

June 23, 2017 11:32 am

## The Little Understood Mental-Health Effects of Racial Trauma

By Rochaun Meadows-Fernandez

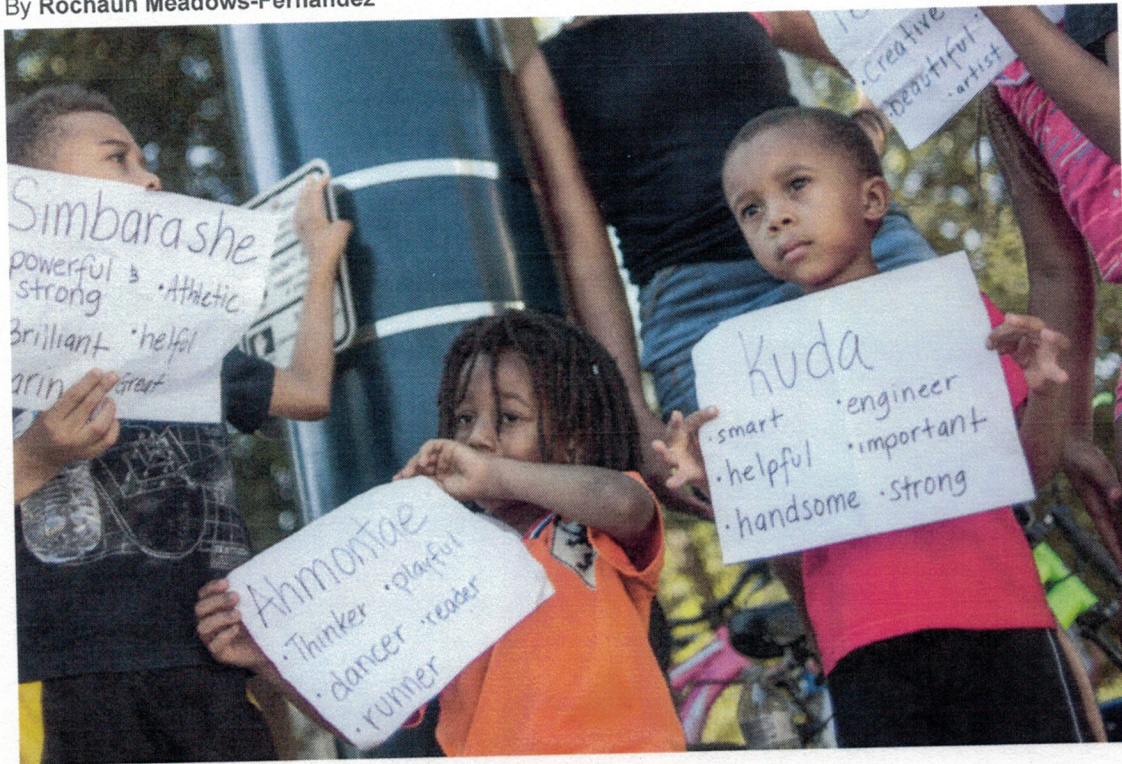


Photo: Sean Rayford/Getty Images

On **Sunday**, police officers in Seattle shot and killed Charleena Lyles in her home. She died in front of "several children," according to reports, and her family members say she was pregnant. Just days before, Jeronimo Yanez, the Minnesota police officer who shot and killed Philando Castile during a traffic stop, was acquitted of all charges. Earlier this spring, an unarmed teenager named Jordan Edwards was shot and killed by police as he was driving away from a party. By now, it's become a sickeningly familiar sequence of events.

While the trigger (both literally and metaphorically) is the same, there is an aspect of these events that is frequently overlooked: the effects of the frequent police killings on black Americans' mental health in the form of racial trauma, a psychological phenomenon that some experts say is similar to post-traumatic stress disorder. "Racial trauma is experiencing psychological symptoms such as anxiety, hypervigilance to threat, or lack of hopefulness for your future as a result of repeated exposure to racism or discrimination," said Erlanger Turner, an assistant professor of psychology at the University of Houston, who is one of only a handful of researchers studying racial trauma.

Symptoms can include depression and angry outbursts, much like what is typically seen in those suffering from PTSD. But Turner has observed additional behaviors that are specific to racial trauma, including a reluctance to interact with or general mistrust of white people. Racial trauma can be triggered by many events, but among the most common **triggers** are continued racial harassment, being a victim of police violence, or witnessing said violence. Even witnessing violence on the news can be damaging. "Research has consistently shown that visual exposure to events can be traumatic," Turner said. "I particularly believe that the recent news coverage of police shootings of black and brown men will cause some short-time trauma for individuals, especially children. I strongly encourage parents to limit exposure to this type of news coverage." And yet few researchers are studying the lasting impact of racial trauma.



Due to cultural stigma and barriers to care like insurance and jobs that provide time off work, black Americans are substantially less likely to receive mental-health treatment than other ethnic groups. This is particularly problematic because black Americans are 20 percent more likely to suffer from mental illness, according to the National Alliance on Mental Illness. For those who suffer from mental illness, the recycling of brutality and violence on the news may worsen symptoms.

Although all negative racial events do not result in trauma, it is important that we are increasingly aware of this topic, and that researchers do more to study its causes and effects. Recently, Science of Us spoke with Turner about his work, and his determination to improve scientific understanding of black mental health.

#### **How would you define racial trauma? How new is this concept?**

Racial trauma or race-related stress is not a new concept. Decades of research have examined the role of racism and discrimination on mental-health functioning. Racial trauma may result from racial harassment, witnessing racial violence, or experiencing institutional racism.

The trauma may result in experiencing symptoms of depression, anxiety, low self-esteem, feelings of humiliation, poor concentration, or irritability.

#### **How is racial trauma similar to PTSD, and are there any key differences?**

Similar to PTSD, racial trauma may result in experiencing symptoms of anxiety, hypervigilance, poor concentration, or irritability. The symptoms for both include direct or indirect exposure to a traumatic event. However, the DSM-5 (Diagnostic and Statistical Manual of Mental Disorders) notes that PTSD is specific to events such as sexual abuse, serious injury, or exposure to actual or threatened death. As you notice, it does not capture events related to cultural background that may result from racism.

#### **What are the signs you should consider speaking to a professional about trauma as a person of color?**

There are some behaviors you should consider when deciding to seek help. I think the most important is answering the question, "Do you have problems getting through your day or functioning at school or work?" If the answer is "yes," it will be useful to talk to a professional. Other signs to consider if you should seek help include: mood changes (being more irritable, sad, or angry), feeling withdrawn and not wanting to be around those who you previously enjoyed spending time with, or when you begin to engage in more risky health behaviors (such as drinking or smoking).

#### **What environmental factors do you believe contribute most to racial trauma? How prevalent do you believe racial trauma is?**

That's a hard question. I don't recall many studies that have examined rates of racial trauma. Additionally, there is so much continued racism either directly or indirectly it's hard to recover from one incident before another occurs. Furthermore, not everyone who encounters racial discrimination will experience racial trauma. For example, with the increased media coverage of police brutality in the past few years it has potentially led to increases in trauma or stress. This research is still emerging. However, a recent study was published in April that found police and law-enforcement stress is associated with racial discrimination and depression symptoms among black men.

#### **What has your research informed you is most important to keep in mind with racial trauma?**

Again, not every incident of racism will result in racial trauma. The research shows that those who directly witness police violence or are continually exposed to violent images are at a higher risk of trauma than those who witness others. It's important for providers and psychologists to assess how the experience has affected the individual.

#### **What do you hope to discover next?**

Currently my research lab is working on a study to look at factors that hinder and promote the use of mental-health services among black Americans. My hope is that the research can help us to better understand stigma, identify ways in which providers can improve their client-therapist relationship, and improve providers ability to engage in cultural competency.

#### **I see your current research projects study cultural factors that either promote seeking help or attitudes that limit seeking care. Can you tell us a little about those projects?**

My current research focuses on mental health among Latino and black Americans. I recently published a paper with a colleague at Santa Clara University on the impact of therapy fears, ethnicity identity, and spirituality on the use of mental-health service among Latino college students. This project will also be exploring these variables among black Americans. Preliminary findings show that religion and spirituality are important to black Americans. These strong spiritual beliefs may also decrease decisions to seek treatment.

#### **What do you believe is the most groundbreaking finding you have come across in your time as a researcher?**

Over the past ten years, my research has focused on access to mental-health treatment. The research consistently shows that a positive attitude is associated with seeking treatment. However, some of my early work found that positive attitudes predicted help-seeking for whites, but not for black Americans. In a recent study that I published with four of my former undergraduate students, we found that fears about therapy was a more important barrier to treatment for ethnic minorities such as black Americans. Specifically, the more people have concerns about being respected by the therapist, working with a competent provider, or



having values different than the therapist it increased the likelihood that they will avoid treatment. It really highlights the importance that other things beside stigma impact the use of treatment. We really need to make sure that therapists are engaging in cultural humility.

**Do you have advice for people of color, in terms of seeking mental-health help?**

My advice is that if you feel stressed or have difficulty getting through life you should consider meeting with a psychologist or behavioral-health provider. If religion or spirituality are an important aspect of your life it is appropriate and perfectly okay to ask the provider if they can incorporate your values into treatment. This will help you make the decision of whether that is the person you want to work with to address your concerns. Going to therapy should be a mutual relationship and it is my view that providers should collaborate with their clients.

---

**CONNECT:**

© 2017, New York Media LLC.