
A Call for Leadership in Tackling Systemic and Structural Racism in the Academy

Collins O. Airhihenbuwa, PhD, and Juliet I. Iwelunmor, PhD

INTRODUCTION

Much has been written about structural racism and ways that it normalizes systems of inequity that lead to persistent marginalization of persons of color in academia. The challenges faced by faculty of color in predominantly white universities revolve around individual issues for which individual solutions, such as mentorship, are often inadequate.^{1,2} Yet, there is growing evidence that, beyond these individual solutions, although they are important, there are institutional factors that should be addressed. For example, senior administrators, women and men alike, implicitly undervalue contributions by women researchers over men researchers.³ The bias, nonetheless, is more prominent against faculty of color who often report lower comfort or confidence with the assertiveness required to discuss or ensure that salary disparities and other types of inequities do not exist. Thus, the ability to train and increase a diverse workforce of public health professionals is hampered by forms of institutional racism.

In this chapter, we offer personal narratives of the roles in which we have found ourselves as junior and senior faculty of color to illustrate how our commitment to addressing inequity may actually compromise the ability to achieve individual professional goals, given expectations for professional advancement in the institutions we serve. Administrators and other academic leaders shape the development of public health professionals; therefore, these stories are intended to help persons in positions of academic leadership to recognize forms of institutional racism in the academic settings where public health students develop into public health professionals and to address them.

We begin with a brief background on structural and systemic inequity in roles and responsibilities of faculty of color—roles and responsibilities either assigned officially or assumed by default. Following the brief review, we describe how certain faculty responsibilities—official or unofficial—place racial-minority faculty in disadvantaged positions, even when their presence at the university benefits both the university's interest in increasing minority representation as well as individual minority students who feel some sense of reassurance by the presence of these faculty members.

BACKGROUND ON STRUCTURAL RACISM AND ACADEMIC RESPONSE

Racism is a dominant social force that influences well-being in myriad ways. Its greatest influence stems from its structural nature.⁴ Race scholars consider it a “fundamental cause” of health disparities because its dominant and all-encompassing influence is such that if all intermediaries through which structural racism operates were magically removed, racism would regenerate the conditions necessary to sustain racial and ethnic inequalities.⁵⁻⁷

A growing body of work indicates that one way racism adversely influences the physical and mental health of minorities is through racial microaggressions, which are defined as the day-to-day annoyances (e.g., being overlooked or ignored by others, being followed while shopping) minorities endure as a result of racism. Although a single such incident may not represent a substantial insult, if they occur frequently, they produce cumulative effects that serve as major sources of chronic stress that ultimately erode physical and mental well-being over time.⁸ Microaggressions may hamper individuals’ ability for optimal decision-making in structural contexts in which they feel they must defend themselves against being perceived stereotypically by others.⁹ Thus, microaggressions, which are known to influence physiological and psychological responses to stress, may also influence the processes by which racial and ethnic minorities make decisions regarding their health. Although work on stereotype threat⁹ shows that microaggressions affect cognition upon an encounter with a racialized stressor, other research indicates that racial and ethnic minorities are resilient and many have developed strategies for coping with the everyday forms of racism to which they are exposed.^{10,11} When resilience is normalized, the ensuing positive coping strategy may be acknowledged as an individual strength but should also be considered a positive cultural factor, particularly when culture is framed as a barrier. It is common to blame culture for negative individual health behaviors without ever crediting culture for positive health behaviors.

A common feature of structural racism is the way in which minorities are expected to come to the academy with “culture deficits.” Thus, any reference to minorities as a group, particularly when addressing health equity, often presents relatively poorer health outcomes that tend to reinforce the notion of a cultural deficit in the group. Culture may be defined as a collective sense of consciousness that embodies decisions that operate at the conscious level when decisions are made and at the subconscious level when existing structures normalize actions that people take such as walking, which is positive for health, more than driving, in part because of safety and well-maintained sidewalks.^{12,13} Culture and identity are critical to understanding how multilevel factors intersect to affect decisions about health and behavior, and the roles agency (the capacity to be in control of decisions and resources necessary for a positive lived experience) and

resilience (capacity to regain normalcy in life following experiences with traumatic or life-altering events) play in framing health decision-making and communications for bridging inequity in global health.¹²

Many universities have acknowledged the presence of structural racism in some sense, if only by their stated goals of increasing minority underrepresentation in the academy. However, some of the solutions that may seem logical have actually resulted in problems for the individuals entrusted with the responsibility to tackle the issue of underrepresentation, thus creating new problems for the retention of the minorities who were successfully recruited.

A JUNIOR FACULTY MEMBER AS AN ACADEMIC ADMINISTRATOR

A fish may be tasty and healthy but it could have bones.

–Edo Proverb

First Example From the Experience of Collins O. Airhihenbuwa

My first faculty appointment was to serve as assistant professor for 75% and assistant to the dean for Minority Affairs for 25%. My application and interview were for the faculty position. The 25% time was added when I received the job offer. Having an appointment as an assistant to the dean for anything, let alone Minority Affairs, which was near and dear to me, was most attractive to me, particularly as an entry-level faculty member. At the time, I was of the opinion that it reflected the value the university saw in what I could contribute to the institution. It never occurred to me to ask how I was deemed a good fit for such leadership and service responsibilities, but I assumed as many others do that being who I was offered sufficient credential to be in such a position.

I arrived on campus and had adequate support from colleagues from my department up to the university level. As an assistant professor, I reported to the head of my department for my professorial responsibilities. As an assistant to the dean, I reported to the dean of the college with whom I met monthly to address issues related to Minority Affairs in the college. The primary task for which I was to take the lead was recruitment and retention of undergraduate African Americans and other minorities in the college. Indeed, at the time, my role in Minority Affairs was much more clearly stated, and I understood it better than my responsibility as a faculty member. To be certain, teaching assignments were clearly stated, but the responsibility for research and with whom I was to seek mentoring were less obvious.

Our university review cycle for faculty on the tenure track included reviews at years two and four with a final tenure and promotion review completed in year six. For each review cycle, each faculty member was required to prepare a dossier that described the

work that they had done in the three areas of responsibilities at the university. These were research, teaching, and service/outreach. The tripartite mission remains today in most universities although the weighting for each of the three depends on whether the university mission is research or teaching. At the few Research 1 (R1) universities that I know and have consulted, the combined time a faculty member is expected to spend on research and teaching amounts to about 90%. Between teaching and research, the 90% split time ranges from 30% to 60% devoted to one or the other, depending on the degree of research intensity inscribed in the mission of the department, college, and university.

The distribution of research and teaching times is not the primary focus of the experience being shared in this chapter; the primary focus is the remaining 10% time (some consider this to be most generous for an R1 university) that is expected of faculty for promotion and tenure. The point here is not to judge whether or not this 10% time is sufficient, but to place the expectations regarding that allotment of time in the context in which faculty promotion and tenure decisions are made. Thus, it is important to understand how these evaluation criteria are structured in a way that often results in the devaluation of diversity and inclusion. One factor, not discussed here, is whether individuals who serve on promotion and tenure committees are committed to supporting diversity and inclusion. Instead, the emphasis in this chapter is on unpacking the system that consigns minority faculty to untenable tenure-track appointments in the first place.

Rewarding only 10% of the time devoted to service/outreach/community engagement is a systemic problem that conflicts with the goal of the university to promote diversity and inclusion. This is the root cause of inequity because the criteria for rewarding excellence do not adequately provide for the level and depth of work needed to achieve the diversity and inclusion goals. It is for this reason that a 25% official time designated to this task was deemed more adequate to the task—hence, my contractual role to take on this task. The problem was that the promotion and tenure criteria did not necessarily change simply because I had a role that amounted to 15% additional time over and above what was expected for service, as all the time and efforts that were credited to my 25% time as assistant to the dean could only be evaluated under the category for service. Yet, my time for “service” was actually beyond the 25% officially designated time. It should be noted that I also maintained a certain level of service as part of my 75% faculty responsibility. This included serving on departmental committees for activities not related to Minority Affairs.

For the 25% time on my job (excluding other departmental non-minority-related committee responsibilities), I served on at least 10 college and university committees that I would otherwise not have been expected to do if I were 100% assistant professor. As supportive as my head of department and dean were, they were oblivious to the amount of time I was spending on Minority Affairs until the dean reviewed my dossier for my second-year review cycle and was alarmed. I can still see the dean’s face as I sat across from her during my face-to-face meeting to get her feedback on my second-year

review. She was visibly shocked and could not believe that I was putting in so much time on these committees. Unbeknownst to me, I was basically spending more time on committee assignments related to 25% of my time than my peers spent on their 100% time as assistant professor. I had no knowledge of how much more time I was spending on the committee assignments alone until that moment. Seeing the shock on her face, I, too, was equally surprised that she did not know as I had assumed that this was normal for every faculty member at my level and rank. My head of department had no idea about how much time I spent on these committees because he was focused on my 75% faculty responsibility, knowing that 25% of my time was under the dean's purview, as I reported to the dean for that part of my responsibility.

Each college of the university at the time, 1984, had different models for assigning the role for Minority Affairs. The larger colleges (based on student population) hired a full-time staff member to handle this responsibility. At the time, the number of students in our college was considered to be too low to warrant hiring a full-time staff member; hence, the role was added to my responsibilities as a new faculty. Alarmed as the dean was, she was not able to make an immediate change given the structural constraint posed by the size of the college. It would take another year when a new College of Health and Human Development was created (which would include my department) before a full-time staff member was hired to take on this responsibility. By this time, some damage had been done. After three years of spending 25% contractual time (in reality it was about 40% of my time) on Minority Affairs, I would end up getting tenured without promotion. I had to wait an extra year for the promotion to Associate Professor. This was during an era when tenure without promotion was allowed at this university.

Even today, it is unclear to me why the split decision was made for me, but it was clear to me at the time that my role in Minority Affairs—albeit rewarding in that I helped to promote minority recruitment and retention—weighed negatively on my prospects for promotion, thus causing the 1-year delay. I realized that the time I spent on Minority Affairs came at a cost. Paradoxically, the benefit of my contribution to the university's diversity and inclusion efforts did not translate to my own professional benefit in timely career advancement.

The delay in promotion could have been caused by several factors including, as some might wonder, the composition of my tenure and promotion committee. However, an unsolicited conversation with a faculty member of the committee in the year I was granted promotion would suggest otherwise. Nonetheless, I focus here on the issue of the cost of diversity and inclusion efforts to a junior minority faculty member when the institution benefits. Another matter is the set of criteria used for evaluating contributions to diversity and inclusion, especially when those who serve on promotion and tenure committees might not be committed to these goals.

In the lectures that I have delivered on academic leadership across the country, several junior faculty of color have expressed their concern that they receive subtle messages that

more teaching or service is necessary for tenure, whereas their White peers are largely judged on their research publications. For these faculty members, their trajectory is a terrain that is preconditioned with inequalities, power structures, and hidden agendas that carry scarring consequences.¹⁴ In my own situation, a misalignment existed between institutional expectations and my career advancement; other such examples exist in the context of minority career advancement, one of which is illustrated in the next section.

Second Example From the Experience of Juliet I. Iwelunmor

I have often heard that no one leaves the United Nations (UN), especially given all the benefits that a position at the UN provides. I left. My decision to leave was not because I did not like my position, or my boss, or my friends, or the opportunity to live and work in Paris, France. I left to pursue knowledge and transform lives through research opportunities.

Before my tenure at the UN, I had been trained as a doctoral-level researcher. I received a National Institutes of Health (NIH) predoctoral scholarship from the National Institute of Child Health and Human Development (NICHD) to conduct research on child malaria in Nigeria. This important work changed my life. It allowed me to learn firsthand why the views of individuals, families, and communities matter for improving health care and why it is important to have a sustainability ethic with every project conducted to transform lives.

When I decided that I was heading to Paris to work for the UN, my program officer at NICHD did not understand why I would not pursue an academic position given my love for research. Truth be told, I took the position because I could not pass up an opportunity to live in Paris and work for the UN.

Nonetheless, after working for 2 years and having a growing family, I decided it was time to return to academia and pursue research full time. I applied to numerous positions, but one university stood out from the rest. I accepted the offer from an R1 university in the United States because of the last conversation I had during my interview with the former head of the department. He asked one question: “Are you a researcher or a teacher?” Without hesitation, my response was, “a researcher.” I told him that, though I loved to teach, for me, the pursuit of knowledge is my most precious commodity and the only time I get to be creative. I am drawn to ideas that seek to transform lives, and I live to unleash creativity within the global health sphere every day. In fact, pursuing a research career was the primary limitation of my UN position. I wanted to go back to an institution that had a similar commitment to research as the one where I was trained.

I believe the ability to address some of the intractable global health challenges of our time requires bold and confident researchers who are willing to perpetually stretch their potential in every situation to generate research that will transform lives. For me, research is the arena where I get to enhance my creativity every day, posing intriguing questions to address the grand health challenges of our time. Nonetheless, before my arrival at the

university to assume my new position, I was informed that lack of mentorship within the unit and departmental evaluation showing levels of research productivity that fell below expectations were commonplace for faculty members of color. Armed or, rather, forewarned with this information, I made a commitment to work every day to ensure that my story would be different.

The university review cycle included a review at year 3 for the midterm evaluation and a review at year 6 for the tenure and promotion evaluation. As the only junior faculty member of color and female remaining in the department and coming into my own at a time when there was a national outcry for the dismal numbers of NIH research being led by Blacks, I knew I had to work even harder to ensure a successful research career.

When I got the comments for my third-year review, the committee shared that, although my progress in research was on track, I needed to make more improvements in teaching and service. In fact, I had the sense that I was being told to cut back on my success in research and focus instead on teaching. It was not that my teaching evaluation was weak (in fact, my teaching was above average), it was that I was being asked to do less grant writing and to use the time to do more teaching. To drive the point home, I learned that I would not be allowed to use my grant money to buy out from teaching as was customary in other research units. Instead, I was to have the same number of teaching assignments, as though I had no grant. This was when I realized that while I was busy counting the points that I had scored in publications and grants, it would appear that the target for my success in my department had been moved and changed just for me. In discussions with leadership at the time, I was being told that being successful in research would not be rewarded in my case and that securing five grants along with above-average teaching evaluations was not good enough at this R1 institution.

Sadly, after working for four years at the institution, I left. My decision to leave was because the opportunity to do the research that I love was no longer viewed as important for the particular department in which I worked. The contradictory element that was at the heart of this paradox was that prioritizing teaching over research at an R1 institution made me uncomfortable, particularly when R1 institutions typically value research and the eminence of their research enterprise. Ultimately, the experience contributed to my decision to seek out other institutions that would support me as a faculty member of color who is committed to a career as a researcher. I note that, only one year into my new institution, I received in 2018 a \$6.4 million 5-year NIH grant as the lead PI on a multiple PIs grant.

EQUITY IS MORE THAN EQUALITY

The analysis of disparity is often attempted via a quantitative analysis of fairness. When addressing disparity, equity is a better goal than equality, although equality is an important component to be included in measuring fairness. Gender-based restrooms at an

airport can be considered as an illustration. A male restroom is typically situated next to a female restroom. During busy times at an airport, it is not unusual to notice that there is a line at the female restroom and almost always none at the male restroom. A casual observer may note that, for every male restroom, there is a female restroom, so equality in the numbers of available restrooms is achieved. Notwithstanding, women spend a longer time in lines waiting to simply exercise the same biological response to nature as do men.

If time wasted were viewed as lost revenue for a business, the time that women spend in line for the restroom would translate to loss of revenue. In this scenario, the lost revenue is not attributable to women's lack of work ethic. Actually, in the scenario, the company has not addressed equity, which could be achieved by providing adequate and sufficient restroom facilities that would ensure that the time that women wait to use a restroom facility is equitable to that of men.

Several solutions could help to address inequity in this case. First, we could make all restrooms gender-neutral, which means that the urinals that populate most male restrooms would need to be either changed to restrooms with more privacy or eliminated because they provide only partial privacy for users. A second solution would be to maintain restrooms as presently gendered but to increase the numbers of toilets in the female restrooms or the numbers of women's restrooms in the facility to ensure that women have equitable wait times. Other solutions exist, especially given how other countries, particularly in Europe, structure public restrooms.

The example of equity regarding gender-based restrooms is relevant to the discussion of equity for minority faculty members. When Collins Airhihenbuwa was hired at 25% time as assistant to the dean for Minority Affairs, there was a level of representational equality in ensuring that each college in the university had someone in this role. However, there was inequity in roles, responsibilities, and time devoted to this task in addition to the employment category of the person responsible for the task, whether a faculty or a staff member. In addition, inequity also existed in how Airhihenbuwa was evaluated by peers based on the evaluation criteria for promotion and tenure. The intension or desire of committee members notwithstanding, the criteria allowed for only 10% for service/outreach/community engagement, at best, for what Airhihenbuwa devoted 25% of official time to do, even when the actual time was closer to 40%. The solution here, as illustrated with the airport restrooms, is to provide equity, not equality.

The promotion and tenure guidelines should expressly stipulate how much time for service/outreach/community engagement will be credited and should state that any faculty members who are asked to commit more time will also have different evaluative criteria, which promotion and tenure committees are bound to honor in their review. Nonetheless, supposing the criteria are revised to reflect equity in representation and duties of faculty, faculty members of color must consider how they will be rewarded for additional time that they devote to students who may seek guidance and mentoring.

WHAT SHOULD WE DO?

In the book entitled *Blink*, Malcolm Gladwell¹⁵ suggests blind evaluation as a way to tackle gender and racial discrimination. He noted that blind evaluation in musical performance proved successful in increasing the number of women who are represented today in orchestras around the country. According to Gladwell, inequity is the result of learned and subconscious biases.

Blinding evaluation when the goal is to identify the voice or instrument to be selected is one thing, but other types of evaluation can be more complicated. The popular talent show “The Voice” has employed blinding in selecting those who make the first cut in the selection process. However, once selected, what becomes a defining factor for success is much more complex and nuanced than the evident talent of the competitors. For example, a few years ago, toward the finale of the year’s season of “The Voice,” the influence of race and identity became so troubling to one of the coaches that he (Adam, who has been on the show from its inception) spoke out about the outcome. He was so incensed by the outcome of the selection that he accused the public who voted in the final selection of being racist.

Blind selection offers some benefits but does not offer a solution to address selection bias. Indeed, peer reviews of manuscripts for journal publications have been with us in the academy for ages. However, the subject matter, the assumptions that guide the solutions encoded in theory and models, and presence or absence of disciplinary “canons” are all critical factors in a reviewer’s decision about whether a manuscript is deemed worthy of publication.

Blind selection has its limits. Even with music, blind selection is not sufficient for a person to enter the schools and institutions that prepare performers to become good enough for elite groups. With so many differences in the rate at which individuals get through various developmental stages of skill mastering, late bloomers will never have an opportunity to develop their skills as Michael Jordan did in his transition from average college basketball player to the epitome of an elite professional athlete. In all of these examples, there is a particular skill set with a very clear standard of performance by which to measure those seeking to join an elite group. When it comes to addressing issues of inequity and roles to be played by faculty of color, there are no standard measures by which to determine which candidate who applies for a junior faculty position has the skills to help the institution advance its goals on equity. Nor are there standard criteria by which to measure the readiness of institutions to make good on their commitment to equity except by the number of minorities represented on their faculty.

WHY THEORY AND MODELS MATTER

Addressing diversity and inclusion has been one of the foci of bridging inequity gaps. Beyond the diversity of underrepresented minority faculty, there is an equally important emphasis on the inclusion of their values and ideas. One of the ways to ensure inclusion

even when knowledge production involves nonminority persons is to develop models that give voice to those whose ways of knowing have been omitted from the values and meanings that academic teaching, research, and service tend to rely on.

The PEN-3 (which stands for three domains of Positive, Existential Negative; Perceptions, Enablers and Nurturers; and Persons, Extended Family, Neighborhood) cultural model (see Airhihenbuwa,¹² Iwelunmor et al.,¹³ and Airhihenbuwa^{16,17}) places culture at the center of analysis. In this way, many scholars, mostly from underrepresented minority groups, have been able to position their scholarship within a framework that allows their voices and those of others with whom they share cultural identity to be heard. It is in the same vein that the Public Health Critical Race Praxis developed by Ford and Airhihenbuwa¹⁸ has allowed scholars to examine issues of race and racism, and indeed structural racism, using multiple levels of analysis. In addition, intersectionality is one approach that has offered a space to share the position of minority scholars and the intersection of their multiple agencies.

Intersectionality is a theoretical framework that considers how gender, race, class, and sexuality simultaneously affect the perceptions, experiences, and opportunities of everyone living in a society stratified along these dimensions.¹⁹ Considering the plight of junior academic researchers in research-intensive institutions enables an understanding of how multiple social identities such as race, gender, sexual orientation, socioeconomic status (SES), and disability intersect at the microlevel of individual experience to reflect interlocking systems of privilege and oppression (i.e., racism, sexism, heterosexism, classism) often observed at the macro social–structural levels of university institutions.²⁰ Guided by Bowleg,²⁰ the core tenets of intersectionality most relevant to university institutions are as follows:

1. Social identities of faculty members are not independent and unidimensional but multiple and intersecting,
2. Faculty members from multiple historically oppressed and marginalized groups often experience implicit bias, and
3. Multiple social identities at the microlevel (e.g., intersections of race, gender, and SES) intersect with macrolevel structural factors (e.g., discrimination, racism, and sexism) to illustrate or produce structural constraints in the agency of faculty at these institutions.

These tenets are elaborated in the coauthors' experiences shared previously in this chapter.

WHAT ARE THE IMPLICATIONS?

For many junior faculty researchers of color at research-intensive institutions, understanding their experiences from a single-identity perspective (i.e., race or gender) is insufficient. Early mentorship, opportunities for collaboration, and encouragement

from department leadership require complex analyses that consider ways in which their multiple social categories intersect to disadvantage them in research productivity. Although the inclusion of university diversity missions appears to signal an increase in institutional efforts to recruit and retain faculty of color, many faculty members remain vulnerable to policies and academic contexts that confer or maintain disadvantage in their research productivity on the basis of their multiple intersecting identities.

CONCLUSIONS AND RECOMMENDATIONS

It is unclear how schools and programs can train public health professionals to achieve racial health equity while neglecting inequities embedded in academic institutions.

For junior faculty members to be hired to take on administrative responsibilities, the notion of being considered a leader early in one's career is seductive, and any advice received to not accept such a position is likely to be rejected. The Edo proverb quoted previously in this chapter basically means that the taste of the fish is a lure, but there are often hidden bones of caution (time spent that is not rewarded). These "bones" can stall the progress of a faculty member on the promotion and tenure track. We strongly recommend that junior faculty members who wish to pursue a career in research and on the tenure and promotion track should not accept responsibility over and above that which will offer them added value to their career trajectory.

The key to achieving success and progress in equity is to institutionalize a goal of increasing faculty diversity in the professoriate. This means that the task of accomplishing this goal does not lie at the feet of one person, even if the person is a senior scholar who is responsible for addressing minority issues at the school, college, or university levels. Also, identifying the scholar who leads such efforts in the university should not be based on identity alone but also on evidence of scholarship that addresses race and racism in addition to strategies to institutionalize inclusion as a priority and strategic mission. As clearly demonstrated in *Public Health Critical Race Praxis* (see Ford and Airhihenbuwa¹⁸), it takes collaborative partnerships committed to social justice to tackle institutional racism because such efforts go beyond individual behavior and action to policy and practices to normalize antiracism at the institutions.

Those in positions of academic leadership have the potential to shape the development of a public health workforce that is equipped to tackle racial inequalities more directly. We recommend that academic administrators do the following:

- Recruit more faculty of color to serve autonomously in senior administrative positions such as deans and department chairs/heads as they are the keys to institutionalizing diversity and inclusion in the faculty body at the institutions.
- Ensure that diversity and inclusion are included in the university's strategic plan with clear milestones that can be measured by units.

- Ensure that a senior faculty member is responsible for the university's commitment to diversity and inclusion.
- Ensure that there is a senior faculty member responsible for facilitating mentoring of junior faculty of color as a part of institutional retention.
- Evaluate promotion and tenure criteria to ensure that appropriate credit is earned for assigned tasks beyond the proportional responsibility that counts for "service."
- Incentivize and publicly reward colleges, schools, or departments that excel in diversity and inclusion of faculty.
- Reduce excessive service demands or committee overload for junior faculty of color that leaves less time for research that leads to the rewards of tenure and promotion.
- Reduce the overuse of an institution's few faculty of color to portray a commitment to diversity.
- Reassess what constitutes rigorous and legitimate scholarship and its relationship to institutional barriers that may help maintain bias in tenure and promotion practices for faculty of color.
- Foster focused faculty development within and outside campus for scholars of color and reward senior faculty mentors that support research and publication.

REFERENCES

1. Stanley CA. Coloring the academic landscape: faculty of color breaking the silence in predominantly White colleges and universities. *Am Educ Res J.* 2006;43(4):701–736.
2. Tillman LC. Mentoring African American faculty in predominantly White institutions. *Res Higher Educ.* 2001;42(3):295–325.
3. Freund KM, Raj A, Kaplan SE, et al. Inequities in academic compensation by gender: a follow-up to the National Faculty Survey cohort study. *Acad Med.* 2016;1(8):1068–1073.
4. Gee GC, Ro A, Shariff-Marco S, Chae D. Racial discrimination and health among Asian Americans: evidence, assessment, and directions for future research. *Epidemiol Rev.* 2009;31:130–151.
5. Link BG, Phelan J. Social conditions as fundamental causes of disease. *J Health Soc Behav.* 1995;35(spec no):80–94.
6. Nazroo JY. The structuring of ethnic inequalities in health: economic position, racial discrimination, and racism. *Am J Public Health.* 2003;93(2):277–284.
7. Williams DR, Collins C. Racial residential segregation: a fundamental cause of racial disparities in health. *Public Health Rep.* 2001;116(5):404–416.
8. Sue DW, Capodilupo CM, Torino GC, et al. Racial microaggressions in everyday life: implications for clinical practice. *Am Psychol.* 2007;62(4):271–286.

9. Steele CM. A threat in the air: how stereotypes shape intellectual identity and performance. *Am Psychol.* 1997;52(6):613–629.
10. Ford CL, Daniel M, Earp JA, Kaufman JS, Golin CE, Miller WC. Perceived everyday racism, residential segregation, and HIV testing in a sexually transmitted disease clinic sample. *Am J Public Health.* 2009;99(1 suppl):S137–S143.
11. Jackson D, Hayter M, Carter B, Nyamathi A. Revisiting the concept of vulnerability: recognizing strength and resilience in the context of risk and susceptibility. *Contemp Nurse.* 2012;42(2):142–144.
12. Airhihenbuwa CO. *Healing Our Differences: The Crisis of Global Health and the Politics of Identity.* Lanham, MD: Rowan & Littlefield; 2007.
13. Iwelunmor J, Newsome V, Airhihenbuwa CO. Framing the impact of culture on health: a systematic review of the PEN-3 cultural model and its application in public health research and interventions. *Ethn Health.* 2014;19(1):20–46.
14. Arnold NW, Crawford ER, Khalifa M. Psychological heuristics and faculty of color: racial battle fatigue and tenure/promotion. *J Higher Educ.* 2016;87(6):890–919.
15. Gladwell M. *Blink: The Power of Thinking Without Thinking.* New York, NY: Little, Brown and Company; 2005.
16. Airhihenbuwa CO. *Health and Culture: Beyond the Western Paradigm.* Thousand Oaks, CA: Sage Publications; 1995
17. Airhihenbuwa CO, Ford CL, Iwelunmor JI. Why culture matters in health interventions: lessons from HIV/AIDS stigma and NCDS. *Health Educ Behav.* 2014;41(1):78–84.
18. Ford CL, Airhihenbuwa CO. Critical Race Theory, race equity, and public health: toward antiracism praxis. *Am J Public Health.* 2010;100(1 suppl):S30–S35.
19. Cole ER. Intersectionality and research in psychology. *Am Psychol.* 2009;64(3):170–180.
20. Bowleg L. The problem with the phrase women and minorities: intersectionality—an important theoretical framework for public health. *Am J Public Health.* 2012;102(7):1267–1273.