In the spring of 2022, the Utah Women & Leadership Project convened 11 community conversations with women of color in Utah, and this report summarizes what Black women shared at two of these gatherings. Additional background information and research methods can be found here. This summary of select findings complements this research snapshot.

INCLUSION AND BELONGING

Need for a Black community:
Participants articulated the need to establish community and foster diversity to ensure Black people in Utah feel welcome and that Black children have role models and mentors. One participant described the impact on their kids when they met other Black kids, “You see them light up, like, ‘Wow, there’s someone that looks like me.’ They’re just so happy and comfortable.” Another noted the massive hiring underway at their tech company but wondered whether diverse recruits would want to stay in Utah.

Navigating the dominant culture:
Many White Utahns resist confronting history and internal bias because, to them, the word “racist” means “bad person.” The avoidance prevents personal growth and understanding; consequently, Black people may not feel wholly accepted or psychologically safe in Utah. “We have learned to code, then you realize you are a role for White people and sometimes you get stuck there and forget who you are. We are afraid to be authentic because we don’t have spaces that are safe.” Another stated, “People look at me and think we don’t have anything in common. They don’t have the words they think they need to talk to me, like I’m some different brand of human.” One mother counseled her children who attend church to take the good but leave the judgments behind: “I don’t want them thinking they’re less because they have dark skin.” The participants acknowledged the many White allies, but noted that allies often need help understanding what it is to live as a Black person and that they are willing to help.

How overt racism is handled:
Participants had many stories of how racist treatment was handled in various settings. Parents may not always address racist bullying due to futility or battle fatigue, but they want their kids to have a better experience than theirs. For example, one participant was called a monkey at their healthcare job: “After reporting it, I could tell management just wanted me to go away. Nobody wants to be uncomfortable in Utah.” Another participant’s nine-year-old son had recently been called the “N word” on three occasions. The principal took the avoidant route, and the teacher addressed it in an inappropriate, colorblind way in class. At work, fellow women of color discussed the discriminatory treatment they received. One had brought the mistreatment to her manager’s attention and was let go the day before severance pay eligibility. She said, “First they gaslight, then sweep it under the rug, then kick you out.”

Need for role models:
Participants described growing up as the only Black person in an all-White community. One never had a Black teacher (even in college) and realized their entire identity had been shaped by White people. Another stated, “On a trip to Chicago was the first time I saw wealthy Black people. And wealth that wasn’t acquired playing sports or being in the entertainment industry. I didn’t think Black women could be lawyers. Now I’m rethinking all that I could be.” Others mentioned only seeing Black people depicted stereotypically in entertainment. Conversely, one participant had experienced panels of professional Black people in college, which increased her vision of possibilities.

HEALTH

Therapists from their community:
Many expressed the difficulty of finding Black mental health professionals who readily understand their circumstances—especially Utah-specific experiences. They yearned for Black therapists whom “we don’t have to codeswitch for or spend time explaining certain things. You get that
racial exhaustion having to over explain. You end up educating them during your own therapy session.” Another said, “I don’t feel comfortable talking to White people about my experiences because, when I have, my experiences have been diminished, demeaned, and set aside.”

The effects of not belonging: Some attendees had been adopted by White families and were the only people of color in their communities, and lack of belonging has eroded their mental health. Participants adopted into White Latter-day Saint families described growing up with internalized racism due to the origin story of dark skin in their religious canon. Participants described mitigating the discomfort of others: “You can sense it when someone is uncomfortable with you, so you turn on that charm to make people comfortable. It’s not something you always want to do, but it makes life easier.” This participant faced racist bullying in high school and attempted suicide: “You want so bad to be included like, ‘If this makes people like me I’ll ‘coon around’’ so that I can have a friend or two. So that for once I’m not the butt of the joke.’ That’s when my eating disorder started because it was something about my appearance I could control. I can do nothing about my hair or my skin. We’re going to be skinny.”

Finding trustworthy health care providers: Participants also experience racism in finding competent physical healthcare. When experiencing very serious depression symptoms, one participant was ignored and minimized by a physician when her primary care physician was unavailable; she was left untreated during a critical time. Another participant studied Utah Black mothers’ experiences in healthcare and found, “Our White doctors don’t believe what we say when we go in. So, we created a guidebook on how to advocate for ourselves.” While some participants knew resources such as 211 exist, they wondered if these are culturally inclusive and accessible because they had experienced poor healthcare from Utah professionals.

Representation in healthcare: Black physicians are difficult to retain, especially women. One participant specialized in a field desperate for practitioners but could not find employment and pivoted to an unrelated field. She felt that racism perpetuates a lack of diversity in Utah medical fields. Participants noted that, because of lack of community and better offers elsewhere, Black physicians leave Utah, and Black medical students leave following graduation.

EDUCATION

Educational environments: Lack of belonging and support precipitates students’ leaving Utah early in their educational careers. Students struggle with teachers’ inability to discuss or understand race, and professors seem uncomfortable interacting with Black students, which affects their ability to succeed. One said, “While not one class has discussed race, my race is in everything I do. I always have to take it into account that I’m Black. . . . You are forced to feel your Blackness in Utah.”

Teaching Black history: Teaching one-sided Black history compounds isolation. One participant said, “I remember when we talked about slavery in elementary school, and every kid turned to look at me. I wanted to crawl underneath the carpet and not exist.” Instead, teach comprehensive history so that Black classmates can celebrate Black achievement and White classmates can become more innately inclusive. One woman stated, “It is hard when education only focuses on slavery and the civil rights movement because the dehumanization sticks with people. Instead, history could cover Black accomplishments in inventions, science, and engineering.” Do not ignore how history affects the present day. Another said, “No one wants to talk about it because it’s self-incriminating for White people.”

Effective diversity training: One participant developed diversity training for an entire university that incentivizes diverse perspectives in their pedagogy by paying faculty members to take the training. Another teacher uses age-appropriate ways of teaching history to younger students, but her colleagues, though inspired by her success, are scared to cover it in their classrooms. Teachers need training on how to teach sensitive subjects with proven curriculum.

ACTION ITEMS FROM PARTICIPANTS

• Compile and distribute a comprehensive Black-specific resource list.
• Create awareness by highlighting professional Black women throughout Utah.
• Implement more accessible, culturally aware care. For example, increase hours of community clinics, create retention programs for Black medical practitioners, incentivize more Black mental healthcare providers, and distribute a resource and advocate guide for Black mothers navigating medical care.
• Increase the number of women of color in government administration leadership.

• Provide better training about race for teachers to discuss history in age-appropriate ways, college faculty to understand anti-racism pedagogy, and school and business leadership statewide on how to handle racist instances, bullying, and harassment.

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