



## Racial Trauma

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### What is racial trauma?

**Racial trauma** is defined as an individual or group's stressful, painful reaction to *racial discrimination*, which is the direct experience of (or witnessing or learning about) conflict, hatred, injury, or threatened harm to an individual based on their race.<sup>2,3</sup> **Racial trauma** may also go by other names,<sup>1,2</sup> such as:

- *Race-related stress*
- *Racism-related stress*
- *Race-based stress*
- *Race-based traumatic stress*
- *Societal trauma*
- *Insidious trauma*
- *Intergenerational trauma*
- *Racist incident-based trauma*
- *Psychological racism*

The term "racial trauma" is distinct from the ICD or DSM definition of a PTSD-qualifying trauma, in that it refers to both non-qualifying adversities and experiences that may rise to the level of a PTSD-qualifying event. Racial discrimination exists on a continuum and encompasses a wide range of experiences. Specifically, it includes **microaggressions**, which are subtle or covert gestures, statements, actions, or incidents that discriminate against members of a specific demographic group, that are often unintentional or invisible to the majority demographic group.<sup>4</sup> It also includes vicarious exposures as well as DSM Criterion A traumatic stressors. All of these forms of race-related stress or racial discrimination can lead to traumatization and symptoms of racial trauma. Indeed, in a survey by the APA, over 75% of African Americans/Black Americans in the U.S. reported daily experiences of discrimination.<sup>4</sup> However, anyone with a marginalized identity status can experience racial trauma. Racial trauma is not bound to a specific race or to a specific context.

### How does racial trauma compare to other trauma types?

Just like other types of trauma, racial trauma can be caused by a single event or multiple events, which may build upon one another. In this way, racial trauma can be **cumulative and persistent**. Racial trauma can also be:

- **Systemic**: policies or institutional behaviors that negatively target individuals based on their racial identity (e.g., redlining)<sup>5</sup>



- **Vicarious:** exposure to traumatic events or narratives that have occurred to others (e.g., watching news or social media reports where graphic material of a racial discriminatory event is presented)
- **Historical:** major events, policies, or treatment of specific groups that negatively impacts subsequent generations of those groups (e.g., genocide of Indigenous Peoples/Native Americans in North America; or *Maafa*, referring to the Transatlantic Slave Trade, also called the African Holocaust)<sup>7</sup>

## What are the effects of racial trauma?

Racial trauma can include a wide range of responses, including symptoms of posttraumatic stress disorder (PTSD) and beyond.<sup>6-9</sup> Other impacts may include:

- **Biological** changes, such as greater allostatic load<sup>10</sup>
- **Psychological** or emotional impacts, such as fear, helplessness, depression, anxiety
- **Social** withdrawal, only affiliating with (or avoiding) one's racial ingroup
- **Spiritual** difficulties, such as questioning one's faith
- **Identity** formation challenges, including how one sees one's race, or internalized racism
- **Physical** impacts, such as higher blood pressure, headaches, fatigue, or insomnia<sup>11</sup>

In children and adolescents, racial trauma can present as shame, fear, guilt, anger, and sadness. Children may show these symptoms in their actions. For instance, a child may avoid sunlight to look a lighter skin-tone, may become interested in toys or media not reflecting their racial identity, or may not want to speak another language except the dominant language in their context. Other times, signs of racial trauma may not be as overt. Children may struggle in school, feel angry and show more outbursts, engage in delinquent acts, or withdraw from others. Children may also show physical symptoms such as wetting the bed.<sup>12</sup>

## What are some of the theoretical considerations for racial trauma?

Although racial trauma has been an increasing focus in the clinical science literature, questions remain regarding prevention, assessment, and treatment. For instance, racial trauma may not align with current DSM-5 and ICD criteria for a traumatic event, as required for a diagnosis of PTSD. Furthermore, the conceptualization of racial trauma may pathologize normal reactions to racial discrimination/mistreatment, particularly since racial stressors (and resulting symptoms) exist on a continuum. Thus, continued discussion of racial trauma is necessary, particularly within the context of antiracist research and practice.

## How can clinicians address racial trauma?

Researchers have developed measures for assessing racial trauma, including:

- Race-Related Events Scale (RES)<sup>13</sup>
- Tools for assessing racism among Latinos described by Williams and colleagues<sup>14</sup>



- Broaching Attitudes and Behaviors Scale (BABS),<sup>15</sup> which is particularly relevant for clinicians who do not share the same racial/ethnic identity with their clients and would like to encourage this conversation of difference
- Race-Based Traumatic Stress Symptoms Scale (RBTSSS)<sup>16</sup>
- UConn Racial/Ethnic Stress and Trauma Survey (UnRESTS)<sup>17</sup>

Clinicians can also consider integrating discussion of racial trauma into trauma-focused treatment. Additionally, providers may be interested in professional resources on how to be more racially conscious. For questions to ask in therapy, and resources for challenging personal biases, please see the additional resources at the end of this document.

## What can researchers do to address racial trauma?

As we continue to learn about the forms and impacts of racial trauma, research in this area is more important than ever. For example, trauma studies, particularly clinical trials for PTSD treatment, should consider inclusion of racial trauma in assessment of lifetime trauma history. For instance, as Bernard et al. (2021) stated, racial trauma should be included in the Adverse Childhood Experiences (ACE) scale. The ACE is part of the Behavioral Risk Factor Surveillance System (BRFSS), a survey of data collected in at least 42 states in America. If racial trauma were incorporated, it could provide essential information on the prevalence and impact of racial trauma among children and youth. It is also important to continue discussions on the limitations of the DSM-5 in capturing the effects of genocide, historical trauma, intergenerational trauma, racial trauma, and oppression, as well as how diagnostic criteria can be expanded to be more inclusive of diverse lived experiences. Racial trauma research, and other work focused on antiracism, should consider:

- Designing study methodologies that are more inclusive, asking culturally relevant research questions, and actively involving communities of interest
- Developing studies that avoid ethnocentric race-based comparisons, focusing on unique findings among specific groups of interest rather than continuing to compare to dominant groups (i.e., White, cisgender, or male)<sup>18</sup>
- How people can recognize and challenge racism broadly to reduce harms and promote wellbeing for communities of color

## Where can I learn more about racial trauma and related areas?

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