

THE EFFECTS OF RACISM-RELATED STRESS ON THE PSYCHOLOGICAL AND PHYSIOLOGICAL WELL-BEING OF NON-WHITES

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Abstract

This paper examines the negative psychological and physiological effects that accompany one's perception of racism. Perceived racism is discussed as a significant stressor that has the potential to negatively impact one's well-being. Racism-related stress is presented as the etiological basis for dysfunction, and a discussion of stress responses is offered to include psychological distress, poor coping strategies, and psychosomatization.

Racism has plagued this country since its inception and continues to be one of the greatest problems our society faces. The non-white population in America has continually been subjected to individual and institutional forms of racism despite the efforts of civil rights groups and political leaders to eliminate discrimination in all its forms. The views and opinions of entire groups of people are disregarded as a result of racial discrimination, which stifles America's progress and places countless individuals in a position of hopeless discontent. Social inequality is most often the topic of conversation whenever one considers the destructive nature of racism, however one must also consider the negative effects racism has on an individual's physical and mental well-being. Wide spread racism has a negative effect on the psychological and physiological health of non-whites.

It is necessary to discuss the etiological model that research has employed to explain the effects of racism-related stress on one's psychological and physiological well-being. Research has shown that racial discrimination is a stressful experience for non-whites (Clark, Anderson, Clark, & Williams, 1999; Harrell, 2000; Nyborg & Curry, 2003). In one study conducted by Klonoff and Landrine (1999), ninety-five percent of a sample population of African Americans reported that racial discrimination was a stressful experience (Nyborg & Curry, 2003, p. 259). The link between stress and health has been the topic of numerous studies, and it is this link that will form the basis for the discussion of racism-related dysfunction. Racism-related stress has been identified by numerous researchers as an etiological basis for the psychological and physiological dysfunction experienced by non-whites (Clark, et al., 1999; Harrell, 2000; Nyborg & Curry, 2003).

Specific attention is given to the topic of racism-related stress by Harrell (2000). According to her research, there are six types of racism-related stress that have the potential to affect the well-being of an individual: racism-related life events, vicarious racism experiences, daily racism micro stressors, chronic-contextual stress, collective experiences, and transgenerational transmission (Harrell, 2000, p. 45-47). The first type of racism-related stress is the result of specific, time-limited experiences of racism in which one feels discriminated against, harassed, or judged (Harrell, 2000, p. 45). One may also experience stress as a result of hearing about or seeing another person's experience with racism. This constitutes a vicarious experience of racism (Harrell, 2000, p. 45). Racism-related stress, however, is not always overt, and this is exemplified in the subtle daily reminders that one is different. These racism micro

stressors may be as simple as being watched in a store or overlooked and discounted in an office setting; however their effects are no less deleterious (Harrell, 2000, p. 45-46). To this point, racism-related stress has been discussed in the context of specific events that either compound one's stress level directly or vicariously. However, three more types of racism-related stress exist that operate on a societal level and which are more closely related to the concept of institutional racism.

Chronic-contextual stress occurs when non-whites are forced to live in a society in which they are subjected to differential treatment and an unequal distribution of resources (Harrell, 2000, p. 46). Non-white families are forced to cope with the unfair treatment and adapt to an environment in which they are given less of an opportunity for success. One example of chronic-contextual stress is poor educational resources in non-white communities (Harrell, 2000, p. 46). Collective experiences, another type of racism-related stress, can be seen when one perceives that the racial group with which they identify is generally not treated fairly. For example, one may experience an increase in stress as a result of witnessing a stereotypical portrayal of the race with which they identify on television or in the news (Harrell, 2000, p. 46). Lastly, it is believed that historical injustices aimed at specific racial groups can be transmitted to new generations. Transgenerational transmission of stress can affect an individual who perceives that the group with which they identify has been historically mistreated or oppressed (Harrell, 2000, p. 46-47).

It should also be noted that the research in question uses a phenomenological approach to the experience of racism (Harrell, 2000, p. 44-45). The individual who experiences racism does so as a result of their subjective perception of the actions of others (Clark, et al., 1999, p. 806-807). "Perceived racism" is a concept that will assist one in understanding the connection between stress and the negative effects of racism (Clark, et al., 1999, p. 808). This approach validates the stress response of the individual perceiving the racism and allows one to consider the negative implications of those subtler instances of racism that are not objectively considered as representative of racist behavior (Clark, et al., 1999, p. 806; Harrell, 2000, p. 45).

Racism-related stress has been discussed in its various forms, and a stress model has been suggested to explain the etiology of the negative impacts that racism has on the psychological and physical well-being of non-whites. It is now important to discuss the various psychological stress responses to the repeated exposure to perceived racism. Exposure to racism may cause one to become anxious, paranoid, angry, helpless/hopeless, frustrated, resentful, and fearful (Clark, et al., 1999, p. 811; Harrell, 2000, p. 47-48; Nyborg & Curry, 2003, p. 264). These stress responses can affect one's ability to function in school, work, and social settings as well as increasing the potential for violent outbursts and suicidal ideations. One study, conducted by Nyborg and Curry (2003), showed a correlation between personal experiences with racism and lower-self concept, higher levels of hopelessness, and depressive symptoms (Nyborg & Curry, 2003, p. 264). It is likely that perception of institutional racism will evoke similar responses if one considers all forms of racism-related stress as having a negative impact on psychological well-being. Harrell's (2000) outline of racism-related stress supports this statement.

Coping strategies may be adopted in response to psychological distress (Clark, et al., 1999, p. 809-811). Many times, however, these coping strategies only serve to amplify or compound one's problems (Clark, et al., 1999, p. 809). For example, personal experiences with racism have been found to be connected to behavior problems in African American boys (Nyborg & Curry, 2003, p. 263). Increased hostility and aggression are common forms of active coping responses that have been associated with racism-related psychological distress (Clark, et al., 1999, p. 811; Harrell, 2000, p. 47-48; Nyborg & Curry, 2003, p. 263). Other forms of negative coping strategies are verbal expression of anger, substance

abuse, cigarette smoking, and poor eating habits (Clark, et al., 1999, p. 811; Harrell, 2000, p. 47-48). One may adopt a negative coping strategy in order to try and alleviate feelings of depression, anxiety, frustration, or anger. These coping strategies do not serve to resolve the underlying problem of racism and often lead to the unfair stigmatization of individuals who have been placed in psychologically distressful situations. Also, substance abuse and poor eating habits are good examples of coping strategies that can have a negative physiological effect on an individual.

It is important to understand the interconnectivity of psychological and physical health when considering the negative effects of racism. The persistent experience of racism-related psychological distress can result in psychosomatization and an increased potential for serious physiological health problems (Clark, et al., 1999, p. 811-812; Harrell, 2000, p. 47-48). Some racism-related physiological effects include hypertension, cardiovascular reactivity, and neuroendocrine responses (Clark, et al., 1999, p. 811-812; Harrell, 2000, p. 47-48). Clark et al. (1999, p. 811) noted that racism-related stress can have a serious impact on the resting blood pressure of African Americans. Another serious physiological outcome related to racism-related stress is poor immune system functioning (Clark, et al., 1999, p. 811-812). Some research has suggested that the healing process is slowed as a result of stress (Clark, et al., 1999, p. 812). It is important to consider the disadvantages that one faces when their health is compromised and they are expected to perform in a society in which stress is a daily consideration.

Racism-related stress complicates the lives of non-whites in a number of very serious ways. In addition to creating the widely discussed social inequalities, racism has been shown to have a negative impact on one's psychological and physiological well-being. The psychological distress caused by racism-related stress can be debilitating and may increase the potential that one will adopt negative coping strategies in an effort to alleviate their depression, anxiety, frustration, and anger. Negative coping strategies, such as substance abuse and poor eating habits, affect one's physiological and social well-being and do not serve to eliminate one's problems. Prolonged exposure to racism-related psychological distress can also cause psychosomatization, which can affect one's physiological well-being in a number of serious ways. One may experience increased blood pressure, hypertension, poor immune system functioning, and a slower rate of healing as a result of stress-related psychosomatization. To quote Harrell (2000, p. 48), "The evidence is compelling, and growing, that racism is pathogenic with respect to a variety of physical and mental health outcomes."

References

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