
“You Said, I Heard”: Speaking the Subtext in Interracial Conversations

Elizabeth Brondolo and Kristy-Lee Jean-Pierre

Abstract

Medical trainees who come from racial and ethnic minority communities and/or from economically and educationally disadvantaged backgrounds face unique external and internalized challenges that may lead to academic difficulties. Given there are still few faculty members from racial and ethnic minority communities, supervision is likely to be cross-racial. Using illustrative cases and their own personal experience as supervisor and student, the authors, the director of the Social Stress and Health Research Unit in the Department of Psychology of St. John’s University and a PhD candidate in this program, review what is known about the dynamics of racism, its effects on mood, the pathways through which racism may affect academic performance. In particular, they discuss what is known about interracial communication styles, race-based stereotypes, and formation of schemas about self and others. They suggest strategies to combat the formation of judgments of which we are not even aware, to recognize stereotype threat and confirmation bias, and to address these issues within student and teacher relationships.

You are very concerned. This is your fourth meeting with ST for remediation after she failed the end of clerkship year OSCE. Getting her to discuss her performance

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E. Brondolo, Ph.D. (✉) • K.-L. Jean-Pierre, M.A.
Department of Psychology, St. John’s University,
Queens, NY, USA
e-mail: BRONDOLE@stjohns.edu

difficulties openly has been unusually frustrating. You have been holding these meetings for years, and typically—once students are reassured that you are there to be helpful—they engage in the discussion about their performance in detail. The students usually participate in designing and committing to a remediation plan with energy and eagerness to “get this over with and move on.” You are very proud of the fact that you are respected among your peers and students for your skill at creating

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a “safe” and therapeutic relationship with struggling students. But this time, things are not working out the way you planned.

ST arrives 15 min late, beautifully dressed, respectful, polite, and emotionally composed. After the usual checking up and reviewing her remedial work, you decide to take a more confrontational approach. “ST, this is the fourth time we have met. You have done most of the things you have been asked to do, but I continue to be concerned that we haven’t really talked about how these difficulties developed. It’s hard for me to tell what you are thinking. I can’t tell how motivated you are to address the issues.”

After a long pause, she responds, angrily in a low whisper with her eyes cast down, “I don’t know what you people want from me!”

You are confused and nervous, but the emotion behind ST’s statement compels you to reach out. “What do you mean ‘you people’?” As she haltingly answers your questions, you realize how isolated and alone this Black woman—an academic superstar in her community high school and college—has felt since coming to a medical school of mostly White and Asian students and faculty. You are also surprised, as a White woman, at how unprepared and unskilled you feel to handle this situation.

interracial student–faculty relationships become especially problematic when a student is struggling with academic or performance problems.

Effective mentoring helps all students to identify barriers to professional achievement and generate the motivation they need to surmount those barriers and accomplish their goals. Students from ethnic or racial minority groups may face barriers that are a product of racial or ethnic discrimination (i.e., racism). Many of these barriers can be a function of past and ongoing difficulties gaining access to the opportunities and resources necessary to build skills and gain knowledge. But other barriers may be internal, a function of racism-related changes in the ways students think and feel about themselves, others, and the world around them.

The barriers facing students who have been exposed to discrimination are not always apparent to either the faculty member or the student [2]. Consequently, both faculty and students can find it hard to develop effective strategies to address the difficulties. In the first section of this chapter, we make these barriers more visible by reviewing ways in which racism at all levels can affect professional development. We examine the effects of cultural, institutional, interpersonal, and internalized racism on expectations and preparation for professional training. We do this to help faculty both understand and discuss the ways in which discrimination may be contributing to student’s difficulties in performance.

Effective communication between students and faculty can help clarify these issues and strengthen motivation. But racism can also undermine this communication and the development of effective student–faculty relationships [3]. In the second section of the chapter, we examine the ways racism-related changes in the way we think and feel about ourselves and others can affect the development of the relationships necessary to support professional development.

To illustrate these issues, we apply these concepts to an examination of our own mentoring conversations and articulate the subtext of our conversations—the unspoken ideas and feelings that drive the interactions. We demonstrate that these subtexts reflect, in part, the effects of discrimination

8.1 Introduction

Relationships with faculty are critical to success in all of graduate education [1]. These relationships help shape a young professional’s identity and are the major medium through which professional norms are communicated. But medical students who are members of cultural or racial minority groups may face specific challenges in developing these professional relationships. These obstacles to the development of effective

on our thoughts and feelings about ourselves and other people. Because these unspoken ideas and unarticulated feelings can undermine our ability to communicate effectively, understanding this implicit subtext can help engage both faculty and students more fully in the process of professional development.

8.2 Racism Affects Professional Development

8.2.1 Student–Faculty Communication Is Integral to Effective Performance

Learning to communicate efficiently and effectively with faculty and other mentors is particularly critical in medical education [1]. Aspiring physicians must work with a wide variety of faculty (i.e., professors, residents, and attending physicians) in both academic and clinical settings. To maximize their chances of success in each training environment, students must quickly establish relationships with their faculty supervisors and understand the implicit rules governing these relationships. If successful, they will be more effective at addressing internal and external barriers to performance in the classroom and in the clinic.

Effective trainee–faculty communication is especially important and difficult in the clinical clerkships. The clerkship setting is less familiar than the classroom or laboratory; the pace of the workload is much more intense, and the consequences of error more severe. Despite the increase in demands, the social protocols for requesting information or guidance from faculty are often ambiguous, and they may vary substantially across faculty [1, 4].

The need for the rapid development of student–faculty relationships may be particularly challenging for students who are members of ethnic or racial minority groups. As a result of persistent and significant racial disparities at the faculty and leadership level in medical education [5], students who are members of ethnic or racial minority groups will receive most of their mentoring from

individuals who do not share their cultural or racial background. This can be problematic, because culture and social class influence our understanding of the rules governing social communication, including our implicit and explicit knowledge about the ways to communicate with authority figures [6, 7].

Our culture and social class shape the contexts (i.e., including our family life, schooling, and early work experiences) in which we learn how to communicate respect and ambition, to resolve conflicts, and to ask for guidance or support [8]. Therefore, in interracial or cross-cultural interactions, students and faculty may have been exposed to different opportunities for learning these social rules and as a result interpret the social interactions differently. Because so many of these social rules are learned through experience rather than acquired as a function of explicit instruction [9], the lack of shared experiences may prevent both faculty and students from relying on an implicit understanding (i.e., on intuition) to repair unproductive interactions.

Cross-cultural or interracial communication can be particularly challenging when the student comes from an ethnic or racial group that has faced substantial stigmatization and discrimination [3, 10, 11]. From the student’s perspective, a personal and group history of being targeted for discrimination can make the student wary of faculty members and reluctant to ask for guidance [12]. From the faculty member’s perspective, a lack of familiarity with the student’s experiences and concerns about appearing biased, as well as actual bias, can impair attempts to engage students and promote professional growth [13]. Unspoken concerns and frustrations can hinder or even obstruct the process of developing effective faculty–student relationships.

The overall aim of this chapter is to provide guidance for “speaking the subtext” in cross-race student–faculty interactions. It is a complex task, which involves recognizing the ways in which cultural and social contexts influence the meaning of interpersonal interactions. The interaction partners must thoughtfully articulate the concerns and frustrations that can emerge in cross-race communication. Directly communicating

previously unspoken anxieties, expectations, and frustrations can make student–faculty communication more effective and support the professional development of both the faculty and the student. (For more information on the nature of this implicit bias, it can be helpful to see the e-learning tutorial provided by the AAMC. See link below and #14 in reference list: [14] https://www.aamc.org/initiatives/leadership/recruitment/178420/unconscious_bias.html).

8.2.2 Conversations in Context: The Role of Social-Cognitive Processes

Each interpersonal exchange between a student and faculty member has the possibility of supporting academic growth. But the effectiveness of the exchange depends, in part, on how each person interprets their own and the other person’s words, tone of voice, and facial expressions. For instance, a flat or skeptical expression can inhibit inquiry; a smile can engender trust. The explicit communication of racial bias will clearly undermine the exchange, but implicit or subtle acts of exclusion or rejection can also raise concerns about the possibility of race-based maltreatment [15].

8.2.3 Schema Theory

The interpretation of words and emotional cues are affected by the current exchange as well as past experiences. Research on social cognition provides a frame for our analysis of racism-related experiences. In particular, we focus on mental structures called schemas, defined as constellations of ideas, attitudes, and feelings that “develop through past experiences and guide the processing and interpretation of new information” [16].

Schemas are shaped by life experiences, including exposure to race/ethnicity-based prejudice and discrimination [17]. Student–faculty relationships, like all interpersonal relationships, are driven by schemas about the self, other people, and the world. These schemas influence the student’s and the faculty’s expectations, feelings,

and actions in the relationships and consequently may determine the degree to which this relationship can effectively support the student’s motivation.

Schemas about the self include ideas and feelings about our self-worth and value to others [18–20]. Schemas about the world reflect ideas about the degree to which other people and the world in general are predictable, controllable, and threatening [21]. Relational schemas concern our interpersonal relationships [17].

These schemas shape our moment-to-moment perceptions of interpersonal communication [22]. They influence the focus of our attention, our perception of the meaning and implications of the communication, and our perception of our ability to resolve interpersonal communication problems. If our underlying schema reflects the belief that the world is threatening, we will be more likely to search for signs of potential danger and be more motivated to take protective action.

Schemas are shaped by both our unique and shared circumstances. Much of the formation of these schemas occurs in moment-to-moment interactions, as a routine part of daily life [23]. We develop these schemas through direct instruction, social modeling, and the experience of the positive and negative consequences of our actions and the actions of those we observe. The influence of these schemas on our actions, emotions, and information processing is largely outside conscious awareness [24–26].

8.2.4 The Effects of Racism on Achievement and the Development of Relational Schemas

Racism has been defined broadly as “the processes, norms, ideologies, and behaviors that perpetuate racial inequality” [27]. Racism at any level can create external barriers to achievement and shape interpersonal interactions. As a consequence, racism can have effects on the development of schemas about the self, other people, and the world at large. More information on these concepts can be found in Brondolo [2] and the

American Psychological Association's website for Division 38 [28] (<http://www.health-psych.org/APADivision38Racism.cfm>).

The barriers presented by each level of racism make it harder for students to achieve because these obstacles require that students have a much higher level of motivation. In the next sections, we identify levels of racism, examine their effects on schemas, and identify the increase in demands for motivation.

8.2.5 Cultural Racism

Ideas and attitudes about race and ethnicity are communicated through the media, including TV programs, movies, and newspapers [15]. The explicit and implicit messages that are conveyed about different racial/ethnic groups shape the schemas we hold about our group(s) and other groups [29]. The content of the messages influence our ideas about the group's values, beliefs, social behaviors, roles, and status. The sensory (i.e., visual and auditory) components of the messages provide the images and elicit the emotions we attach to the ideas [30–32]. This combination of intellectual, sensory, and emotional communication drives the development of the schemas we hold about our own group and that of others [33].

Cultural racism results when these messages communicate negative stereotypes about a particular group (e.g., Asians are subservient; Blacks are angry and lazy) [33]. Research supports the notion that these media communications strengthen existing stereotypes and shift attitudes about members of those groups [34, 35] even when the viewers are unaware of the effects [26]. Media communications of these stereotypes can shape the way in which members of the stereotyped group think of themselves [36]. These stereotypes can influence performance evaluations [37]. These stereotypes can distort both the faculty member's and the student's expectations of the student's professional competencies. Without active critical thinking about the information presented by the media, these stereotypes may prove difficult to adjust [38].

8.2.6 Institutional Racism

Cultural racism can create a desire among some groups for social distance from members of stigmatized groups. Consequently, individuals may consciously or unconsciously avoid contact with members of other groups, promoting racial segregation [2, 39]. Residential racial segregation further contributes to the exacerbation and maintenance of racial disparities in achievement [40, 41].

Residential segregation changes how we learn about others and ourselves [42]. In racially/ethnically diverse communities, we absorb knowledge about the qualities associated with other ethnic or racial groups in much the same way as we learn about our own—through actual and observed interactions with individuals from diverse backgrounds. These face-to-face interactions provide an opportunity to challenge biased beliefs, allowing for more elaborate and deeper understanding of specific individuals. In contrast, residents of segregated communities must depend on the media for much of their knowledge about members of other groups. These media portrayals can heighten attention to visually salient phenotypic or cultural characteristics and can strengthen stereotypes.

For some groups, most notably Black, Latino, and Native American individuals, residential racial segregation can be confounded by neighborhood poverty [43]. In segregated low-income communities, there may be fewer opportunities to gain preprofessional social or academic skills. There may be fewer individuals who serve as accessible professional role models or who can provide technical or instrumental support. Students may face greater demands to provide emotional or practical support to other family members, and their attention and energy may be diverted from pursuing academic goals.

The developmental experiences that students (and faculty) have in their residential environments shape their schemas about themselves and the larger world. Students from neighborhoods with few social and practical resources may hold less developed and potentially more negative schemas about their own competence and their ability

to negotiate the larger world. In contrast, in an environment high in opportunity and supportive resources, students have the ability to develop more detailed and more realistic appraisals of their own interests and competencies. With greater knowledge about their capacities under a wide variety of situations, students can perceive a broader range of activities as challenges, rather than threats.

8.2.7 Individual or Interpersonal Racism

On an individual level, we may experience race-based maltreatment during many different types of social exchanges. In the academic and professional environment, race-based maltreatment can be manifested as social exclusion, as preferential work assignments, or as very negative or stigmatizing work evaluations. Sometimes the motivation for an episode of maltreatment is clear and the racial bias is obvious. But often, the maltreatment is subtle and determining the cause is more difficult [44]. We make judgments based on small variations in social behavior, including the non-verbal behaviors used to communicate acceptance and rejection.

Social psychologists have reported that even when we are overtly included in a group, we may not trust this acceptance, if the small nonverbal cues of inclusion are not fully communicated [45]. For example, a faculty member might smile warmly to a student from the same racial/ethnic background but offer a slightly briefer smile to a student from a different background. These split-second interactions can cause students to worry about their standing and begin to mistrust the possibility of being included and valued in future contact [45]. Even when we are not aware of their impact, these social interactions have the potential to affect the degree of positivity in our schemas about others and ourselves [26].

8.2.8 Internalized Racism

When we are exposed to cultural, institutional, and interpersonal racism, we can inadvertently

internalize racial or ethnic bias and (consciously or unconsciously) accept negative attitudes towards our own groups [46, 47]. We may develop schemas about our own group that incorporate widely disseminated negative stereotypes. For example, in one of his stand-up comedy routines, Chris Rock, the comedian, talked about moving to an upscale neighborhood in New Jersey. He joked about keeping his bag packed, because he does not believe that it is true that he lives in such a nice neighborhood [48]. In this interview on National Public Radio, he explicitly talks about internalizing the stereotype that Black people do not live in affluent suburbs [49].

We engage in this type of self-stereotyping when we worry that we possess characteristics consistent with stereotypes associated with our group [50]. Students may internalize certain stereotypes about themselves and as a consequence develop schemas about their potential strengths and limitations that are based on these stereotypes and not on their actual abilities. Understanding the potential stereotypes that are commonly associated with particular groups can help identify the types of self-stereotyping that different students might experience.

Even when we do not accept the negative stereotypes communicated about our group, we may still be aware that other people may hold prejudicial beliefs. This awareness can elicit stereotype threat and drive stereotype confirmation concern. *Stereotype threat* occurs when we are in situations in which we are primed to activate stereotype-related schemas about our group [51]. For example, researchers have demonstrated that when African American students are primed to be aware of their race before they perform an academic task, this priming can elicit stereotypes threat (i.e., activate negative schemas about Black individuals and intelligence) and impair performance on academic tasks [52].

Stereotype confirmation concern refers to unease that one might exhibit behavior or attitudes that confirm other people's stereotypes or negative beliefs about your own group. For example, a Latino medical student might worry that asking for help with an assignment will confirm stereotypes that Latinos are not independent [13].

Stereotype threat concerns can be elicited by a wide range of behaviors and values that have been portrayed as consistent with their ethnic or racial group, from choice of foods to choice of profession.

8.2.9 Summary: The Consequences of Racism on Motivation

When students do not meet expectations (i.e., fail to perform or to communicate their needs), faculty members may perceive them as lazy, unmotivated, or rejecting. They make these value judgments because they base their evaluation of the demands of the situation on their own experiences and those of the students they have worked with in the past. They calculate the amount of motivation and skill needed for the situation based on these demands and their own access to the internal and external resources needed to meet these demands. The faculty member's estimates may be reasonable approximations of the student's experiences in many cases, particularly when the students and the faculty member have a common cultural, racial, or economic background.

But as medical education draws students from increasingly diverse backgrounds, the faculty may need to adjust their estimations of the level of effort and the type of training needed to achieve professional goals. The ability to adjust these estimates is often hampered because many of the barriers are not always clearly visible to the faculty member or to the student. In this chapter, we have focused on making visible the particular issues facing students from stigmatized racial or ethnic minority groups. As we have seen, racism on every level may create additional external and internal barriers that require students to exert more effort and undermine their ability to quickly establish effective relationships with faculty or others who can help.

As a consequence of cultural racism, students will require additional motivation and effort to develop self and group schemas that are independent of biased portrayals in the media. Limited cultural models of effective cross-race communication can undermine both the students' and fac-

ulty members' confidence in their ability to overcome communication difficulties. Students will need to evaluate the degree to which the feedback they receive from faculty is affected by the faculty member's internalized stereotypes about their group.

Residential segregation can limit social and professional opportunities and leave students with gaps in foundational technical and interpersonal skills. Students will require extra motivation to gain these skills, in addition to those taught in the normal medical education curriculum. Learning these skills is more difficult when there are fewer opportunities to have access to professionals who can provide advice and guidance in informal settings (i.e., settings in which help can be obtained without fear of professional repercussions). Fears about identifying these gaps (i.e., fears of stereotype confirmation concern) can raise further barriers to seeking supervision. To overcome these barriers, students will need sustained motivation and encouragement.

In some cases students may not recognize or be aware of these gaps. There is some evidence that race-based ostracism can decrease self-awareness in the area of health behavior [53] and is likely to do the same in academic settings. Changes in self-awareness may make students less aware of their need for guidance and support and consequently decrease motivation when it is most needed.

Residential segregation can also heighten the pressure to succeed. Some students may choose to study medicine because it is one of the few professional career paths about which they (and their families) have some knowledge. There are visible and respected role models for a medical career for almost every race or ethnic group. Each obstacle to success along this one path may feel more serious, in part, because they do not have well-developed ideas about other possible career pathways.

Throughout their training, students are likely to have interpersonal encounters with peers, patients, and faculty that are affected by explicit or implicit racial/ethnic bias [54]. They will need extra motivation and emotional resourcefulness to learn to negotiate interactions that evoke concerns about race-related maltreatment and to manage the

emotions evoked by these interactions. But without access to faculty members from similar backgrounds, students may not have access to mentors who have themselves experienced these difficulties and can provide guidance based on intimate knowledge of the setting and the situation.

8.2.10 Racism and Negative Mood

It would be hard to overestimate the effects of racism on negative mood [44]. At the moment it occurs, race-based maltreatment can elicit negative emotions. Stereotype threat concerns can leave students feeling anxious and defensive. But over time, racism can foster negative schemas about the self and the world at large, creating a cycle that intensifies negative emotion. The research literature is clear that negative schemas facilitate depression [55]. And depression itself is a barrier to action: we require much more motivation to perform when we are depressed [56].

As important, negative moods make negative feedback more threatening. Negative moods partly mediate the link between race-based maltreatment and stereotype threat concerns [52]. Identifying difficulties can feel increasingly harmful, if the student is already feeling uncomfortable and insecure. The faculty may avoid providing corrective feedback if they sense the student's emotional concerns. And as a consequence, students become less able to overcome future obstacles.

8.2.11 Cross-Race Supervision Is Cognitively and Emotionally Demanding

XW was referred for remediation after failing the psychiatry clerkship because of poor attendance, unprofessional behavior, and poor performance on the shelf exam. This failure was surprising and unanticipated. XW had been an academically successful and well-liked student, active in the

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student government, musical theater club, and student orchestra. Born in China and raised in San Francisco by garment workers, he speaks unaccented English in a distinctly southern California dialect. After years of consistently high academic performance all through public school, he followed his two older sisters to medical school. Because he speaks Chinese fluently, he reports that throughout his clerkship year, he was pulled into patient rooms by patients and their family members and the healthcare team to help with communication tasks. On psychiatry, because of his language ability and expressed desire to help, he was assigned to care for three very challenging Chinese-speaking Asian patients. After the first week of the rotation, his faculty supervisors praised his work and acknowledged his professionalism. Three weeks later they noticed that he started missing sessions with his patients, he began giving confusing explanations of his behavior, and he was often unavailable when paged. The psychiatry clerkship director called him repeatedly asking XW what the problems were and offering help. But despite these efforts and for the first time in his life, XW continued to do the minimum work and failed the rotation.

What happened? Multiple factors may be at work here: racism at all levels may interact with the unexpected demands of working with severely ill psychiatric patients. Cultural racism can influence both the faculty member's and the student's expectations about XW's technical skills and his stress tolerance. There are widespread beliefs that all Asian individuals are highly competent and have a strong work ethic. XW's supervisors might have assumed that his competence in his basic science programs would also extend to clinical competence in psychiatry. But interactions with very disturbed psychiatric patients can present highly ambiguous and challenging clinical

circumstances. XW may have been unaware of the technical complexity of the task he was facing. XW's supervisors may not have been attuned to his increasing stress, because they may have unconsciously been holding stereotypes about the emotional experiences of Asian individuals (i.e., these stereotypes suggest that Asians, being "inscrutable" and "alien," experience emotions differently than do Caucasians. In turn, this situation may have elicited some stereotype threat concerns for XW. He may have internalized some of the beliefs and expectations about Asian individuals' competence and stoicism and been afraid to acknowledge both his confusion about how to handle the clinical situation and his own distress. Without an understanding of the degree to which his difficulties and his emotions were normative, he may have assumed he was failing and would shame himself and other members of his ethnic group.

Why was XW "in over his head"? Because there were very few faculty members who were competent in speaking other languages or communicating across a complex cultural divide, XW, like many ethnic minority students, was assigned high-level responsibilities without access to an effective role model. His ethnic pride and his sense of loyalty might have made it very difficult for him to turn away any patient in need. He needed his supervisors to help him determine how much responsibility he could reasonably accept. And yet his needs were largely invisible to himself and to his faculty supervisors.

As this example suggests, racism increases the cognitive and emotional demands on faculty members as well as students. The faculty will need a wide range of competencies to develop the professional capacity of students from a broad range of cultural and social backgrounds. They must consider not only the information the students need to master as part of the medical education curriculum but also the additional training that may be required if students have not had the opportunities to learn prerequisite skills. The faculty may need to provide instruction in a broader range of social and communication skills to address cultural and social class

variations in interpersonal behavior. Faculty may need to consider that the supervision process itself might be perceived negatively by individuals with different experiences of justice or equality [57].

As is the case for students, the faculty may also face significant barriers in developing the skills and emotional resources needed to negotiate cross-race interactions. Many faculty members are unfamiliar with the norms associated with social and cultural backgrounds different from their own [58]. They may not yet developed first-hand or intuitive knowledge about the challenges facing students and the implications of those challenges for supervision. They may be reluctant to intervene when they perceive a gap between their perceptions of the student's difficulties and the student's awareness of his or her own performance [59]. Faculty members may need to ask for assistance in initiating and sustaining anxiety-producing conversations about culture, race, and disparities. Asking for help, particularly in managing cross-race interactions, may seem daunting.

8.2.12 Objectives for Sect. 8.2

1. Recognize that you may not immediately or intuitively understand the historical and personal experiences of individuals who come from groups different from your own.
2. Recognize the stereotypes that are commonly communicated about different groups, including your own.
3. Accept that you may not be aware of your own biases, just as students may not be aware of theirs.
4. Recognize that racial bias is not a fixed characteristic. Stereotypes can be challenged.
5. Recognize the effects of social disparities on mood, including symptoms of anxiety and depression.
6. Estimate the ways in which race or culture-related maltreatment may raise barriers to achievement and change the level of motivation the student needs to perform.

8.3 Speaking the Subtext: Applying the Science to an Analysis of Our Own Conversations

In the next section of the chapter, we provide examples that illustrate the ways in which racism at all levels can be able to create barriers to communication. We illustrate the ways in which speaking the subtext—making these implicit barriers explicit—can reduce these barriers. We include excerpts of the authors' (EB and KLJP) mentoring conversations. The conversations were painful but also interesting and beneficial. Our goal in sharing our own experiences is to increase both students' and faculty members' willingness to tolerate the stress that comes from communicating to reap the benefits.

EB is a Caucasian professor, and KLJP is an African American doctoral level graduate student. We describe the conversations from the student's perspective, first recounting the teacher's comments ("You said") and then the student's interpretation ("I heard"). Next, we describe the subtext of the conversation, providing an analysis of the ways in which racial and ethnic discrimination shape the perception of meaning and the emotions of both teacher and student. "Speaking the subtext" allowed us to make conscious and explicit the feelings and ideas that influenced our conversations, even when they were not initially apparent to us. Although the setting in which these exchanges took place is a psychology doctoral program, similar underlying issues have been identified in our experiences training medical residents.

We deconstructed these conversations in a series of emails and in the context of supervision meetings. We hoped that openly acknowledging our difficulties could help us to understand each other better. We also reviewed these sentences in more public contexts including our lab meetings. These group discussions provided students from a broad range of ethnic backgrounds an opportunity to contribute their own interpretations of the conversations and provide their own "subtext" to

similar conversations with other mentors. They offered some support for KLJP and made the exercise a little less personal.

KLJP is working on her master's thesis in clinical psychology. EB asks her to rewrite a draft she submitted and to meet to analyze some data. KLJP never responds and several months go by.

KLJP says: *"I was trying to complete a second draft of my master's thesis. I have already completed a first draft, but I was told (by EB) that it was not academic enough. Now I am afraid to write another draft or even attempt it. My anxiety and avoidance levels are at about an 8 or 9 on a scale from 1 to 10. It is virtually impossible for me to rewrite my thesis."*

What happened? Why did the communication go awry? Why was KLJP unable to move forward with her academic work? In the next sections we examine social-cognitive processes that influence student-faculty communication and students' ability to negotiate barriers to academic success.

To facilitate our ability to resolve our difficulties and reduce the barriers to KLJP's efforts to get her work done, we decided KLJP should write out the sentences she heard EB say in our earlier discussions and to write what these sentences meant to her (see Table 8.1).

8.3.1 The Pervasive Power of Stereotypes

As we reviewed the "You said, I heard" sentences, we noticed that each sentence evoked a specific common negative stereotype about African Americans. Stereotype-related feedback may elicit student's concerns that the feedback is a function of racial bias on the part of the teacher.

This conversation confirmed findings from our prior research. We asked participants to provide

Table 8.1 Writing the subtext

| Supervisor said | Student heard | Potential stereotypes evoked |
|---|--|--------------------------------|
| "You need to learn how to ..." | Sounds condescending | Low intelligence—low knowledge |
| "You must learn how to..." and "You still have to learn how to" | You don't take me seriously as a competent person | |
| "Think logically, think as if you were me" | "Your way of thinking is flawed or inadequate. Your reasoning skills are subpar" | Lazy, primitive, shiftless |
| "Your paper does not sound academic" | What you wrote sounds ignorant | Low-life |

narratives of negative interactions, some of which were discriminatory, and some which were not. An analysis of these stories revealed that participants experience negative interpersonal behavior as implicit or covert racism (i.e., as motivated by racial bias, if the behavior evokes stereotypes), even if there is no explicit mention of race [60].

8.3.2 Why It Was So Difficult for KLJP to Get the Work Done? The Effects of Potential Interpersonal Racism on Mood, Information Processing, and Motivation

All negative feedback can raise anxiety. However, exposure to negative feedback that includes references to stereotypes about the student's ethnic/racial group may present particular difficulties in an academic context. The student must evaluate the mentor's comments and determine if the feedback is specific to the current situation or reflective of the mentor's conscious or unconscious bias [61]. This strains cognitive resources and can distract from academic work. Students develop expertise in making these evaluations, but even with practice, the additional cognitive

demands increase the level of motivation required to complete academic tasks. As KLJP points out:

KLJP: *"Normally, (when I have to get down to work) I only have to overcome my own natural apathy and procrastination, but in this situation the motivation I need to get over the anxiety and doubt increases exponentially. Because (when I hear things like Dr. B. is saying), I don't know if I am encountering racial bias or not. There are so many more thoughts to combat and fears to quell. So the motivation I need to get started on my work is much, much greater.*

Other students may need about a '5' level of motivation (on a scale from 1 to 10). They may be anxious about their work, but I think it seems more manageable for them.

For me, it seems insurmountable. Now I need so much more motivation—way beyond level '10'. Why? Because I heard, 'You're stupid and incapable of writing.' I imagine Dr. B thinks I should be brighter. I worry that I am not, and this ignorance is shown through my writing. Whenever my writing is criticized, it brings up these feeling of inadequacy and worries about being an outsider."

Giving negative (and positive) feedback is part of the educational process. For all students, negative feedback about academic performance can engender concerns about their own intelligence and academic competence. For Latino(a) and African American students, this can present particular difficulties, since one negative stereotype about African Americans and some groups of Latino(a)s is that they are less intelligent and less hardworking than other racial or ethnic groups. Therefore, for some African American and Latino(a) students, stereotype threat concerns can include concerns that any evidence of difficulty will confirm stereotypes about their incompetence.

And consequently, these concerns can lead to worries that if they ask for help they will be discounted in academic settings [62].

For many groups of Asian Americans, the stereotypes include the idea that they are more intelligent and hardworking than members of other groups [63, 64]. Consequently, they may not receive as much feedback or be provided with as much support or guidance as students from other groups. Asian students can experience concerns that they will be a disappointment to their race/ethnic group if they need help or have difficulty completing their work. Failure to conform to the model minority stereotype can elicit shame and engender anxiety and depression.

After reflecting on KLJP's concerns and identifying the stereotypes that could be evoked by her comments, EB wrote to KLJP:

If I stopped to think about what stereotypes could be elicited by my comments, I would have taken the time to clarify my intent and message. I see that my comments are not thoughtful. When I say 'Think like me...', I am actually asking you to use a strategy for thinking that we demonstrated in class. But this is not apparent. Because of the shorthand way I am expressing it, my sentences can easily be seen as communicating that you and your way of thinking is not acceptable.

I could have said that your writing on your thesis needs to be improved, but it is my responsibility to see that the feedback is clear and specific to the paper in front of us, and not perceived as a comment on your general intelligence or somehow attributable to your race.

I want to reduce your anxiety and the extraneous cognitive demands, because I want you to be able to get to work on your paper. The topic is very interesting, and I want to see what you find in the data. It is in both of our best interests for me to ask what you are thinking and to clarify the communication.

After this discussion, we could more easily identify when feedback might elicit concerns about stereotypes. As we moved forward in our writing together, we made sure it was very clear why the feedback was being given in the particular circumstance. The goal was for KLJP to focus on her writing and not on worries about EB's motivations or their relationship.

8.3.3 Identifying the Moments When Things Are Going Wrong: Avoidance of Negative Emotions

Avoidance is a common problem. Sometimes the avoidance is obvious. Students/trainees fail to hand in assignments or fail to attend meetings, classes, or clinical assignments. Other times the avoidance is subtle. Students/trainees agree to complete work, look motivated, promise to do better, but still don't perform. Or they may perform, but won't have the types of sustained direct communication necessary to demonstrate their thinking and move it to a more sophisticated level necessary to achieve excellence.

Sometimes people use nonverbal behavior, not direct expression, to communicate their feelings. They may avoid eye contact, shift in their seat, or move farther back. These more subtle kinds of avoidance may indicate that students are trying to avoid experiencing anger or shame or fear.

The desire to avoid confrontation or feelings of fear or shame is understandable. But it limits professional development. Professional growth requires confronting a host of negative emotions. We need to learn to use the negative emotions we feel when we fail; these feelings are powerful motivators of learning.

In interracial interactions, both parties may have difficulties recognizing or decoding emotions [65, 66], and consequently, they cannot use these emotional cues as a guide through interpersonal difficulties. Racial prejudice may lead us to assume that members of other groups experience emotions differently. If we hold stereotypes of Asians as less emotional or Latino(as) as more emotional, we can forget that all students

experience anger, fear, and shame even if we do not know how to easily gauge the intensity of their emotional reactions.

Therefore, anticipating situations in which students may be avoiding or struggling with negative feelings can be helpful. It can be useful to directly ask students: (a) "How do you usually handle different kinds of negative feedback?" and (b) "How do you recognize when you are not able to prevent negative emotions from blocking your engagement and performance?" Proactively addressing these issues can also help students and faculty recognize when communication has gone awry or when students are struggling with race-related blocks to progress.

8.3.4 Warmth and Competence: When Different Stereotype Confirmation Concerns Get in the Way

It is very important to KLJP that she is perceived as competent. EB wants to be perceived as competent, but it is also important to her that she is perceived as caring. These competing stereotype confirmation concerns undermine their communication. Why does this happen? Fiske and colleagues have proposed a model for considering stereotypes of different groups [67]. She notes that we categorize both individuals and groups along two key dimensions: warmth and competence. Commonly, Whites are rated as competent, but not warm; in contrast, Latino(a)s are seen as warm, but less competent.

Empirical research suggests that cross-race interactions can produce anxiety in part because stereotype confirmation concerns can create competing subtexts for the conversations. White individuals may be trying to maximize the appearance of warmth; Latino(a) and African American individuals may be trying to maximize the appearance of competence. These different motivations can drive the conversations in competing directions [68].

It may be worth noting that some of these same concerns about warmth/competence arise in workplace communication between men and women.

As EB notes, "As a woman working in psychophysiology, a field initially dominated by men, I wanted to be careful not to be too personal. I wanted to be seen as competent. My early career experiences as a minority because of my gender made me concerned about stereotype threats in much the same way Black and Latino(a) students are. I wanted to be taken seriously."

Here is another example, which illustrates how differences in the failure to recognize stereotype-related concerns can elicit difficulties in communication. In this case, the faculty member's actions were intended to communicate concern for student well-being, but they also communicated other unintended messages as well.

Sara is a White medicine resident supervising Janine, a psychiatry intern rotating on the medicine service for the first time. Sara also supervises Nadia, a medicine intern 3 months into the year. Janine is Black, and Nadia is White. It becomes obvious to everyone that Sara is giving the less challenging cases to Janine and all the "great cases" to Nadia (who doesn't appreciate all the extra work). Janine begins to worry about being stigmatized. She wonders: "Sara thinks I'm lazy, dumb, and incompetent. Not only am I Black, but I am a psychiatry intern."

Janine spent a few days avoiding both Nadia and Sara as an attempt to deal with her own growing embarrassment and Nadia's growing resentment. Finally, Janine gets up the nerve to ask Sara to redistribute the caseload. Sara is flummoxed by the request, but says "I am so glad you came to me...I was concerned you didn't think I was teaching you enough. You have been kind of quiet. But you are doing such a good job with your patients; I was going to ask you to take on a few more cases. I didn't want to overwhelm you. Nadia has been at this longer after all."

In this case the resident was thinking that she wanted to make sure the interns had the necessary training experience to handle the cases and was afraid of overloading the psychiatry intern. She is very concerned about appearing sensitive and caring to the Black resident, not overwhelming her. On the other hand, Janine wants to be perceived as competent and capable. Because Sara did not see that the intern might have perceived the task assignments as discriminatory, she did not understand why the intern was distant and tense whenever they talked. She did not understand that the intern felt as if she were being singled out and belittled deliberately, possibly as a function of racial bias. Once lines of communication were opened and assumptions examined, the tension dissipated and the team was able to work well together caring for their patients.

8.3.5 An “Outsider Status”: The Costs of Institutional Racism

KLJP worries that she lacks certain academic skills. She is concerned that her lack of skills will confirm the stereotype that will be perceived as less intelligent, less hardworking, and less cultured than others because she is Black.

How does this develop? Institutionalized racism, including racial residential segregation, often has a wide range of effects on social and academic skills. Students whose early education experiences were relatively poor or who do not come from homes in which the parents have higher levels of education may, in fact, lack certain academic and social skills. However, as any teacher can attest, students from affluent backgrounds can also have significant academic gaps. Academic and social skills can be taught. But students may have residual concerns about the unspoken social knowledge (i.e., knowledge about culturally appropriate manners) that they did not acquire. They may be ashamed that they will be perpetual outsiders, never able to master these skills.

Institutional racism can create gaps in social and cultural access that undermine conscious and unconscious knowledge of the rituals and norms of elite society. The perception (or misperception)

of these gaps can drive avoidance. We see this in KLJP’s story.

KLJP says: *“Do all the other students know how to correctly compose a thesis? They must. I think I am the only one that is so stupid that I can’t. Even with evidence to the contrary, I can’t get past these feelings of inadequacy and fear. So I can’t write.*

Why? As far back as my grammar and high school education, I believe that the teachers did not push us as hard as they did White children in better schools. Our work seemed remedial in comparison. I knew someone who went to a better school in a better district, and the books they were reading and their assignments were more advanced.

It seems that White students are given more room to be creative and think critically about things from an early age. They are exposed to more. Schools that serve inner city kids tend to focus on the basics. You learn just enough to get you by and free thinking is not encouraged.

I remember my high school teacher urging me to apply to Howard University and saying that inner city schools teach their kids how to be employees and staff while White schools teach their students how to be managers. They spelled out the idea that inner city school socializes Black children not to be free thinkers but to stay in line.

So with writing assignments, I start to wonder: if because I did not become a free thinker or true critical thinker until Howard (University), am I behind White students who have been critically thinking and held to a higher standard since birth? In comparison it feels like in K-12 the bar was set so low. If some people have been training since birth and I just started training vigorously in college, of course I am going to have to some anxiety. I worry that skills are ingrained in them, but these skills are new and somewhat foreign to me.”

One more example to consider:

During your initial conversation with ST you ask about an incident, noted in her surgical clerkship evaluation, where she had come "woefully unprepared for a MSMM conference." She sits very still and says nothing. Medical Student Morbidity and Mortality rounds on the Surgery Clerkship are a grand tradition at your school that sends excitement and fear through the class. A student is chosen by the chief residents 2 days before to present a patient case where something "went wrong" and the chairman leads a discussion of the case by questioning the student. While the discussion can get rough, it is assumed by the clerkship leadership that it is highly educational for students and is an important aspect of the professionalism, accountability, and patient safety curriculum. In general, students who "survive" MSMM admit to having learned a great deal, as do their peers who usually stay up all night helping the chosen student prepare. ST was the first student in her group to be selected for this task, because she had cared for a patient who died from a complication of surgery.

Later that day you ask: "How did you feel about the MSMM rounds? Usually students are terrified at having to present and prepare the whole night before..."

ST shrugs.

"How did you prepare?" you ask.

ST says: "I did what I always do... I wrote out the case, I presented it the way I was taught... I didn't know I was supposed to be able to answer all those questions..."

"ST, didn't the chief resident offer to help you? That is his job..." you ask.

"He said I should come by, but I didn't know what to ask him. So I just went home and read up about the case," she offered.

Knowing that there is a lot of "buzz" in the dorm the night before these conferences

and that there is a tradition of the senior students helping prep the clinical clerks, you ask,

"What advice did you get from the other clerkship students in the dorm?"

"I live at home," she offers plainly.

8.3.6 Why Can't We Just Talk About It? Different Groups, Different Relational Schemas, and Different Rules About Authority and Assertiveness

It may not be enough to simply ask students to express any concerns they have if they feel they are being mistreated or if they are having any difficulties. The meaning of the request to communicate concerns in a direct or assertive manner may be perceived differently by members of different ethnic groups. For example, EB asked KLJP to be more *assertive* (i.e., specifically, to feel free to address any concerns she had about EB's communication of negative stereotypes and to demand more time and attention for supervision). KLJP agreed, but she felt extremely uncomfortable. She would allow weeks to pass without any communication about the status of her work.

When we discussed her progress, she disclosed that she had not been working on her paper. She reported that even though she did not understand the required structure, she did not want to bother me with questions. She couldn't find a way to ask for the help she needed.

As we were having this conversation, another student chimed in. DS is an orthodox Jewish student. He empathized with KLJP's concerns. He said he had many concerns about being perceived as "pushy or greedy or self-aggrandizing," negative stereotypes that are associated with being Jewish. This made him wary about being too assertive with teachers. As a Jewish person, EB could identify with DS's concerns. She told both students that she has had the same stereotype confirmation concerns herself (i.e., worries about being seen as bossy or self-promoting).

(continued)

DS said that when EB gave him permission to be “pushy” and to ask persistent questions, he felt relieved and was able to be appropriately assertive. EB and DS share a common culture. They could empathize about their shared fears. DS had reason to believe EB was sincere in her willingness to tolerate assertiveness.

But KLJP pointed out that this was not as easy for her. To act in a more direct way and communicate her needs or concerns, she must challenge deeply ingrained images of African American women and face two types of stereotype confirmation concerns. She worries she will be seen as an “uppity aggressive Black woman.” But she also worries about appearing ignorant if she needs help and cannot figure out her work on her own. She worries she can’t win if she asks and can’t grow if she doesn’t, so she feels paralyzed.

After months of avoiding the remediation team with serious consequences for her academic standing, ST finally tells you she could not complete her work on time because was struggling with very serious family problems and was working full-time to support her mother. When you ask her why she never told you of her struggles, ST said she did not want to seem like “just another poor Black person who can’t keep up.” You pick up the phone, call the dean, and try to negotiate a personal leave of absence for ST rather than the immediate dismissal that was planned after your conversation with her.

8.3.7 The Role of Racial Identity

Racial identity, which can be seen as schemas about the self and one’s ethnic or racial group, also plays a role in shaping reactions to requests for communication. We experience anxiety and may avoid action when we are asked to act in ways that are not consistent with our group or individual identity [69]. As we discussed the role of racial identity, it became clear that aspects of

KLJP’s identity as a Black woman sometimes conflict with the demands of her training.

Developing both research and clinical skills requires collaboration. Through the process of collaboration, students can develop the ability to recognize gaps in knowledge and skills and identify the appropriate people to ask for help. Learning to work with others and benefit from the experience of older students and faculty is part of the process of developing as a scholar and clinician.

In contrast, many of the characteristics KLJP associates with her identity as a Black woman are strongly connected to the idea of self-sufficiency and self-denial. The subtext of these messages is that Black women are not supposed to have needs of their own. Pride in independence is a strong positive value. But it can be undermining if reaching out for help is seen as dangerous, weak, or inconsistent with one’s identity.

Similarly, respect for elders is also a good value. But in professional training, this value can prevent students from developing or expressing independent judgment or expressing concerns about difficulties. From a training perspective, we need to recognize how identity-related concerns can undermine our ability to make students both more independent and more collaborative.

Students can wonder if the direct expression of concerns or problems is safe or likely to provide any benefits. *Students can reasonably assume that the faculty has some stereotype confirmation concern about appearing cruel or biased.* Students may worry that the request to be direct could be seen simply as a way of assuaging the faculty’s anxiety. Speaking the subtext openly and repeatedly can provide an opportunity to address the multiple layers of mistrust that might contribute to problems in communications.

8.3.8 Addressing Interpersonal Racism: “Getting to Know You”

One underlying theme KLJP and many other students have articulated is the concern that their value as a person and their intellectual capabilities may not be perceived if their social behavior is not

as polished or writing skills are not as proficient as their White peers. KLJP has expressed the idea that without a full knowledge of her as a person, she will be judged as deficient based on her phenotype or perceived academic deficiencies.

She writes:

"So when it comes to working with White faculty members, I think they may feel that if I do not know something it is because I am not capable of learning, because I am Black. I don't believe they will understand that I wasn't given the vast exposure that the White kids were. Even though I believe that Howard (University) helped a great deal, I still feel uncomfortable about writing. The belief that 'there is some micro-knowledge that I am not aware of' gets activated when it comes to writing assigned by some White faculty members. I think I understand that I don't have to be perfect, but if I make too many mistakes, then I won't be judged as KLJP (smart, but needs corrections just like everyone), I will be seen as an indigent black girl (i.e., stupid and undeserving of being a graduate student).

What's worse is that instead of asking Dr. B. for help, I stay quiet because I don't want her to know that I am dumb. I want to impress her with how smart I am. But how can I, if I have to ask her how to appropriately draft this paper?"

KLJP writes further about the differences that occur when she interacts with a Black faculty member, but in particular a Black faculty member who has taken the time to get to know her.

"If she (EB) was RW, I would have no problem asking for help because RW would understand that I am not stupid, I just never did this before. She won't secretly be thinking 'What an idiot!' Plus, I don't have to worry

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about confirming the stereotype with her because RW knows it is not true anyway, but Dr. B doesn't know that. I'm sure she will connect my inability to do this with the color of my skin and I can't have that. So, I'll just have to figure it out on my own, so that Dr. B. thinks that I am the exception or even better. She can see that Blacks are just as smart."

How do we get to know each other as people? KLJP and RW simply spend time talking in the lab. Recently, EB observed an African American colleague, SS, work with one of her graduate students, who is White. As they started working, SS stopped and made sure she asked her student about her weekend. The student responded and they conversed about the student's children and the upcoming vacation. Then SS and her student got down to work.

It is clear that this type of interaction has some benefits, but it also raises some concerns for EB. EB writes,

"I don't think I have ever asked anyone about their weekend. It just isn't my style. I get to know people through their work, and they get to know me. I was 'raised' in a work environment in which too much closeness could be perceived as crossing boundaries. And I have always been a working mother; I just am too pressed for time to spend much time on conversations that are not work-related."

Without speaking her own "subtext" and clarifying her history, EB's lack of communication could lead KLJP to think she is uninterested or unwilling to devote time to get to know her. Speaking the subtext in the context of the work conversations can help students and faculty get to know each other. By observing evidence of avoidance and signs of distress, faculty members can identify opportunities for direct communication. If they ask questions about beliefs and fears and

barriers to progress, they have the opportunity to get to know the student as a person as they address the professional development issues.

8.3.9 It Is a Process: Making the Commitment

Interracial communication difficulties are not resolved in a single conversation. It takes time and continued effort. After many different and more positive interactions, EB and KLJP hit another bump. EB made an offhand comment to KLJP during the conversation. KLJP was complaining about one of her student's writing, and EB pointed out that she made similar mistakes. Later that week in a writing meeting, EB recognized that KLJP was very uncomfortable, she was moving about in her seat, not making eye contact, and the tension in her jaw was apparent. They discussed their difficulties and EB asked KLJP to write out the subtext of the conversation:

“When the time for our meeting came, I decided not to say anything. I was tired of talking about how hurt I was or that I was offended. I felt like a baby, like I was too sensitive. Because I did not want to address the issue, the meeting was tense and the communication was edgy. If she tried to elaborate on something, I would tell her that I was fully capable of understanding it. I just felt like I had to make clear to her that I was not stupid and I was just as good as anyone else.

By the end of the meeting, she asked me what was up and I told her. She apologized, and I just wanted to leave. I was so annoyed that we had to talk about this again. I was annoyed because I felt that no matter what she says, I have to be able to finish my thesis so that I can get my degree. If she is the person who is responsible for guiding me during this journey, I should be able to feel as though (1) she would not intentionally hurt my feelings or self-esteem and (2) that I can talk to her about things that may get in the way of my success.”

In the context of the discussion, EB said to KLJP that they were “*in a committed relationship*” and that the work was what mattered. EB said, “*We can have as many conversations as we needed to in order to develop trust.*”

Following this conversation, KLJP wrote a different set of “You said, I heard” sentences.

“The turning point for me came when she in essence said that no matter the problems, we are in ‘a committed relationship.’ What I heard was, ‘If we have to have difficult conversations every time, I will still be here. I will not abandon you or decide that this is too much to deal with. If you are willing to work, I am too.’

This was reassuring to me. It made clear that this is going to be hard, but she is committed to seeing this through. She also emphasized that I am allowed to have a problem and voice it. There is no need to be concerned that if I state how I feel, that she will refuse to address it or even work with me anymore.

Another thing Dr. B. emphasized was that the most important thing was the work—the patients and the writing. What I heard was ‘At the end of the day, after all the emotions are dealt with, the work still needs to be done.’ It actually makes completing the work easier. It has been made clear that nothing will get in the way of the work being completed. I am coming to understand that if I feel that my work is not up to par, she will correct it and we will move forward. The focus is not on my perceived deficits but rather on the completion of this task.”

EB wrote:

“I used a metaphor—referring to a committed relationship—to communicate my ideas about the supervision process. What I meant when I said we were in a ‘committed relationship’ was that I was

(continued)

committed to working through any difficulties in our relationship. In some cases the commitment might be for a semester or for a practicum rotation, but no matter what the context is, the commitment is there. I accepted that communication might be harder for me with some students than with others, but every student's education is my professional responsibility. My development as a professional and as a person was dependent on our growth together."

The situation is complicated. And the interpersonal communication required to support professional achievement requires commitment. This commitment from faculty is needed to help students maintain motivation to persist in the hard work that is involved both in mastering the technical material and processing the many moments of negative emotion that accompany all types of professional development. In "Appendix" we offer a rubric for analyzing and remediating difficulties that exist in these relationships.

Racism can affect many facets of the processes involved in achievement. In some cases, there are actual gaps in either technical or social knowledge that are a function of residential or academic segregation and its effects on access to educational and professional opportunities. But in other cases, the gaps are perceived to be much more salient than they really are. Sometimes, the faculty member's racial bias will influence their perception of the magnitude or importance of students' mistakes. In other cases, students anticipate making mistakes or catastrophize the consequences as a function of self-stereotyping or stereotype threat concerns.

More problematic than any particular skill deficit are the emotional consequences of these gaps. When students feel stigmatized, they are likely to become angry. Unaddressed anger and resentment can damage the relationships necessary for professional development. When students stigmatize themselves, they are likely to feel afraid, ashamed, and defensive. Shame and fear leads to avoidance, and avoidance will undermine relationships and disrupt professional

growth. Learning to recognize these emotions and use them to identify the underlying sources of stigmatization and disempowerment can be a powerful and meaningful experience for both the student and faculty.

When we have limited understanding of the lives and social experiences of members of different race groups, we may be less likely to challenge (often unconscious) beliefs that members of other groups experience and perceive interpersonal relationships in a different way. We may worry that we do not share the same social reality and cannot communicate across this divide. But speaking the subtext allows us to put our social realities "on the table." And once they are made explicit and clearly understood, then our social realities can converge. We can create the opportunity to work together to solve any existing difficulties.

Medical students are prepared for complex diagnostic and clinical challenges. They are learning to be alert to signs and symptoms and to generate hypotheses about the factors which precipitate the symptom presentation. When the potential diagnosis involves identifying factors contributing to racial disparities in achievement, the task of identifying the causative factors can be challenging. It can be useful to consider the ways in which discrimination at any level can influence access to opportunity and support; change schemas about the self, others, and the world at large; and subsequently undermine the student's ability to benefit from or seek out supervision. This knowledge can guide the supervision. When faculty are committed to learning to recognize and point out signs of difficulty, and when they are willing to speak the subtext and ask students to do the same, they can develop professional relationships that can reduce racial disparities in achievement.

8.3.10 Objectives for Sect. 8.3

1. Recognize when feedback has the potential to communicate racial bias.
2. Recognize signs of avoidance: lack of eye contact, apparent distraction, physical distancing, signs of physical agitation, failure to hand in

work, and repeated agreement with priorities but no change in behavior.

3. Identify the ways stereotypes may affect the communication rules for different ethnic and racial groups.
4. Identify your communication goals and stereotype confirmation concerns: Do you want to be seen as competent, warm? How anxious are you about not being perceived as warm (or on the contrary, how anxious are you about feeling that you don't want to be perceived as "easy" or gullible)?

Appendix A: Putting It All Together (A Rubric for Analyzing and Remediating Difficulties and Presenting Problems)

There can be many examples of presenting problems that may be influenced by race-based maltreatment (e.g., the student does not complete assignments, the student does not ask for guidance with difficult problems, the student appears uncomfortable in conversation or avoids communication with the faculty, or the student's behavior is not professional (i.e., too informal/too formal, too inhibited/too aggressive, unprepared/too much preparation and detail, cannot acknowledge mistakes/over-apologizes)).

Provide a Clear Description of the Difficulty (Identifying Signs and Symptoms)

It can be most helpful to formulate the problem in specific measurable terms (e.g., "*You are 3 weeks behind in handing in this report and have not incorporated the suggestions we made an earlier draft.*" or "*You don't seem to make eye contact or volunteer information when we are discussing cases.*" If appropriate, make explicit the point that you are not making comments about the student's overall competence, but are concerned about this specific piece of behavior.

Identify Risk Factors

- *Proactively identify stereotype concerns:* Think about the stereotypes that might be communicated by the particular feedback (e.g., Are you communicating about the student's trustworthiness, intelligence, class?). Can you clarify that you are speaking about a specific issue and not making general statements about the individual?
- *Pay attention to nonverbal expressions of distress:* Watch for signs of avoidance or agitation and scan for evidence of depression.
- *Gather information about the history of barriers and resources:* What are the cultural messages communicated about the student's racial or ethnic group? What kinds of environmental supports does this student have? What kinds of social supports does this student have? Is there a reason to suspect that the student is concerned about or does not have experience with social rules or communication or writing rules? How do the resources available and the perceived or real barriers change the amount of motivation needed?

Interventions

Consider speaking or writing the subtext to clarify the messages you are giving and receiving. Write down the sentences you spoke when you gave feedback. Ask the student to provide information about their perceptions of the sentences and the emotional meaning of the sentences to the student. You can ask them about their professional identity and their concerns about stereotype threat. You might inquire about their beliefs about independence or their fears of being perceived as ignorant or incompetent if they ask for assistance.

- *Provide models:* Models can help students make improvements independently. If students are worried about not understanding the subtle details of communication, provide models of writing. If students are not expressing themselves clearly or handling themselves professionally, try

role playing exercises. Examples of exercises are included in the next section.

- *Anticipate potential barriers:* Ask if the student is facing any of the common barriers to academic achievement (i.e., confusion about writing, outside demands, family responsibilities).
- *Speak the subtext yourself:* The faculty can provide explicit comments on their own concerns about these conversations, communicating their stereotype threat concerns. It can be helpful for faculty to discuss their worries about the costs and benefits of having personal conversations with students. You can address the nature of the “commitment” students can expect from faculty.

Appendix B: Applying the Knowledge: Remediation Ideas and Exercises

Here are some exercises to increase understanding of the effects of cultural, institutional, and interpersonal racism. In each exercise we are attempting to increase the ability to speak the subtext—to communicate the ways in which social contexts and interpersonal interactions can undermine professional development.

Exercises to Increase Understanding of Cultural Stereotypes

Discussing the stereotypes that are frequently communicated in the media can help students and faculty become aware of the ways their beliefs may have been influenced by cultural communications.

In Table 8.1 we provided examples from our own experience of some common stereotypes about African Americans, and that KLJP internalized. Awareness of stereotypes for other racial and ethnic groups (not to mention other groups of diversity) may help you anticipate when students might have concerns about implicit bias and take the time to clarify your feedback, increasing its detail and specificity and avoiding more global judgments. If you see a student become uneasy

(i.e., avoid eye contact, provide brief answers, or become overtly agitated), you can ask questions about their concerns about implicit stereotyping.

To increase awareness of stereotypes, students and faculty members can identify different movies or TV shows that portray stereotypes and others that present alternative models. It can be useful for faculty and students to hear how different people from different ethnic or racial groups perceive the characters portrayed.

Exercises to Understand the Effects of Institutional Racism/Residential Segregation on Access to Resources

Medicine can be a dynastic profession (i.e., there are often many generations of physicians in a family). But students who are the first in their family to go to college or graduate school may not have these resources available. Asking or finding out about educational and opportunities and informal support networks can be useful. You can ask: “Who do you turn to rehearse tough conversations with faculty or patients—someone who can give you the inside scoop?”

Some students may not have someone to explain tough course material or difficult clinical situations. For those students, it can be valuable to provide a low-stakes mentor—someone who can give them “behind the scenes” advice and information. This person can provide the knowledge and confidence that can bridge the gap between the student and a high-stakes faculty (i.e., a clerkship faculty). More senior students or program administrators can sometimes serve as “low-stakes” support.

Exercises to Improve Recognition of the Effects of Racism on Motivation

Think about the neighborhoods you lived in and the schools you attended when you were growing up. What cultural messages did you receive about the characteristics associated with you and your ethnic group? Did those messages increase or decrease your motivation to work hard? What

physical and social resources were available that helped you feel successful (i.e., what kinds of strength did you gain from your family, neighbors, or relatives or your teachers, mentors, or spiritual leaders?) What kinds of opportunities to develop new skills were available in your early years (i.e., after-school programs, recreation areas, enrichment programs)? Did the resources help you think you could succeed? Did they make it easier to be motivated to try? On the other hand, what obstacles slowed down your ability to succeed (e.g., interpersonal conflict, lack of resources)? How much motivation did you need to overcome these barriers? Most people can “turn on the steam” or find the motivation to work intensely for a short period (i.e., sprint to the finish line of a course), but it is much harder if extra motivation is needed for longer periods of time.

Exercises to Improve Recognition of Subtle Interpersonal Maltreatment

We all communicate much more information through our nonverbal behavior than through the content of our words. Our nonverbal behavior may be communicating message we do not realize or intend. Research from social psychologists indicates that African Americans can make reasonably accurate judgments about someone’s implicit racial bias, based on a 30 s brief of routine conversation. Increasing awareness of the emotional message we communicate can help us improve interpersonal communication.

One exercise includes brief role plays to help students identify the emotions communicated by even minor variations in nonverbal behavior. This exercise is an adaptation of work we have done in different employee groups [70, 71]. It can be especially helpful if students first engage in the exercise with no faculty present. Then when they are more familiar with the process, students can repeat the exercises with both faculty and students participating.

Participants sit in a circle. The assignment is for each person to take a turn approaching a “faculty” (i.e., initially a student playing a

faculty) who sits in the center of the circle. One at a time students take turns asking the “faculty” a single question (e.g., “How or when do I ... (some procedure)?”). Each student repeats the approach and the question three or four times. The first time the student asks in his or her normal manner. Then group members suggest minor changes to either body language (e.g., move more quickly, raise your shoulders, furrow your brow, avoid eye contact) or tone of voice (e.g., speak more softly (loudly), speak more quickly/slowly, clip or emphasize consonants). Group members make recommendations about body language or tone of voice rather than how they want the emotional message to change (i.e., they say “raise your shoulder” rather than “look defensive”). This helps keep the focus on deciding emotional cues and recognizing the ways small but significant changes in body language change emotional tone.

Each time the student asks the question, group members give feedback on the degree to which the student is communicating confidence vs. fear, openness vs. defensiveness, and respect vs. disrespect or arrogance.

When a faculty member joins the group, the faculty member can role play giving one sentence worth of feedback (i.e., essentially “Don’t do that, do this.”) to a student sitting in the center of the circle. They repeat this feedback with modifications of body language and tone of voice. Students and other faculty can give feedback about the emotional communication of the faculty (approachable (open and interested) vs. rejecting (closed and annoyed), respectful vs. condescending or patronizing, patient vs. impatient).

At the end of the exercise, participants can identify different specific pieces of body language and tone (i.e., muscle tension or forceful consonants) that change the communication of emotion.

This exercise can be particularly helpful for students who are foreign-born or from cultures, which have very different rules about the ways in which women vs. men should communicate respect. For example, in some cultures women sometimes communicate respect by speaking softly, lowering their head slightly, keeping

distance from the other person, and keeping their gestures close to their body. However, these same nonverbal behaviors can communicate subservience to people of other cultures and therefore undermine authority.

Writing the Subtext

You can use a chart that has columns we present above ("You said, I heard" stereotypes). You might want to add another column in which the faculty clarifies his or her intent and establishes a more effective method of communicating his or her ideas.

A more informal way is also possible. For example, when critiquing academic work, it is also possible to say something like "Teachers and students often misunderstand each other. I want to make sure that we are on the same page. The feedback I am giving you is about your specific paper at this point in time. I am not communicating anything more general about you as a person. And I want to make sure that we can discuss any concerns you might have that I am acting on any biases I might have (about your gender or age or racial or ethnic group)."

Asking the student to write out the comments he/she heard and his or her interpretation of the subtext can help identify the barriers to performance. The upside of this strategy is that it is extremely clear and provides the student with an opportunity to take the time to write out his/her thoughts. The downside is that it is scary for mentors to see the student's anger and distress. These exercises can also make the student nervous about anonymous retaliation. Therefore, this activity requires a fair amount of trust. However, the faculty member opens the door and asks the questions, there can be a change in the ability to remediate future difficulties.

For KLJP and EB, these conversations were simultaneously very painful and also very interesting and moving. Ultimately, they permitted us to be more completely ourselves and strengthened both our individual identities and the mentor-mentee relationship.

Writing Remediation Exercises

We use two strategies to improve writing in students, both of which are time-consuming. When we are preparing papers for publication or presentation (and every word has to be correct), we sit together and read aloud. The papers are edited jointly and in real time. This provides an opportunity to articulate the rules of grammar or to describe the nuances of choosing just the right word. If everyone is taking turns reading and writing (and listening), many of the subtle features of general writing and professional communication, in particular, are communicated naturally (e.g., this sentence would be clearer if we followed the rule of parallel construction).

Another strategy involves sharing three sample papers (or case presentations) from different students (with the names removed) and allowing students to see models and identify areas in need of improvement. Students often believe that they are the only person having any difficulties writing, and they often do not have good models for the specific type of writing they need to accomplish. Providing models (with comments about the strengths and weakness of the work) can help normalize the experience of needing help and underscore how much time and effort it takes to develop clear prose.

Template for "You said, I heard" exercises

| "You said...." the student's recollection of the faculty member's feedback or comments | "I heard..." what the student meant to the student | Any stereotypes evoked by the comments or feedback | What is the intent of the feedback that is given to the student |
|--|--|--|---|
| — | — | — | — |
| — | — | — | — |
| — | — | — | — |
| — | — | — | — |

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