

**Statement of Dr. Robert T. Carter to the 30<sup>th</sup> Session of the United Nations Working Group of Experts on People of African Descent 5.12.22**

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I wish to thank the Working Group of Experts on People of African Descent, as well as all the distinguished delegates from UN Member States, and others, as well as my fellow panelists for being part of this important discussion today.

*Introduction*

I am pleased and honored to be here today to tell you about Race-based Traumatic Stress Injury (RBTSI). There are decades of research on the health effects of racism, but redressing the harms of racism in legal and policy forums has been difficult, in the United States and internationally. The Race-Based Traumatic Stress model and measures was developed to address this difficulty.

Often, when people tell their stories about racism, I call them targets, they find little recognition in non-discrimination and anti-racism, laws, policies, or existing remedies. In addition, existing mental health assessments and diagnostic categories offer little guidance in assessing race-based incidents as sources of emotional and psychological harm. More important, targets of race-based incidents have few ways to describe their encounters, other than to name it as racism or racial discrimination or by saying they are upset, angry or depressed. I contend they are experiencing race-based stress or trauma as emotional or psychological injury, but the way that law and policy addresses the effects of racial discrimination bypasses some of the most pervasive and harmful race-based harms.

I contend, that; (1) acts of racism are external assaults that harm the person such that he or she may be functionally impaired; and (2) the person, does not have a mental disorder. Rather, they have been injured.

*Definitions:* Let's start with some key definitions and foundational terms.

*A. Classes of Racism*

First, what is meant by racism? The events that may produce Race-based Traumatic Stress can occur in many different forms. Racial encounters may be direct and clear or subtle and ambiguous. Racial events can occur on an individual level (a stereotype, verbal abuse, or the use of symbols) and can be institutional or cultural or systemic. On an institutional level, racism occurs, wherein policies and procedures function to create different outcomes on the basis of race, as reflected in disparities, many of which are well documented, that result from application of racial stereotypes, or occur in the context of cultural racism i.e., where members of a racial group are deemed inferior and less worthy.

Race-based events may be severe, moderate, or daily slights that can produce harm or injury through memorable impact or lasting effects or through cumulative exposure. Life-long exposure to racism teaches people of color to cope by adapting to racial events and minimizing the impact. The severity of racial incidents should be determined by the strength and intensity of the person's subjective reaction and the symptom cluster that emerges. Many forms of racism can occur throughout one's life, thus, severity may be a consequence of the effects of numerous events, or one of these events could be the "last straw" that leads to overwhelming stress and an inability to cope. The type of social support one has both before and after an event, coupled with the person's developmental vulnerability, all contribute to the stress of an event being severe enough

to be traumatic. Psychological or emotional pain causes damage to one's sense of self. Thus, the key aspect of this element is the perception of the event.

Given this, while it is important to understand the role that various forms of systemic racism play in our society, including housing, educational, economic, and health disparities, the broader social and personal effects of systemic racism do not offer adequate assistance in assessing how a person is affected by a specific racial encounter. For such instances, we can classify racism as either hostile, avoidant, or aversive-hostile. These forms of racism link a person's emotional and psychological symptoms or injury to a specific racial encounter(s).

*Avoidant racism*, is reflected in how dominant people keep nondominant people away from them and in their place, on the margins of society or outside the mainstream entirely. Acts of avoidant racism range from social exclusion to explicit barriers, such as denying to rent or sell homes or apartments in particular areas, to create segregated neighborhoods.

*Hostile racism* is when the power of the dominant group is asserted. George Floyd, clearly, was the victim of hostile racism. What was done to him communicated to him and to other Black people that he (and they) were powerless and inferior.

*Aversive-hostile racism* involves the type of racial discrimination contained in unwritten social and organizational rules, in other words, the social structures that dictate status, or lack thereof. The message to non-dominant people is that even if we let you in, you should stay in your place. The invitation to a seat at the table is revocable, dependent on your compliance with racial rules.

#### *B. Race-Based Traumatic Stress*

Next, how do I define *Race-Based Traumatic Stress*? In general, targets of racially hostile environments or individual, institutional and cultural racism may experience emotional reactions

such as depression, low-esteem, self-doubt and emotional distress. The psychological and emotional harm experienced is captured in the clinical literature under the category of *stress*, which is defined as a person-environment, biopsychosocial interaction, wherein environmental events (stressors) are appraised and judged as neutral, positive or as unwanted and negative. Race-based Traumatic Stress occurs when someone has a racial encounter that causes emotional pain, they found the encounter to be out of their control, and it was sudden and unexpected. In addition, there is the attempt to deal with what happened, but the effort to cope fails. As a consequence, symptoms emerge (for example, flashbacks of what happened, withdrawal from close relationships, extreme alertness or irritability, inability to concentrate, or even physical reactions) and these reactions contribute to impairment of daily functioning.

According to health psychologists (Taylor, 2015), the intensity of stress of any sort, increases when the stressor is perceived as negative, unpredictable, and uncontrollable. *Stress is greater if a negative event occurs in central aspects of one's life (i.e., at work, in one's home).* Stress reactions occur whether the stressor(s) are objective (e.g., sudden death or accident) or subjective (e.g., perceived discrimination). In research, both have been shown to independently predict adverse psychological and health effects.

Racism as a stressor functions in the same way as other stressors. The broader criteria for traumatic stress are particularly useful in assessing the effects of racism given the fact that its effects may occur suddenly. *So, we employ the concept of traumatic stress in assessing and understanding race-based experiences both as stress and as trauma.* Trauma reflects a more intense or severe stress experience characterized by specific types of reactions, signs and symptoms that interfere with a person's capacity to function (Carlson, 1997). When coping and

adaptation fail, an individual experiences continued stress reactions and exhibits measurable forms of Race-based traumatic stress injury.

In mental health, *Trauma* is a severe form of stress that is defined in two ways, as Post-Traumatic Stress Disorder (PTSD) or as Traumatic Stress (*DSM-5*). PTSD results from: “*Exposure to actual or threatened death or serious injury, or sexual violence*” (p. 271). An essential element of *Traumatic Stress* is the subjective perception of the event, and that it creates emotional pain, which is determined by the *psychological meaning of the event to the individual*, not the physical consequences of the event. Thus, the *Race-Based Traumatic Stress* is based on a broader definition of trauma than is PTSD. To use diagnostic categories to assess the effects of racial discrimination simply **pathologize** the person experiencing racism and **obscures** what happened to them, since these categories are not specific to race and racism. While the core reactions of RBTS are similar to PTSD symptoms, with a few exceptions, such as, the critical stressor being emotional pain, not physical threat to life, they are nevertheless distinct.

#### *Why Race-Based Traumatic Stress as a Framework for Law and Policy*

There is real necessity for this approach, if we ever want law and policy to touch the realities of racial injuries people experience. Well-established legal processes based on injury and redress (including tort law) are currently underutilized. Civil liability requires that a clear demonstration of “injury” to the plaintiff be established. Yet, this injury - the psychological or emotional harm caused by racism – has not been understood nor documented, prior to RBTS.

Intentional or negligent infliction of emotional distress claims, used in racial discrimination or harassment lawsuits, offers a vehicle to document the effects of racism to individuals in law and policy.

Thus, Race-Based Traumatic Stress Injury, is increasingly used to strengthen legal actions involving acts of racism. In my books, *Confronting Racism* we discuss the many existing legal avenues presumed to redress racism and how these avenues have been blocked or are ineffective. To prevail in fighting racism in law and policy, one must encounter old-fashioned racial acts, over a long period of time, and they must come with racial animus, with explicit symbols, and openly stated racial intentions, acts that are far less frequent today.

It is time to recognize injury from racism in the legal context. To overcome the current failure to target racism as it is actually experienced and its harmful impact, the Race-Based Traumatic Stress framework integrates multiple legal doctrines to seek redress. These include tort or injury, contract, and racial discrimination laws. The premise is that lawyers (or policymakers) and mental health professionals can work together and use forensic assessments to document the presence of race-based emotional and psychological injury for redress. These combined legal and mental health strategies are viable and fruitful for *Measuring the Effects of and Confronting Racism*.

In this way, the use of the RBTS model encourages more legal and administrative redress for the injuries caused by racism. By doing so, courts, policymakers, lawyers, and other key stakeholders will be encouraged and persuaded to put organizational and institutional measures in place to prevent or minimize racism or racial injustice, and establish a clearer path to redress for such injury.

### *Conclusion*

This is a brief overview, and I am happy to discuss more about this during the Q&A. The ideas for the research and theory regarding race-based traumatic stress came about over the past several decades, through my involvement as a racial-cultural researcher, scholar, and as an expert

witness in court cases involving race and racial discrimination ranging from family issues to school desegregation, racial harassment and more. Today, I give expert testimony in civil and criminal cases, using Race-Based Traumatic Stress Injury, and I recently co-authored two books on the topic: *Confronting Racism: Integrating mental health research into legal strategies and reforms*, and *Measuring the Effects of Racism: Guidelines for the assessment and treatment of Race Based Traumatic Stress Injury*. These books promote a greater understanding and use of RBTS as emotional and psychological injury.

Thank you for your attention