

Belonging as a Protective Factor for Minoritized Identity Students

Abstract

Belonging, respect, and care for our students are priorities for CU Boulder. Yet there are significant disparities for our minoritized identity students in both perceived belonging and sexualized and gender-based violence compared to their non-minoritized peers. As belonging is an essential protective factor against decrements in health, wellness, and academic success, we must further learn belonging can be a useful target to reduce disparities in sexualized and gender-based violence experiences and related outcomes (e.g., dropping out, suicidality). Our interdisciplinary team proposes the following project, which uses both qualitative and quantitative research to (a) explore how belonging is associated with disparities in sexualized and gender-based violence, academic success and retention, and mental health and wellness for minoritized students and (b) how we might structurally begin to increase belonging for this subset of our students to mitigate these alarming disparities.

Project Summary

Undergraduate students with minoritized identities (e.g., racial/ethnic, gender, sexual orientation, and intersectional [REGSI] identities) experience an elevated number of stressors (e.g., acculturation stress, stigmatization, discrimination) at higher education institutions compared to their White, heterosexual, cisgender counterparts, particularly on primarily White campuses (PWC).¹⁻³ In addition to these stressors, there are numerous health and wellness disparities, such as a greater risk of experiencing sexualized and gender-based violence (SGBV),⁴⁻⁷ higher rates of academic attrition (i.e., “dropping out”),^{8,9} elevated risk of alcohol and substance misuse and related consequences,^{10,11} and more mental health difficulties.^{12,13} In the CU Boulder Campus Culture Survey (CCS, 2021), 22% of sexual orientation minority and gender diverse (e.g., transgender, non-binary) undergraduate students reported experiencing a form of SGBV.¹⁴ Irrespective of gender or sexual orientation, for students of a racial/ethnic minoritized identity, rates of SGBV ranged up to 15%. Notably, prior CU sexual misconduct data (2015-16) indicated that students who experienced sexual assault in their first year were also significantly less likely to return for their second year in comparison to students without sexual assault experiences.¹⁵ Given that SGBV is also associated with academic attrition, feeling less safe on campus, increased alcohol and drug use, and significant mental health decrements,¹⁶⁻¹⁹ SGBV may also further exacerbate these disparities for REGSI students.²⁰

A greater sense of belonging has been shown to be an effective protective factor for minoritized populations.^{1,12,21} Programs that improve belonging demonstrate increased academic success²²⁻²⁴ and improvements in mental health among minoritized populations.^{25,26} Constructs similar to belonging have also shown promise as a protective factor against SGBV disparities and related outcomes (e.g., depression, suicidality).²⁷⁻²⁹ For instance, greater perceived inclusion of sexual and gender minority students on campus is associated with reduced odds of experiencing sexual assault among these students on campus.²⁸ Additionally, SGBV reduces belonging, and in turn, increases negative outcomes (e.g., attrition). Yet, no research has directly addressed student belonging as a protective against SGBV or as an area for intervention following SGBV.

Despite student belonging being an identified value of CU Boulder,³⁰ the CU Boulder CCS 2021 data indicate that REGSI students have a substantially lower sense of belonging than do their non-minoritized counterparts. The proposed project is the first in-depth mixed-method examination of the protective utility of a sense of belonging against SGBV for REGSI students on a PWC. Understanding how minoritized identities and sense of belonging may interact to impact students' health, wellness, and safety on PWC's will allow for more targeted program development for addressing the systematic barriers to belonging and, in turn, disparities in academic success, health, wellness, and safety from violence in REGSI students.

Methodology.

Participants and recruitment: For method 1, participants will be 40 REGSI students and recruitment efforts will be employed to ensure diverse representation of identities, such as through organizations (e.g., Gender & Sexuality Alliance) and centers on campus (e.g., Center for Native American and Indigenous Studies). For method 2, participants will be 300 first-year students (50% REGSI) and recruitment will take place through move-in week events, student portals and media outlets (e.g., Buff Portal), and on- and off-campus flyer-ing.

Note: See the Budget Justification for more detailed information regarding participant compensation and retention. The proposed timeline is reported in Table 1.

Focus groups: Student leaders will engage our REGSI student participants in a structured dialogue around their experiences of belonging on campus, its association with academic attrition and performance, health and wellness, and safety with a specific focus on SGBV. Eight students will be recruited from each of the following five identity groups: Black/African American, Hispanic/Latinx, Indigenous/Native American, sexual minority [i.e., LGBTQ+], and trans and gender diverse students. Eight focus groups of 5 students / group will be conducted. The student leaders and the proposal team will code and identify themes from these dialogues.

Online assessments: The four online assessments will include open-ended questions that ask students to write expressively about (a) their sense of belonging at CU, (b) how they think belonging may relate to student risk for experiencing SGBV, and (c) actionable steps and ideas to bolster student belonging. The surveys will include a comprehensive assessment of the demographics of the sample, SGBV experiences (pre- and post-arriving on campus), perceived belonging (on campus and among peers), sense of safety from violence, academic engagement (e.g., continued enrolment, perceived level of classroom difficulty), minority-stress (for minoritized-identity students), alcohol and substance use, and mental health (e.g., depression, anxiety). Assessments will be given prior to the start of the Fall semester (three-weeks prior to start of classes), Mid-term Fall semester (Mid-October through early November), Mid-term Spring semester (March prior to the Spring break) and 2-months following the end of the Spring exam period. Open-ended responses will be analyzed using topic modeling procedures to find quantitatively derived themes from the content of the writing. Survey data will be analyzed using latent growth curve models with random intercepts.

Impact. The proposed project elevates the narratives of REGSI students to find actionable targets for campus-level intervention to improve belonging and reduce disparities in SGBV, academic success, and health and wellness at CU Boulder. The themes and narratives resulting from the focus groups will be used to direct our program development in partnership with campus (e.g., Center for Inclusion and Social Change; Office of Victim Assistance) and community organizations (e.g., Safehouse Progressive Alliance for Nonviolence; Moving to End Sexual Assault) to foster belonging at CU Boulder for REGSI students. The multiple online assessments will allow for establishing a trajectory in the relationships between belonging, SGBV, and related outcomes (e.g., attrition, mental health) and differences in these trajectories between REGSI and non-minoritized students. The results from this mixed-method research can inform the development of targeted interventions for REGSI students who are at elevated risk of SGBV, a low sense of belonging, and academic and health disparities. Results from longitudinal online assessments in conjunction with the qualitative results will be used as pilot data demonstrating the critical intersections of these variables and the high potential of belonging as a protective factor against disparities for REGSI students in violence experiences, academic success, and health and well-being. Mechanisms where the team will seek future funding including the National Institute of Minority Health and Health Disparities and the Center for Disease Control and Prevention.

Innovation. The proposed study is the first to examine belonging among REGSI students as a protective factor against SGBV. The study uses mixed-method approaches to (a) center the stories and validate the lived experiences of REGSI students, (b) rigorously examine the intersections of minoritized experiences and safety, belonging, and health and wellness, and (c) identify actionable steps and targets for improving REGSI student belonging on campus. Despite ongoing evidence for the pervasive impact of SGBV on students, very few

Table 1. Proposed Timeline

Activities	Timeline (MMM./YY or Semester YYYY)
Preparation	
IRB Submission	Pre-award (Spring 2023)
Training team	Pre-award (Summer 2023)
Method 1. Focus Groups	
Recruitment	Sep./23 to Mar./24 (ongoing basis)
Data collection	Oct./23 to Apr./24 (ongoing basis)
Data analysis	May-Jun./24
Method 2. Online Assessments	
Recruitment	Aug./23 (move-in week, first 2-weeks of class)
Data collection	1.) Aug./23, 2.) Oct./23, 3.) Mar./24, 4.) Jul./24
Data analysis	Jul.-Aug./24
Wrapping up & Next steps	
Paper Writing	Summer & Fall 2024
Applying for funding	Post-award (Fall & Spring 2024)

studies have connected SGBV victimization with retention rates—leaving a significant gap in the literature on dropout rates following these experiences. Additionally, existent literature on the impact of belonging on mental health and academic performance are cross-sectional and retrospective. The pattern and direction of the relationship of belongingness with these outcomes remains unclear, necessitating more rigorous methodology to investigate the nature of the relationship before targeted intervention programming can be developed. As such, the use of longitudinal data collection will allow the identification of directions of relationships between feelings of belonging, SGBV, sense of safety, academic engagement, and mental health. Finally, the interdisciplinary team includes key stakeholders and experts across the CU Boulder campus to ensure the project can be skillfully executed and translated into an implementable program to benefit CU students.

Project team. The current team of collaborators hold a range of positions and varying areas of expertise from different offices and disciplines across campus. Together, the team is well positioned to successfully execute the proposed research within the timeline and budget.

Chelsea Kilimnik (Assistant Research Professor; Department of Psychology and Neuroscience, Renée Crown Wellness Institute): Chelsea Kilimnik is an expert in SGBV experiences and their impact on health and wellness. She is highly experienced in the novel assessment and advanced statistical approaches that will be employed in the current project. Chelsea is also a clinical psychologist trained in traumatic stress, minority stress, and mental health and wellness with a focus on emerging adulthood.

Donna Mejia (Associate Professor; Department of Theatre and Dance, Women and Gender Studies, LGBTQ Studies, Ethnic Studies, Center for Teaching & Learning, Renée Crown Wellness Institute): Donna Mejia is a scholar and performer in traditions of African and Arab Diaspora, and emerging transcultural fusion traditions. Her interdisciplinary work prioritizes individual and communal healing, global citizenship and personal identity, cultural retentions and innovations, gender equity, intersectionality, anti-bias and anti-racism efforts, and arts-based research. Additionally, Donna is a member of the Provost’s Taskforce for Sexual Misconduct.

Teresa Wroe (Assistant Vice Chancellor of Prevention and Education, Deputy Title IX Coordinator at OIEC) and **Julie Volckens** (Director of Assessment at OIEC): Teresa Wroe joined CU Boulder in 2004 in Student Affairs as the Coordinator for the CU Rape and Gender Education program and the Community Health program. In 2015 she began her current position at the OIEC as the head of prevention and education on campus and deputy Title IX coordinator. Julie Volckens has served as an expert of assessment and research coordination for CU Boulder since 2009. She is the point person for institutional assessment and data collection. She led the development and implementation of the CU Sexual Misconduct Survey in 2015-16 as well as the administration, analysis, and reporting of the 2021 Campus Culture Survey.

Project Budget & Justification

Participant compensation and retention:

The proposed compensation schedule for participants are outlined in Table 2. Focus Groups: Participants will be compensated \$25.00 for their participation in the focus groups.

Online assessments: Participants who complete all four assessments will receive \$75.00. Later assessments are compensated more to incentivize participant retention. We have allowed for up to 20% attrition in our target sample size, but are budgeting for 0% attrition to have funds available for potential compensation of the full sample enrolled ($N = 300$). *Total compensation costs: \$23,500.*

Student leaders: Five students will be included in the project implementation, including being peer-leaders of the focus groups to keep it a student generated and led dialogue, study recruitment, online assessment data collection and monitoring, and data cleaning in collaboration with the research team. Hourly wages are requested for these 5x students at 3hrs/week for 30 weeks at \$15.00/hr. *Total student leader wage costs: \$6,750.*

Other costs and materials: We are requesting \$4,000 for printing and materials costs related to recruitment flyers, focus group discussion guides, and consent and debriefing forms. We are also requesting \$1,500 for food and refreshments for participants during the focus groups. *Total other costs and materials: \$5,500.*

Total budget requested: \$35,750

Table 2. *Compensation schedule*

Assessment	Cost per	# of People	Total Cost
Focus Groups	\$25	40	\$1,000
Assessment 1	\$15	300	\$4,500
Assessment 2	\$15	300	\$4,500
Assessment 3	\$20	300	\$6,000
Assessment 4	\$25	300	\$7,500
Totals		340	\$23,500

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