

Understanding the Trauma of Racism

Mental health professionals are coming to understand the psychological impact of systematic racism. Psychological trauma and even post-traumatic stress disorder (PTSD) are linked to racism, which can be traumatic in both overt and subtle ways. According to the American Psychological Association, trauma that results from acts of racism is called racial trauma. These acts can be obvious ones, such as workplace harassment and racial profiling, or subtle ones, which are known as micro aggressions and can take the form of offhanded comments or even non-verbal exchanges like refusing to sit next to someone of color on the bus.

Regardless of the source or severity of the acts, research has linked racial trauma to a host of psychological problems, including serious psychological distress, physical health issues, depression and anxiety, substance use disorders and eating disorders.

Understanding Racial Micro aggressions

While it may be easy to understand the psychological impact of hate crimes and other violent acts, it can be harder to understand how micro aggressions lead to trauma.

Some examples of racial micro aggressions include:

- A White man or woman moving to the sidewalk across the street when a Black or Latino man approaches
- An Indian-American, who has lived her entire life in the United States, being complimented for speaking “good English”
- A Black couple at a restaurant being seated at a table next to the kitchen despite empty and more desirable tables located up front

When experiencing micro aggressions, the victim expends vital mental resources trying figure out the intention of those committing the act. When these events happen frequently, it can be difficult to mentally manage the sheer volume of racial stressors: “The unpredictable and anxiety-provoking nature of the events, which may be dismissed by others, can lead to victims feeling as if they are ‘going crazy.’ Chronic fear of these experiences may lead to constant vigilance or even paranoia, which over time may result in traumatization or contribute to PTSD when a more stressful event occurs later,” writes Monnica T. Williams, Ph.D., a clinical psychologist and professor, in Psychology Today.

Impact of Current Events

With the unrest that has spread across the United States, people in general, and especially people of color, are experiencing increased levels of trauma and stress. These times are marked by a sense of horror, helplessness, and even the threat of serious injury or death. The resulting trauma affects not only survivors, rescue workers and the friends and relatives of victims, but also everyone who has seen the events firsthand or on television.

What are common responses to trauma?

Emotional responses to traumatic events vary. People may exhibit feelings of fear, grief and depression. Physical and behavioral responses include nausea, dizziness and changes in appetite and sleep pattern, as well as withdrawal from daily activities. Responses to trauma can last for weeks to months before people start to feel normal again.

Most people report feeling better within three months after a traumatic event. If the problems become worse or last longer than one month after the event, the person may be suffering from post-traumatic stress disorder.

What is post-traumatic stress disorder?

Post-traumatic stress disorder (PTSD) is an intense physical and emotional response to thoughts and reminders of the event that lasts for many weeks or months after the traumatic event. The symptoms of PTSD fall into three broad types: reliving, avoidance and increased arousal.



- Symptoms of reliving include flashbacks, nightmares and extreme emotional and physical reactions to reminders of the event. Emotional reactions can include feeling guilty, extreme fear of harm and the numbing of emotions. Physical reactions can include uncontrollable shaking, chills, heart palpitations and tension headaches.
- Symptoms of avoidance include staying away from activities, places, thoughts or feelings related to the trauma or feeling estranged from others.
- Symptoms of increased arousal include being overly alert or easily startled, difficulty sleeping, irritability, outbursts of anger, and lack of concentration.

Other symptoms linked with PTSD include panic attacks, depression, suicidal thoughts and feelings, drug abuse, feelings of being isolated and not being able to complete daily tasks.

Ways to Cope with Tragedy

There are many things you can do to cope with traumatic events:

- Understand that your symptoms may be normal, especially right after the trauma.
- Keep to your usual routine.
- Take the time to resolve day-to-day conflicts so they do not add to your stress.
- Do not shy away from situations, people and places that remind you of the trauma.
- Find ways to relax and be kind to yourself.
- Turn to family, friends and clergy for support. Talk about your experiences and feelings with them.
- Participate in leisure and recreational activities.
- Recognize that you cannot control everything.
- Recognize the need for trained help, and call a local mental health center.

When should you contact a doctor about PTSD?

About half of those with PTSD recover within three months without treatment. Sometimes symptoms do not go away or they last for more than three months. This may happen because of the severity of the event, direct exposure to the traumatic event, seriousness of the threat to life, the number of times an event happened, a history of past trauma, and psychological problems before the event.

You may need to consider seeking professional help if your symptoms affect your relationship with your family and friends, or affect your job. If you suspect that you or someone you know has PTSD, talk with a health care provider or call your local mental health clinic.

Resources:

- Video: ComPsych Answers Your Counseling Questions: <https://www.youtube.com/watch?v=7tLDia4fYBc&feature=youtu.be>
- OK2Talk: <https://ok2talk.org/>
- You Are Not Alone: <https://notalone.nami.org/>

