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Causes and Consequences of Racial Prejudice

Deep rooted prejudices entertained by the whites; ten thousand recollections, by the blacks, of the injuries they have sustained; new provocations; the real distinctions which nature has made; and many other circumstances, will divide us into parties, and produce convulsions which will probably never end but in the extermination of the one or the other race.

—Thomas Jefferson, *Notes on Virginia*
(as cited in Jordan, 1968, p. 436)

The deleterious effect of prejudice and racism on African Americans and other ethnic minority groups is well documented. A number of scholars have built long and illustrious careers delineating the exact mechanisms by which racism diminishes the quality of life experienced by African Americans and other racial and ethnic minorities living in the United States and elsewhere (e.g., Gordon Allport, Na'im Akbar, Philomena Essed, Joe Feagin, Franz Fanon, James Jackson, James Jones). In contrast, little evidence, empirical or otherwise, exists regarding the negative consequences of racism for White Americans. The lack of attention given to understanding how racism affects the lives of White Americans is due to the commonly held belief that it is an issue germane only to people of color. This fallacy has been perpetuated by research scientists, educators, politicians, policy makers, and, to some degree, well-intentioned civil rights leaders and organizations. Moreover, and to a greater degree, the privilege of Whiteness allows persons so classified to be oblivious to racism and its deleterious effects (see McIntosh, 1988, 1998; Neville et al., 2001).

There is little doubt as to how insidious racism is and that it permeates every facet of American life. Intuitively, we know that racism is harmful for both the victims and perpetrators and that eliminating it from our society would be in everyone's interest. However, a number of scholars (e.g., D'Andrea & Daniels, 2001; Helms, 1984) have suggested that only when Whites are convinced that racism is detrimental to their own quality of life and accept responsibility for its elimination can we expect to eradicate it from our society. This chapter will make the case that racism is not only a bad thing for African Americans and other minority group members but that it negatively affects the quality of life and psychological well-being of White Americans.

We would like the reader to note that the focus of this chapter is White racism. Some might argue that members of other racial and ethnic groups can be racist and to focus on only Whites is in and of itself a form of racism. Here we would direct the reader back to Chapter 1, where we define racism and distinguish it from prejudice and discrimination. True, anyone can be a bigot and harbor hatred based on race, ethnicity, national origin, sexual orientation, and related demographics. These behaviors, though reprehensible, do not constitute racism. The focus on White racism, however, is not based on these distinctions but is used for historical accuracy and conceptual clarity. White racism is the progenitor of all the other forms of racism that pervade the social and cultural fabric of U.S. society. To begin this discussion anywhere else would be misleading.

The current chapter will address several areas pertinent to the deleterious effects of racism on both Black and White Americans. First, we discuss the psychological mechanisms responsible for the development and maintenance of racial animosity. Particular attention is given to unconscious psychological processes and how they protect the ego from the threat, both real and imagined, ignited by anxiety related to racial fantasies. Second, we examine the deleterious effects of racism on the mental health of Whites; particular attention is given to reviewing recent empirical evidence on the topic. In the next section, we devote space to a discussion of the negative consequences of racism on the quality of life and general well-being of African Americans. We conclude with a summary of the chapter.

Racism and White Americans

Psychological Mechanisms of White Racism

White Privilege

White privilege, according to McIntosh (1988, 1998), is a means whereby Whites achieve societal rewards based on skin color and other

socially determined indicators of race rather than on merit. White privilege is based on the assumption that Whiteness confers powers, both real and imagined, on the beholder that are not available to people of color (Neville et al., 2001). McIntosh posits that there are two types of White privilege: (a) *unearned entitlements* and (b) *conferred dominance*. Unearned entitlements refer to things that all people should enjoy (e.g., feeling safe in public spaces, being valued for what one contributes, working in a place where one feels one belongs) but that are restricted to Whites and result in *unearned advantage*. It is this unearned advantage that results in a competitive edge that most Whites are unwilling to admit to, let alone relinquish. The other form of privilege, conferred dominance, goes even further by giving individuals classified as White power over individuals classified as non-White. For example, the second author (S. O. Utsey), an African American male, was once questioned about his presence in a predominantly White community by an ordinary citizen who felt empowered to do so.

Like racism, White privilege is maintained and reinforced via cultural symbols that perpetuate the superiority of Whites and the inferiority of all other racial groups. As a result, White privilege has become institutionalized, permeating virtually all aspects of American life. Neville et al. (2001) suggest that White privilege is a multidimensional phenomena occurring at both macro and micro levels. Macrolevel White privilege is systemic in nature and manifests itself in the benefits, rights, and immunities afforded Whites in institutional settings in the United States. For example, in times of economic hardship, the “first-hired-last-fired” policy practiced by many U.S. corporations tends to benefit Whites because Blacks and other people of color, due to historical discrimination in hiring, tend to be the last hired and therefore the first to be fired. Microlevel White privilege is characterized by the individual and group advantages that Whites enjoy. According to Neville et al., advantages at the microlevel of White privilege are primarily intrapsychic and interpersonal (e.g., sense of entitlement, social validation of Whiteness). What makes White privilege so insidious is that it is invisible, omnipresent, and unacknowledged by its beneficiaries.

Colorblind Racial Attitudes

The concept of colorblind racial attitudes was first introduced in Chapter 2. As was noted, racism is less an individual-level psychological attitude than it is a social, cultural, and institutional phenomenon (Neville et al., 2001). As such, Neville et al. (2001) posited that colorblind racial attitudes (CoBRA) were an attempt to deny and distort the reality of race and racism in the lives of people of color. In this context, CoBRA are viewed as a more modern form of racism, distinguishable from old-fashioned racism and bigotry. Expressions of CoBRA are characterized by negative stereotyping, “blaming the victim” (assuming that people of color are to blame for their own racial victimization),

and resistance to any meaningful effort to dismantle institutional barriers to racial equality. Moreover, Neville et al. (2001) noted that CoBRA are multi-dimensional and complex attitudes characterized by positive cognitive schema, with affective correlates for processing racial material, and that it is possible for people of color to adopt them.

White Racial Identity Development

White racial identity theory posits that racial attitudes toward self, for individuals who classify themselves as “White,” develop in relation to their attitudes toward Blacks (Helms, 1990). The model posited by Helms (1984) initially consisted of a five-stage cognitive model describing the phases Whites experienced as they moved toward a nonracist identity. She later expanded her model to include six statuses (formerly stages) that delineate the abandonment of racism by Whites (Helms, 1995). The six statuses of White racial identity development are as follows: (a) contact, (b) disintegration, (c) reintegration, (d) pseudoindependence, (e) immersion-emersion, and (f) autonomy. According to Helms (1990), the six statuses comprise the following two themes: (a) the abandonment of racism (contact, disintegration, and reintegration), and (b) developing a positive, nonracist White identity (pseudoindependence, immersion-emersion, and autonomy). (See Chapter 6 for a more detailed discussion of the White racial identity statuses.)

In the updated model, Helms (1995) described each racial identity status and its concomitant style of cognitive-emotional information processing. For example, Whites who operate primarily from the contact status often use obliviousness to alter reality. In the disintegration status, the primary information-processing strategies include disorientation, confusion, and suppression of information. Information processing in the reintegration status is marked by distortion of information in an own-group-enhancing manner. The reshaping of race-related material to fit one’s societal framework is the preferred style of information processing for individuals in the pseudoindependence status. The autonomy status is characterized by a more complex approach to integrating race-related stimuli, such as searching for internally defined racial standards and open and flexible interpretation and responses to racial material. Furthermore, Helms suggested that the thematic content of these strategies might vary according to the era in which a given individual was socialized. That is, a person internalizes race-related messages in the context of what society and the developing ego will allow (Kovel, 1970).

Psychodynamic Formulations of White Racism

The psychoanalytic literature posits that anxiety and racial intolerance are interrelated constructs. Accordingly, the more underlying anxiety one has, the greater one’s propensity toward racial prejudice (Bettelheim, 1964). An individual whose personal control is weakened by the pressure

of his or her anxiety may be inclined to seek relief through prejudice and racial animosity. This facilitates the discharge of hostility, thereby reducing anxiety. An individual's anxiety is reduced because he or she is able to convince the ego of its superiority, and therefore the person need not feel anxious (Bettelheim, 1964; Welsing, 1991; Wright, 1981).

Some psychoanalytic theoreticians have posited that racial prejudice represents the defensive efforts of the ego and superego. Meerloo (1961) observed that prejudice is more common among individuals with fragile egos and a deep fear of loneliness. From this theoretical perspective, racial animosity is viewed as an ego-strengthening experience that permits the prejudiced individual to better function in society. This is particularly true in a society in which racial prejudice is condoned. Moreover, the primary psychological benefit of racial animus is the reestablishment of the threatened ego's control over the individual's instinctual forces (Ryan & Buirski, 2001).

Identity formation theory has also received considerable attention in the early psychoanalytic literature in relation to racial prejudice. Bettelheim (1964) posited that racial prejudice offers individuals protection from the threat of identity diffusion or a complete loss of identity. For the extremely prejudiced person, feeling superior to members of an identifiable racial or ethnic group forms the basis for his or her identity. Any perceived infringement of the rights and privileges of the dominant group is viewed as a threat to the identity of the individuals who rely on their group membership as a source of ego strength (Bettelheim, 1964). In this regard, racial prejudice is viewed as an attempt by a weak ego structure to secure a social, ethnic, or personal identity.

More recently, object relations theory has been used to conceptualize the psychological mechanisms associated with White racism. In this framework, the unconscious source of racism is located deep within a primitive layer of the human psyche (Timimi, 1996). Here racism has its origins in the paranoid-schizoid split that occurs when an individual attempts to control or dominate, through projection and projective identification, those external objects that are different or separate from the self. Just as children less than one year old use fantasy to control objects that are external to themselves but at the same time projectively identify with them, highly prejudiced individuals are prone to the same behavior (Ryan & Buirski, 2001; Timimi, 1996). This is done to manage the anxiety of feeling separate and apart from them. For example, by viewing Blacks as inferior and as representing all that is evil, the highly prejudiced individual is able to project those aspects of self that are despised and disowned onto Blacks, thereby reducing her or his own feelings of anxiety.

The Disease Model of White Racism

Skillings and Dobbins (1991) proposed a disease model that characterizes White racism as a form of psychopathology whose etiology is similar to

that of an addictive disorder. According to Skillings and Dobbins (1991), the addiction is to the seductive and distorted worldview that the success of White Americans is exclusively the result of their individual effort. The phenomenon of *cognitive dissonance* is integral to Skillings and Dobbins's conceptualization of racism as a disease. Cognitive dissonance is a psychological state characterized by anxiety and emotional discomfort that results when a person holds beliefs and cognitions that are incongruent with each other. Accordingly, when White Americans begin to realize that many of the privileges they enjoy are at the expense of people of color, feelings of anxiety, guilt, and shame may result. Skillings and Dobbins (1991) posit that White Americans have formed an addiction to a worldview steeped in denial, rationalization, and projection in an effort to avoid the anxiety and emotional pain associated with any cognitive dissonance they may experience.

The disease model of White racism has come under attack by a number of scholars writing in the area. For example, Wellman (2000) takes issue with the disease model of racism because it fails to meet the criteria for a disease. *The American Heritage College Dictionary* (1993) defines a disease as "A pathological condition in an organism resulting from infection or genetic defect" or "A condition or tendency, as of society, regarded as abnormal and harmful" (p. 397). Wellman argues that because racism is socially acceptable in the United States and is sanctioned by social and cultural institutions of society, the model of racism proposed by Skillings and Dobbins (1991) cannot be classified as a disease. Furthermore, he warns that by "medicalizing" racism we run the risk of absolving White America of the responsibility for dismantling the racial hierarchy created to give individuals classified as White advantage over individuals classified as non-White.

Negative Consequences of Racism for White Americans

In spite of a dearth of empirical research, anecdotal evidence suggests that Whites do experience psychological and emotional distress related to White racism. For example, several researchers have reported that Whites experience anxiety, frustration, guilt, and shame when confronted with issues related to their own racism or racism in general (Bowser & Hunt, 1996; Pettigrew, 1996; Utsey & Gernat, 2002). Similarly, Jones and Carter (1996) reported that Whites experience feelings of guilt, shame, anxiety, and helplessness, interwoven with a sense of intense confusion, around issues related to racism. Furthermore, Whites who consider themselves to be egalitarian but simultaneously hold that the second-class status of Black Americans is justified have been found to experience emotional and psychological discomfort (Hass, Katz, Rizzo, Bailey, & Moore, 1992).

Much of the early research that examined the psychological correlates of racial prejudice has produced dissimilar results. For example, in a study using

a sample of psychiatric patients, researchers failed to detect any relationship between racial animosity and severity of psychiatric diagnosis (Ackerman & Jahoda, 1950). However, the highly prejudiced patients tended to have little awareness of their feelings and lacked insight into their psychological problems. Moreover, these patients often suffered from generalized anxiety, had physical symptoms of anxiety with somatic complaints, and experienced high levels of nonspecific rage (Ackerman & Jahoda, 1950). Research with psychiatric populations has consistently found racial prejudice to be correlated with symptoms of hypochondriasis, depression, psychopathic deviations, schizophrenia, and hypomania. Studies involving normal samples have not produced significant differences between highly prejudiced and unprejudiced individuals (Ackerman & Jahoda, 1950).

In a study conducted by Claney and Parker (1989), Whites who exhibited little racial consciousness experienced increased amounts of psychological discomfort during interactions with Blacks. A similar study by Hass et al. (1992) found that making Whites aware (i.e., conscious) of their ambivalence toward Blacks aroused emotional tension and psychological discomfort. Furthermore, European Americans who harbor racial animosity are at risk of developing maladaptive coping behaviors (Skillings & Dobbins, 1991). An earlier study by Bettelheim (1964) found that personal insecurity, subjective feelings of deprivation, anxiety, and hostility positively correlated with racial animosity. One study found that Whites who harbor racial prejudice are less likely to benefit from psychotherapy (Dowling, 1955). The empirical evidence suggesting that Whites experience psychological threat of varying levels of intensity during interracial interactions has clear implications for efforts aimed at reducing racial prejudice in society.

Racism and the Black Experience

Mechanisms of Anti-Black Racism

White Supremacy

Several renowned scholars have examined the psychological and cultural mechanisms of White supremacy and domination (Ani, 1994; Fuller, 1969; Kambon, 1998; Welsing, 1991; Wilson, 1998). White supremacy is defined as a system of power and domination, determined consciously or subconsciously, and embedded in the logic, thought, speech, action, perceptions, and affective response of people who classify themselves as White. According to Fuller (1969), White supremacy permeates cultural, economic, ideological, military, political, psychological, religious, and social structures in the service of European global conquest and domination.

The system of White supremacy and domination is perpetuated and maintained through violence, cultural hegemony, and the myth of White superiority (Ani, 1994; Fanon, 1963; Kambon, 1998; Sutherland, 1993). The European worldview, which values rugged individualism, dominance over nature, competition, materialism, and aggression, is congruent with a White supremacy orientation toward relations with others (Ani, 1994; Kambon, 1998; Myers, 1993). According to Welsing (1991), it is the culture and system of White supremacy and its thrust toward the global domination of people of color that produces the phenomenon of racism. Fuller (1969) posits that in spite of any self-professed economic and political independence on the part of individuals of color, all "non-White" people are victims of White supremacy.

Oppression

Freire (1970) views oppression as an act (or acts) of violence that by its very nature interferes with a person's ability to evolve as a complete human being. He defines oppression as any attempt by an individual or group of individuals to exploit, block, or hinder a person's or group of persons' pursuit of self-determination. Not only is oppression achieved and maintained by violence, but the violence gradually permeates all aspects of the social order, through which it affects the everyday lives of the oppressed (Fanon, 1963, 1967). In the course of time, such violence becomes normalized, subtle, and embedded into the institutional structure of society. The violence of oppression, once established in the culture, consumes and dehumanizes both the oppressed and the oppressor (Bulhan, 1985; Fanon, 1963, 1964).

Racism

According to Bulhan (1985), racism is characterized by the generalization, institutionalization, and assignment of values to phenotypic and cultural distinctions between persons from various racial and ethnic groups. These distinctions are typically used to justify the privilege of one group over others, unequal distribution of resources, and acts of aggression and violence directed at individuals from less powerful out-groups. Essed (1990) defined racism as "a complex aggregate of prejudice and discrimination based on an ideology of racial domination and oppression" (p. 11). Jones (1997) described racism as "resulting from the transformation of race prejudice and/or ethnocentrism through the exercise of power against a racial group defined as inferior, by individuals and institutions with the intentional or unintentional support of the entire culture" (p. 280). As far back as four decades ago, Fanon (1964) recognized that traditional racism, grounded in vulgar notions of the biological inferiority of certain racial groups, usually dark-skinned people, had become transformed into a more sophisticated and insidious form of cultural racism.

Negative Consequences of Racism for Blacks

Researchers have elucidated the exact psychological and physiological stress response associated with racism and discrimination (see Clark, Anderson, Clark, & Williams, 1999; Harrell, 2000; Hashfield et al., 1989; Krieger & Sidney, 1996; Outlaw, 1993). Psychologically, racism has been associated with increased levels of depression (Brown et al., 2000; Noh, Beiser, Kaspar, Hou, & Rummens, 1999), increased hostility (Utsey, 1999), lowered life satisfaction and self-esteem (Broman, 1997; Jackson et al., 1992), and feelings of trauma, loss, and helplessness (Fernando, 1984). According to Clark et al. (1999), perceptions of a racially stressful situation may result in the amalgamation of maladaptive feelings of anger, anxiety, paranoia, hopelessness, frustration, resentment, and fear. In some cases, these emotional and psychological responses are exacerbated by maladaptive coping strategies (Dobbins & Skillings, 2000; Lalonde, Majunder, & Parris, 1995; Plummer & Slane, 1996). For example, suppressing anger that results from encounters with racism potentially results in increased blood pressure, hostility, substance use, and other maladaptive coping responses (Clark et al., 1999; Krieger & Sidney, 1996).

The cumulative impact of the psychological stress and strain of racism may, in time, have negative somatic health consequences for African Americans. For example, the stress associated with chronic exposure to racism has been implicated in the onset of a number of stress-related diseases, including hypertension (Krieger & Sidney, 1996), cardiovascular disease (Armstead, Lawler, Gorden, Cross, & Gibbons, 1989), cirrhosis of the liver (McCord & Freeman, 1990), and lung ailments (Karlsen & Nazroo, 2002). Several studies have examined the relationship between noxious racial stimuli and blood pressure reactivity in African Americans. For example, Sutherland and Harrell (1987) found that racist encounters resulted in increased heart rate activity for a sample of African Americans. Armstead et al. (1989) found that racial stressors resulted in increased blood pressure in a sample of African American college students. A study by Clark (2000) found that perceptions of racism resulted in increased blood pressure responses in a sample of college women.

A number of other scholars have reported that African Americans experience a diminished quality of life due to their chronic exposure to invidious racism and general life stress (Essed, 1990; Jones, 1997; Outlaw, 1993; Utsey, Bolden, Brown, & Chae, 2001; Utsey, Chae, Brown, & Kelly, 2002). According to data from the National Study of Black Americans, racism was responsible for lowered life satisfaction among African Americans (Jackson et al., 1992). Another study by Broman (1997) found that the life satisfaction of African Americans was negatively affected by their experiences with racism. Jackson, Williams, and Torres (1995) found an inverse relationship between African Americans' life satisfaction, general happiness, and the stress associated with racism. Harrell (2000) noted

that the interaction between race-related stress and general life stress increases the potential for African Americans to experience deleterious health consequences and a decreased quality of life.

Effects of Prolonged Exposure to Racism

In the context of American society, institutionalized racism is so sinister and ubiquitous that its victims are very often unable to fully recognize it in all its forms, even when they personally experience it (Akbar, 1984; Feagin, 1991; Jones, 1997). Firmly held notions of Black inferiority and White superiority have consummated the cultural legacy of racism in American society. Anti-Black sentiments are casually, commonly, and openly expressed daily in American society, both directly and through cultural symbolism (Ani, 1994; Wilson, 1998). To the extent that African Americans have internalized these anti-Black attitudes and accepted their subordinate status in society, as prescribed to them under a social order of White supremacy, a most damning and irreversible effect will occur—self-alienation (Akbar, 1984; Fanon, 1963, 1967; Wilson, 1990, 1998). Table 3.1 delineates this and other negative consequences of racism.

Fanon (1963) believed that adoption of the cultural reality of the oppressor and abandonment of one's own resulted in a profound sense of alienation for the oppressed. He proposed the following five aspects of alienation as a reaction to conditions of oppression: (1) alienation from the self—to be alienated from one's personal identity, (2) alienation from significant others—estrangement from one's family or group, (3) alienation from others in general—characterized by violence between Blacks and Whites, (4) alienation from one's culture and history—estrangement from one's language and history, and (5) alienation from creative social praxis—denial of or abdication from self-determination and from socialized and organized activity, which is at the core of the realization of human potential.

Akbar (1984) proposed an Africentric classificatory system of mental disorders that result from the assimilation of an alien worldview (i.e., European) for people of African descent. The first, *alien-self disorder*, is characterized by a conscious rejection of one's African reality, a denial of the reality of racism, and the active attempt of African Americans to emulate the European worldview and reality. The second, *anti-self disorder*, shares some characteristics with alien-self disorder but has the added element of covert and overt hostility toward all things African. *Self-destructive disorder*, on the other hand, reflects the ineffective and destructive attempts of African Americans to cope with the unnatural conditions of White supremacy and domination. Finally, *organic disorder* refers to those physiological and biochemical diseases that have their etiology in the oppressive conditions typical of the victims of White supremacy (ecological racism, poor nutrition, substandard health care, etc.).

Table 3.1 Classification Systems Characterizing the Negative Consequences of Racism for Persons of African Descent

<i>Authors</i>	<i>Classificatory System of Racism Reactions</i>	<i>Notes</i>
Fanon (1963)	<ol style="list-style-type: none"> 1. Alienation from self 2. Alienation from significant others 3. Alienation from others in general 4. Alienation from culture and history 5. Alienation from social praxis 	According to Fanon, alienation results from the cultural deracination of Blacks via the imposition of European cultural hegemony
Akbar (1984)	<ol style="list-style-type: none"> 1. Alien-self disorder 2. Anti-self disorder 3. Self-destructive disorder 4. Organic disorder 	Like Fanon, Akbar's taxonomic model focuses on the cultural identity of Blacks as the etiology of psychological dysfunction
Kambon (1998)	<ol style="list-style-type: none"> 1. Cultural misorientation (CM) <ol style="list-style-type: none"> a. Minimal b. Moderate c. Severe 	Kambon's model is an extension of both Fanon's and Akbar's but adds degrees of dysfunction (i.e., minimal, moderate, severe)
Utsey, Bolden, & Brown (2001)	<ol style="list-style-type: none"> 1. Racism-related trauma 2. Racism-related fatigue 3. Anticipatory racism reaction 4. Race-related stress and distress 5. Racism-related frustration 6. Racism-related confusion 	This model is behaviorally focused in that the symptoms are directly observable and measurable

Kambon (1998) proposed that African Americans who are alienated from their natural African self-consciousness experience *psychological and cultural misorientation*. Hence, those of an individualistic orientation, expressing or exhibiting anti-African or -Black behavior, manifesting self-deprecating or self-destructive tendencies, or who are exploitative of or hostile to other African Americans, suffer from the Africentrically defined mental disorder cultural misorientation (CM). According to Kambon, African Americans can experience cultural misorientation with varying degrees of severity (i.e., minimal CM, moderate CM, or severe CM). For example,

persons experiencing minimal cultural misorientation have a weak propensity for a Eurocentric worldview. In individuals experiencing moderate cultural misorientation, there is a tendency to internalize Eurocentric cultural values, beliefs, attitudes, and behaviors and at the same time manifest some pro-Black cultural values, beliefs, attitudes, and behaviors. Severe cultural misorientation is characterized by a predominance of internalized Eurocentric cultural values, beliefs, attitudes, and behaviors. A most insidious feature of psychological and cultural misorientation is that individuals with severe CM appear “normal” when viewed through the lens of a Eurocentric worldview (Kambon, 1992).

Acute Racism Reactions

In addition to the impacts of long-term exposure to racism and oppression, African Americans are at risk of experiencing a number of acute racism reactions. Utsey, Bolden, and Brown (2001) proposed six racism-related reactions that characterize African Americans' response to the psychological and physiological processes associated with the experience of racism and oppression. Although the reactions may occur simultaneously, each response is distinctive in its functionality and interpretation by the respondent. The racism-related reactions are as follows: (a) race-related trauma, (b) racism-related fatigue, (c) anticipatory racism reaction, (d) race-related stress and distress, (e) racism-related frustration, and (f) racism-related confusion. The following sections provide further explanations of the racism-related reactions and examples of their physical and psychological manifestation.

Race-Related Trauma

Race-related trauma is the spiritual, psychological, and physiological devastation African Americans experience following exposure to stressors involving the (a) direct personal experience with, (b) witnessing of, or (c) learning about actual or threatened violent death, serious injury or harm, or other threat to one's physical integrity on the basis of their race or skin color or as a result of the vicious and aggressive encroachment of oppression and White supremacy. Symptoms associated with race-related trauma include recurring thoughts or nightmares regarding the traumatic event, anxiety, fear, sleeplessness, and depression. Race-related trauma is not a pathological reaction per se but a logical and predictable response to racism and oppression.

Events that can trigger the onset of a race-related traumatic episode include being victimized with regard to housing or employment discrimination; race-based exclusion from goods and services; humiliation and degradation in public places; witnessing or experiencing mob violence (i.e., lynching, being attacked by a hate group); and being harassed, detained,

arrested, or beaten by the police or other law enforcement personnel. Notable race-related events that have traumatized the collective psyche of African Americans include the dragging death of James Byrd in Jasper, Texas; witnessing the videotaped beating of Rodney King by members of the Los Angeles Police Department; the brutal beating and sodomy of Abner Louima by New York City police; the murder of Eleanor Bumpers by New York City police; and the murder of Amadou Diallo, also by New York City police (note that this list is hardly exhaustive). These horrific events, as soon as they are known by the masses, cause fear, anger, outrage, and shock in the African American community.

Racism-Related Fatigue

Racism-related fatigue is the tremendous psychological and physiological exhaustion that African Americans experience as a result of and in response to the chronic exposure to racism and oppression. Racism-related fatigue is a physiological manifestation of the constant, sweltering, and grinding toll taken on the individual who must combat racism, oppression, and White supremacy daily. The more determined the struggle against racism and oppression, the more taxing to one's ability to maintain focus in daily routine tasks, concentrate, or participate in activities that require physical exertion.

Similar to the physical fatigue one experiences as a result of exhaustive training and the chronic fatigue that women experience during pregnancy, racism-related fatigue is just as exhaustive and debilitating, making daily chores and routine tasks challenging or impossible. The causality of race-related fatigue often goes unrecognized because of its coupling with the daily challenges of life, such as dealing with family, school, intimate relationships, financial obligations, and work environments.

Anticipatory Racism Reaction

An anticipatory racism reaction is a defense mechanism that African Americans develop after being the victim, recipient, or combatant of racial discrimination and racially motivated hostility. The development of the anticipatory racism reaction is necessary and functional, as it forces the individual to remain aware at all times, in all situations involving Whites, based on previous interracial experiences. Although functional for self-protection and environmental awareness, the extreme amount of energy that the individual expends in attempting to maintain this high level of awareness increases his or her anxiety and becomes too taxing and burdensome to sustain.

The fear and threat of being attacked results in a state of hypervigilance for African Americans, who are constantly confronted with personal and

shared experiences of racism and oppression (Essed, 1990; Feagin, 1991). Even in an environment that is perceived to be nonthreatening, the mechanisms of anticipatory racism reaction are unable to disengage, consequently making the situation uncomfortable for others. The effort that the individual must exert in anticipation of a race-related incident occurring may be more anxiety producing and stressful than the anticipated encounter itself (Essed, 1990).

Race-Related Stress and Distress

Chronic exposure to racism and oppression has been shown to have a deleterious effect on the psychological and physical well-being of African Americans (Utsey, 1998b). Racism is viewed as a major source of stress in the lives of African Americans and results in increased incidences of stress-related diseases (Outlaw, 1993). Stress is recognized as a person-environment encounter that is appraised as relating to one's well-being and that taxes or exceeds the person's resources to cope with a situation (Lazarus & Folkman, 1984, as cited in Outlaw, 1993). In this regard, encounters with racism and oppression result in an acute source of stress for African Americans.

Some symptoms associated with race-related stress and distress include the onset of tension headaches, muscle tightness, inability to concentrate, intrusive thoughts regarding a specific racism encounter, and a general sense of anxiety and tension. Moreover, race-related stress and distress may result in greater susceptibility to minor (e.g., common cold, flu) and major (e.g., hypertension, cancer) illnesses due to a weakened immune system.

Racism-Related Frustration

Racism-related frustration occurs when African Americans realize that they are powerless over the way in which they are treated because of their race. This experience often results in feelings of anger, irritability, aggravation, disappointment, dissatisfaction, and lack of fulfillment and satisfaction. Encounters with racism and oppression that are neither traumatic nor life threatening are still bothersome and upsetting. The individual involved in the incident recognizes that the encounter is both unnecessary and frivolous but must be entertained and managed until a conclusion is reached. If the situation is not resolved, closure cannot occur, and the individual will remain frustrated until a new racism encounter is experienced and the existing frustration is magnified.

Racism-Related Confusion

Racism-related confusion is a reaction that occurs when an individual in the midst of an onslaught of racist exchanges asks the question, "Who am I?"

This consuming question and the search for identity must be undertaken in an oppressive society, and the oppressed, now psychologically and physically fatigued, are thus left to function in bewilderment. Partially because of this disorientation, other questions now need answering: "What is going on?" "Whose problem is this?" and the unanswerable "Why me?" In this state of racism-related confusion, the oppressed begin to look at events and individuals differently. Things that were once certain are now uncertain; positions known are now unknown. As the oppressed are continuously attacked and placed in compromising positions, they now question their own involvement and skills and internalize the plight of the deserving victim.

Chapter Summary

We began this chapter by examining the mechanisms of White racism and discussing their role in the expression of racial animosity. Specifically, we provided an overview of White racial identity and psychodynamic formulations of White racism. The literature on White racial identity development and psychoanalytic theory highlighted the unconscious processes associated with the development and maintenance of racial animosity in Whites. Next, we presented evidence to demonstrate that racism not only negatively affects African Americans and other people of color but that it has deleterious consequences for White Americans. Most scholars conducting research in this agree that until Whites are convinced of racism's harmful effects, there will be little progress toward its eradication.

At the outset of our discussion, we indicated that the literature examining the negative impact of racism on African Americans and other people of color was extensive. Therefore, in our discussion of this topic our aim was not to duplicate that literature. To this end, we focused our discussion on the structural mechanisms that maintain and perpetuate racism and discrimination. In this section, we discussed White supremacy, oppression, and racism as acts of violence directed at its victims. In our coverage of the deleterious effects of racism, we first discussed the long-term, intrapsychic consequences of racism for African Americans. Here we examined the work of Na'im Akbar, Franz Fanon, and Paulo Freire, all of whom are internationally renowned scholars who have written extensively in the area of racism and oppression. Next, we presented a number of acute reactions commonly experienced by African Americans who are the victims of racism. Utsey, Bolden, and Brown (2001) developed a classificatory system for use by clinicians working with the victims of racism and discrimination. They outlined and named several symptom clusters to describe potential short-term reactions to encounters with racism and discrimination.

This chapter has a number of implications for reducing racial prejudice and racism. In writing this chapter, it was our intention to make real the

causes and consequences of racism. It was especially important to make the case for racism's harmful effects on White Americans. Counselors, educators, and parents who want to reduce expressions of racism should be cognizant of the intrapsychic mechanisms that maintain and perpetuate racial animosity. Moreover, it is equally important for counselors, educators, and parents to be familiar with the negative effects of racism on the victims; this awareness is crucial for developing prevention and intervention programs.