

# Intersectionality Spotlight:

## Our Focus Areas + Racial Disparities

**Equity is a critical piece of our work at the Tower Foundation.** We believe that young people with intellectual disabilities, learning disabilities, mental illness, and substance use disorders should have the chance to achieve their personal goals, regardless of the challenges they face. We also know that some young people need more support than others to get where they want to go because of the intersection of these identities with systemic inequalities.

We pay attention to the convergence of our focus areas with issues of race, gender, class, ability, and more, because living at the intersection of multiple identities is a reality that factors importantly into our grantmaking. For instance, the Foundation has long recognized the importance of individualized, customized support for young people in our focus areas. Generalized, average, or one-size-fits-all approaches do not take into account the unique strengths, abilities, and needs of the young people we work to support. Aligning our grantmaking with the reality that young people's needs vary in accordance with their identities and lived experiences makes us a stronger, more impactful grantmaker. ***Without diversity, equity, and inclusion, we cannot advance our vision of achieving equitable communities where all young people are included, accepted, and valued; and are confident in themselves.***

## Applying an Intersectional Lens

Every person's self-image, worldviews, and life experiences are defined by a handful of identities: race, ethnicity, gender, ability, sexual orientation, age, and income, to name a few.<sup>1</sup> The Tower Foundation focuses its grantmaking on four aspects of a young person's identity that can lead to significant marginalization and discrimination: intellectual disabilities, learning disabilities, mental illness, and substance use disorder.

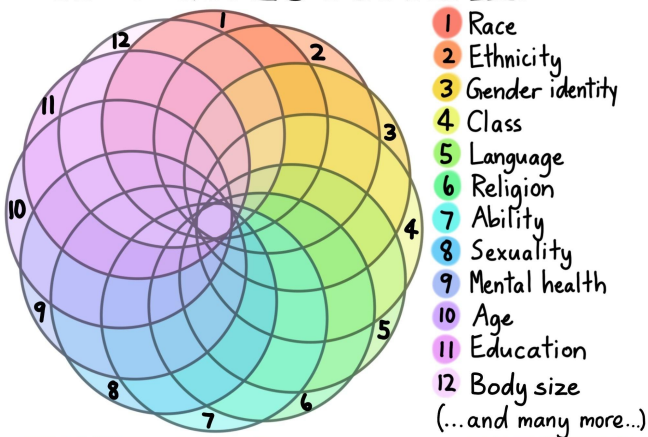
To best meet the needs of these young people, the Foundation continually reflects on the work and adapts based on lessons learned. An opportunity in the Foundation's evolution is the addition of an intersectionality framework. Intersectionality recognizes that aspects of someone's identity (e.g. "learning disability" and "black") are not independent from one another, and that people are often disadvantaged by multiple sources of oppression at once.<sup>2</sup> Recognizing the intersection of the Tower Foundation focus areas with additional disadvantaged identities, like race as a result of systemic racism, is a critical lens required for our work to change systems in support of our populations of interest.

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<sup>1</sup> Loden, Marilyn. Implementing Diversity. Ed. Jeffrey Krames. United States: Irwin Publishing, 1996. Print.

<sup>2</sup> Kimberlé Crenshaw, 1989 paper ["Demarginalizing The Intersection Of Race And Sex: A Black Feminist Critique Of Antidiscrimination Doctrine, Feminist Theory And Antiracist Politics."](#)

# INTERSECTIONALITY



Intersectionality is a lens through which you can see where power comes and collides, where it locks and intersects. It is the acknowledgement that everyone has their own unique experiences of discrimination and privilege.

- Kimberlé Crenshaw -

@syfraduckworth

Focusing on individuals as unique and complex is not new to the Tower Foundation. In fact, since its inception, the Foundation has favored funding for programs that support targeted, differentiated interventions for individuals over one-size-fits all approaches. A level playing field is not sufficient. Students with print-based learning disabilities truly require academic accommodations in order to thrive. Equitable approaches that provide a leg-up to traditionally under-supported populations are at the core of our work. This preference for equity-focused projects over approaches that promote equality is core to our work<sup>3</sup>.

This document highlights the importance of intersectionality to our grantmaking.

This discussion focuses particularly on race in combination with the Tower Foundation's four focus areas. Race, and systemic racism in particular, is currently at the center of a critical national dialogue.

<sup>3</sup> For more information on the difference between equity and equality, check out this video "Equity and Equality" from the University of Maine's Rising Tide Center: <https://www.youtube.com/watch?v=nCS7Rus4-Y>

## Intellectual Disabilities & Race

When looking at the intersection of intellectual disabilities and race, disparities are apparent. To begin with, people with intellectual disabilities face greater barriers and marginalization in almost every aspect of their lives, including education, recreation, and employment. People who identify as Black, Latino, or Native American receive lower quality health care services and have worse health outcomes compared to people who identify as White. Individuals who have an intellectual disability *and* identify as a person of color face even more significant disparities, including worse health outcomes and a greater proportion of unmet service needs.<sup>4</sup>

- While students of color are disproportionately **overrepresented among children with disabilities** (e.g., Black students are 40 percent more likely to be identified as having a disability than their White peers), four year old black children are disproportionately **underrepresented in both early childhood special education settings** and in early intervention programs.<sup>5</sup>
- Despite the focus on inclusive education and the mandate to place children with disabilities in the least restrictive environment, children of color with disabilities are **less often placed in inclusive settings**.<sup>6</sup>

***Of note:** Data is significantly lacking on the experiences of people with IDD with a focus on race, but paying attention to this intersection is a major new focus of the field, including the US Department of Education and the American Association of Intellectual and Developmental Disabilities (AAIDD).*<sup>7</sup>

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<sup>4</sup> Burke MM, Heller T. Disparities in unmet service needs among adults with intellectual and other developmental disabilities. J Appl Res Intellect Disabil. 2017;30(5):898-910.

<sup>5</sup> US Department of Education, [Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2016](#)

<sup>6</sup> US Department of Education, [Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2016](#)

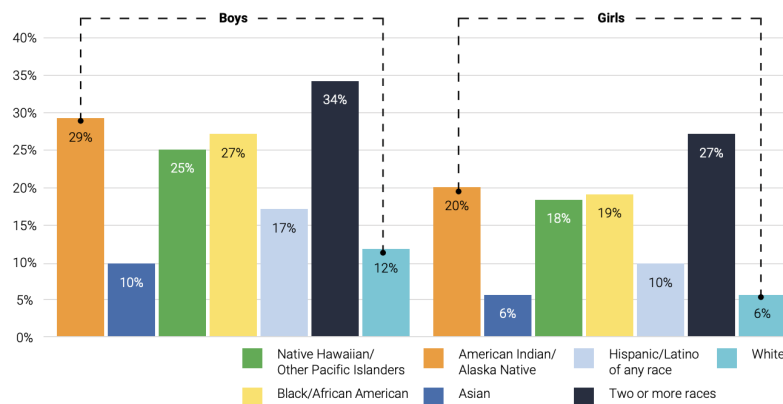
<sup>7</sup> AAIDD [Journal Articles focused on IDD and Race and Ethnicity](#).

## Learning Disabilities & Race

Racial inequities are evident for students of color who also have a diagnosed learning disability. This inequity is seen in disproportionate enrollment in special education services, use of restrictive education settings, and school discipline such as suspensions and expulsions. From a neurobiological perspective, children of color are more likely to be exposed to environmental toxins and experience food insecurity, factors that impact healthy brain development.<sup>8</sup>

- According to the Learning Disabilities Association of America, “A number of researchers (Figlio, et. al., 2019; Fish, 2019; Shifrer, 2018; Shifrer, et. al., 2011) find that in many situations, students of color are less likely than their white peers to be appropriately identified and to receive high quality special education services, despite demonstrating similar levels of academic performance and behavior, even when attending the same schools. Black students may be placed in special education at a higher rate than their peers but there is evidence that they are more likely to be identified as intellectually disabled or behaviorally disordered rather than having a learning disability such as dyslexia or other conditions such as speech or language impairment or ADHD.”<sup>9</sup>
- Implicit racial bias toward students of color shows up in one study that found that teachers were less likely to associate behavioral difficulties of students of color as the result of a disability compared to their treatment of white students.<sup>10</sup>
- Students of color who are also diagnosed with a disability are disproportionately suspended from school. More than one in five Native American, Black, or Multiracial boys with disabilities are **suspended at least once** compared to one in ten White boys with disabilities.<sup>11</sup>

**Figure 3. Students with disabilities (IDEA students) receiving out-of-school suspensions by race/ethnicity and gender.<sup>38</sup>**



National Center for Learning Disabilities. (2020.)

[Significant Disproportionality in Special Education: Current Trends and Actions for Impact.](#)

<sup>8</sup> Learning Disabilities Association of America. [Disproportionate Identification of Students of Color in Special Education.](#)

<sup>9</sup> Learning Disabilities Association of America. [Disproportionate Identification of Students of Color in Special Education.](#)

<sup>10</sup> Teachers College, Columbia University. (2017). [Examining Racial Disparities in Teacher Perceptions of Students with Disabilities.](#)

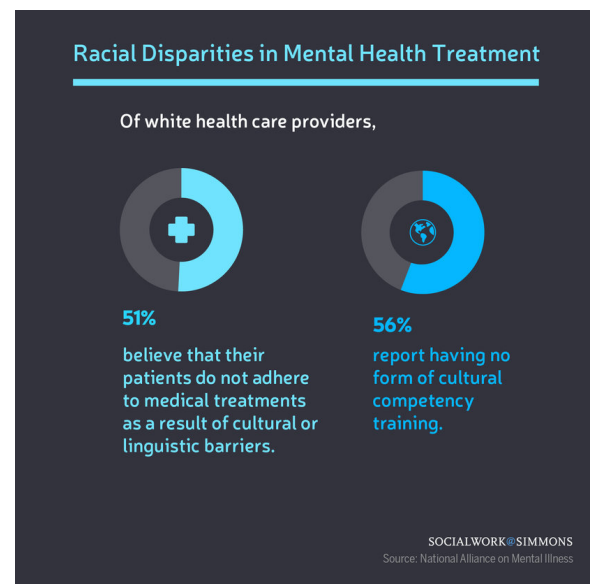
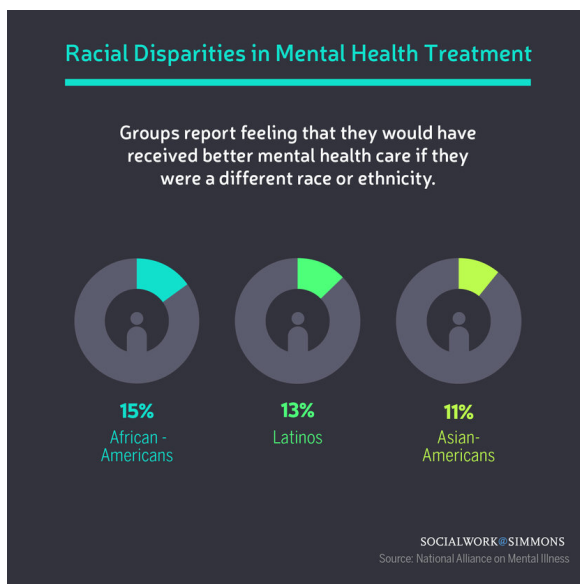
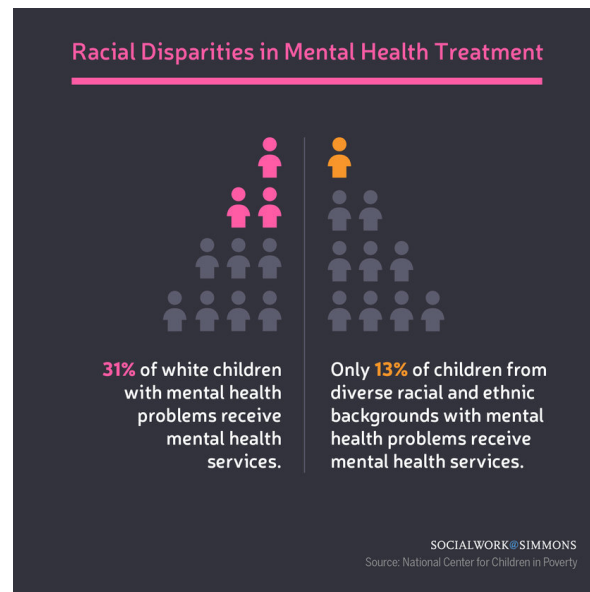
<sup>11</sup> US Department of Education, Office for Civil Rights. [2013-2014 Civil Rights Data Collection: A First Look.](#)

## Mental Health & Race

Why is looking at mental health and race important? Research<sup>12</sup> shows that, when compared to people who are White, Black, Indigenous, and People of Color (BIPOC) are:

- Less likely to have access to mental health services;
- Less likely to seek out services;
- Less likely to receive needed care;
- More likely to receive poor quality of care; and
- More likely to end services prematurely.

It is particularly difficult for people of color to receive adequate and culturally appropriate treatment. Multiple studies show that racial and ethnic minorities face mental health disparities even after controlling for variables like income, insurance status, age and symptom expression.<sup>13</sup>



<sup>12</sup> Counseling Today. [The historical roots of racial disparities in the mental health system](#), 2020.

<sup>13</sup> Simmons University. [Racial Disparities in Mental Health Treatment](#)

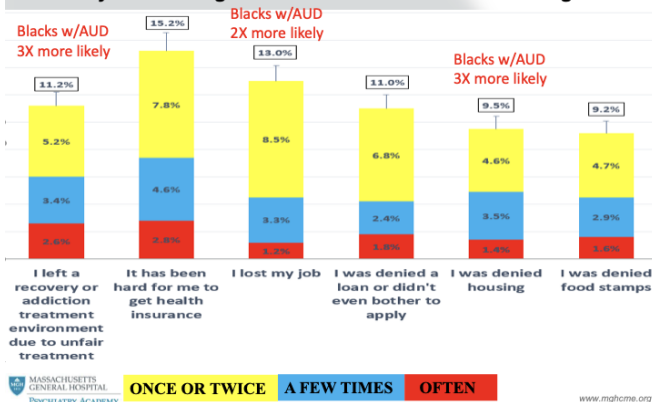
## Substance Use Disorder & Race

The impact of substance use disorders is seen across demographic groups. Nevertheless, according to a 2021 Massachusetts General Hospital report, “racial-ethnic minorities, Black Americans in particular, suffer a disproportionate burden of health and social consequences despite having a lower or equivalent prevalence of substance use and substance use disorders.” The report lists the following disparities relating to treating Substance Use Disorder:

- White Americans are 35 times more likely to have a buprenorphine prescription related visit than Black Americans.
- Latino and Asian had no/low perceived need for treatment despite meeting criteria compared to White. Latinos often use informal forms of support (e.g., family cohesion) and handle problems on their own.
- Latino Americans have worse outcomes in substance use treatment programs, though little is known as to why.
- Individuals who identify as Black are more likely to have recurrent alcohol use disorder (35% vs. 22% for Whites).
- The overdose rate for individuals who identify as Black was 35% lower than Whites until 2015/16 when they experienced an alarming increase of 39%.
- 88.7% of African Americans diagnosed with SUD did not seek out or receive substance use treatment (2018 National Survey on Drug Use and Health).
- 89.7% of Latino/Hispanic ages 12+ do not receive any kind of substance use treatment for their substance use disorders.<sup>14</sup>
- 96.2% of Asian, Native Hawaiian, and Other Pacific Islanders ages 12+ do not receive any kind of substance use treatment for their substance use disorders.<sup>15</sup>

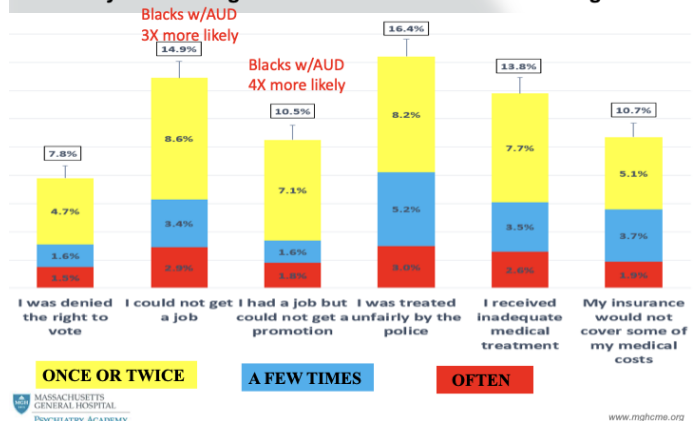
Vilsaint, Hoffman, Kelly. 2020. *Drug and Alcohol Dependence*

### National Prevalence of Recovery-Related Macrodiscrimination After Resolving a Problem with Alcohol or Other Drugs



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Images above from: “Racial Ethnic Disparities in Substance Use Disorder” [Presentation](#) (2021)  
Recovery Research at Massachusetts General Hospital

<sup>14</sup> Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services. (2018). *2018 National Survey on Drug Use and Health: Hispanics, Latino or Spanish origin or descent*.

<sup>15</sup> Substance Abuse and Mental Health Services Administration: U.S. Department of Health and Human Services. (2018). *2018 National Survey on Drug Use and Health: Asians/Native Hawaiians and Other Pacific Islanders (NHOPI)*.