



[#racialtraumaisreal](#)

**Alumni Advisory Group
Institution for the Study and Promotion of Race and Culture**

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Race is a long-standing and often controversial topic in the United States. Recent national events in the fall of 2014 and beginning of 2015 have reignited a national conversation about race relations.

Despite assertions of a more just society and claims of a post-racial America, events following the lack of grand jury indictments in the recent deaths of [Michael Brown](#), [Eric Garner](#), and [John Crawford III](#) highlight a tale of two perspectives. Furthermore, the police-involved shooting deaths of unarmed Black girls and women, such as [Aiyana Stanley-Jones](#), [Tarika Wilson](#), and [Yvette Smith](#), highlight the legacy of disregard and brutality toward Black bodies. More recent examples of police brutality continue to surface as demonstrated by the deaths of [Walter Scott](#), and [Freddie Gray](#) leading to related protests and riots in Baltimore, MD. For some, this is a tale of the clear continued existence of institutional and interpersonal racism. For others, bewilderment, confusion, coincidence and denial are the common narrative.

Regardless of a person's previous understanding of racism, many people of Color may find themselves struggling to process their reactions to the deaths of Michael Brown, John Crawford III, Eric Garner, Aiyana Stanley-Jones, Yvette Smith, Walter Scott, and Freddie Gray, as well as the lack of indictments of the police officers involved in several of these deaths. Anger, sadness, fear, feelings of helplessness, exhaustion, rage, and the desire to act may emerge at unpredictable times in an unpredictable manner.

Racial trauma is one term used to describe the physical and psychological symptoms that people of Color often experience after being exposed to stressful experiences of racism (Carter, 2007). Similar to survivors of other types of trauma (e.g., sexual assault survivors), people of Color often experience fear and hypervigilance, headaches, insomnia, body aches, memory difficulty, self-blame, confusion, shame, and guilt after experiencing racism (Bryant-Davis & Ocampo, 2005; Carter, 2007, Carlson, 1997; Helms, Nicolas, & Green, 2010). Moreover, when people of Color experience racism more frequently, their

symptoms tend to intensify (Bryant-Davis & Ocampo, 2005). And, these racism experiences never exist in isolation; racial trauma is a cumulative experience, where every personal or vicarious encounter with racism contributes to a more insidious, chronic stress (Carter, 2007). When people of Color experience racism, it brings to mind both their own previous experiences with racism, as well as their awareness of the longstanding history of racism directed toward similar others in the US (Helms et al., 2010; Utsey & Ponterotto, 1996). Historical race-related events play a significant role in shaping how people of Color view racism. For many people of Color, early racial socialization experiences often include listening to their parents' and grandparents' stories of living through different periods of racial tension in the U.S., including the Civil Rights movement, Jim Crow laws, and for some slavery (Shenk, 2000). While the passing down of these stories is an essential part of educating and socializing the younger generation about race and racism, the transmission of racial trauma is often carried across multiple generations as a result. The cumulative emotional effects and psychological wounding that is transmitted across generations is also known as intergenerational trauma (Rakoff, Sigal, & Epstein, 1966), and can result in higher rates of mental health and physical health issues within communities of Color as well.

Many mental health professionals and scholars have called for the recognition of racial trauma as a mental health concern. Too many accounts from student trainees, colleagues, and professionals demonstrate a lack of awareness, knowledge, and the practical skills necessary to competently address racial trauma in mental health settings. This obliviousness exists despite a pervasive body of literature that explicitly states that a clinician's awareness of race and racial factors (e.g., racism, racial discrimination) often determines clients' of Color ability to seek, continue, and benefit from mental health interventions.

We offer our recommendations as mental health professionals and advocates of the study and promotion of racial and cultural understanding and discussion. Specifically, we are hoping these recommendations will serve as a much-needed resource for people of Color. Many have written about the importance of repeated race-related traumatic events, but we felt few were speaking to the broad mental health impact we as a community are experiencing as witnesses, participants, and mental health practitioners.

Acknowledge

There is no one way or "right" way to react. It is important to be aware and accept what you are feeling and thinking. Individuals or groups may respond to experiences of trauma differently. Developmental age and ability to express one's emotions can all affect whether or not a person wants to talk about the traumatic event or if verbalizing her or his emotions poses too much of a challenge. As a result, younger children are going to experience and respond to traumatizing events in a different manner than adults. Therefore, it is important to actively check in with family and friends, including children. When doing so, pay attention to your nonverbal communication, as well as that of the person you are engaging. Our nonverbal behaviors are often a good way to communicate support, acknowledgement, and validation. Alternatively, attempting to multitask while checking in (e.g., scrolling through your cell phone) and partially listening can lead to feelings of disconnection, resentment, or invalidation.

Some helpful ways to increase self-awareness are journaling, practicing [mindful body scans](#) to check your body for signs of stress and anxiety, and active reflection of the feelings you are having. These activities can increase your ability to identify the range of emotions and physical reactions you may be experiencing, all of which are normal and should not be discounted.

Discuss

At times, it can be helpful to openly discuss your experiences following racially traumatizing situations. Talk to those that you trust, including: friends, family, confidantes, colleagues, and spiritual leaders. Open discussion can help to minimize the tendency to internalize negative racial experiences, which can lead to feelings of anger, sadness, or anxiety. Speaking to others who may have similar reactions can also be normalizing and validating. It is however helpful to be cautious about engaging in repetitive discussions with the same person, which may exacerbate negative reactions.

Determining when and how to engage in discussion, also requires some considerations. It is important to note that not everyone may serve as a source of support. Sometimes you may feel that discussions centering on the topic of race are more beneficial when they are confined to those with whom you closely identify racially and/or ethnically. This advisory is not always accurate, however. Just because a friend or family member has assisted you in navigating a difficult emotional experience previously, does not mean he or she is able to provide mutually engaging and affirming conversations about racial topics. It also may be necessary to avoid some people who you know or have recently encountered who may negatively impact your mood.

A person's ability to listen to your perspective, validate your experiences, and communicate an understanding of race and racism from a social, political, and historical context is most important. You may find that White allies, as well as People of Color, are able to engage in dialogue that is growth fostering. Progressive, nurturing cross-racial communication may also serve as a needed reminder to avoid gross generalizations regarding individuals from specific racial backgrounds. In other words, not all People of Color will understand issues of racism and discrimination in the same manner. Likewise, not all White people are incapable of understanding racism and lack the desire to promote social justice. White people who embody a healthy and sophisticated racial consciousness are aware of racial systems of privilege, they are able to discuss racism, and they recognize how racism affects them personally. And, most importantly, they act in an effort to combat racial discrimination.

Seek Support

There are times when seeking guidance and support from others will help to facilitate positive coping and management of racial trauma responses. For some, beginning the process of self-exploration with a counseling professional at your workplace, university health center, or local community agency will be beneficial. For others, guidance from trusted mentors, spiritual leaders, or religious organizations and groups may offer needed counsel and collective support.

Self Care

The range of emotional and behavioral responses as a result of racial trauma requires proactive planning in order to begin the process of coping and healing. Self-care is a commonly recommended survival skill to promote a balance between mental and physical rest and activity and social interaction, especially in high stress situations. Self-care is deliberate and should be self-initiated to promote and maintain overall wellness. Whether done in groups or individually, the key is to minimize negative intake of information, including social media outlets or discussions, in an effort to enhance personal wellbeing. Self-care should involve activities that bring some pleasure and promote a healthy lifestyle to offset the effects of race-based stressors.

In an effort to buffer the emotional and physical consequences of racial trauma, one should plan activities that promote a healthy mind, body, and spirit. Internal coping strategies, such as mindfulness practices, meditation, reading, prayer, or other indigenous healing systems and faith practices serve to promote optimal mental, emotional, and spiritual wellbeing. They can offer encouragement and hope, and counter the often negative interactions and messaging present. Engaging in activities that allow you to process your emotions externally is also important. Painting, drawing, spoken word recitations, singing, or dancing provide a means to continue to process emotions through expression and body movement. Such activities are helpful as they may facilitate a release of “pent up” thoughts and feelings. Finally, other physical activities, including exercising, going for walks, cooking, and sitting in outdoor spaces can also help calm the physical body and the mind, and may combat symptoms of insomnia, anxiety, and irritability as well.

Empowerment through Resistance

Experiences of racism and discrimination can lead to feelings of helplessness and hopelessness. After all, one does not ask to be treated negatively based on one’s racial categorization. Prolonged personal experiences or the continued witnessing of racial discrimination can prompt avoidance, fatigue, secondary traumatic stress, or lack of motivation. To combat such feelings, for many it is important to engage in activities that may make them feel empowered and seek to promote change. Be proactive by channeling the hurt, anger, and feelings of hopelessness and helplessness that you are feeling by participating in social-change activities in your community. In doing so, you can use your voice to speak out against racial injustices. For example, if issues of race and culture are not discussed in your institution, some are moved to find ways to implement workshops that challenge the status quo and start dialogue. Consider making recommendations for consultants to assist in this process, as taking on such a role yourself may feel burdensome and lead to increased frustration. One can also look for local groups that are organizing protests against racism. If you do not wish to personally join a group or organization, consider signing petitions or giving monetary support to activist groups.

It is also important to stay connected to family and friends, community, neighborhood, and spiritual communities for shared wisdom, support, and collective strength. Participation in protests with community and family is one way to cope and support one another through connection, solidarity, and strength across generations.

Other ways to feel empowered may involve mentoring youths, or writing personal commentary. Mentoring programs that serve younger generations and teach them about racial-cultural issues, including how to cope with systemic racism, can provide opportunities for connection with others, as well as an opportunity for taking action against injustice. In addition, acts of empowerment and resistance can also come through writing blogs, editorials, or poetry. However, when publishing your work publically online it often is helpful to think about limiting exposure to the comments section that follows many online publications.

The aforementioned comments offer some guidance for how to identify, cope, and manage racial trauma. In essence, it may be a good idea to create what we refer to as the Racism Recovery Plan (RRP). The RRP is a step-by-step guide that people of Color can tailor and then implement when coping with racial trauma. The guide helps people of Color identify stressful racism events in their lives, related symptoms they experience after such events, and coping strategies they can use to care for themselves during these events. Ideally, the RRP should be developed prior to encounters with particularly stressful racial trauma. It is based on the Substance Abuse and Mental Health Services Administration supported work of Mary Ellen Copeland (see Copeland, 2002). Our hope is that a RRP can be created individually or in groups and used as a tool to ground oneself in the midst of racial trauma experiences. See the table below.

Racism Recovery Plan Steps

<u>1</u>	Racial Wellness Toolbox	Describe what you feel like when you are managing and responding to racism in a healthy manner (How do you feel emotionally? How do you feel physically?).
<u>2</u>	Daily Maintenance of Centeredness in the Face of Racism	Describe some ways you can stay grounded, healthy, and caring of yourself, when encountering racism (i.e., “Centeredness Strategies”). Examples: a) Review Racial Identity Theory (see Helms); b) Connect with friends who are equally or better able to engage in conversations about racial awareness; c) Engage in prayer, spiritual practices, meditation, or use of mantras; d) Engage in activism; and e) Practice self-management, such as healthy eating, exercise, journaling, and favorite activities that help you feel centered and grounded.
<u>3</u>	Racial Trauma Triggers and Response Plan	When do you experience racial trauma? List types of experiences that tend to result in racial trauma symptoms (e.g., anger, isolation, sadness). After each experience, identify a specific Centeredness Strategy (i.e., RRP Item # 2) that you can use to help you cope.
<u>4</u>	Racial Trauma Early Warning Signs & Response Plan	What does it feel like when you encounter racial trauma? List early warning signs that you are experiencing racial trauma (e.g., body aches, fatigue, anxiety, irritability, depression, difficulty sleeping) and identify Centeredness Strategies (i.e., RRP Item # 2) you can use to combat your symptoms.
<u>5</u>	Acute Racial Trauma & Response Plan	List signs that you are experiencing acute racial trauma (e.g., hypervigilance; heightened emotional experiences, such as depression, anxiety, and anger, which compromise your ability to engage at work or school or to sleep). Identify an action plan to cope with your symptoms using Centeredness Strategies (e.g., meet with a mental health provider or spiritual leader, meet with an activist group).
<u>6</u>	Crisis Planning	Ask yourself, how would you know if you were experiencing a crisis due to racism (e.g., thoughts of harm to others and/or self; inability to care for self and/or others; acute racial trauma symptoms that last longer than a specified duration). List a person(s) or additional resources to contact in the event you experience such a crisis.
<u>7</u>	Post Crisis Planning	List ways of reconnecting with yourself and your communities to regain your sense of centeredness in the face of racism.

References

- Bryant-Davis, T., & Ocampo, C. (2005). Racist-incident-based trauma. *The Counseling Psychologist, 33*(4), 479-500.
- Carlson, E.B. (1997). *Trauma assessments: Clinician's guide*. New York: Guilford Press.
- Carter, R. T. (2007). Racism and psychological and emotional injury: Recognizing and assessing race-based traumatic stress. *The Counseling Psychologist, 35*(1), 13-105.
- Copeland, M. (2002, January 1). Action Planning for Prevention and Recovery. Retrieved December 26, 2014, from <https://store.samhsa.gov/shin/content/SMA-3720/SMA-3720.pdf>
- Helms, J. E., Nicolas, G., & Green, C. E. (2012). Racism and ethnoviolence as trauma: Enhancing professional and research training. *Traumatology, 18*, 65-74.
- Helms, J.E. (1995). An update of Helms's White and people of color racial identity models. In J.G. Ponterotto, J.M. Casas, L.A. Suzuki, & C.M. Alexander (Eds.). *Handbook of Multicultural Counseling* (pp. 181-198). Thousand Oaks, CA: Sage Publications, Inc.
- Rakoff, V., Sigal, J.J., & Epstein N.B. (1966). Children and families of concentration camp survivors. *Canada's Mental Health, 14*, 24-26.
- Shenk, D. (2000). Views of aging African American women: Memories within the historical context. *Journal of Aging and Identity, 5*, 109-125.
- Utsey, S.O., & Ponterotto, J.G. (1996). Development and validation of the Index of Race-Related Stress (IRRS). *Journal of Counseling Psychology, 43*, 490-502.

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Alumni Advisory Group

Fostering the Institute's legacy of Racial Identity Research



Alumni Advisory Group

About the ISPRC Alumni Advisory Group (AAG): The AAG was formed to serve the purpose of advising and mentoring current ISPRC members. Its mission is to continue to foster the Institute's legacy of racial identity research and discussion around race and culture as they relate to mental health; to provide a network of support and mentorship between alumni members and current ISPRC graduate students; and to promote increased understanding of the meaning of race and culture in today's society, based on the tenets of social justice and/or counseling psychology.