real struggle to get mental help.

As participants began to navigate U.S. cultural norms and norms within their sub-communities and understand their diagnosis, they described the nuances of disclosing their diagnosis and the challenge for them

Table 2

Organizing Structure of Superordinate Themes and Sub-themes

Superordinate Themes	Sub-themes
Challenges with Diagnoses	Cultural Barriers to Understanding Mental Health Concerns
	Disclosing Diagnosis
	Impact of Diagnosis
Belonging	Isolation
	Inclusive Intersectional Spaces
	Connection to Others with Similar Identities
	Navigating Predominately White Spaces
	Inevitable Discrimination
Identity Development	Self-Awareness
	Negotiating Identity
	Erasure of Identity
	Navigating Multiple Marginalized Identities
	Pride
Support	Family Support
	Social Support
	Institutional Support
	Self-Support

to share with their family, peers, and university faculty/staff set against the backdrop of systemic ableism and racism. In particular, participants grappled with the notion of having a nonapparent disability and the vulnerability that disclosing requires. This selectivity in sharing their disability underscores the navigation of a landscape where racial and disability identities are often made invisible or dismissed. For example, Adrian, a Black and Puerto Rican student with anxiety, depression, and OCD expressed:

> It feels like you really have to put yourself out there because there's no way for me to know they would be accepting because they won't know [my disability] until I tell them. You don't really go to people and be like, "Hey, do you hate people of color?" or "I have a mental disability and I'm also bisexual, do you still want to be friends with me?" It's hard because that's not very organic so it's kind of exhausting.

This quote highlighted the need for Adrian to always have to consider both her racial identity and disability identity when meeting new people. The act of disclosure becomes a strategic decision, entangled with the risk of encountering racism and ableism. Participants described being selective on who they disclosed their diagnosis to, however, regardless of whether they disclosed, they all expressed experiencing challenges with the impact of their psychiatric disability physiologically, psychologically, and socially. Maya, a mixed-race student with depression, anxiety, and an undisclosed PD described:

> I have classes at 9:00 AM, but sometimes I come late, or I miss it because I can't really get up. Sometimes I miss most of the class. I come in really late, and it's hard to explain to my professor why I'm late because I can't really say, "Yeah, I didn't want to get up." Because then they'll be like, "That's not a thing." Physically I cannot walk to class…everything feels so tired and sometimes a bit self-destructive.

Maya's experience is one of many participants which emphasizes systemic ableism experienced by students through inflexible class policies or unaccommodating instructors.

Belonging

The theme “Belonging” illuminated ways in which college fosters the presence or lack of a sense of belonging for REM students with PDs, which is aligned with DisCrit’s tenet valuing people with complex, multidimensional identities. The sub-themes included feelings of isolation, the need for inclusive intersectional spaces on campus, connection to students with similar identities, how participants navigate predominately White spaces, and facing inevitable discrimination. Participants expressed harboring feelings of isolation related to the difficulty of connecting with other students and finding their place on campus. For example, Adrian stated, “Figuring out who you are in a place completely different than who you are is very difficult. Instead of accepting your identities, it makes me feel more alienated because of my identities.” Maya described what it’s like for her to be around others: “It's hard, and sometimes I feel uncomfortable. Sometimes I feel like I should walk on eggshells around people. I don’t know how they’ll react. I don’t know what their ideals are.”

These feelings of isolation left participants yearning for spaces on campus that would affirm all their identities, be void of racism and ableism, and provide them with support. They explained the importance of inclusive spaces on campus and the impact of the lack of inclusive spaces for REM students with PDs. Gina, a Black, Puerto Rican, and Native American student with anxiety, depression, ADHD, and an unspecified psychosis disorder elucidated the impact of a space curated for a specific marginalized identity, but not being inclusive of students with multiple marginalized identities: “They’re targeting women, but most of the women in engineering are White so most conversations are from that perspective and there’s not a want to diverge into other perspectives.” She continued by clarifying the impact of the lack of inclusive spaces:

> When you are responding to things, people ask your experience as a person of color or your experience as a person with a psychiatric disability, or like just one thing. There’s, not much room for intersectionality. When put into one category, I feel like I’m having to disregard some part of myself to try to think about that one category.

Inclusive spaces on campus are imperative for students with multiple marginalized identities to reduce feelings of isolation and increase their sense of belonging by having a place where they feel safe to be themselves and connect with other students. Participants expressed the connection with students of similar identities as imperative for their wellness throughout college. Priya expressed the following:

> The friends I do have, we’re really close. A lot of them have that shared experience of being a person of color or being a woman in games. My best friend, the one who had a psychotic break, he’s Black. So, we'll talk a lot about, like, “Oh my God. Fucking White people.” It’s kind of hard for me to connect with people who aren’t aware of race, but I’ll still sometimes run into people, especially because I’m in a sorority and frat guys have no idea what’s going on. There’s that disconnect where I feel like we don’t really understand each other fundamentally. And my disability, especially, makes me feel very different and very alienated sometimes. And that’s what I like about my friend group, they try very hard not to make it be a big deal.

Participants also expounded on the impact of not being able to connect with students of similar identities. Eli, a Black, 40-year-old graduate student with anxiety, depression, and ADHD discussed the impact of being a Black, older student with a disability by stating:

> At my age, I have fewer peers. I know [Black] brothers and sisters who are in other programs where it seems like they’ve done a better job of recruiting and bringing in students of color. It’s isolating. And I think age makes it isolating too.

This superordinate theme also brought attention to how participants navigated predominately White spaces on campus and throughout the world. Arjun, an Indian student with bipolar disorder and ADHD expressed, “The problem at [my university] is that it seems diverse, but it’s not. When I got here, I was the only one from my city. I didn’t have any friends. I was all alone.” Adrian added the following:

> I think there’s things on campus that I feel like I’m missing out on. I tried to join the Society of Women Engineers, and I went to the first meeting, and it was overwhelmingly White people, and I just couldn’t do it. I was like, “There's just no way that this is going to work out for me. I feel very uncomfortable.” So, I miss out on opportunities.

Conclusively, this theme also highlighted students’ awareness of inevitable discrimination, discrimination from faculty and classmates, and coping with discrimination. Gina explicitly mentioned feeling discriminated by professors who notably hesitated to provide accommodations and "might not be too friendly with people of color," setting her and other students like her apart for this treatment. Participants consistently highlighted the impact of sexuality being intersected with race and disability as they described how they are perceived by others as fetishized (Priya) or feeling invalidation due to bisexuality within marginalized communities (both LGBT and Black communities; Gina and Adrian).

Identity Development

The superordinate theme of "Identity Development" emphasized the process participants underwent when making meaning of and understanding their multiple identities during their college experience. Many of these processes took participants on a journey from awareness of these identities to embracing them as significant components of themselves. Consistent with DisCrit, participants navigated their identities against a backdrop of social constructions of race and ability. The sub-themes included developing self-awareness and disability identity, negotiation of identity, erasure of identity, navigating multiple marginalized identities, and pride of self as they embraced their identities. Participants described moments of self-awareness when they had realizations of their identities of which they were unaware or discovered through experiences of discrimination. Adrian shared her realization of her Hispanic identity by the reactions of others to her cultural greeting of a kiss on the cheek: "That was when I first started realizing my identity was different from other people. So, that's when I started developing my identity, and I knew that I was Hispanic forever." Priya had a similar thought regarding her romantic orientation:

> Now I am polyamorous. That's an identity I didn't think about. That's just a thing about me. It's a lot easier than I thought because it was something I denied for so long and now that I know, I'm much more comfortable.

As participants increased their self-awareness and explored more of their identities, disability was a predominant identity that became integrated within their overall sense of self. Some gained awareness of their disability identity through their diagnosis process, such as Priya who shared that before working on finding a diagnosis, she believed her academic challenges were due to her being "lazy" rather than mental health concerns. Adrian, on the other hand, described a sense of confirmation that arrived with her diagnosis as she expressed, "I just had a feeling this isn't normal. I'm sad all the time, or my legs are always shaking. I had a feeling." Disability identity, although challenging, influenced participants' need for connection. Gina described how her disability identity afforded her an opportunity of creating community:

> I think that what, I guess, gives me comfort or a sense that I'm not alone is that I know that a lot of other people of color have disabilities as well. Especially undiagnosed disabilities, that have been in the same situation as me where it was not diagnosed at an early age or just not diagnosed at all. So, that makes me feel like there is still a community even though it feels like the community is much, much smaller.

As participants increased their self-awareness and began to understand their disability identities, they described traversing a period of identity negotiation while fighting against the erasure of their identity. Through identity negotiation, participants struggled to understand the role disability plays among their other identities. Maya shared her negotiation process when experiencing discrimination from others who were aware of her disability by stating, "How much of it is a disability and how much is it because of how people perceive me as a person of color and the way my culture is? That's the big issue I have. I want to at least understand it." The challenges of discovering and negotiating participants' identities are compounded by the erasure of these identities by others in predominately White institutions. This erasure is represented by how others ignore important aspects of participants' identities. For instance, Maya shared her fear of being invalidated when her challenges are attributed to one identity and not the intersection of all of them. Gina shared, "Because I'm perceived as a Black person, I identify as just being a Black person and so I didn't really identify as being Hispanic or being Native American because people only see me as Black." This erasure is also represented by the commodification of identities where one component of their identity was used to dehumanize them for the pleasure of others. Priya shared a stark example: "There is a lot of fetishization. I've had a lot of guys be like, 'Oh, I've never slept with an Indian girl.'"

Through the process of identity negotiation and navigating the attempted erasure of their identity, participants also described how they navigated multiple marginalized identities and worked to make meaning of them. They described searching for acceptance and representation while arriving at a sense of pride in how they chose to embrace their identities. Adrian discussed her struggle navigating her ethnicity:

> Well, I have to put that I'm Black because I'm darker skinned. So, then I don't identify with the Black community as much because I'm not African American Black, even though I have ancestry from Africa. So, that's all confusing. So, I don't fit in with the White people. I don't fit in with the Hispanics. I don't fit in with the Black people. It's a mess.

Priya shared her struggle to navigate ethnicity and her bisexuality:

> I find that everyone that's gay here that I've met is White. And I have a lot of trouble dating White people in general. I do, but there's always this imbalance of power I feel. I can't get girlfriends, so I'm always dating men and I feel like that's really invalidating.

Participants described the process of identity development arriving at a sense of pride in how they chose to embrace their identities. Maya encapsulated this sentiment when they said the following:

> My identity as a person of color is really important to me because I'm always afraid of somebody undermining it, or they ignore the other parts of me because I said I was mixed. They ignore everything else. Everything is a part of me.

Priya added, "I tried really hard to be like, 'Oh, I'm just American. I don't see color.' And then I realized the lack of progress behind that idea. It felt like I wasn't honoring something that needed to be honored."

Support

For the final theme of "Support," participants described the impact of support and their longing for additional supports within various contexts, drawing attention to DisCrit's call for activism and supportive measures that affirm students' full identity. The subthemes encompassed the role of family support, social support, institutional support, and self-support. When highlighting family support, participants described the financial and academic support many family members provided juxtaposed to a lack of understanding and support around their mental health concerns. Maya described her father's response to her needs:

> He's more like, 'Hey, just do your best because I know you're going to do really well. If you need anything, we will support you.' But I think there's still this comfortability with talking about mental health issues with them.

Arjun commented on his discomfort when he stated, "My parents tried to keep it a secret that I had [bipolar disorder]." Gina added to the presence of parental discomfort by describing her parents' denial: "That's not my child…my child can't have this." These reactions often changed the relationship between participants and their parents and reflects the systemic undervaluation of disability and mental health concerns within racially/ethnically minoritized communities. Kadin, a Black student with anxiety, depression, and ADHD, stated that they began to "pull away" from their mother when they realized they were not able to discuss their mental health concerns with her. This finding further illustrated the broader U.S. cultural discomfort surrounding mental health, which can be compounded by ableism and stigmatization of psychiatric disabilities.

Although participants described challenges in receiving mental health support from their family, they also expressed turning to their social supports and finding comfort among their friends. However, some participants noted a sense of guilt and hesitation when seeking support from friends due to the fear of overburdening them. Arjun expressed, "Everyone is busy with their coursework, so I just don't like bothering them. I feel guilty." Maya continued along that vein, "My friends are good, but they're not professionals. They are dealing with their own stuff, so I don't want to lay everything on them." While there were differences in the level of support received, all participants described a sense of support from their friends. Adrian stated, "I don't feel like I have a support system of people like me, but I do have a support system of people that can understand and help me through things, which is really great because not everybody has that." The participants' reliance on social support highlights a community's role in mitigating the effects of systemic oppression. However, the guilt and hesitation expressed by Arjun and Maya about burdening friends signal the complexities of seeking support within ableist and racialized contexts, where REM students may feel the need to downplay their struggles to conform to societal expectations of self-reliance.

As REM college students with psychiatric disabilities, receiving institutional support was imperative to their overall wellness and success in college. Participants described the importance of supportive faculty affirming their identities but noted the inconsistency in finding them or knowing how to communicate their needs. Arjun shared, “If the professor … sees the trend of having high grades and then dropping suddenly, that’s a clear warning sign. And I had that so many times over the year. Professors never understood that.” Priya felt “lucky” to have a professor with similar identities who seemed to understand her challenges and was better prepared to accommodate her. Participants also described the importance of student organizations and support groups where they felt a sense of safety. For example, Gina discussed the Society of Hispanic Professional Engineers affirming her identities by encouraging her to attend their events when she was unsure if she would feel accepted, and Maya shared that she felt a sense of belonging in the LGBT+ group for REM students.

Priya discussed the role of her university’s student disability resources office in being supportive and providing her with accommodations for class: “I have an academic excuse through SDR, so I don’t always have to go to class…I think SDR has really helped support me and been understanding about what I’ve been going through.” While Priya has had positive experiences with her student disability resource office, she also expanded on the lack of racial/ethnic diversity in the office and the challenge of connecting with the staff:

> I will say everyone who works at SDR is White. And I feel like that needs to change. I don’t know how that can be done. Maybe the cultural center can include SDR services or something. I feel like there’s a disconnect where I don’t want to outwardly say things. I feel like it’s wrong and it’s difficult for me to even begin to go to them…I feel like there’s that context missing.

The lack of racial and ethnic diversity within the student disability resources office not only highlights a representation gap, but also signals a deeper issue of systemic exclusion, which can lead to a disconnect in understanding the complex realities of REM students with PDs as evidenced by Priya’s statement.

The final sub-theme of support was self-support in which participants advocated for themselves by asking for accommodations, seeking services, and understanding their needs to navigate college. Participants named a few examples of how they supported themselves including medically withdrawing for a semester, finding a therapist when they turned 18, late dropping courses, scheduling classes at a time when they knew their symptoms would be lessened, creating consistency in their schedules and routines, or teaching themselves class material that was missed. Adrian described her role in finding a therapist, despite the lack of support from her parents, by stating, “As soon as I turned 18, I signed my own consent forms with a therapist in my school, and [my parents] were even against that because they were like, ‘We don't want you missing classes.’”

Discussion

Using an interpretive phenomenological qualitative design informed by Disability Critical Race Studies, this study aimed to advance understanding of the lived experiences of REM college students with PDs. The findings of this study offer insight into the importance of recognizing and centering race/ethnicity and disability identities that can inform the structure and design of higher education settings and disability resource offices. Participants in this study described the impact of systemic racism and ableism on their college experience through highlighting challenges with diagnoses, their sense of belonging, identity development, and the role of support.

Several participants underscored the impact of U.S. culture and their specific community sub-culture on how they relate to, understand, and make meaning of their disability identity. Confirming Maura and Weisman de Mamani’s (2017) findings that stigma in REM cultures impact mental health help-seeking behaviors, findings from this study suggest that cultural norms may hinder or promote students’ ability to receive treatment, seek support, or accept their disability identity. Cole and Cawthon’s (2015) findings propose that students with learning disabilities choose to disclose their disability depending on their view of disability and experience with classmates and professors. The current study expands on this research by accentuating students’ courage and risk of disclosing their PD to peers, faculty, and staff and highlighting their ambivalence of whether others would be accepting or if they would face further discrimination and prejudice. The exhaustion that participants described when deciding whether to disclose speaks to the constant negotiation of identity that DisCrit identifies, where individuals must assess the risk of how much of their intersecting identities they can safely reveal in a world that stigmatizes and discriminates. The need to “put oneself out there” is a direct reflection of the participants’ anticipation of and response to ableist and racist structures that dictate which identities are acceptable.

Related to the second research question, the current study also highlights the impact of students’ sense of belonging and connection among peers with similar identities as they navigate systemic discrimination. Creating spaces on campus that are supportive of students' varied identities is imperative to reduce students' feelings of isolation. For example, an organization or department on campus that serves sexual and gender minoritized students but does not also center race and disability can lead to further seclusion and loneliness for REM students with PDs. Findings also elucidated the intricacies of navigating predominately White spaces and students' awareness of inevitable discrimination in spaces that are not inclusive of their multiple identities. Moreover, connecting with students with similar racial/ethnic and disability identities was essential to reduce feelings of alienation and for students' overall well-being. This finding expands on the intersectional work of Abes and Wallace (2018) on students with physical disabilities by highlighting the complexities of finding a sense of belonging for REM students with hidden disabilities.

In addition to challenges with diagnoses and having a sense of belonging, a major development for REM students with PDs was their sense of identity as it transformed throughout their experiences in college. Particularly, becoming aware of their identities and negotiating how they chose to identify while fighting for representation in a predominately White space was emblematic of long-persistent struggles for REM students (Jones & Williams, 2006). These struggles are heightened in the findings as participants described the effects of erasure of their identities in their navigation of predominately white spaces. Considering there are few identity development models focusing on individuals with multiple marginalized identities and most of the disability identity development models consist of majority White participants (Forber-Pratt et al., 2017), the negotiation and erasure of identities are imperative to consider when centering race/ethnicity and disability in identity development models. These factors should be embedded within college support services and inform the development of services that affirm marginalized identities and result in more successful outcomes.

Findings also suggest that while REM students faced the challenge of newfound independence and discovered their need for academic accommodations, they received minimal emotional support from their family, which was often limited to financial or academic support. This aligns with previous research, which suggests that emotional support may be limited for white students with psychiatric disabilities, however, it may be further limited for REM students due to mental health stigma in their communities (Barksdale & Molock, 2009; Masuda et al., 2012). Despite the limited family support, students reported receiving meaningful support from peers, though often not wanting to burden them. Several students discussed the varied levels of institutional support, highlighting the importance of supportive faculty members juxtaposed to the absence of spaces on campus that affirm their multiple marginalized identities. This finding contributes to an understanding of both positive and negative ways that students feel supported in their university despite the ways that REM students with PDs have not been centered in the systemic creation of university support services (Abes & Wallace, 2018; Francis et al., 2019). Disability service offices, college administrators, faculty, and staff should engage in advocacy training to help students manage complex interpersonal interactions in school and with their families.

Implications for Theory and Practice

Theoretically, the findings of this study provide support for DisCrit by illustrating the additional challenges faced by students navigating racism and ableism in their institutions. A DisCrit perspective helps contextualize student experiences in primarily White institutions and further supports the need to consider cultural factors that do not center a Eurocentric perspective. This study offers insight into the value of extending this theoretical framework to highlight the intersection of disability, race, and sexuality particularly in higher education settings. In addition to theoretical implications, this study provides a wealth of practice implications to better support REM students with PDs.

These findings should inform the development and delivery of support services to students with multiple marginalized identities to challenge the purported idea of normalcy in higher education settings, which produces policies and microsystems rooted in racism and ableism. From a DisCrit perspective, it is essential and urgent to work towards dismantling systemic and institutional barriers that impact student experiences and academic outcomes. Institutions should identify ableist and racist attitudes, policies, and structures to create more inclusive environments and reduce the presence of discrimination and harm amongst REM students with PDs. This may be achieved by implementing strength-based approaches that highlight potential rather than deficits. For example, adopting universal design for learning (UDL) principles in classroom settings and other environments on campus can provide students the opportunity to demonstrate what they have learned through various methods that are more inclusive and affirm different ways of learning.

Furthermore, to enhance support systems for REM students with PDs as they prepare for higher education, families could be provided with resources and information regarding how to support students as they navigate college. It is also imperative to increase the accessibility of resources for REM students and promote self-advocacy to increase self-efficacy. Additionally, institutions should recruit and retain more diverse students, faculty, and staff, which would increase peer support and decrease tokenism (Jones & Williams, 2006). Overall, higher education settings should remove the burden from REM students with PDs and spotlight the intersecting systems of oppression that higher education can perpetuate.

Disability Resource Offices

Disability resource offices (DROs) can have a great impact on students if more attention is placed on how they make space for intersectional identities. The findings of this study have specific implications for DROs, which can be highlighted through each tenet of DisCrit. As the first tenet focuses on the interdependence of racism and ableism, the reported challenges with diagnoses underscore the need for DROs to consider the compounded effects of racism and ableism in their assessment and support processes. Offices must ensure that their staff are not only well-versed in psychiatric disabilities, but also in the cultural nuances that affect REM students' experiences and willingness to seek help. DROs could also develop trainings for faculty and staff on intersectionality and disability/racial literacy, particularly psychiatric disabilities, to increase their awareness of challenges faced by REM students and the unique nature of their PD to better support them. Trained faculty and staff are vital in increasing support for students as faculty and staff are often the first contact when students reach out for help (Williams et al., 2018).

The second tenet values multidimensional, complex identities. Students' struggles with belonging and identity highlight the importance of DROs creating spaces that affirm and cater to the intersectional nature of student identities. Creating such spaces may involve training DRO staff to engage with students on multiple identity fronts and ensure that support services are not siloed but integrated, recognizing the overlapping impact of various identities. DROs should be visible to students and make connections with multiple centers on campus (i.e., multicultural centers, LGBTQ+ centers, international student center, etc.) to ensure students have access, feel accepted, and feel safe to discuss their varying identities and how they may interact with students with psychiatric disabilities as they seek academic accommodations and support from staff and faculty.

As the third tenet emphasizes the social constructions of race ability, DROs must actively work to deconstruct social biases related to race and ability, and the social stigma related to psychiatric disabilities, that contribute to the challenges REM students with PDs face. This work might include facilitating workshops that explore these social constructions and their real-world implications. Furthermore, it is necessary that DROs privilege marginalized voices, aligned with the fourth tenet, by incorporating feedback mechanisms, such as focus groups or advisory panels that include REM students with PDs, ensuring that these students' voices guide the development of services and policies. The next tenet of DisCrit considers the legal and historical contexts of disability and race. Recognizing the historical marginalization of REM students with PDs, DROs should examine their policies through a historical lens and push for institutional changes that acknowledge and redress past injustices. Furthermore, DROs particularly at predominantly White institutions should reflect on Priya's experiences discussed above and actively recruit diverse staff members, aiming to dismantle the "Whiteness as the norm" in staff representation, thereby addressing the discomfort that REM students with PDs may feel, which is supported by the sixth tenet of DisCrit.

The final tenet calls for activism by DROs and its support of students resisting discrimination. DRO professionals should advocate for their universities and colleges to implement policy changes that enforce inclusionary practices for REM students with PDs (e.g., resource centers, scholarship programs, or mentoring). Addressing institutional barriers and systemic issues will have a lasting impact for students. Echoing the self-support theme, DROs can encourage and facilitate self-advocacy among REM students with PDs. They should provide resources and guidance on navigating university systems, advocating for accommodations, and educating peers on intersectional issues. By realigning their practices within the DisCrit framework, DROs can play a pivotal role in not just accommodating, but actively supporting, advocating for, and empowering REM students with PDs.

Limitations and Future Research

This study is limited in its focus on students with self-identified PDs in a predominantly White institution within the Northeastern United States. Future research should consider student experiences in other regions of the United States and internationally, along with student experiences at minority serving institutions such as Historically Black Colleges and Universities, Tribal Colleges and Universities, and Hispanic Serving Institutions, and how those varied experiences impact student outcomes in higher education settings. Additionally, we were limited to one interview with participants; future research should adopt a longitudinal approach to examine student experiences in college over time. Although the sample was racially/ethnically diverse, most participants identified as cisgender; additional research should be conducted to understand the nuances of gender-expansive REM students with PDs. Moreover, our inclusion criteria for this study allowed us to center the impact of racism and ableism in the context of higher education; however, it is necessary to recognize variability within and among racial/ethnic groups and PDs. Further research should highlight distinctions among specific racial/ethnic groups with specific PD types.

Considering the noted discussion of cultural barriers to understanding one's disability, there is also a need to explore potential cultural norms that enhance or inhibit students' experiences as they come to understand their disability identity. Future research with a focus on the impact of culture on overall well-being and disability pride could lend itself to a greater understanding of the importance of considering racial and ethnic identity when providing support services. Similarly, there is a growing need for research that develops and examines therapeutic interventions which are specifically tailored to cultural backgrounds of REM students with PDs. This may include analyzing culturally-specific stressors, resilience factors, and coping mechanisms highlighted in the interventions. Future studies should also explore the creation and evaluation of campus spaces that are designed to be welcoming, supportive, and affirming of both racial/ethnic and disability identities. Institutions and disability resource offices play a pivotal role in creating inclusive environments. Additional research can shed light on the best practices for universities to adopt in terms of policies, training programs, and infrastructure to create holistic inclusive disability cultural spaces. An essential direction following this research is to understand the long-term impact of these inclusive spaces on the academic success, mental health, and overall well-being of REM students with PDs. It would be worthwhile to compare the symptom management techniques employed by REM students versus their non-REM peers. Such research may be beneficial in identifying unique challenges and strengths that non-REM students might experience.

Conclusion

The findings of this qualitative study provide insight into the lived experiences of REM students with PDs and advances our theoretical understanding of the processes that underscore identity negotiation and formation, particularly as they relate to intersectional identities. These findings provide an important foundation for future work and yield important implications for practice and policy, particularly pertaining to ways in which higher education settings can better support positive and healthy outcomes among REM college students with PDs. Inclusive environments and multi-faceted levels of support helped REM students with PDs navigate systemic discrimination throughout college. Contrarily, systemic racism and ableism, interpersonal challenges, and lack of support often led students to feelings of isolation, disconnection, and identity confusion. This study contributes to the small body of empirical research on the experiences of REM college students with PDs. By focusing on REM students with PDs, this study was able to highlight the unique experiences students with nonapparent disabilities navigate and their process of intersectional identity development.

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Appendix A

Interview Protocol

The interview will focus on the details of students' current experience and what it means for participants to identify as a person of color with a psychiatric disability in college. Participants will be asked to reconstruct concrete details of their experiences with being a college student of color with a psychiatric disability. The goal in this interview is to elicit rich descriptions of participants' experiences with the phenomena. The following questions and prompts will be used as a guide for the interview:

1. **Background Questions**
   - a. To start, can you tell me a bit about yourself?
     - i. Potential additional prompts for background information (i.e., age, race, sexual orientation, languages spoken, etc.).
   - b. Tell me about the history of your diagnosis.
     - i. When did you first learn that you had a psychiatric disability? Could you tell me more about the process of diagnosis?
   - c. Can you talk about the support that you've had or currently get from your family (i.e., financially, emotionally, etc.)?
     - i. Are you the first person in your family to go to college? If so, how do you feel that has shaped or influenced your experiences in college?
     - ii. Tell me about your academic program here at <university>. What are you majoring in?
     - iii. Are you taking classes full-time?
     - iv. What year are you currently in (i.e., Freshman, Grad student, etc.)?

2. **Experiences of Current Students**
   - a. Tell me about your understanding of your identity as a person of color with a psychiatric disability?
     - i. How do you feel that your identity has impacted/influenced your experiences in college?
     - ii. Can you tell me about some time when your identities have influenced your experiences in college?
     - iii. What opportunities do you feel have been afforded to you based on these or other identities? What opportunities do you feel were missed based on these identities?
   - b. Can you describe for me any other groups that you identify with (i.e., sexual orientation, religion, first-generation student, age, race/ethnicity, gender, international status, citizenship status, languages spoken, marital status, parenthood, etc.) and how you make meaning of those identities as a college student?
     - i. How has your identity changed over time?
   - c. Can you reconstruct a day in your life as a college student of color with a psychiatric disability?
     - i. How would you describe this experience?
     - ii. Tell me about your relationships with others you have interacted with in college.
     - iii. What is it like as a person of color at a predominantly white institution?
     - iv. Can you talk some about experiences that have made you feel included and/or supported?
   - d. What challenges have you faced as a college student of color living with a psychiatric disability?
   - e. Tell me about what has been some of your strengths as a college student?