

## **Advancing Equity: Supporting the Mental Health and Emotional Well-Being of Black Youth in the School Setting**

Anne O. Odusanya  
*University of Milwaukee*

Frances Dean  
*Defense Centers for Public Health-  
Aberdeen*

Kerritt Saintal  
*DC Health Community Health  
Administration*

Xavier Lewis-Palmer  
*Old Dominion University*

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### **ABSTRACT**

This study examines the impact of societal challenges on the mental health of Black youth and explores strategies for school personnel to support their well-being. With heightened awareness due to COVID-19 and incidents of police brutality, this paper assesses effective practices for fostering a supportive educational environment. Utilizing hybrid coding and a two-round literature review via PubMed, gaps in the intersection of Adverse Childhood Experiences (ACEs) and Black youth's educational experiences were identified. Thematic analysis revealed crucial strategies for combating biases, discrimination, and enhancing school connection. Recommendations include training educators in cultural responsiveness, building strong relationships among school staff, students, along with their families, and improving engagement with Black youth to alleviate negative school perceptions. The paper underscores the urgency of addressing mental health disparities and suggests comprehensive approaches encompassing personal, interpersonal, and public policy interventions to support Black students' mental health.

**Keywords:** ACE, Black Youth, African Diaspora, Public Health, Education, Teaching, Social Work, School, Equity, Mental Health

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The awareness of health inequities affecting the Black community has garnered substantial attention towards often disregarded issues, notably the rise of police brutality and increased vulnerability to racially-motivated traumatic events. Much of this attention appears to have been encouraged by public social activism and the spotlight on police brutality resulting from the very public deaths of Sandra Bland, Breanna Taylor, George Floyd, Ahmaud Arbery, and Jacob Blake, to name a few in addition to the onset of the COVID-19 pandemic (*Congressional Record*, Vol. 167, Number 40., 2021, pp.H1039-H107). After the killing of George Floyd coupled with the protests that emerged, nearly 200 declarations from a variety of different communities recognizing racism as a health issue started to pass at an accelerated rate (American Public Health Association, 2021). Additionally, with respect to Adverse Childhood Experiences (ACEs) that negatively impact individuals across all sociodemographic backgrounds, research has shown that ACEs disproportionately burden racial and ethnic minoritized groups, especially Black communities. Black communities including children, older youth, and adults report more ACEs than their Latine and European American counterparts with higher income not being a protective factor (Hampton-Anderson et al., 2021; Slopen et al., 2016). There are many systemic contributors to why Black communities have an increased vulnerability to ACEs worsening their physical and mental health over time: deep poverty, racism, police brutality, lack of child protection, and more result in community, intergenerational and personal trauma (Conching & Thayer, 2019; Hampton-Anderson et al., 2021; McCrea et al., 2019). However, disparities and inequities exist in relation to mental health care services for Black communities (American Psychiatric Association, 2017). Black individuals often receive substandard and less consistent quality of care, and have little to no access to culturally responsive care, including medication and outpatient services. Furthermore, Black individuals have higher utilization of inpatient services, emergency rooms or primary care, and lower utilization of mental health specialists (American Psychiatric Association, 2017).

Consequently, these systemic contributors have called the soundness and neutrality of the systems that are meant to serve the Black community, especially Black youth, into question. The mental health impact of Black youth hearing about or watching images of Black people killed, sometimes for taking part in everyday activities, must be considered (Alany et al., 2017; Ayodeji et al., 2021). Furthermore, the Black community has experienced excess mortality due to COVID-19 (Ayojedi et al., 2021). The US Surgeon General issued an advisory on the youth mental health crisis further exposed by COVID-19 acknowledging that COVID-19 disproportionately affected youth from structurally marginalized communities, including: youth from racial and ethnic minoritized groups, with special health care needs, who identify as LGBTQIA+, and more, especially in the school setting (Office of the Surgeon General, 2020). More recently then, in May 2022, a coalition of agencies through the US Department of Health and Human Services issued a joint letter assuring their collaborative commitment to providing resources and services to support children's mental health, especially during the COVID-19 pandemic (Health Resources and Services Administration, 2022). In June of the same year, the Administration for Children and Families also issued a letter to policymakers and other parties responsible for youth health and wellness, emphasizing the need for high-quality resources for youth. In July 2022 following the issuance of the letter, the Biden-Harris Administration announced two new actions to address the youth mental health crisis (US

Department of Education, 2022). Due to the disruption and grave consequences that have resulted from the COVID-19 pandemic, there has been increased discussion on officially recognizing COVID-19 to be an ACE itself. What is evident, however, is that COVID-19 worsened pre-existing ACEs. According to Sanders (2020), there are several ways in which ACEs may be exacerbated by the social isolation, job loss, school closures, and other stressors unleashed by the pandemic. Sanders (2020) went on to identify specific areas impacted below:

First, the pandemic may have increased intra-familial adversity, by exposing children to increased parental anxieties, especially those associated with job loss, food insecurity, and housing insecurity. Second, by amplifying toxic stress, increased family adversity may impair child brain development, particularly during the early years. Third, the pandemic's indirect social and economic impact on family stress may linger for months or years. Fourth, the pandemic and its response are disproportionately affecting low-income and racial and ethnic minoritized populations, which are already at increased risk for ACE-impacted chronic conditions like preterm birth, diabetes, hypertension, and chronic lung disease. Taken together, the indirect effects of the pandemic response could exacerbate each of the common ACEs in children's lives (p.174).

Although literature has not proven the COVID-19 pandemic to be an ACE, when it comes to the Black community, scholars can argue that the COVID-19 pandemic is a potential ACE due to the pronounced racially-motivated tragic events and worsening of other ACEs.

To better assess the issue, this paper sets out to determine effective strategies to prepare school personnel in supporting the mental health and emotional well-being of Black youth. We identified articles noting emerging approaches or recommended practices to support school personnel in cultivating a racially just school climate.

## **METHODS**

We initiated a first-round literature review of articles that discussed the increase of Black youth experiencing ACE-related events when assimilating in non-Black spaces. PubMed was utilized to locate articles noting events, discussions or policies related to connections between reported lived experiences of Black people and ways that ACEs were (or could be) mitigated, prevented, and/or exacerbated on a multi-tiered system (i.e., intrapersonal-level, interpersonal-level, community-level, organizational-level and public policy-level). Inclusion criteria of peer-reviewed articles were that the study population consisted of Black youth up to 18 years and had to touch on socioeconomic and/or sociopolitical influences that contributed to ACEs in said youth. In addition, the peer-reviewed articles were published within the past 10 years and located within the US. Keywords and search terms included "ACEs," "Black youth," "Black community," and "social assimilation."

Once a sufficient number of articles were found, a hybrid coding approach was used to identify current research gaps that pertain to the lack of mental support for Black youth in schools and develop SMART (Specific, Measurable, Achievable, Relevant, and Time-bound) research questions. Using the deductive coding method, we identified articles that closely aligned with our topic of interest (Barbarin et al., 2019, Moses et al., 2019, Pais, 2014, Strompolis et al., 2019), developed discussion-based questions based upon reading

the articles, assigned themes (aka "codes") associated with those research questions, and compared all questions to identify overlapping themes (i.e., mental health, education, depression, advocacy, teachers).

The following questions that we asked upon reading each article and identified to have the strongest overlap with all the themes were: "How can we accurately assess the impact of support strategies for low-income families, short and long-term, in culturally appropriate ways?" (Strompolis et al., 2019), "How can we create synergy in messaging and building across a diverse set of cultures without diminishing each other?" (Moses et al., 2019), "What is the least that can be done to significantly reduce the amplification or acceleration of ACE effects on the most marginalized?" (Barbarin et al., 2019), and "What are ways to induce the effects of income on reducing ACEs, communally or indirectly, for kids in families making less than \$25,000?" (Pais, 2014). The question from Strompolis et al., 's study is based upon findings that show an increase of ACEs exposures for those with less than \$25K when accounting for the intersectionality between race, ethnicity, and income (Strompolis et al., 2019). These findings speak to the importance of prioritizing Black youth who are socioeconomically disadvantaged in recommended practices (e.g., health and well-being assessments, training on cultural responsiveness practices, curricula highlighting content that supports the well-being of students). With the question inspired by Moses' study, stronger racial-ethnic identity (ERI) has been associated with higher academic success, better preparation for interacting with other racial-ethnic groups, and increased mental and physical health (Moses et al., 2019). This finding confirms the need to develop training that prepares youth for navigating racial socialization and success with establishing a strong connection with the Black community.

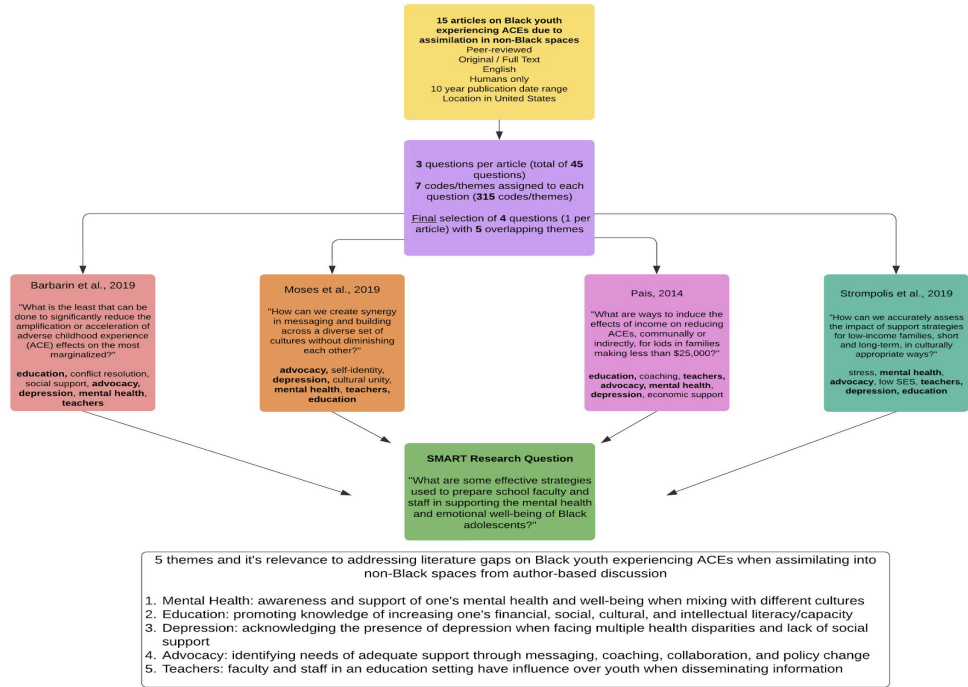
After determining the commonality of themes associated with all the research questions from the articles, we used inductive coding to finalize our overarching research question using the SMART method. The overarching question was, *What are some effective strategies used to prepare school faculty and staff in supporting the mental health and emotional well-being of Black adolescents?* From there, we performed a second-round traditional (narrative) literature review that touched on recommended practices to promote a racially inclusive educational environment for Black youth.

While performing the second-round literature review, The Social Ecological Model (SEM) was applied to investigate effective strategies in supporting school personnel to promote the mental health and well-being of Black youth. SEM consists of intrapersonal, interpersonal, organizational, community and public policy factors that affect one's overall health. Intrapersonal factors consist of traits at the individual level, such as knowledge, attitudes, behaviors, skills, self-concept and more (McLeroy et al., 1988). The interpersonal level comprises informal and formal social support systems and networks, including work groups, friends, family, and additional peers. Examples of characteristics at the organizational level are social institutions along with their regulations for operations. Community level factors are the relationships among organizations. Lastly, public policy emphasizes policies and law at the local, state and national levels (McLeroy et al., 1988). Each of the emerging approaches and recommended practices corresponded to at least one level of the SEM, with school personnel at the center of the SEM.

PubMed was utilized to locate articles noting emerging approaches or recommended practices to support school personnel in cultivating a racially just and inclusive school climate for Black youth. Qualitative data outcomes were assessed through the identified

articles to conclude emerging approaches and recommended practices highlighted in our thematic analysis concept map (Figure 1). The diagram highlights the inclusion criteria for the deduction portion of the coding, the process, the codes associated with each discussion question and its accompanying article, and the finalized research question formed from the discussion questions.

Inclusion criteria of articles were that the study population consisted of Black middle or high school students aged 13-18 years. Articles also needed to be peer-reviewed; include intrapersonal-, interpersonal, community, organizational, or public policy-centered emerging approaches or recommended practices; had taken place in an educational setting within locations that had English as a primary language, and were published within the past 10 years. Keywords or search terms used to find articles encompassed various combinations of "mental health support", "Black youth", "school setting", "policy" and "mental health need prevention."



**Figure 1.** Concept Map of Thematic Analysis Process for Identifying Common Themes Speaking to Literature Gaps Focused on Black Youth Experiencing Adverse Childhood Experiences (ACEs) Due to Assimilation in non-Black Spaces

## **FINDINGS**

With regard to thematic analysis, the strategies aimed to address common factors comprising biases or discrimination, school disconnection or little to no school engagement relative to Black youth, and relationships between school personnel, including school police, and families. At the intrapersonal level, looking beyond misbehavior of Black youth to better understand the context of the misbehavior served as an emerging approach or recommended practice. Additionally, being mindful of vulnerability and intersectionality of race, culture, disability and gender in relation to misbehavior of Black youth was imperative (Haight et al., 2016). This greater understanding can result in alternative approaches and responses to the misbehavior of Black youth that support their engagement in school (Haight et al., 2016). In addition, educators were advised to avoid frequently used language associated with the criminal justice system including but not limited to "self-defense," "offender," "crime," "misdemeanor," and "assault" in relation to Black youth misbehavior to prevent Black youth from internalizing these negative messages to refer to themselves (Haight et al., 2016). Black youth are disproportionately exposed to school harsh disciplinary practices, such as suspension, expulsion, zero tolerance policies, and security measures than their White peers (Anderson and Ritter, 2017; US Department of Education Office for Civil Rights, 2014). This has resulted in the criminalization and school to prison pipeline that funnels Black students into the criminal justice system (Fabelo et al., 2011; Hampton-Anderson et al., 2021). Although we recognize the growing injustices that are disproportionately affecting Black males in America, it is also important to recognize that Black female experiences should also be amplified and they each have a space for discussion (Richie, 2012). To address these issues, school districts have adopted and implemented restorative justice programs. Restorative justice programs promote equitable and relational learning environments through practice and policies that are supportive for students. Restorative justice programs work with students to resolve conflicts rather than suspend or expel students. Furthermore, restorative justice programs foster a community that strives to center and equalize the voices of educators, staff, administrators, and students (Davison et al., 2022; US Department of Education, 2023).

### **Intrapersonal-related Findings for Recommended Practices**

At the intrapersonal level, an emerging approach or recommended practice was for educators to receive training and implement cultural responsiveness practices, such as: tapping into cultural and contextual resources for learning; acknowledging cultural strengths (e.g., enhancing racial and ethnic identity); exuding cultural sensitivity; asking about students' culture and what it means to them; and encouraging students to complete assignments or reports on people who are racially and ethnically diverse (Bottiani et al., 2020). School personnel often serve as the first identifier or contact for a student concerning a mental health problem and are more likely to have more frequent contact with the student as well as develop trusting relationships. Given

the unique role of school personnel in being able to support their students' mental health and emotional well-being, school personnel should be given professional development training that allows for them to adequately address mental health needs in the classroom. This includes training on implementing universal social and emotional behavioral health screenings, identifying signs and symptoms (depression, low self-esteem, anger, low life satisfaction, etc.), referring students in need of services, and utilizing prevention programs/models in the classroom (Malone, Wycoff, & Turner, 2021). Additionally, school personnel can be trained to increase/encourage their students' help seeking behaviors. In a small qualitative study, eight out of nine groups of students identified their teachers above mental health counselors and peers as the first person they would seek help from concerning a mental health problem (Ijadi-Maghsoud et al., 2018). In response to the aforementioned social unrest in addition to the persistent racial disparities, inequities, and discrimination targeting Black communities, schools are focusing on improving racial equity in relation to school climate (Urban Institute, 2021). School climate entails multiple qualities of the school environment, including but not limited to physical and social-emotional safety, teaching and learning, interpersonal relationships, and school connectedness. Enhancing school climate and belonging is associated with improved student achievement, confidence and safety. To have a more holistic approach, efforts must address both academic and nonacademic needs of students (Urban Institute, 2021).

According to the US Department of Education (2023), there are five guiding principles for creating safe, inclusive, supportive and fair school climates: 1) Foster a sense of belonging through a positive, safe, welcoming, and inclusive school environment; 2) Support the social, emotional, physical, and mental health needs of all students through evidence-based strategies; 3) Adequately support high-quality teaching and learning by increasing educator capacity; 4) Recruit and retain a diverse educator workforce; and 5) Ensure the fair administration of student discipline policies in ways that treat students with dignity and respect (including through system-wide policy and staff development and monitoring strategies).

To foster a sense of belonging through a positive, safe, welcoming, and inclusive school environment, school personnel can work toward building strong and trusted relationships with; challenging the growth of, expressing care toward, providing support and inspiration for, and sharing power with students through professional development and coaching (US Department of Education, 2023). Furthermore, cultivating positive peer relationships for and providing instruction that connect to the lived experiences and identities of students results in safe environments and a sense of belonging for students. Additionally, increasing the number and diversity of school personnel; developing curricula that challenges and builds on prior knowledge of students; and providing project-based or service-learning projects for students to learn about issues they care about contribute to promoting a sense of belonging. To support the social, emotional, physical, and mental health needs of all students through evidence-based strategies, schools can invest in full-service community schools that have integrated student supports; expanded learning time and opportunities; family and community engagement; and collaborative leadership and practice. In addition, schools can implement the Centers for Disease Control and



Prevention's Whole School, Whole Community, Whole Child (WSCC) model that centers students and school personnel, and highlights the importance of community in supporting schools, connections between health and academic achievement, and implementing evidence-based school policies and practices. The WSCC model has 10 components: physical education and physical activity; nutrition environment and services; health education; social and emotional climate; physical environment; health services; counseling, psychological and social services; employee wellness, community involvement; and family engagement (US Department of Education, 2023).

To adequately support high-quality teaching and learning by increasing educator capacity, schools can provide pre-service, and ongoing professional development, learning, and mentoring opportunities for teacher preparation centered on maintaining positive class environments, limiting bias, improving trauma-informed approaches, and increasing positive behavior (US Department of Education, 2023). Improving understanding of child and youth development and monitoring progress toward meeting grade-level standards promote high-quality teaching and learning by increasing educator capacity (US Department of Education, 2023). Moreover, expanding the diversity of the educator workforce and school mental health professionals through hiring and retention is crucial to building strong relationships with, and reducing stigma for students of color (US Department of Education, 2023). To ensure the fair administration of student discipline policies in ways that treat students with dignity and respect, school policies need to be co-created with students, parents/caregivers, and community members through informal (forums, feedback boxes) and formal (school climate surveys) methods, discipline policies need to be reviewed to ensure they are developmentally appropriate, accessible to students, families and community members and are not disproportionately affecting a group of students (disaggregate and analyze data by race, ethnicity, gender, disability, etc.); and two-way communication with families need to be in place (emails, text messages, phone, multiple languages)(US Department of Education, 2023). Furthermore, clear roles for law enforcement and school security should be established to prevent instances of their involvement in student discipline that can be addressed by trained mental health professionals and educators (US Department of Education, 2023).

### **Interpersonal-related Findings for Recommended Practices**

At the interpersonal level, school police caring toward Black youth weakened the association between perceived frequency discrimination and negative school attitudes from Black youth (Bottiani et al., 2020). It is important to note that perceived frequency discrimination included observing societal forms of, hearing about, the witnessing of and personal experiences of discrimination (Bottiani et al., 2020). Recommended practices concerning school police include training that increases levels of caring, empathy, awareness of positive youth development and sensitivity to mental health needs of youth in addition to engaging in an informal counselor role per the National Association of School Resource Officers (Bottiani et al., 2020). With respect to relationships between educators, youth and families, teacher cultural responsiveness practices were associated with more school connection or engagement

for students (Bottiani et al., 2020). Additionally, strong partnerships between families and educators around shared values, goals and improved communication to understand youth misbehavior, especially for students in special education, were strongly recommended (Haight et al., 2016). Lastly, to enhance communication and recognize cultural preferences, school personnel should implement oral narrative communication pertaining to misbehavior of Black youth because it is highly valued by the Black community rather than formal or authoritative reporting which is often connected with systems of oppression (Haight et al., 2016).

### **Community-related Findings for Recommended Practices**

At the community level, a recommended practice for school personnel to support the mental health and emotional well-being of Black youth, is for the school system to meaningfully engage and partner with families, which will help strengthen the relationship between teachers, school administrators, parents/caregivers, and students (Malone et al., 2021). Malone et al. (2021) found that building a more inclusive school environment that more closely engages parents/caregivers in their child's education and well-being, allows for families to feel empowered to work with school personnel in addressing behaviors through reducing barriers associated with perceived power differentials and also enhances parenting/caregiving skills. Ultimately, engaging families is associated with greater positive outcomes for youth, parents/caregivers, and school personnel, including increasing communication and improving student academic achievement. One recommended strategy is for schools to hold parenting/caregiving education events that focus on having conversations around mental health and race related issues (Malone et al., 2021).

Furthermore, there should be a greater focus on prevention school wide. Malone et al. (2021) suggest using a multi-tiered system of support (MTSS) framework to address racism and discrimination in schools. For example, tier 1 supports (universal prevention and promotion) include promoting a positive racial school climate through teachers' implementation of transformative social emotional learning and micro affirmations, in which students' cultures and racial identity are positively acknowledged. Where possible, teachers should assess Black and Brown students' perceptions of their school climate as distinct from that of White students, as research shows that there is a gap in positive perceptions of school climate between students of color and White students. Tier 2 supports include both early intervention services and school wide prevention services, and are geared towards students identified as being at risk for mental health problems through universal screenings (Malone et al., 2021). School-based mental health clinicians should look for opportunities to adapt school-based interventions in tier 2 to be more culturally relevant. For example, suicide prevention for Black youth can be implemented in community settings led by trusted community leaders that Black youth frequent, such as faith-based organizations, after-school programs, community centers, and more (Sheftall & Miller, 2021). Prevention and early intervention services can serve to prevent development of a mental health issue in adulthood, as well as identify students and provide them access to services earlier (Malone et al., 2021). Given the increased rates of suicide among Black students in recent years (Ivey-Stephenson et al., 2020),

use of an MTSS framework to disrupt racism and discrimination in schools could be beneficial in preventing ACEs which have been linked to increased risk of suicide as well as violent behavior in youth (Fox et al., 2015). Scholars have argued that racism should be conceptualized as an ACE due to its negative impact on physical and mental health (Bernard et al., 2020).

### **Public Policy-related Findings for Recommended Practices**

At the organizational and public policy levels, school-based mental health providers and other school personnel can leverage the strength of school-based mental health programs to increase equity in addressing school mental health needs, reduce disparities in harsh discipline, and improve school safety and perception of a positive school environment (Malone et al., 2021). Some recommended public policy change examples include advocating for financial investments and expansion of school-based health centers and school-based mental health programs, increasing the amount of racially and ethnically diverse school-based mental health clinicians in schools, elimination of zero tolerance policies that disproportionately impact Black and Brown students and their mental health, as well as a reduction in the use of expulsion and suspensions (Malone et al., 2021). A study conducted by Ijadi-Maghsood et al. (2018) aimed at understanding the perceptions of low-income minority youth on seeking help and their barriers to mental health assistance, reported a lack of awareness of mental health service providers and not entirely understanding their roles. Further recommended strategies include raising awareness of school-based mental health clinicians in schools, providing education to students around available programs and clinicians, and providing regular mental health education in schools to students (Ijadi-Maghsood et al., 2018).

## **DISCUSSION & RECOMMENDATIONS FOR FUTURE RESEARCH**

Recommended practices for schools to implement from the intrapersonal to the public policy level comprise understanding the context of misbehavior; acknowledging intersectional identities; using inclusive language; implementing cultural responsiveness programming concerning the mental health and emotional well-being of Black youth. Additional approaches are cultural sensitivity training; strengthening partnerships between families and educators; and utilizing a less formal method of communication regarding misbehavior of Black youth. Moreover, strategies, such as improving the relationships between school personnel, students and families; implementing an MTSS framework to promote a positive school racial climate and culturally responsive practices; and maximizing impact of efforts of school-based mental health programs can support the mental health and emotional well-being of Black youth. Implementing strategies at multiple levels of the SEM increases the likelihood of the effectiveness of multi-level interventions to promote behavior change, in this case, to equip school personnel in supporting the mental health and emotional well-being of Black youth.

Additional recommended practices include the need to recognize systemic racism as an ACE. Various literature have highlighted the consistent relationship

between childhood adversity and adverse health outcomes (Lanier, 2020). Institutional and interpersonal racism are known to be measurable and many findings mention that Black youth are more likely to have higher ACE scores compared to their White counterparts. Black youth are overrepresented among children with two or more identified ACEs (Lanier, 2020). This calls for a need for school personnel, clinicians, public health practitioners, including school nurses, school psychologists, school social workers, school counselors, policymakers and more to develop effective treatment and interventions for Black youth who are disproportionately suffering from systemic racism and other forms of ACEs. This can include designing services that support Black youth in a clinical and community setting, considering race-related trauma in clinicians' diagnostic and treatment formulation and promoting diversity, equity and inclusion efforts to support Black youth (Ayodeji et al., 2021). Compound stress, also known as cumulative impact from different sources of adverse public health outcomes, can not only lead to poor mental health outcomes, but ultimately early onset of morbidity and mortality (Mathis, 2017; Areba et al., 2021).

Recent research is paving the way towards building mechanistic models of racism's physiological effects. One example can be found in a recent published pilot study by Nam et al. (2022) which revealed a means by which discrimination-linked stress can be measured in real-time through tracking of biomarkers in response to stressors such as slurs or microaggressions. The overall findings of the work, if confirmed, potentially deliver the beginning of a mechanistic foundation by which communities can measure sources of racial discrimination-based stressors and provide meaningful quantified data for policies aimed at reducing discrimination. This study is aimed for a larger trial, which can provide further validation, and is likely not the only one of its kind over the near future (Ortega., 2022). It is hoped that new enterprising means are adapted in the future, to ground discussion of race-based stresses and ACEs and advance meaningful policies that improve health outcomes for Black youth experiencing ACEs, their parents/caregivers, and their educators.

As Black authors, we play a crucial role in shedding light on experiences that can be classified as ACEs. Collectively, at some given point during our educational journey, we have all had a negative experience that we would classify as an ACE. For example, one of the authors had an experience wherein a teacher would make derogatory and condescending comments about all of the Black students in their class. Whenever the teacher would ask a question, they would only call on the White students to answer. That was our coauthor's first experience in school where their intellect was dismissed due to prejudice in relation to the color of their skin. These are not experiences that we could expect those of other demographics to speak of, so directly, for our demographic, and thus our lived experiences provide an important voice. We believe that our personal experiences, especially as Black authors, strengthen the imperative to address these issues. Through our narratives, we provide tangible examples of the challenges and traumas faced by Black individuals, ultimately amplifying the urgency for society to confront and heal from these deep-rooted issues. Our collective voices contribute to a broader understanding of ACEs, fostering empathy, awareness, and a call to action for the betterment of Black communities and society as a whole.

Lastly, there must be a national investment to address the high unmet need for Black youth concerning mental health and emotional well-being. For example, in September 2022, the US Department of Health and Human Services' Office of Minority Health awarded more than \$3 million in grants to organizations to promote Black youth mental health (US Department of Health and Human Services, 2022). Although this is a great start to confirm the commitment to promoting mental health and emotional well-being for Black youth, additional agencies and organizations must back their efforts with financial support to make a measurable positive change.

### **LIMITATIONS**

This paper reflects work submitted on September 25, 2022, assembled through virtual communication, and edited through review. Updated opinions and insights by the authors in the time since can be sought via email. While we did touch on findings that speak to the different ways of supporting the mental health and well-being of Black youth, there were several limitations that were identified in this study. First, due to the paper using qualitative analysis and theoretical perspectives, we were unable to statistically measure the effectiveness of the identified recommended practices used to support Black youth in school settings. Second, some of the identified articles had qualitative interviews and case studies with students, which may have been subjected to recall bias (such as in Haight et al., 2016, where four students were interviewed for a case study). Additionally, since none of the qualitative interviews from the articles highlighted in the results were with policy makers or school staff, we cannot speak on insight regarding the identified practices from their point of view. Third, generalizability cannot apply to this paper due to some of the studies having small sample sizes from conducting descriptive analyses or participants involved in qualitative interviews. Finally, because some of the studies took place outside of the US, their findings on recommended practices will involve different variations regarding the context of intrapersonal, interpersonal, community, organizational, and public policy factors and can only be applicable to some degree.

### **CONCLUSION**

There are ample opportunities to disrupt inequities and disparities regarding the mental health and emotional well-being of Black youth. In order to achieve a desired outcome which would reflect a significant and positive change, approaches from the intrapersonal to public policy levels should be implemented. We learned that insights from the SEM can be used to make a substantial impact enabling an environment for which schools can receive the necessary support and resources to improve the mental health and emotional well-being of Black Youth. In doing so, we send a powerful message to Black and Brown youth that their well-being matters and that their situations are surmountable. By investing in their mental health today, we invest in a brighter and more equitable future for all.

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**ANNE ODUSANYA, DrPH, MPH**, was an instructor at the University of Wisconsin-Milwaukee, Joseph J. Zilber School of Public Health at the time of this article's generation. She has 11 years of public health experience, specifically related to maternal and child health regarding community health behavior and education. This includes creating undergraduate and graduate curricula, working alongside minoritized communities (Black, Indigenous, People of Color, LGBTQIA+, and families of children and youth with special health care needs), in addition to equity-oriented program development, implementation, and evaluation nationally and internationally. Email: [anneodusanya@gmail.com](mailto:anneodusanya@gmail.com)

**ANNE ODUSANYA, DrPH, MPH**, was an instructor at the University of Wisconsin-Milwaukee, Joseph J. Zilber School of Public Health at the time of this article's generation. She has more than a decade of public health experience, specifically related to maternal and child health regarding community health behavior and education. This includes creating undergraduate and graduate curricula, working alongside minoritized communities (Black, Indigenous, People of Color, LGBTQIA+, and families of children and youth with special health care needs), in addition to equity-oriented program development, implementation, and evaluation nationally and internationally. Email: [anneodusanya@gmail.com](mailto:anneodusanya@gmail.com)

**FRANCES DEAN, MSW, MPH, BSHP**, is a seasoned public health professional and currently works as a Civil Rights Analyst with the Department of the Army. Her research interests involve using data and community resources to inform recommendations that will support those with Mental, Behavioral, and Developmental Disorders (MBDDs), promote health equity, and eliminate health disparities. Email: [deanfran@umich.edu](mailto:deanfran@umich.edu)

**KERRITT SAINTAL, MPH (c), CPH**, is a Public Health Analyst at DC Health's Tobacco Control Program. Ms. Saintal serves as the Program Officer for the Community Disparities Initiative, focusing on reducing tobacco burden among Black residents of the District of Columbia who also experience food insecurity. With nearly 10 years of research experience, she is currently completing her master's degree in public health with a concentration in epidemiology at Eastern Virginia Medical School. Her research interests include minority health disparities, global health, chronic diseases, and understanding the implications of artificial intelligence and machine learning methods on community-based research. Email: [kerritt.saintal@dc.gov](mailto:kerritt.saintal@dc.gov)

**XAVIER-LEWIS PALMER, PhD**, is a senior technical professional in Data. He holds 5 degrees, being a PhD in Engineering, MS in Cybersecurity, MS in Biotechnology, BS in Biology, and BA in Philosophy. His research interests primarily concern interdisciplinary projects that investigate technological intersections, as well as societal impacts.

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outlook for students is increasingly at risk for as long as our societies fail to address factors leading to burnout. Meaningful change includes (but exhaustively so) will require enhanced training, improvements in leadership, funding to address shortcomings in resources for school personnel, and meaningful movements toward building racial equity in staffing (D'Souza et al, 2022; Ferren 2021; Gómez-Domínguez et al 2022; Jones et al, 2021). Additionally and particularly important in equity in areas of significant diasporic African populations is the ability of educational agencies to invest in Black school personnel; and youth's mental health. Stability in mental health is needed for teaching to have a profound impact. A report from the Center for American Progress noted that Black teachers had twice the turnover rate, which points to a decaying educational structure (Ferren, 2021). It is the desire and hope of the authors that additional policies be enacted that help relieve school personnel burnout.

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