



Through a Darker Lens: The Trauma of Racism in Communities of Color

As I watched my son walk across the stage at his high school graduation I was a ball of emotions. I was happy and excited to watch my firstborn reach this pivotal milestone. I was a little sad because this event officially signaled the end of his being “my baby.” I was excited for all the adventures that he was about to experience in this new phase of his life. Underneath all of this were more two emotions that I never wanted to feel but are never far from my consciousness: anger and fear. I felt anger from knowing all that my son had to endure to get to that point. I was also constantly fearful for what he would face as he went forth boldly into his destiny. There was sadness and frustration because the challenges, the pain, and much of the frustration that my child would face were because of something completely out of my control: because my child was born Black and male.

According to the American Psychological Association “trauma is an emotional response to a terrible event like an accident, rape or natural disaster.”¹ In communities of color traumatic events are commonplace. When I say this people often go to thoughts of gang and gun violence, drug related crime, or other things reported on the evening news. While those things are present they do not constitute the lion’s share of traumatic experiences I am speaking of. For communities of color we must look at the trauma caused by structural oppression, implicit bias, and racism. These experiences might, on the surface, seem to be inconsequential, however

they have left scars that have endured for generations.

As I gave birth to each of my four children I was both overjoyed and worried. I had infinite hopes and dreams for them. I also had a sense of dread at the thought of the treacherous road that lay before them, the perpetual trauma of racism and oppression that would most surely be as much a part of their journey as kindergarten, little league, and scouts. I would work with all my might to shield them from the sting; but how do you protect a child completely from the air? Oppression and trauma are the air we breathe. Its effects are all around: in school, in the neighborhood, everywhere... like the air.

When my oldest child was five my husband was diagnosed with stage 4 cancer and was given two weeks to live. During the course of my husband’s battle with cancer he would often become sick and be hospitalized for weeks without warning. During this time our children couldn’t see him because his immune system was so compromised. My son was deeply affected by “daddy going away to the hospital.” At one point my husband suffered a heart attack and fell at my son’s feet. I took my son to a local mental health provider to help him deal with the trauma of these experiences. I was told by the therapist that my son had no issues because “he had two married parents in the home and he wasn’t killing small animals and setting small fires because that’s what Black boys do.” I looked at the therapist incredulously. Due to the implicit bias of the therapist my son was denied proper care. The family

structure and the situation that was presented did not fit the “the profile” for an African American family in the mind of this therapist so there couldn’t possibly be anything that needed to be addressed. You may say that this is an isolated incident with one bad therapist. The fact is that social science research shows that there is significant bias against Black boys. According to psychologist Phillip Atiba Goff and his research team, “Black boys can be misperceived as older than they actually are and prematurely perceived as responsible for their actions during a developmental period where their peers receive the beneficial assumption of child-like innocence.”²

When my son was in seventh grade he began experiencing challenges with maintaining focus in class. He had always been a very popular and chatty child which, in combination with attention difficulties, caused him to talk in class. He wasn’t disrespectful or mean in any way; he was what is often known as a “Class Clown.” There were quite a few of these class clowns in that particular seventh grade class. The way the individual “Clowns” were treated was quite different. The White boys were reprimanded in class and the Black students would either receive in-school suspension or out-of-school suspension. I went to the school several times to advocate for my child. I requested testing for my child to see if there was some challenge that could be helped with some extra supports. I was bcc’d in an email exchange between some of the teachers and the Special Education Coordinator for the school who indi-

cated that she didn’t want to “waste services” on my child who was clearly suffering from a lack of discipline for his behavior problem. After I took him for an outside evaluation, he was diagnosed with severe ADHD and started medication. His symptoms improved and he did much better in a different school. However, once again my son was profiled. He had never fought, never been disrespectful, or never did anything other than be a good student with a motor mouth.

During my son’s high school career I went to his school several times to advocate for him against the “Thug” label. A teacher once told him that he was headed straight to prison because he had skipped a class. This wasn’t a normal behavior for my son; he was an honor roll student who had completed the majority of his high school requirements by the end of tenth grade. After a number of these interactions with teachers my son became disengaged in school. His grades dropped, he was frequently late and he stopped doing his homework. When I tried discussing this with him he said: “Those folks don’t care about me...They said that I’m not going to be anything anyway.” I went to his administrator who told me not to worry because he would graduate because of all the work he had already done. I said, “What about college? He needs the grades to get into a good college.” She told me, “He will graduate on time!” I knew in that moment that despite all of the excellent work that my son had done he was not seen as college material. The Black boy bias strikes yet again.

During the summer before my son’s senior year of high school he was beaten in an attempted robbery while he was returning to his friend’s house after a trip to the store. When we called the police to report the crime we told the dispatcher the address and we were told that we couldn’t get a police response because “it had been more than five minutes since the attack.” I took my son to the hospital (in my car) to get care for his injuries. Upon our arrival at the hospital the triage nurse asked us what happened and when we described the events to her she said incredulously: “No one responded to you?” Then she said, “Call from here, use this phone, you will get two cops.” I didn’t understand but I complied, and just like she said we had two officers on the scene in a matter of minutes. When the officers arrived they looked very concerned and asked the nurse for my son. However, when they saw my son their demeanor changed. Along with a couple of obligatory questions, they talked about and asked questions regarding his sneakers. There were two witnesses (my son’s two best friends) who were never questioned. I later heard that the two people who tried to rob my son robbed two other people that same night. My son said that his interaction with the police was worse than



getting beaten and almost robbed. He said that they made him feel “like a criminal.” “They asked me about my shoes like as if to say: ‘How could a Black kid from the city afford such shoes?’” The officers’ bias impacted the way they interacted with my son. Their interaction further traumatized him, and because of his previous experience with systems he had no hope for a positive outcome or any desire to pursue anything further.

Despite these experiences my son does well. He’s in his first year of college and is very engaged. He recognizes injustices and also knows that he, and other young men like him, can persevere and be successful. I asked him what was helpful. What could adults in the lives of Black youth do to support resilience? He said three things:

1. *Be consistent in your engagement.* If it’s once a week or once a month, whatever it is, be consistent.
2. *Be real!!!* Don’t sugar coat stuff or be fake. Acknowledge challenges and provide guidance in overcoming them.
3. *Don’t let stuff slide.* If you see bias/profiling happening call it out!! Much of the hurt comes from watching good people do nothing.

Every child is our own and the trauma of racism, institutional oppression, and bias are very real for Black youth. However, through awareness, acknowledgment, and action by adults, that trauma can be mitigated, paving the way for bright futures.

REFERENCES

1. American Psychological Association. (2015). *Psychology topics: Trauma*. Retrieved from <http://www.apa.org/topics/trauma/index.aspx>
2. Goff, P. A., Jackson, M. C., DiLeone, B. A. L., Culotta, C. M., & DiTomasso, N. A. (2014). The essence of innocence: Consequences of dehumanizing Black children. *Journal of Personality and Social Psychology, 106*(4), 526-545.

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PROJECTS AND STAFF

PROJECT FUTURES: FOSTERING UNITY TOWARDS UPLIFTING RESILIENCE, EDUCATION, AND SUCCESS tests an approach to enhancing self-determination and community participation to help young adults with a history of mental health challenges to build skills to navigate the university system and increase postsecondary success and engagement.

Sarah Geenen, Laurie Powers, and Jessica Schmidt, Co-Principal Investigators; Shannon Turner, Project Manager.

EASA CONNECTIONS brings together young adults who have been part of Oregon’s early psychosis initiative to develop and test a peer-delivered series of web-based decision support tools for new individuals entering into early psychosis services.

Tamara Sale and Ryan Melton, Co-Principal Investigators; Dora Raymaker, Project Manager; Christina Wall, Young Adult Coordinator.

TEC-PD: TECHNOLOGY-ENHANCED COACHING FOR POSITIVE DEVELOPMENT tests a workforce intervention using state-of-the-art technology to implement high-quality coaching and supervision with practitioners employing the Transition to Independence Process intervention with emerging adults with serious mental health challenges.

Janet Walker, Principal Investigator; Celeste Moser, Project Manager; Mary Welch, Research Analyst; Eleanor Gil-Kashiwabara, Cultural Consultant.

S/PAC: SYSTEM/POLICY ASSESSMENT AND CHANGE PROJECT documents and analyzes processes, strategies, and outcomes by which organized groups of young

adults engage in policy analysis and action relevant to transition, and develops knowledge about key systems factors at the state level affecting transition services.

Nancy Koroloff and Barbara Friesen, Co-Principal Investigators; Nicholas Buekea, Research Assistant; Pauline Jivanjee, Project Consultant.

AMP+: DEVELOPING THE YOUNG ADULT PEER SUPPORT WORKFORCE tests a workforce intervention focused on training and coaching peer support providers who work with emerging adults with serious mental health conditions, and prepares agencies to supervise and support them.

Janet Walker, Principal Investigator; Celeste Moser, Project Manager; Mary Welch, Peer Support Training Specialist; Sharice Jackson, Research Analyst.

MENTEE-NOMINATED MENTORING adapts and tests a promising mentoring approach – youth-initiated mentoring – for young people who are living in residential treatment settings after stepping down from more acute psychiatric care.

Jennifer Blakeslee, Tom Keller, and Janet Walker, Co-Principal Investigators; Celeste Moser, Project Manager; Mary Welch, Research Analyst.

THE PATHWAYS TRANSITION TRAINING PARTNERSHIP is forming partnerships with service provider organizations that will participate in testing the effectiveness of an online training program, will survey service providers regarding their training needs and preferences, and develop new training materials in response.

Eileen Brennan and Pauline Jivanjee, Co-Principal Investigators; Claudia Sellmaier, Project Manager; Juliette Sanchez, Video Production Intern.