

CULTURAL PERSPECTIVES

CEDAR VALLEY MENTAL HEALTH SUMMIT

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Impacts of Historical Trauma and Its Effects on Health Seeking Behaviors for Communities of Color

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Overview

- ▶ Define historical trauma.
- ▶ Discuss the relevance of historical trauma for minority ethnic groups, and how it impacts their mental/physical health and experience in terms of health seeking behaviors.
- ▶ Discuss cultural responses to healing and treatment.

Definition of Trauma

- ▶ “A traumatic experience is an event that threatens someone’s life, safety or well being (NCTSN, 2010).”



Diversity of Traumatic Experiences

- ▶ Sexual abuse
- ▶ Physical abuse
- ▶ Intimate Partner Violence (aka domestic violence)
- ▶ Community and school violence
- ▶ Medical trauma
- ▶ Motor vehicle accidents
- ▶ Acts of terrorism
- ▶ War experiences
- ▶ Natural and human-made disasters
- ▶ Suicides / Homicides
- ▶ Other traumatic losses

What Causes a Traumatic Experience?

- ▶ Trauma results in the activation of the body's "survival systems" (i.e., Fight – Flight – Freeze)
- ▶ These systems may continue to run even after the trauma has ended
- ▶ This can result in enduring chemical imbalances and structural changes in the brain
- ▶ These changes can result in the symptoms of PTSD

Historical Trauma Defined

- ▶ Maria Yellow Horse Brave Heart, widely regarded as the “mother of **historical trauma**” by **Native Americans**, describes **historical trauma** as the cumulative emotional and psychological wounding over one's lifetime and from generation to generation following loss of lives, land and vital aspects of culture.

Historical Trauma (cont'd)

- ▶ Brave Heart and DeBruyn (1998) utilized the literature on Jewish Holocaust survivors and their decedents and pioneered the concept of *historical trauma*.
- ▶ The current problems facing the Native American people may be the result of “a legacy of chronic trauma and unresolved grief across generations” enacted on them by the European dominant culture (Brave Heart & DeBruyn, 1998).
- ▶ The primary feature of historical trauma is that the trauma is transferred to subsequent generations through biological, psychological, environmental, and social means, resulting in a cross-generational cycle of trauma (Sotero, 2006).

Why is Historical Trauma Relevant?

- ▶ As a collective phenomenon, those who never even experienced the traumatic stressor, such as children and descendants, can still exhibit signs and symptoms of trauma.

Neurobiology of Trauma

- ▶ Mouse pups — and even the offspring's offspring — can inherit a fearful association of a certain smell with pain, even if they have not experienced the pain themselves, and without the need for genetic mutations.
 - ▶ Kerry Ressler, a neurobiologist and psychiatrist at Emory University in Atlanta, Georgia, and a co-author of the latest study,.

Manifestations of Historical Trauma

▶ *Internalized Oppression*

- ▶ As the result of historical trauma, traumatized people may begin to internalize the views of the oppressor and perpetuate a cycle of self-hatred that manifests itself in negative behaviors.
- ▶ Emotions such as anger, hatred, and aggression are self-inflicted, as well as inflicted on members of one's own group.

Who is Impacted by Historical Trauma?

- ▶ Blacks/African-American/Africans
- ▶ American Indians/First Nations People
- ▶ Asian/Pacific Islanders
- ▶ Immigrants
- ▶ LatinX
- ▶ Families Living in Poverty

Communities Impacted by Historical Trauma

American Indians/First Nations Peoples

- ▶ This population has been exposed to generations of violent colonization, assimilation policies, and general loss.
 - ▶ Example of Stressor: The Americanization of Indian Boarding Schools and the forced assimilation among their students.



Communities Impacted by Historical Trauma (cont'd)

Native American/First Nations People

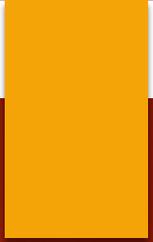
- ▶ Compared with all other racial groups, non-Hispanic Native American adults are at greater risk of experiencing feelings of psychological distress and more likely to have poorer overall physical and mental health and unmet medical and psychological needs (Barnes, Adams, & Powell-Griner, 2010).
- ▶ Suicide rates for Native American adults and youth are higher than the national average, with suicide being the second leading cause of death for Native Americans from 10–34 years of age (Centers for Disease Control and Prevention [CDC], 2007).

Communities Impacted by Historical Trauma (cont'd)

Asian Americans and Pacific Islanders

- ▶ Psychological researchers have documented the effects of transgenerational psychological trauma among Asian Americans and Pacific Islanders.
 - ▶ For example, children of Japanese Americans interned during WW II experienced negative psychological sequelae from the internment.





Communities Impacted by Historical Trauma (cont'd)

Immigrants

- ▶ Forced migration may be the result of conflict, natural disaster, famine, developmental projects and policies, or nuclear and chemical disasters (Forced Migration Online, 2012).
- ▶ These various populations may have been exposed to discrimination, racism, forced assimilation/acculturation, colonization, and genocide.

Communities Impacted by Historical Trauma (cont'd)

Black People of the African Diaspora

- ▶ Example of Stressors: slavery; colonialism/imperialism
- ▶ Current Manifestations: Mistrust of police; self-worth (Rich & Grey 2005)
- Internalized racism - self-hatred among Blacks/African Americans who act out their aggression on people who look like them.

Communities Impacted by Historical Trauma (cont'd)

Black People of the African Diaspora

- ▶ This population has been exposed to generations of discrimination, racism, race-based segregation and resulting poverty.
- ▶ Members of this population may have been exposed to microaggressions, which are defined as “events involving discrimination, racism, and daily hassles that are targeted at individuals from diverse racial and ethnic groups.” (Michaels, 2010)



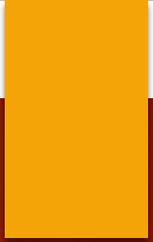
Narratives of Historical Factors

- ▶ By the time of our country's Civil War in 1861, **eight generations of black children were born, grew up, toiled, and died as the property of white adults and children.** Slaves worked at **hard labor**, from sun up to sun down, for no pay, six or seven days a week.
- ▶ The **13th Amendment** to our Constitution outlawed slavery. But many of the four million former slaves were **forced back into unpaid labor.** They became **sharecroppers** on their old plantations. If a white man said a black man was "shiftless," that black man could be **arrested and forced to work** without pay in a mine, factory, or farm. This was **slavery by another name.**



Narratives of Historical Factors

- ▶ After emancipation came the “**separate and unequal**” system of **Jim Crow** in the South. This made it **legal to have racially segregated** public schools, buses, restaurants, movie theaters, and occupations. Under Jim Crow, **black lives were cheap**. Over five thousand African Americans were strung up, shot, tortured, mutilated, and burned to death during those one hundred years. Most **lynchings** occurred in the South, but many took place in the North and West as well.
- ▶ The **Civil Rights Movement of the 1950s, 60s, and 70s** challenged Jim Crow. The Jim Crow era “officially” ended when **Congress passed the Civil Rights Act of 1964**. However, **white Americans found ways around** many of the gains African Americans made. In “**white flight**,” white parents moved to the suburbs or put their children in private schools. White neighbors signed “**covenants**” not to sell their homes to black families. White unions made it difficult for black workers to become members and advance themselves in the skilled trades. Many African Americans became **trapped in poverty**.



Communities Impacted by Historical Trauma (cont'd)

Impoverished Communities

- ▶ Poverty can lead to:
 - ▶ family stress
 - ▶ child abuse and neglect
 - ▶ substance abuse
 - ▶ mental health challenges
 - ▶ domestic violence

(Wilson, 2005)

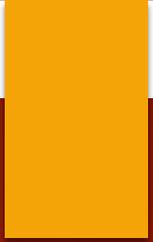
Intergenerational Poverty

- ▶ Poor individuals and families are not evenly distributed across communities or throughout the country. Instead, they tend to live near one another, clustering in certain neighborhoods and regions.
- ▶ This concentration of poverty results in higher crime rates, underperforming public schools, poor housing and health conditions, as well as limited access to private services and job opportunities. (Kneebone, Nadeau & Berube, 2011).



Intergenerational Poverty

- ▶ Poverty in these communities is frequently intergenerational.
 - ▶ The lack of access to services, increased exposure to violence, and higher risk of victimization that exist in these communities often results in a much greater potential for experiencing trauma and re-traumatization among residents than in communities that are not areas of concentrated poverty.
- ▶ Example of Stressors: Hunger; poor or inadequate housing; lack of access to health care; community crime
- ▶ Current Manifestations: Domestic violence; child abuse; substance abuse (Wilson, 2005)



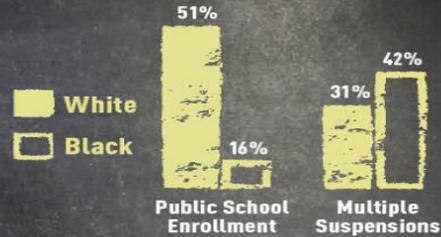
Institutional Racism

- ▶ Institutional
 - ▶ Differential punishment
 - ▶ Schools – School to prison pipeline (NAACP , 2005)
 - ▶ Policing – Over policing, under-policing, police involved shootings/killings
 - ▶ Justice system – 20% longer for black men than white (Starr & Rehavi, 2012)
 - ▶ Funding in communities of color

SCHOOL-TO-PRISON PIPELINE

School disciplinary policies disproportionately affect Black students.

Zero-tolerance discipline has resulted in Black students facing disproportionately harsher punishment than white students in public schools.¹



Black students represent



31%
of school-related arrests²

Black students are suspended and expelled

3x

more than white students.³



Students suspended or expelled for a discretionary violation are nearly three times more likely to be in contact with the juvenile justice system the following year.⁴



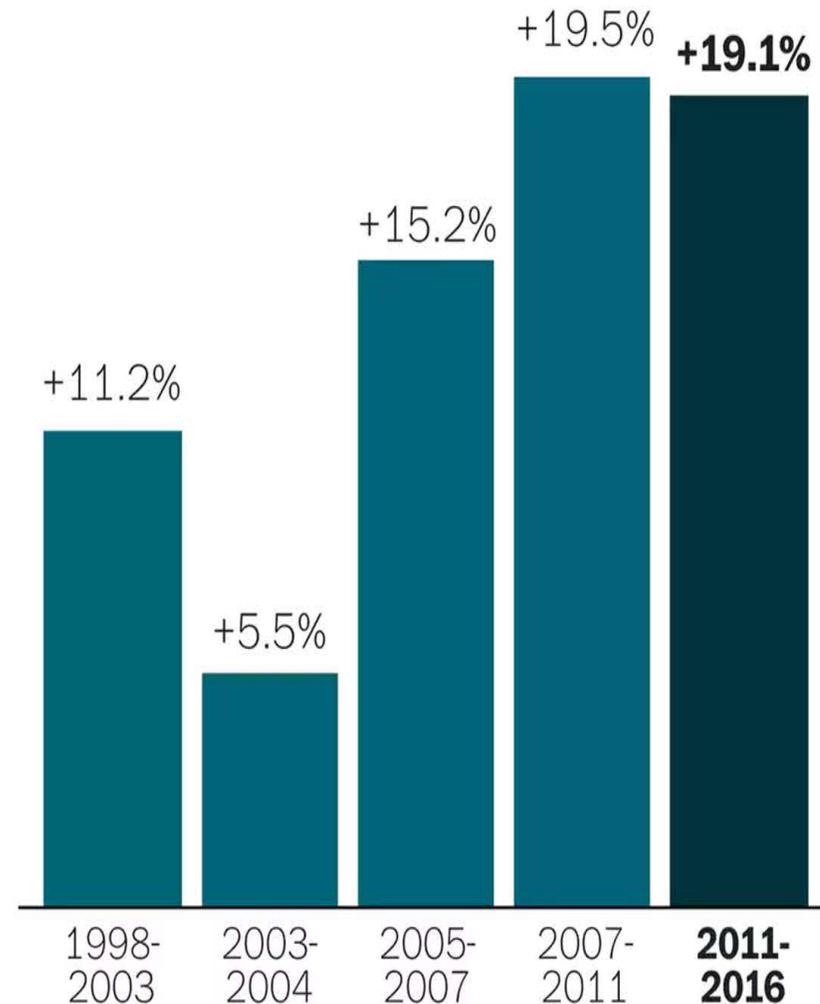
BROWN AT 60: STILL SEPARATE. STILL UNEQUAL.



¹ Data Snapshot: <http://ocrdata.ed.gov/Downloads/CROC-School-Discipline-Snapshot.pdf>
² Ibid.
³ Ibid.
⁴ Breaking School Rules: http://csgjusticecenter.org/wp-content/uploads/2012/08/Breaking_Schools_Rules_Report_Final.pdf

Same crimes, different times

Percentage difference in sentence length for black men, versus white men with similar backgrounds who commit the same crimes, by time period



Fear of Utilizing Medical and Psychological Services

- ▶ There is a significant history of atrocities against Black people that contribute to suspicion and paranoia regarding seeking physical and mental health services.

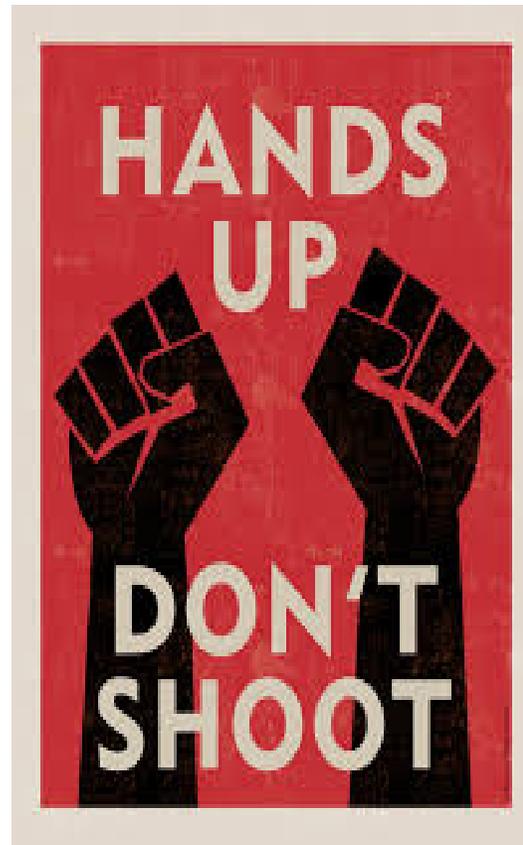


Post Traumatic Slave Syndrome (PTSS)

- ▶ As a result of twelve years of quantitative and qualitative research Dr. DeGruy has developed her theory of Post Traumatic Slave Syndrome, and published her findings in the book **Post Traumatic Slave Syndrome** - America's Legacy of Enduring Injury and Healing”.
- ▶ **WHAT IS P.T.S.S.?**
P.T.S.S. is a theory that explains the etiology of many of the adaptive survival behaviors in African American communities throughout the United States and the Diaspora. It is a condition that exists as a consequence of multigenerational oppression of Africans and their descendants resulting from centuries of chattel slavery. A form of slavery which was predicated on the belief that African Americans were inherently/genetically inferior to whites. This was then followed by institutionalized racism which continues to perpetuate injury.

Reasons for Fear

- Slave labor
- Forced migrations
- Forced Breeding
- Stolen property
- Dehumanization
- Mass incarceration
- Torture
- Medical experimentation
- Discrimination
- Race riots

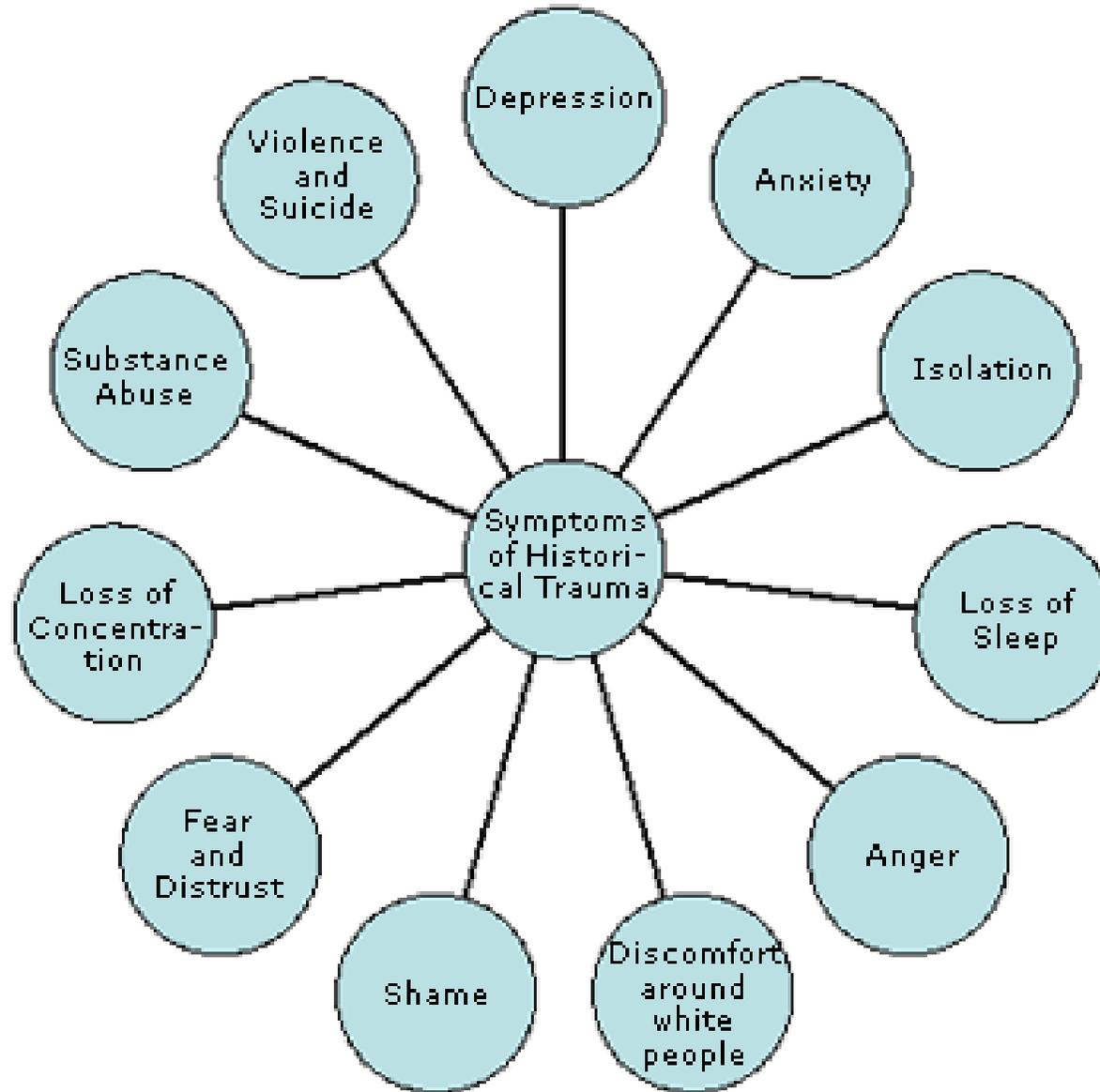


Police Brutality
Racial Profiling
Lynchings
Mass murder
Long-lasting psychological effects (Post-Traumatic Stress Disorder) on survivors and descendants.
Posttraumatic Slave Syndrome (PTSS)

Post Traumatic Slave Syndrome (PTSS) Cont'd

- ▶ Thus, resulting in **M.A.P.:**
 - ▶ **M:** Multigenerational trauma together with continued oppression;
 - ▶ **A:** Absence of opportunity to heal or access the benefits available in the society; leads to
 - ▶ **P:** Post Traumatic Slave Syndrome.

Symptoms of Historical Trauma



Mental Health

“The U.S. Surgeon General ... finds that more than in other areas of health and medicine, mental health services are ‘plagued by disparities in the availability of and access to its services,’ and that ‘these disparities are viewed readily through the lenses of racial and cultural diversity, age, and gender.” – Institute of Medicine (2003)

Mental Health Disparities

- ▶ **Black people** are more likely to live below poverty and those living below poverty are 3x more likely to report psychological distress
- ▶ **Black people** are more likely to report psychological distress
- ▶ **Black people** and Hispanic/LatinX Americans have similar rates of mental illness overall compared to White Americans, but tend to have worse outcomes
- ▶ **Black people** over represented in patient psychiatric facilities and diagnosed with schizophrenia and bias in diagnostic criteria and diagnose thought to explain this disparity, while mood disorders are underdiagnosed
- ▶ **Black people** are more likely to be prescribed psychotropics and at higher doses but less likely to receive antidepressants when compared to White Americans

Post Traumatic Slave Syndrome (cont'd)

KEY PATTERNS OF BEHAVIOR REFLECTIVE OF P.T.S.S.

▶ **Vacant Esteem**

Insufficient development of what Dr. DeGruy refers to as primary esteem, along with feelings of hopelessness, depression and a general self destructive outlook.

▶ **Marked Propensity for Anger and Violence**

Extreme feelings of suspicion perceived negative motivations of others. Violence against self, property and others, including the members of one's own group, i.e. friends, relatives, or acquaintances.

▶ **Racist Socialization and (internalized racism)**

Learned Helplessness, literacy deprivation, distorted self-concept, antipathy or aversion for the following:

Results from American's Perceptions of Psychotherapy and Psychotherapists

▶ ***Lack of Trust***

- ▶ Participants reported that while psychotherapy might be beneficial, most psychologists and psychotherapists lacked an adequate knowledge of African American/Black life and struggles to accept or understand them.
- ▶ Participants discussed the stereotypes of African-Americans/Blacks in the larger society and challenged the ability of psychologists and psychotherapists to be free of the attitudes and the beliefs of the larger society. (Thompson, Bazile, & Akbar 2004)

Results from American's Perceptions of Psychotherapy and Psychotherapists

▶ ***Cultural Sensitivity***

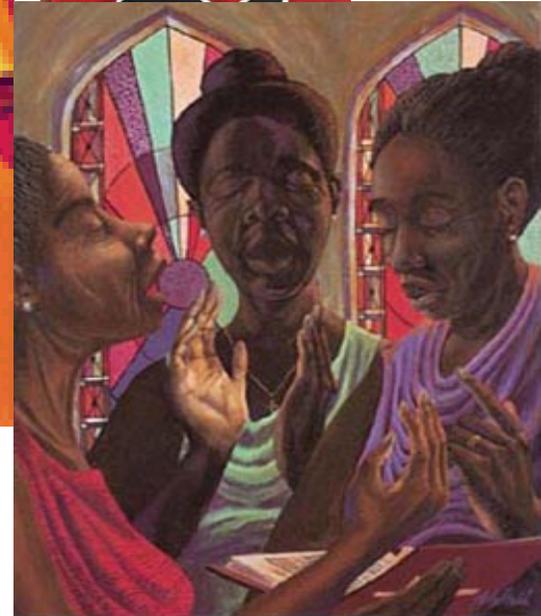
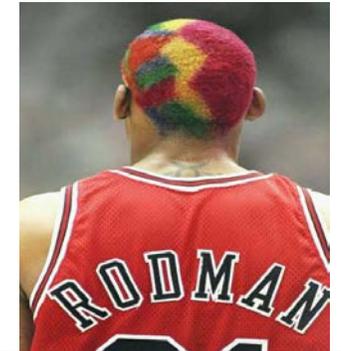
- ▶ Participants reported a preference that race not matter in the provision of mental health services, but a vague fear that it did.
- ▶ Most participants reporting this attitude noted that it was based on sensitivity to the issues and experiences that the African-American community has historically confronted.
- ▶ Participants believed that therapists were often influenced by frequently encountered stereotypes of African Americans.
(Thompson, Bazile, & Akbar 2004)

Results from American's Perceptions of Psychotherapy and Psychotherapists

- ▶ ***Cultural beliefs***, such as a belief in the need to resolve family concerns within the family and the expectation that African-Americans demonstrate strength.
 - ▶ Despite the sense that therapy was required to address certain issues, participants reported that they lacked sufficient knowledge of the signs and symptoms of mental illness, or information on the services available. (Thompson, Bazile, & Akbar 2004)

Adaptive Cultural Factors for Black Population

- ▶ Spirituality, religious involvement
- ▶ Strong kinship bonds
- ▶ Role flexibility
- ▶ Communalism
- ▶ Rich affectivity,
- ▶ “Keeping it real”



Native American/First People Cultural Factors

- ▶ Spirituality
- ▶ Sweat ceremonies
- ▶ Talking circles
- ▶ Prayers
- ▶ Smudging
- ▶ Sessions with recognized spiritual healers



Does Historical Trauma Have Only Negative Effects?

- ▶ Not necessarily. There are positive aspects that arise from historical trauma.
 - ▶ Resilience / Posttraumatic growth
 - ▶ Adaptive survival behaviors
 - ▶ Evolutionary enhancements

Ways to Enhance Quality of Life Despite Historical Trauma

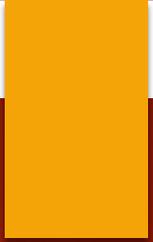
- ▶ Acknowledge and confront historical trauma
- ▶ Work on understanding historical trauma
- ▶ Focus on healing of ones self; as well as healing within and among the community

Ways to Enhance Quality of Life Despite Historical Trauma

- ▶ Releasing the pain in healthy ways
 - ▶ **Spiritual/Religious and/or Cultural Healing Services** (spiritual services, cleansings, sweat lodge, challenge the westernized religious indoctrination thru colonialization of blacks in America and throughout the diasporas)
 - ▶ **Psychological Treatment Services** (psychological testing; psychotherapy, counseling)
 - ▶ **Psychiatric Treatment** (medicine – research shows medicine along with psychotherapy has better outcome than medicine alone)
 - ▶ **Social Justice/Advocacy** (volunteer, lobbying, civic action)
 - ▶ **Education** (dispel the myth of inferiority by understanding the rich culture of black people being the mothers and fathers of civilization)

Cultural Competence

- ▶ At the annual convention of the American Psychological Association in 2001, the Surgeon General of the United States presented a report on the mental health status of racial/ethnic minorities. The report summarized several key findings:
 - A. The mental health needs of people of color continue to be unmet
 - B. There is a strong need to understand both cultural and sociopolitical factors affecting the life experience of these groups
 - C. Cultural competence in the delivery of services is absolutely essential to the psychological and physical well-being of persons of color.



Cultural Competence

- ▶ Culturally competent therapists are:
 - A. Aware of and are sensitive to their own racial and cultural heritage and value/respect differences.
 - B. Differences are not seen as necessarily deviant or pathological. Culturally competent therapists are aware of their own background/experiences and biases and how they influence psychological processes.
 - C. Recognize the limits of their competencies and expertise; and realize that it is unethical to work with culturally diverse populations without specialized training or expertise.



Cultural Competence

- ▶ Culturally competent therapists:
 - A. Culturally competent therapists are comfortable with differences that exist between themselves and others. They realize that discomfort over differences can hinder an effective therapeutic relationship. Further, they do not profess, “color blindness.”
 - B. Know the biases likely to affect assessment, evaluation, and diagnosis of
 - C. minority clients.
 - D. Have knowledge about minority family structures, community, and so forth.
 - E. Know how discriminatory practices operate at a community level.

Considerations for Intervention

- ▶ Assessment
 - ▶ Several assessment tools to assist with assessing impact of racial based stress and trauma
 - ▶ Race-Based Traumatic Stress Symptom Scale (RBTSSS; Carter et al. 2013)
 - ▶ Trauma Symptoms of Discrimination Scale (TSDS; Williams, Printz, and DeLapp, 2018)
 - ▶ Ask about experiences
 - ▶ Have you have had a time where you felt that you were treated differently or unfairly? Do you feel this was due to race/ethnicity?
 - ▶ Have you ever had a time where you felt as though you had to be very alert because of your racial identity?
 - ▶ Were there times you felt that you were put in harms way compared to others of a different race?
 - ▶ Have you ever had to make a choice between honoring your racial identify and instrumental needs?
- ▶ Understanding their narrative – creating a place to be heard
- ▶ Assess the effects of oppression

Considerations for Intervention

- ▶ Empowerment (adapted from feminist theory)
 - ▶ Acknowledge impact of oppression and racism (Comas-Diaz, 2006; Munoz & Mendelson, 2005)
 - ▶ Try to foster positive images and connection with racial identity and pride
 - ▶ Positive self-esteem
 - ▶ Resilience
 - ▶ Address internalization of the oppressor
 - ▶ Discuss areas where patient experiences having power and powerlessness
 - ▶ Encourage ways to express themselves in areas they feel they have power
 - ▶ Their voice is primary
 - ▶ Integrate holistic and mindfulness approaches to connect mind and body (Cane, 2000; Comas-Diaz, 2006)

Multicultural Guidelines

American Psychological Association (2017)

- ▶ Guideline 1. Psychologists seek to recognize and understand that identity and self-definition are fluid and complex and that the interaction between the two is dynamic. To this end, psychologists appreciate that intersectionality is shaped by the multiplicity of the individual's social contexts.
- ▶ Guideline 2. Psychologists aspire to recognize and understand that as cultural beings, they hold attitudes and beliefs that can influence their perceptions of and interactions with others as well as their clinical and empirical conceptualizations. As such, psychologists strive to move beyond conceptualizations rooted in categorical assumptions, biases, and/or formulations based on limited knowledge about individuals and communities.
- ▶ Guideline 3. Psychologists strive to recognize and understand the role of language and communication through engagement that is sensitive to the lived experience of the individual, couple, family, group, community, and/or organizations with whom they interact. Psychologists also seek to understand how they bring their own language and communication to these interactions.

Multicultural Guidelines

- ▶ Guideline 4. Psychologists endeavor to be aware of the role of the social and physical environment in the lives of clients, students, research participants, and/or consultees.
- ▶ Guideline 5. Psychologists aspire to recognize and understand historical and contemporary experiences with power, privilege, and oppression. As such, they seek to address institutional barriers and related inequities, disproportionalities, and disparities of law enforcement, administration of criminal justice, educational, mental health, and other systems as they seek to promote justice, human rights, and access to quality and equitable mental and behavioral health services.
- ▶ Guideline 6. Psychologists seek to promote culturally adaptive interventions and advocacy within and across systems, including prevention, early intervention, and recovery.

Multicultural Guidelines

- ▶ Guideline 7. Psychologists endeavor to examine the profession's assumptions and practices within an international context, whether domestically or internationally based, and consider how this globalization has an impact on the psychologist's self-definition, purpose, role, and function.
- ▶ Guideline 8. Psychologists seek awareness and understanding of how developmental stages and life transitions intersect with the larger biosociocultural context, how identity evolves as a function of such intersections, and how these different socialization and maturation experiences influence worldview and identity.
- ▶ Guideline 9. Psychologists strive to conduct culturally appropriate and informed research, teaching, supervision, consultation, assessment, interpretation, diagnosis, dissemination, and evaluation of efficacy as they address the first four levels of the *Layered Ecological Model of the Multicultural Guidelines*.
- ▶ Guideline 10. Psychologists actively strive to take a strength-based approach when working with individuals, families, groups, communities, and organizations that seeks to build resilience and decrease trauma within the sociocultural context.

Discussion Questions

- ▶ What steps should be taken to produce healing of the mental anguish experienced among black people due to slavery?
- ▶ In what form(s) should healing be instituted? (i.e., curriculums, forums, training, etc.)
- ▶ What would we properly include in that program in order to stop the re-occurring cycles centered around the mental, emotional and spiritual impacts of historical trauma and race based stress?



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