

CULTURALLY COMPETENT MENTAL HEALTH CARE FOR BIPOC (BLACK, INDIGENOUS AND OTHER PEOPLE OF COLOR)

Understanding Historical and Intergenerational Trauma
and the Effect on Eating Disorders and Addictions

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1

Carolyn Coker Ross, MD, MPH, CEDS is an author, speaker, expert in using Integrative Medicine for the treatment of food and body image issues and addictions. She is board certified in Preventive Medicine and also in Addiction Medicine and is a graduate of Dr. Andrew Weil's fellowship in Integrative Medicine. Dr. Ross is the former head of the eating disorder program at Sierra Tucson and has served as a consultant to multiple treatment programs at all levels of care on the treatment of eating disorders and addictions. For the past 4 years, Dr. Ross has been an international speaker and consultant on issues of cultural competence, antiracism and diversity in mental health with a particular emphasis on the treatment of eating disorders in women of color.

She is the author of 3 books on eating disorders, the most recent is "The Food Addiction Recovery Workbook." She is a contributing author to the soon to be released book: "Treating Black Women with Eating Disorders: A Clinician's Guide." She is co-founder of the Institute for Antiracism and Equity – a consulting group that works with University counseling centers, treatment centers and other facilities offering mental health care - training staff and health care professionals - to make culturally competent mental health care more available and accessible to black, indigent and other people of color.

2

Objectives

1. Lay the groundwork for why and how trauma and attachment insecurity has a life-long impact.
2. Define historical and intergenerational trauma vs. individual trauma.
3. Gain a deeper understanding of historical trauma and its impact in various cultures.
4. Understand the underpinnings, definitions and concepts of culturally competent care.

3

Trauma

- Experiences of extreme adversity can lead to feelings of being “transformed” by these experiences
 - “I’m not the same person I used to be.”
- Many biological systems are impacted by stress exposure and PTSD. Long term changes have been observed in:
 - Brain neurocircuitry
 - Hypothalamic- pituitary- adrenal axis
 - Sympathetic nervous system
 - Immune system
- Chronic / long term stress can cause long-lasting change
 - “I don’t live in the past, the past lives in me.”

4



The brain has plasticity but this is most available in younger ages

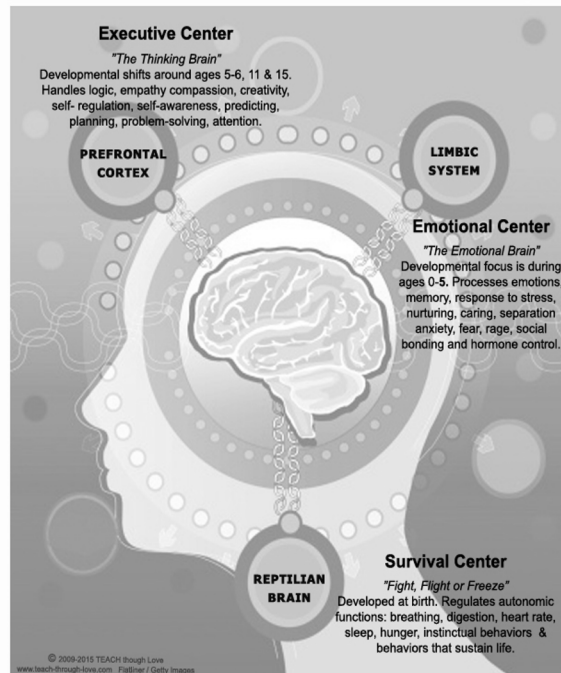
Neurodevelopment involves billions of interactions across multiple domains: multiple micro (synapse), macro domains (maternal-child interactions). These is what results in the dynamic expression of our genetic potential and the organization of nerve cells and synapses that make up the human brain. Maltreatment disrupts this process. Trauma, neglect and other experiences of maltreatment (prenatal exposure to drugs or alcohol) or impaired early bonding all influence the human brain.

Bruce Perry 2009

5

Brain Development

- Brain development is bottom up
- The organization of higher brain depends on input from the lower brain
- Dopamine, Norepinephrine and serotonin "over all"



6

- Experience molds the developing brain
- ACE's disrupt neurodevelopment which leads to compromised functioning
 - Perry BD 2002



7

Trauma and the Brain

- ".....the impact of trauma is upon the survival or animal part of the brain. That means that our automatic danger signals are disturbed, and we become hyper- or hypo-active: aroused or numbed out. We become like frightened animals. We cannot reason ourselves out of being frightened or upset.

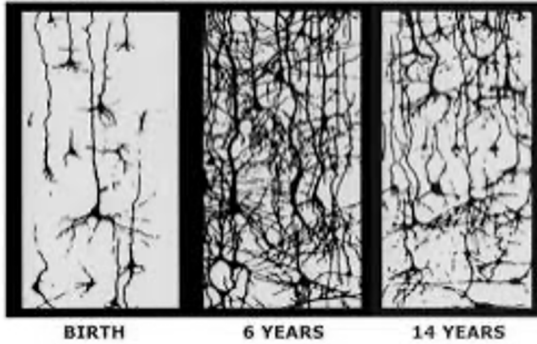
Of course, talking can be very helpful in acknowledging the reality about what's happened and how it's affected you, but talking about it doesn't put it behind you because it doesn't go deep enough into the survival brain."

- Van der Kolk
<https://www.psychotherapy.net/interview/bessel-van-der-kolk-trauma>

8

CORE CONCEPTS IN THE SCIENCE OF EARLY CHILDHOOD DEVELOPMENT

Experience Shapes Brain Architecture by Over-Production of Connections Followed by Pruning



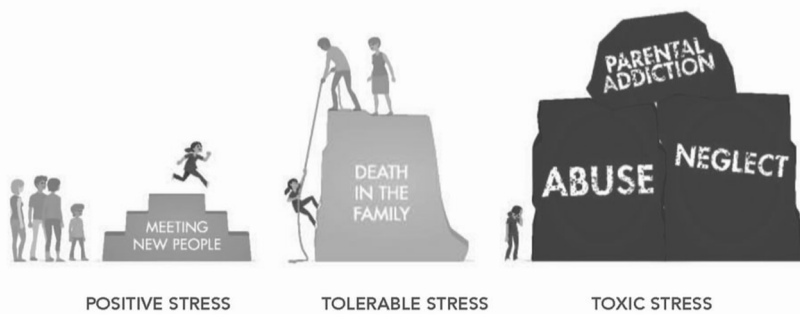
Brains and skills are built over time

- Experience shapes brain architecture
- Connections between neurons increase over time (not number)
- The connections that get used a lot strengthen & stay in place
- Connections that are not used frequently fade / are pruned

9

TOXIC STRESS

A force that disrupts brain architecture



10



When there is a threat to a child that is prolonged and repetitive

The brain undergoes "use-dependent" changes

This affects norepinephrine



Changes the brain's response to stress

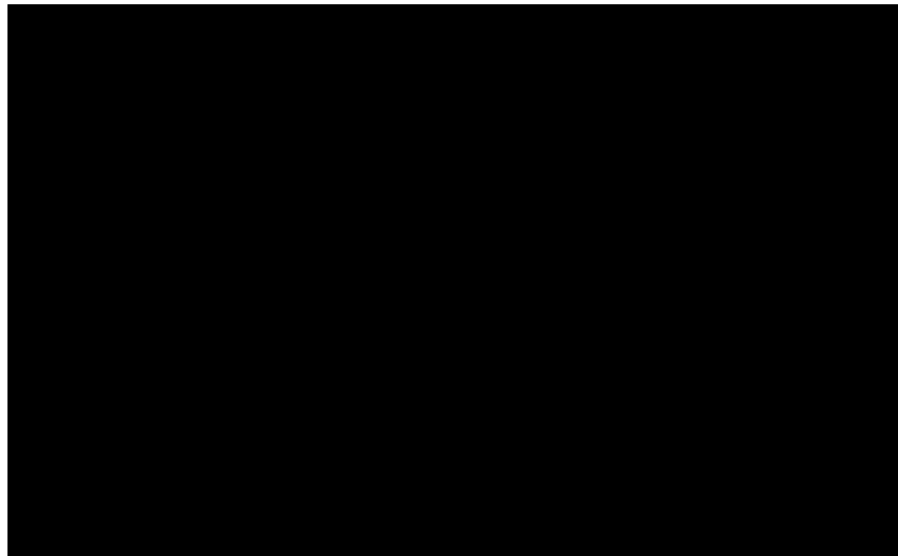


Brain will reset acting as if it is under constant and present threat

(Perry & Pollard, 1998; Hambrick et al. 2019).

11

**TOXIC
STRESS**



12

Perry BD, 2009

Childhood Neglect – a different problem

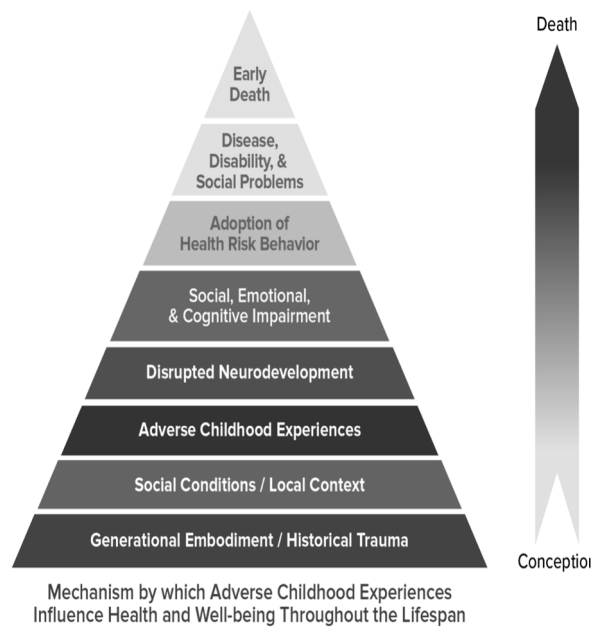


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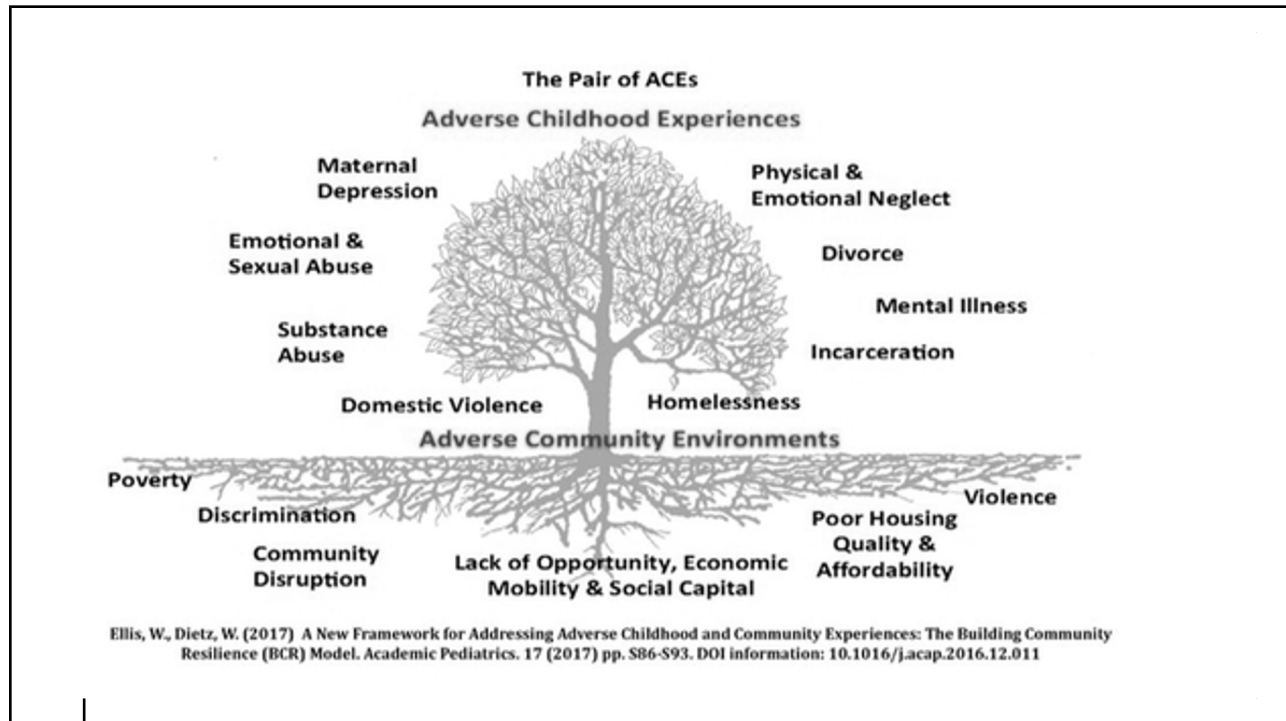
Trauma

- Addiction has its' roots in childhood trauma
- *" Trauma is defined as the **loss of some essential part of yourself**, like a sense of peace, vitality or presence. (or safety or trust)"*

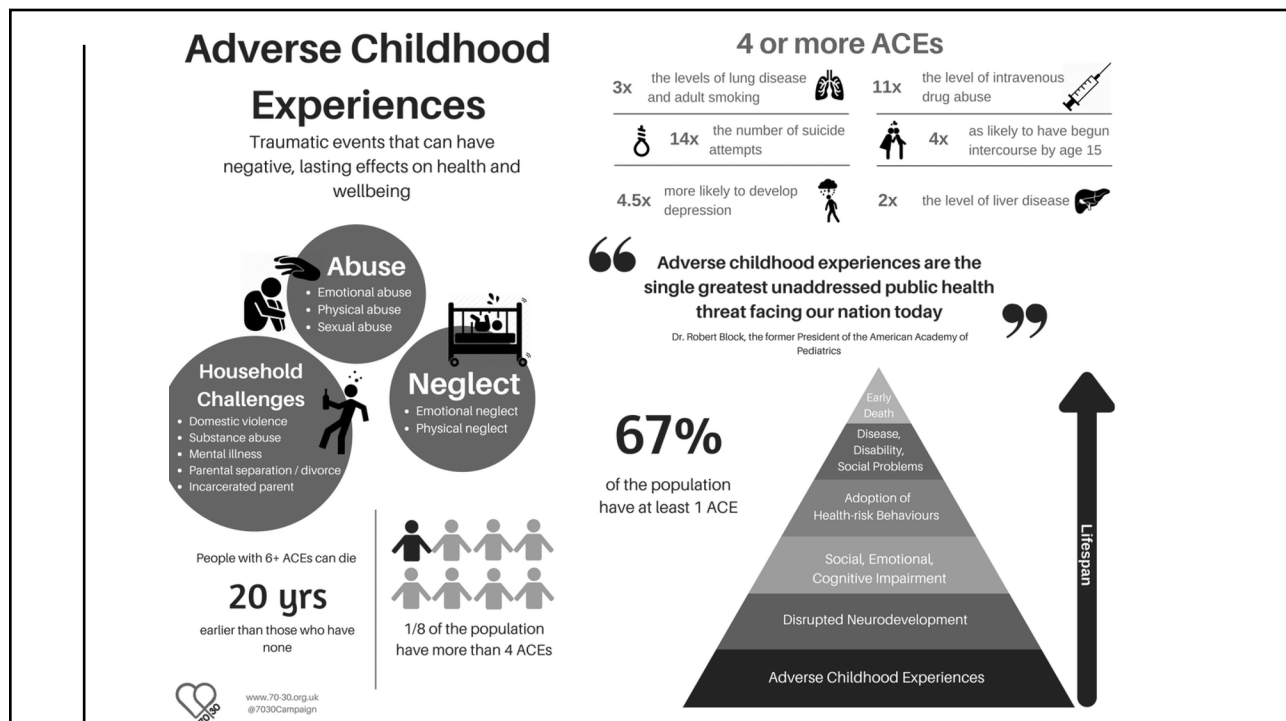
• Gabor Mate'



14

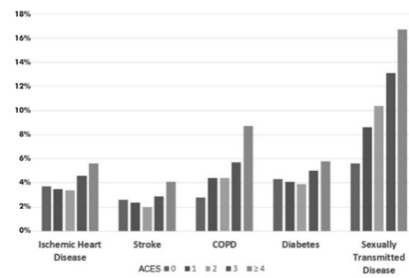


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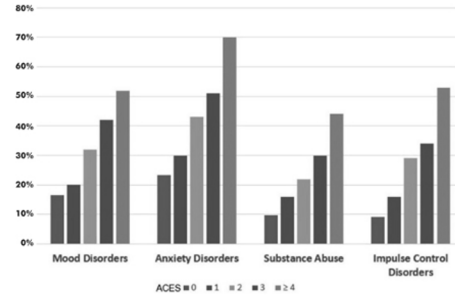
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Figure 2 Cumulative ACEs and Chronic Disease



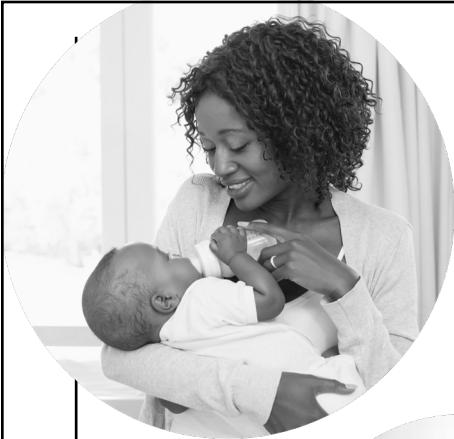
Figures reprinted from Putnam, Harris, Lieberman, Putnam, & Amaya-Jackson, 2015

Figure 1 Cumulative ACEs and Mental Health



ACEs and Physical and Mental Health

17



Attachment and the Brain

- Early social environment directly impacts the limbic system, responsible for learning, memory and coping with stress
- Attachment insecurity mediates the relationship between childhood trauma and eating disorder and addiction psychopathology
 - (Tasca, et al., 2013)
- Increased sensitivity to media images → drive to be thin
- Mediated by emotional dysregulation – “I feel, therefore I eat.”

18

Attachment and Mental Health

- Attachment insecurity is a key feature of:
 - Personality disorders
 - Depression
 - Anxiety
 - Obsessive-compulsive disorder
 - Suicidal tendencies
 - Eating Disorders
 - PTSD
 - Addictions

19

For an adult, experiences may alter behavior; but for a child, experiences provide the organizing framework of the brain

20

Intergenerational trauma

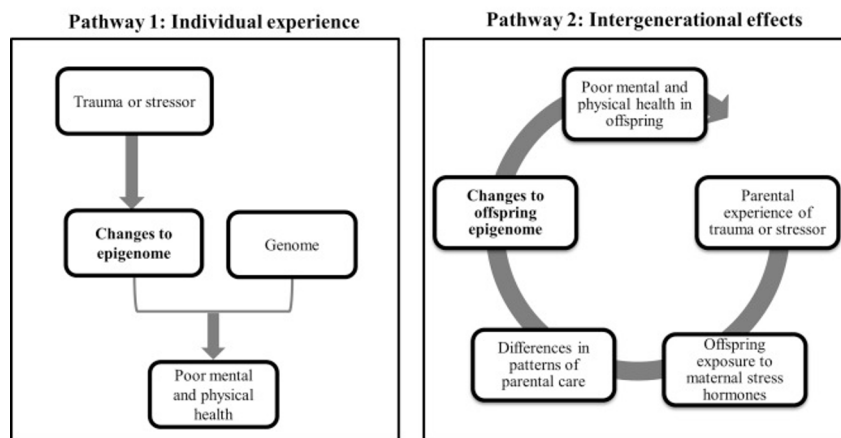
“....a childhood history of maltreatment increases the odds of maltreating offspring by a factor of 1.3 to 5.3 depending on the sample and the severity of the parent’s abuse history.”

- CDC Inter-gen.Trauma, Journal of Adolescent Health 53 (2013) S1eS3

21

Historical Trauma

Biological Pathways for Historical Trauma to Affect Health



22

Sources of Intergenerational Trauma

- Domestic violence
- Refugees
- **Immigrants**
- Survivors of Genocide
- Sexual abuse → feelings of mistrust, isolation and loneliness
- Slavery → when faced with racism-motivated violence, microaggressions or outward racism, react as if faced with the original trauma
- Natural disasters (Hurricane Katrina) → increase in interpersonal violence with higher mortality rates
- Japanese Internment
- Holocaust
- ACEs

23

Definitions

- Transgenerational trauma, or intergenerational trauma is a psychological term which asserts that trauma can be transferred in between generations. intergenerational trauma refers to the specific experience of trauma across familial generations, but does not necessarily imply a shared group trauma
- Historical trauma is multigenerational trauma experienced by a specific cultural, racial or ethnic group. It is related to major events that oppressed a particular group of people because of their status as oppressed, such as slavery, the Holocaust, forced migration, and the violent colonization of Native Americans.
- Instances of Transgenerational trauma where the **trauma** is a shared experience amongst a group of people **and** their role in society, are often referred to as historical trauma.

24

Intergenerational Trauma

- The intergenerational effects of trauma occur via a variety of mechanisms including the impact on the attachment relationship with caregivers; the impact on parenting and family functioning; the association with parental physical and mental illness; disconnection and alienation from extended family, culture and society.
- These effects are exacerbated by exposure to **continuing** high levels of stress and trauma including multiple bereavements and other losses, the process of vicarious traumatization where children witness the on-going effect of the original trauma, which a parent or other family member has experienced.
- Even where children are protected from the traumatic stories of their ancestors, the effects of past traumas still impact on children in the form of ill health, family dysfunction, community violence, psychological morbidity and early mortality.
 - Zubrick, et al. 2005

25

Intergenerational Trauma

- Union Army Soldier study
 - Maternal nutrition
- Animal studies
- The Hunger Winter
- Racial Discrimination
- Methylation in offspring of Holocaust survivors
 - The Atlantic. <https://www.theatlantic.com/health/archive/2018/10/trauma-inherited-generations/573055/>

26

Intergenerational Trauma

- Children of those with Alcohol Use Disorder
- Children of veterans with PTSD
 - Aust. N.Z. J. Psychiatry 2001;35:345-51
- Children of Vietnam veterans
 - J. Trauma Stress 2002;15:351-7

27



Historical Trauma

- Historical trauma consists of 3 factors:
 - Is widespread
 - The traumatic events result in collective suffering
 - Those inflicting the trauma do so with malicious intent
 - O'Neill 2018
- Historical trauma requires subjugation:
 - Overwhelming physical and psychological violence
 - Segregation and/or displacement
 - Economic deprivation
 - Cultural dispossession

28

Historical Trauma

- Populations historically subjected to long-term, mass trauma exhibit a higher **prevalence of disease even several generations after the original trauma occurred.**
 - Disease is from both physical and psychological stressors
 - There are political and economic determinants of health and disease – unjust power relationships and class inequity
 - There is a multilevel dynamic and interdependence of present and past life course factors that cause disease.

29

Historical Trauma

- Are offspring of trauma survivors also affected biologically and psychologically by trauma in their parents?
 - Social learning model – may not be adequate to explain clinical observations in children
 - Epigenetics –
 - How experiences from a previous generation can affect who we are
 - Epigenetic changes may be passed down from parent to child, directly affecting genes for obesity, diabetes, anxiety and depression
 - Could explain offspring's adaptation to parental experience

30

Historical Trauma

- Persistent trauma among **Holocaust Survivors** – 1960's
- Research on **American Indians and Native Alaskans**
 - Definition: "the cumulative and collective psychological and emotional injury sustained over a lifetime and across generations resulting from massive group trauma experiences." (Brave Heart)
- Legacy of slavery in African-Americans
- Other 1st world peoples (Aborigines)
- Japanese internment camps

31

Offspring of Holocaust Survivors

- First paper about intergenerational effects contained clinical anecdotal reports that Holocaust offspring seemed so affected by the trauma of the Holocaust that it was as if they themselves had been exposed.
 - Rakoff VM. Long term effects of the concentration camp experience. Viewpoints 1966; 1:17–22.

32

Offspring of Holocaust Survivors (OHS)

- Two comprehensive reviews reported that in non- clinical populations, offspring of Holocaust survivors did not demonstrate higher rates of psychopathology.
 - Studies did not take into account parental symptoms
 - When parental PTSD was taken into account, Holocaust offspring demonstrated higher rates of PTSD in association with maternal PTSD, and higher rates of mood and anxiety disorders in association with PTSD in either parent
 - Highlights the importance of persistent and disabling effects of the trauma exposure in a subset of survivors and its impact on offspring
 - Period of development in which survivors were exposed to trauma also has relevance (child, adolescence, etc.) and interval between exposure and conception

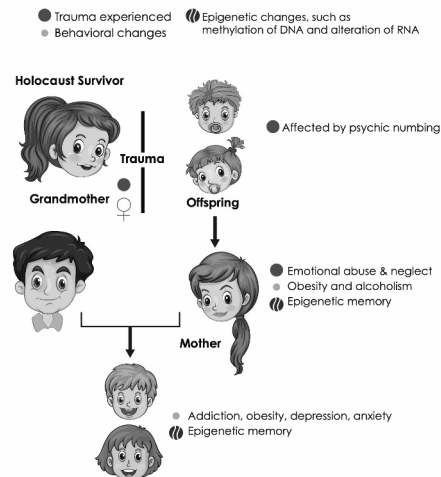
33

Studies on offspring of Holocaust survivors (OHS)

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • distrust of the world • impaired parental function • chronic sorrow • inability to communicate feelings • an ever-present fear of danger • pressure for educational achievement • lack of entitlement | <ul style="list-style-type: none"> • unclear boundaries • overprotectiveness within a narcissist family system • higher levels of childhood trauma • increased vulnerability to PTSD and other psychiatric disorders • separation anxiety • Neuroendocrine abnormalities <ul style="list-style-type: none"> • Braga et al., 2012; Yehuda 2018 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

34

INTERGENERATIONAL AND HISTORICAL TRAUMA



35

Japanese Internment



A Royal Canadian Navy officer questions Japanese-Canadian fishermen while confiscating their boat.

- Beginning in early 1942, the **Canadian** government detained and dispossessed more than 90 per cent of **Japanese Canadians**, some 21,000 people, living in British Columbia.
- Job and property losses
- Forced repatriation to Japan
- 1988 – Compensation package given: Japanese Canadian Redress Fdn set up

36

Japanese Internment

- Long term health consequences
 - Psychological anguish
 - Increased cardiovascular disease – Former internees had a 2.1 X greater risk of cardiovascular disease, CV mortality and premature death vs. a non-interned counterpart.
- Offspring carry the legacy of their parent's internment
 - Sadness, Anger about the injustice
 - Low self-esteem
 - Pressure to assimilate
 - An accelerated loss of the Japanese culture and language
 - Experiencing the unexpressed pain of their parents



37

Historical Trauma – Native American

- “The cumulative emotional and psychological wounding over the lifespan and across generations, emanating from massive group trauma experience.”
 - Maria Yellow Horse Brave Heart

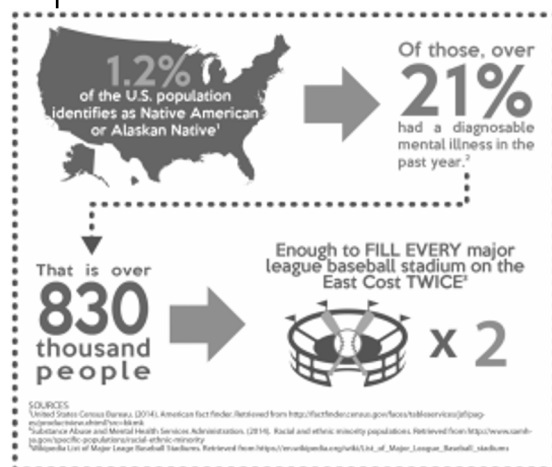
38

Native American / Alaska Native

- 566 different tribal nations, numerous different cultures and languages, and numerous different experiences of historical loss
- Lowest income, least education, highest poverty level, and lowest life expectancy of any population
- Native adults are at greater risk of experiencing psychological distress, and more likely to have poorer overall physical and mental health
- Highest suicide rate
 - Suicide rate has increased 139% in women and 71% for men (vs. 33% for US) since 1999
 - CDC

39

Native American / Alaska Native



- American Indian and Alaska Natives also experience PTSD more than twice as often as the general population

• SAMSHA

- American Indian and Alaska Native women experience higher levels of violence than other U.S. women. Nearly 84 percent experience violence in their lifetime

40

Native American / Alaska Native

Six Stages

- 1st Contact: life shock, genocide, no time for grief, a Colonization Period in which the introduction of disease and alcohol occurred, and traumatic events such as Wounded Knee Massacre,
- 2. Economic competition, which resulted in loss from spiritual and tangible dimensions
- 3. The occurrence of Invasion/War Period, which involved extermination and refugee symptoms
- 4. Subjugation/Reservation Period: confinement and translocation occur, a relationship forced dependency on oppressor is formed, and a lack of security occur

41

Native American /Alaska Native

5. Boarding School Period, in which the family system is destroyed, beatings, rape, and prohibition of Native language and religion ensue; Lasting Effect: ill-prepared for parenting, identity confusion

6. Forced Relocation and Termination Period: transfer to urban areas, prohibition of religious freedom, racism and being viewed as second class; loss of governmental system and community. and a three-pronged intervention mode: education, sharing the effects of trauma and grief resolution through collective mourning and healing

Braveheart

42

Indigenous people - Canada

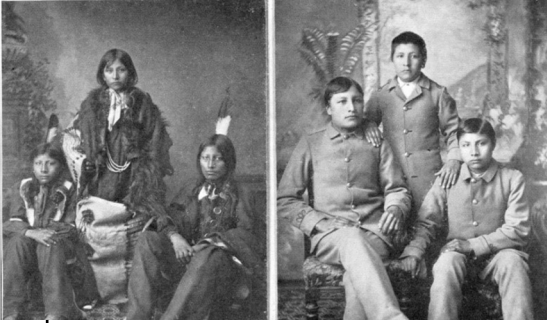
- Trauma is very common among people in Canada, and the Indigenous people in Canada (First Nations, Metis and the Inuit) have nearly 4 times the risk of severe trauma than the non-Indigenous population (Haskell & Randall, 2009).
- Indigenous women are six times more likely to be murdered than non-Indigenous women in Canada
- Colonialism is responsible for much of the trauma experienced by Indigenous people all over the world, and its effects continue to this day (Linklater, 2014; Haskell & Randell, 2009).

43

Effects of Intergenerational / Historical trauma - Canada

- Ongoing social and economic marginalization
- Acculturative stress → poorer mental health
- Feelings of marginality and alienation
- Heightened psychosomatic symptoms
- Identity confusion
 - (Berry, et al. 1987. p. 492)
- Residential schools led to the fracturing of family relationships and community cohesion (this experience extends through 4-5 generations for most First Nation peoples in Canada)

44



Historical Trauma in Native Populations

- A breakdown of traditional Native family values
- Alcohol and other substance abuse
- Depression, anxiety, and suicidality,
- Child abuse and neglect and domestic violence,
- Posttraumatic stress disorder,
- General loss of meaning and sense of hope,
- Internalized oppression, self-hatred

45

Trauma in African Americans

History, despite its wrenching pain,
Cannot be unlived, but if faced
With courage, need not be lived again.

MAYA ANGELOU, ON THE PULSE OF MORNING

46

Historical Trauma and African Americans

- *Historical Trauma is a Macro-Stressor – AA have sustained traumatic psychological and emotional injury as a direct result of slavery, perpetuated by social & institutional inequality, racism and oppression.*

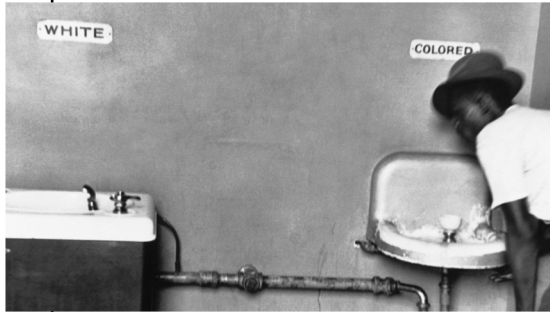
Sotero M, 2006

47

A history of African American People

- Chattel Slavery → “the negro is not equal to the white man” and “slavery subordination to the superior race is his natural and moral condition.”
 - Vice President of Confederate states prior to Civil War
- 1863 - Emancipation Proclamation
 - Did not apply to over 400, 000 slaves in Tennessee, Delaware, Kentucky, Missouri, and Maryland that did not succeed from the Union
 - In most Southern states resistance to Emancipation continued and enforcement did not exist
- 1865 – Ratification of 13th Amendment

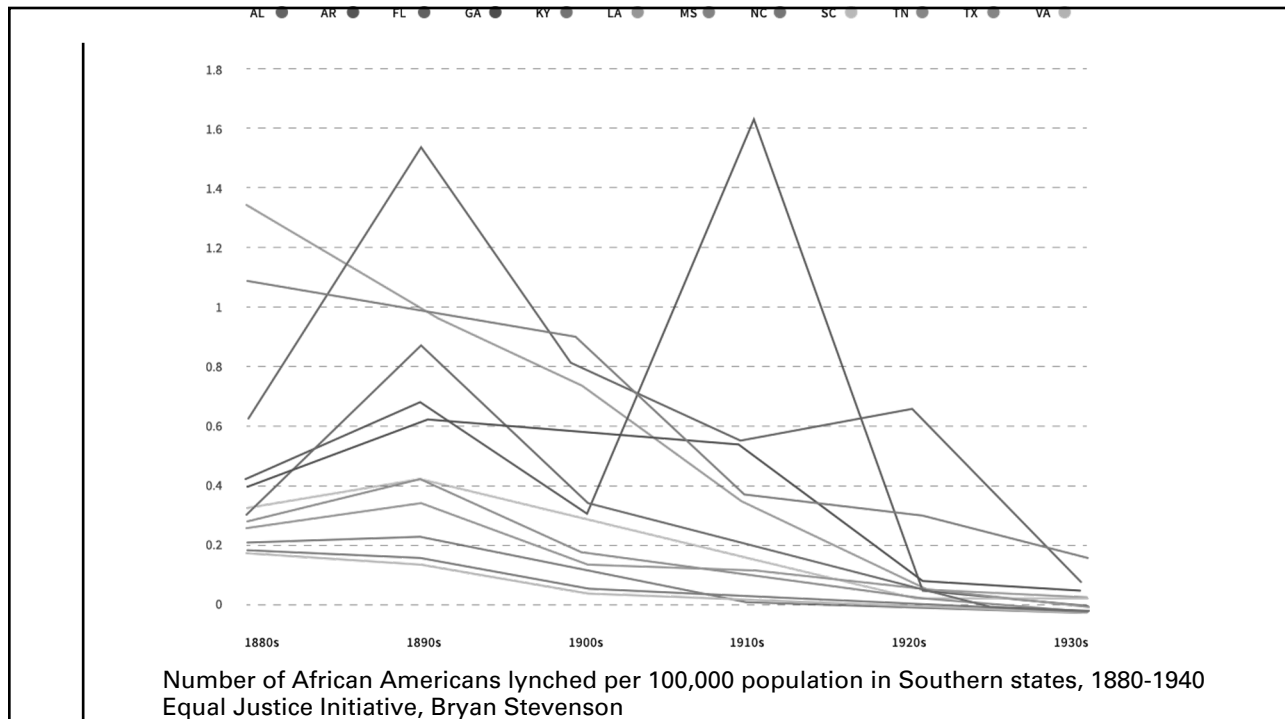
48



History

- 1868-1871 – White backlash – Ku Klux Klan
 - “They are to be returned to a condition of serfdom,” predicted Governor Ames of Mississippi. “An era of second slavery.”
- 1890 - Jim Crow

49



50

The Legacy of Slavery



- The Civil Rights Movement struck down legal barriers, but failed to dismantle racial barriers. It ended the "violence of segregation," but not the "violence of poverty"
 - (Litwack, LF. 2009. How Free is Free? The Long Death of Jim Crow. Cambridge and London: Harvard University Press))

51

Systemic Racism - Canada

- Black Torontonians 20 times more likely to be shot by police than the city's white residents.
- Black people in Toronto account for 25 per cent of police-involved shootings when they make up only slightly more than 8.8 per cent of the population
- Between 1628 and 1800s, 3000 people of African ancestry who were enslaved in the US were brought to Canada and forced to live in slavery in Canada
- Slavery Abolition Act became law in Canada in 1834, just 27 years before the American Civil War

52



Police shootings of Black men

- Chief Alan Adam
- D'Andre Campbell
- Nicholas gibbs
- Orlando Brown
- Jermaine Carby
- Andrew Ioku
- Abdirahman Abdi

53

Canada – Systemic Racism

- From 1886 to 1996, 150,000 First Nations, Inuit and Métis children were taken from their families and forced to attend residential schools. The trauma of residential schools and the '60s Scoop' is still being felt today.
- From 1881 to 1884, 17,000 Chinese labourers came to work on the Canadian Pacific Railway. Many died during the construction. Upon completion, Canada introduced a "head tax" that applied only to Chinese immigrants. After collecting \$23 million through the head tax between 1885 and 1923, Canada closed the door to Chinese immigrants until 1947.
- In 1939, Canada turned away the MS St. Louis, an ocean liner carrying 907 Jewish refugees. Forced back to Europe, 254 of the passengers later died in the Holocaust.

54

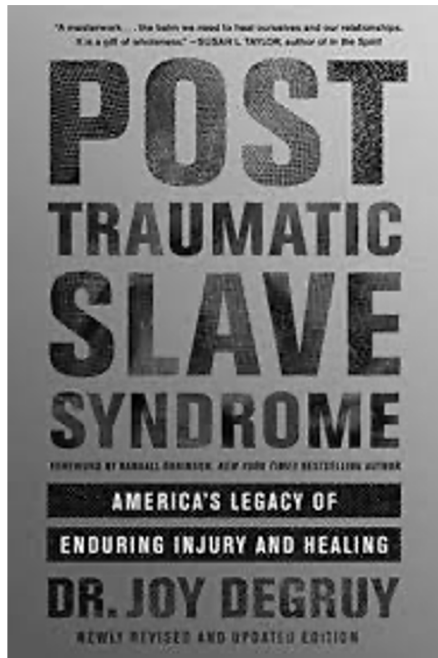
- During the Second World War, the Canadian government forced 20,000 Japanese people — 75 per cent of them Canadian citizens — into internment camps.
- After the war, Canada continued with a range of policies that made it difficult, if not impossible, for people of colour to immigrate from Asia, Africa, Latin America and the Caribbean. It wasn't until 1976 that a point system was introduced, which allowed for a fairer immigration policy.
- Even so, the last segregated school in Canada, in Guysborough County, N.S., did not close until 1983.
- Amy Cooper - is a Canadian woman. From her since-deleted social media accounts, Cooper grew up in Canada, graduating from the University of Waterloo in 2003.

55

Post-traumatic Slave Syndrome (PTSS)

- P.T.S.S. is a theory that explains the etiology of many of the adaptive survival behaviors in African American communities throughout the United States and the Diaspora. It is a condition that exists as a consequence of multigenerational oppression of Africans and their descendants resulting from centuries of chattel slavery. A form of slavery which was predicated on the belief that African Americans were inherently/genetically inferior to whites. This was then followed by institutionalized racism which continues to perpetuate injury.

56



Symptoms of Historical Trauma

- Suicide
- Depression
- Anxiety
- Substance use
- Loss of concentration
- Fear and distrust
- Violence
- Shame
- Anger
- Loss of sleep
- Isolation
- Discomfort around people

57

Key Patterns of Behavior in PTSS

Vacant Esteem

Marked Propensity for Anger and Violence

Racist Socialization and (internalized racism)

58



59

Racial Oppression after Slavery

- Racial terror lynchings
 - 4084 racial terror lynchings in twelve Southern states between the end of Reconstruction in 1877 and 1950, which is at least 800 more lynchings in these states than previously reported.
 - Played a key role in the forced migration of millions of black Americans out of the South. Thousands of people fled to the North and West out of fear of being lynched.
- Mississippi, Georgia, and Louisiana had the highest number of lynchings

60

- Through a criminal tribunal, truth commission, or reparations project, suffering must be engaged, heard, recognized, and remembered before a society can recover from mass violence.



61

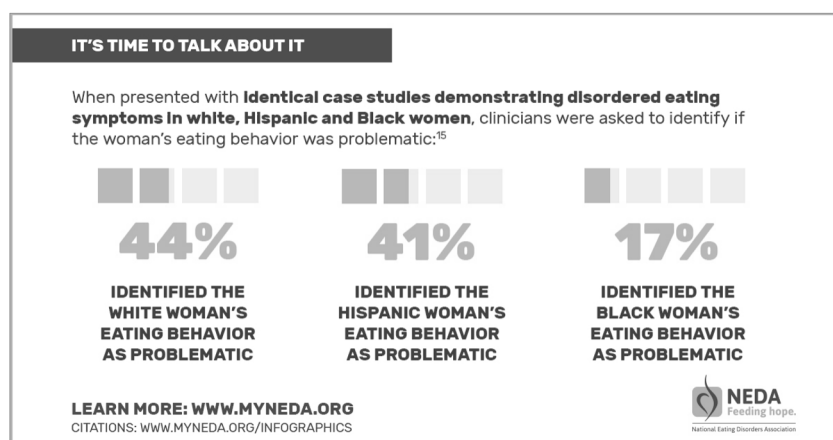
HISTORICAL AND INTERGENERATIONAL TRAUMA AND BIPOC WITH EATING DISORDERS / ADDICTIONS

62

Trauma

- 9.1% of African Americans have been diagnosed with PTSD (vs. 6.8% of Whites)
 - Felitti and Anda's (2010)
- In a study that included 58% A-A children:
 - **67.2% had one or more ACE** (compared to 52% in the Felitti study)
 - >4 ACEs was associated with increased obesity and learning / behavior issues
 - Burke et al. 2011
- In a study that included 58% A-A children:
 - **67.2% had one or more ACE** (compared to 52% in the Felitti study)
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63



64

Body Image

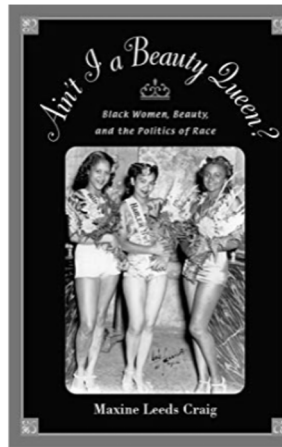
- **Skin tone** and **Hair** noted to be of great importance to Black women's body image and a source of microaggressions
- Curvy/Thick/Hypersexualization
 - Germaine et al., 2014
- Black college females have more favorable body image perceptions than whites and also held body image ideals that were less thin and were closer to their current perceived size than whites
 - Rucker and Cash, 1991

65

Racism and Black Women's Bodies

- **Bias in BMI for Black women:** *"While Black women have higher BMIs than white women, they also have lower mortality rates at a given BMI."* (Paul Campos author of *The Obesity Myth: Why American's Obsession with Weight is Hazardous to Your Health.*)
- Association between fatness and black femininity dates from the late 18th century
- Fat phobia as a way of instituting social distinctions.

66



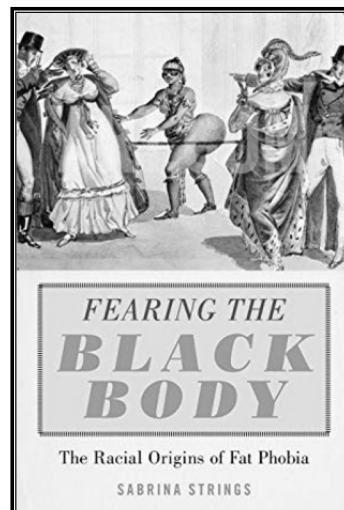
Racism, continued

- Other concerns such as slavery / emancipation, voting rights were focus of black women until mid 20th C.
- *Ain't I a Beauty Queen? Black Women, Beauty and the Politics of Race (2002)*
- Beauty pageants for A-A women to instill pride in the race / "Black is Beautiful" movement

67

Racism, cont'd.

- Black women seen as "savage" or "barbarous" in art, philosophy and science and "diseased" in medicine



68

Intergenerational Trauma

- The core of intergenerational or historical trauma is the ripple effect of victimization where “the systemic effect of personal trauma often extends beyond the actual victim and can have a profound effect on the lives of significant others, particularly spouses and offspring.”
 - (Morrissette and Naden 1998, p. 45)

69

Ongoing racism and oppression / Re-traumatization



TECH \ POLITICS \ CORONAVIRUS \

White supremacists are targeting Jewish groups on Zoom

ANTI-SEMITISM IN THE US | EXTREMISM, TERRORISM & BIGOTRY

One Year After the Tree of Life Attack, American Jews Face Significant Threats

October 18, 2019



Anti-Hispanic violence that pierced El Paso has been part of Texas' history

“This violence against Latinos and immigrants has a long history since the founding of the country,” says a Texas state senator.

70



71

Intergenerational and Historical Trauma and Health

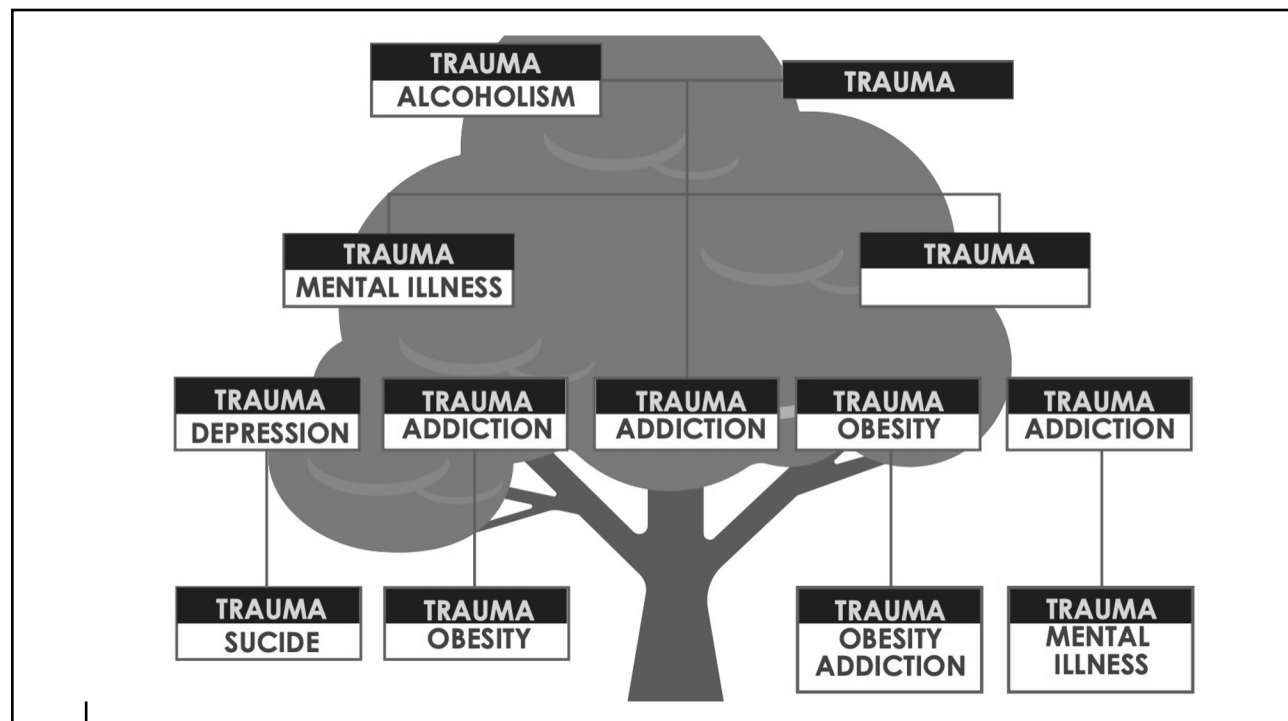
- Canadian First Nations people with family history of forced boarding school attendance and removal from family and community is associated with:
 - Increased exposure to sexual violence and involvement with child welfare systems
 - Injection drug use
 - Current depressive symptoms
 - Increased exposure to trauma
 - History of abuse and with suicidal thoughts and attempts
 - Mohatt, et al. 2014

72

Intergenerational and Historical Trauma and Health

- Canadian First Nations people with family history of forced boarding school attendance and removal from family and community is associated with:
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 - Mohatt, et al. 2014

73



74

Intergenerational and Historical Trauma and Health

- In a sample of North American Plains Indians – the frequency of thinking about historical trauma affects psychological health.
- Native Americans – frequency of losses with historical trauma is associated with emotional distress, which mediates the effect of perceived discrimination on alcohol abuse

75

Intergenerational and Historical Trauma and Health

- Children of Holocaust survivors from Israel to Canada are more vulnerable to PTSD.
 - 2nd and 3rd generation OHS – have remarkable resilience and heightened PTSD symptoms
 - Insecure / ambivalent attachment
 - Predisposition to anxiety-related disorders in later generations
- African Americans who had higher perceived discrimination also had:
 - higher rates than others of uncontrollable hyperarousal, feelings of alienation, worries about future negative events and perceiving others as dangerous

76

The Narrative

- A narrative conceptualization does not deny the veracity of past traumatic events, but rather redirects one's focus on how those events are represented and linked to health outcomes today. In this way, historical trauma consists of public narratives that link traumatic events in the historic past to contemporary local contexts so that the trauma becomes part of the contemporary cultural narrative.
- The ways in which people and cultures represent and respond to past traumas become more central than an examination of the facts when we consider historical trauma as narrative.

• Mohatt, 2014

77

Canada

2015 – The Truth and Reconciliation Commission (a component of the Indian Residential Schools Settlement Agreement) recommends:

1. A call for all levels of government to acknowledge that the current state of Aboriginal Health in Canada as a direct result of previous government policies.
 1. Need to include the mind/body effects of early adverse childhood environments

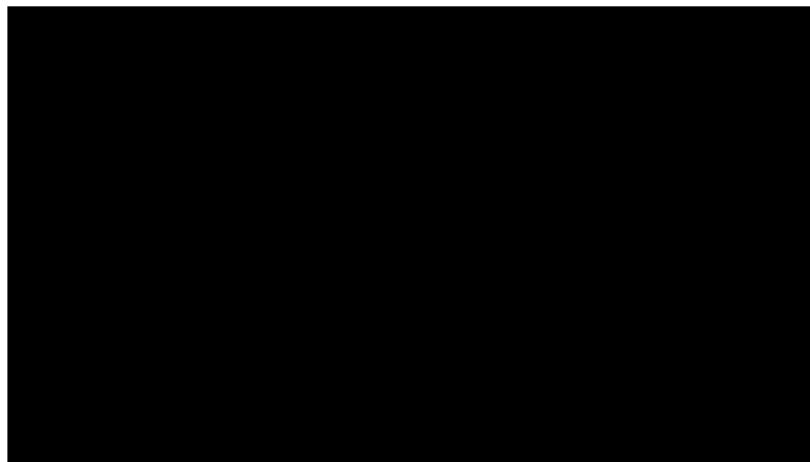
78

Healing

- Aboriginal people who lost parental and cultural role models through forcible attendance at residential schools have had to invent their own methods and strategies to negotiate the two worlds and cultures.
- Family focused strategies may be triggering to the helpers due to IG trauma
- Aboriginal people who lost parental and cultural role models through forcible attendance at residential schools have had to invent their own methods and strategies to negotiate the two worlds and cultures. (Braveheart)

79

Healing



80

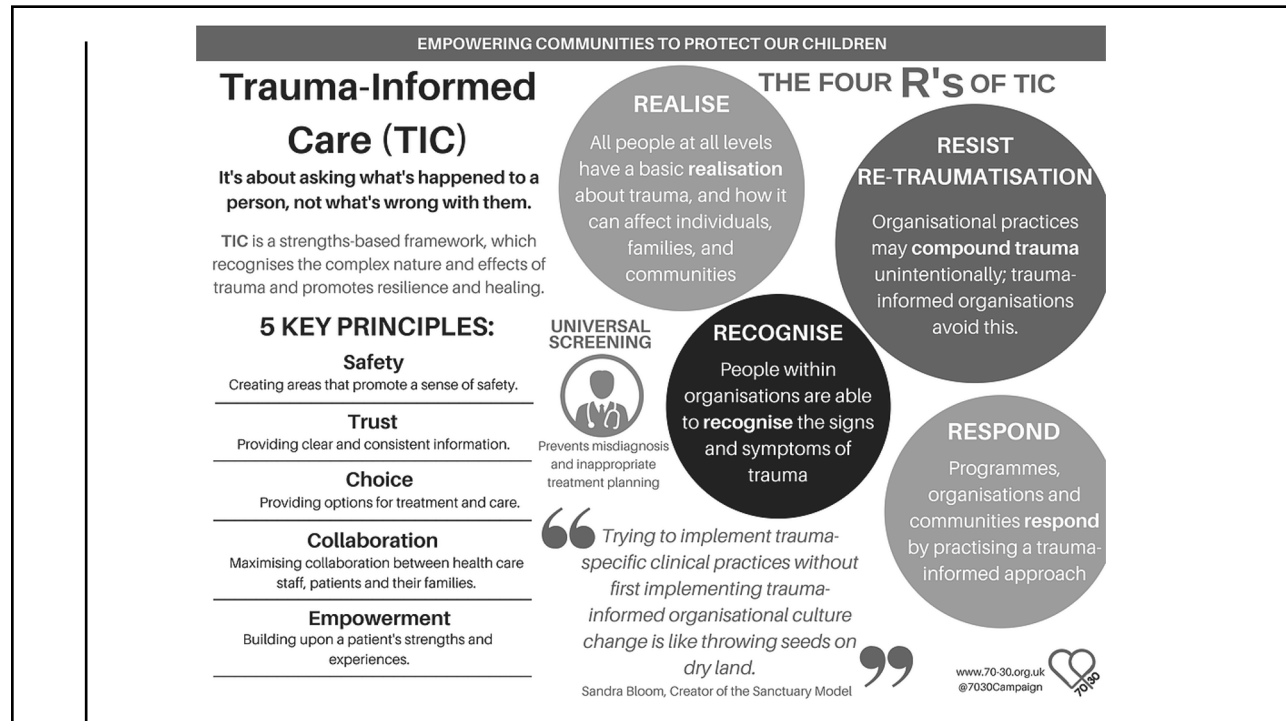
Healing from Trauma – ADAPT Model

- Healing the community contributes substantially to healing the individual....
 - Silove et al. 2005
- Communities with a strong sense of cultural continuity have significantly lower rates of youth suicide.
 - Chandler and Lalonde 2009

81

<i>Pillar</i>	<i>Threat: Past Present and Future</i>	<i>Normative Psychological Response</i>	<i>Normative Adaptive Response</i>	<i>Negative Outcomes (if Adaptive Responses Fail)</i>	5 Pillars of society And individual and Response to Trauma and Mass violence
Security	Ongoing violence, poverty, lack of food, absence of medical care	Fear, anxiety, hyper-vigilance, insecurity	Security seeking, protectiveness, vigilance	Anxiety, post-traumatic stress	
Attachment and Bonds	Forced separation, losses, disappearances	Grief, separation anxiety	Parental protective-ness, attention to restoring families and networks	Complicated grief, pathological separation anxiety, depression	
Justice and Human Rights	Discrimination, racism, humiliation, degradation, rejection, incarceration, dehumanization	Suspicion, lack of trust in authorities, anger	Sensitisation to justice, universalism, human rights promotion and demanding of justice	Pathological anger and violence, loss of trust	
Roles and Identity	Dispossession and deprivation, genocide, denial/inadequate rights to: work, residency, and self-support	Aimlessness, reduced awareness, loss of sense of belonging, reduced efficacy	Role confusion, recreation of new or hybrid roles and identities	Loss of direction, giving up, persisting aimlessness or persistent inactivity	
Meaning and Coherence	Destruction of places of worship, banning of religious/spiritual activities, suppression of spiritual, political and cultural aspirations and practices	Loss of coherence, a feeling of disorientation and alienation from society Cultural disintegration	Rediscovery or regeneration of cultural, and religion/spirit, pursuit of social and political causes	Isolation, discontinuity, fragmentation, loss of coherence	

82



83

Therapy must change the brain

- Childhood maltreatment → disorganized or poorly regulated networks (monoamine neurotransmitters) in the lower brain
- Current treatment targets the limbic or cortical (cognitive and relational interactions)
- Changing the brain requires repetitions to modify the neural pathways in the brain

84

Building Resilience

1. Emotional regulation
2. Creating a narrative story
3. Personal trauma work
4. Open communication
5. Identification of survival skills
6. A sense of community
7. The parent-child relationship

85

CONNECTING THE DOTS

- PATHWAY TO ADDICTION and ED
 - ACEs
 - Overwhelmed emotionally / hot wire / a dam
 - Response -
 - Self medicate with substances or food
 - Explode → anger, DV
 - Shut down
 - Act out
 - Core beliefs → I'm not worthy, I'm weak, I'm _____
 - Pass on to next generations (EX. ACOA)
 - Relationship issues, social problems, not reaching potential
 - **THE PATTERN CONTINUES EVEN THOUGH THE ORIGIN IS FORGOTTEN OR DEEPLY BURIED**

86

Epigenetics - Cautions

- Epigenetic marks must be explained as potentially enduring but also malleable, rather than as a permanent alteration to offspring DNA.
- Even enduring marks exist within complex biological systems that have their own influences, calibration systems, and adaptive potential.
- Epigenetic marks are as likely to foster resilience as vulnerability.

• Yehuda 2018

87

**THE HEARTBEAT OF RACISM ITSELF
IS DENIAL AND THE SOUND OF THAT
HEARTBEAT IS "I'M NOT RACIST."**

Ibram X. Kendi

88

CULTURALLY COMPETENT TREATMENT

89

Definition

- CC is having an understanding and appreciation for cultural differences and similarities within, among and between culturally diverse patient populations.
 - The US Department of Health and Human Services
- Culturally competent care:
 - Implies an understanding of the client's ethnicity, belief system and background.
 - It is also important that therapists / psychologists are sensitive to their own belief systems and how their personal beliefs and biases may affect the perceptions of their client, the client's issues and the therapeutic relationship.

90

Value of Culturally Competent Care

- It allows therapists to accommodate and respect differences in values, attitudes and belief systems into their work with the client, allowing them to respond to a culture that may be different from their own.
- In a broader sense, cultural competence is about diversity and inclusion – understanding differences based on age, beliefs, ethnicity, race, religion, sexual orientation, gender and socioeconomic status in such a way as to provide the most effective therapeutic care for all clients.

91

Psychoanalysis' Refusal to Remember

- "Refusal to remember, denial, disassociation and disavowal are all echoed in the absence of slavery from the trauma literature, and until recently, from psychoanalytic literature. Trauma literature gives attention to the Holocaust, floods, earthquakes, sexual abuse, rape, etc. but not to slavery and racism."
- The Intergenerational Trauma of Slavery and its Aftermath Graff, Gilda The Journal of Psychohistory; Winter 2014; 41, 3; ProQuest Central Essentials pg. 181

92

Culturally Competent Care

- Important because there is a lack of representation of BIPOC in the healing professions
- There are many biases that can impact your ability to serve your patients:
 - Sexual orientation bias
 - Racial bias
 - Size / weight bias
 - Gender bias
 - Religious bias
 - Class bias
- Your clients may experience bias
 - When they are not part of a dominant group
 - Where there is intersectional bias

93

Foundation of Cultural Competence

- Challenging the Standard Bearer White, Middle Class, Heterosexual, and Male To Move Over
 - Therapists of color
 - Feminist therapists
 - LGBTQ+ therapists

94

Disparities in mental healthcare

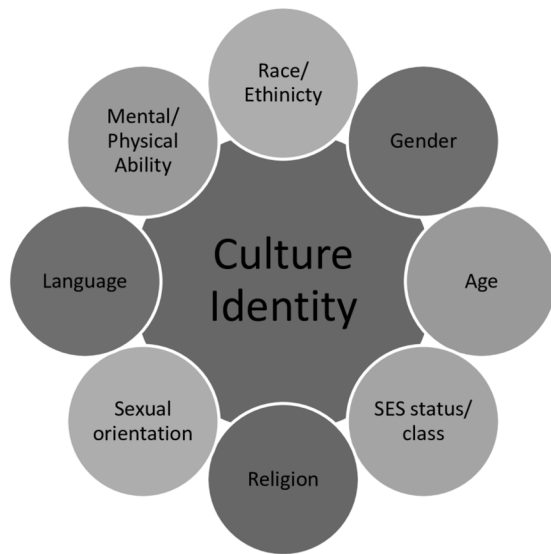
1. Indigenous/Aboriginal populations – most services are located on reservations while the majority of people no longer live on reservations
2. Bilingual populations: The language in which they are evaluated makes a difference to the treatment. LatinX patients are undertreated in comparison to their white peers.
3. African Americans – Have experienced microaggressions from their therapists → decreased satisfaction in treatment
4. LGBTQ+ - over 50% reports being verbally abused or their mental health issues being blamed on their sexual orientation

95

The behavioral health culture beliefs

1. The belief that one's health and well being translates into an ability to achieve their goals
2. Putting a focus on psychological symptoms over and above physical symptoms
3. Psychological symptoms are best explained in biological terms rather than in spiritual terms

96



Cultural identity

- Cultural identity is the identity or feeling of belonging to a group. It is part of a person's self-conception and self-perception and is related to nationality, ethnicity, religion, social class, generation, locality or any kind of social group that has its own distinct culture.

97

Cultural identities



98

Social Identity

- Membership in different social groups; *a social group that controls the value system and rewards in a particular society.*
 - Dominant group – the group with the most power, highest social standing and greatest privilege
 - Nondominant group – group with less power, lower social status and less privilege

99

Social Identity

Social identity	Dominant group	Non-dominant group
Race and ethnicity	European Americans	Everyone else
Religion	Christian	Jews, Muslims, Buddhists, etc.
Age	Young and middle aged adults	Older adults / children
Socio-economic status	Upper and middle class	Lower SES, inner city, rural
Sexual orientation	Heterosexual	LGBTQ+
Language (in US)	English	Spanish, Farsi, Arabic, etc.

100

Priviledge



101

Privilege

1. You are an American citizen
2. You don't have an accent
3. You are able-bodied
4. You have insurance
5. You are not followed when you enter a store
6. It was assumed from a young age you would go to college
7. You are cis-gendered

PRIVILEGE CHECKLIST

102

Privilege



103

BIAS

104

Implicit Bias

- The assumptions, stereotypes, and unintentional actions (positive or negative) we make towards others based on identity labels like race, religion, age, gender, sexual orientation, or ability. Because our implicit associations are stored in our subconscious, we may act on our biases without even realizing it. Often, our implicit biases contradict our values.
- ADAPTED WITH PERMISSION FROM: Anti-Defamation League Education Glossary Terms, 2018

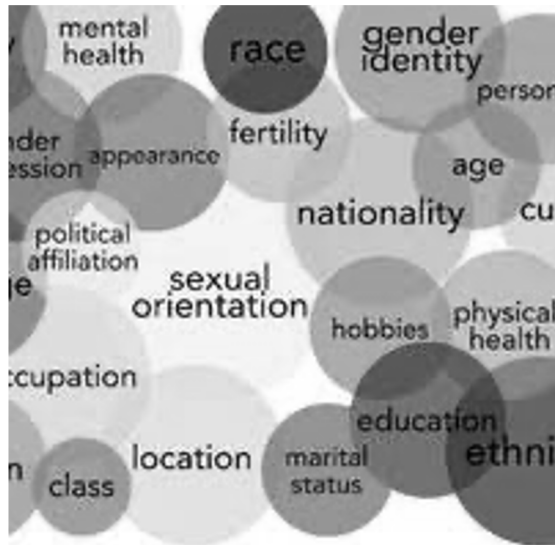
105

Implicit Bias - Examples

- ☐ Have you ever avoided sitting next to someone in public based on how you perceived their race, religion, or ability
- ☐ Have you ever justified using a specific language that may be offensive to some because a friend told you it didn't bother them?
- ☐ Picture your three best friends – do they all look like you?
- ☐ Have you ever specified someone's race when it was not necessarily relevant (for instance, referring to someone as "a black doctor" or "Latina lawyer" or "white cashier")?

☐ LoveHasNoLabels.com

106



Intersectionality

- The multiple social identities (such as race, gender, sexual orientation, socioeconomic status, and disability) that intersect at the individual level to reflect interlocking systems of privilege and oppression (e.g., racism, sexism, heterosexism, and classism) at the societal level.
- **Example:** Black actors, media people, sports stars are respected in their work but often experience racism in their personal lives
- *I shouldn't have to be Dave Chapelle to not get killed during a police stop*
- *You don't want me in your neighborhood*
-

107

Examples of possible bias between client and therapist

- Therapist A has a new client who is a college student who just got a DUI after his mother passed away due to complications of her alcoholism. Therapist A also has a parent with alcoholism from whom she is estranged.
- Therapist A may be biased because of her own personal history.
 - She may see client as potentially difficult to treat because of his alcoholism
 - She may stereotype him without spending time getting to know him

108

Examples of possible bias between client and therapist

- Therapist B is an African American woman who is tall, brown skinned and naturally thin. Her new client is a woman living in a larger body, who is from Haiti and is working at an advertising company. Client is happy to have a therapist of color but is not sure her therapist understands other parts of her cultural identity: she is lesbian and she has a lot of body image issues related to her size.
- Therapist B assumes because they are both women of color that she completely understands the client.

109

Positive Bias

- Offering help that may not be needed
 - Therapist offering to meet outside of regular hours for a couple with relationship issues / Therapist very invested in making the relationship work
- Overidentification
 - Female school counselor who had body image issues growing up overfocuses on a student's body image issues, neglecting her poor grades
- Idealization
 - A client who escaped an abusive relationship and is now raising 3 kids as a single parent and is stressed and drinking more than usual. Therapist praises her for being so "strong" while overlooking her drinking issues.
- Acceptance of less than optimal behaviors
 - An older Asian American client and younger therapist. They share cultural value of respect for one's elders. Therapist is reluctant to challenge the client or ask for more in-depth information for fear of hurting their feelings, leading to mis-diagnosis

110

Biased statements in the Workplace

1. "I'm not a racist"
 1. Based on an extreme view of racism. Everyday racial abuse / microaggressions are more common.
 2. With an "Amy Cooper" boss – you may have to walk on eggshells – trying to do your job while appearing non-threatening
2. "I can't believe the racist joke that John told us."
 1. MLK: "In the end we will remember not the words of our enemies, but the silence of our friends."
3. "We have three women working in our company so we have diversity handled."
 1. The number of female CEOs in Fortune 500 is 37
4. "Our company prides itself on not being racist – we have three Black people working with us now."
 1. The number of Black male CEOs in Fortune 500 is 4 / Black female CEOs = 0
 2. Regardless of education, white workers earn more than Black
 3. Do the minority employees actually have any power or are they token Blacks (diversity without inclusion)

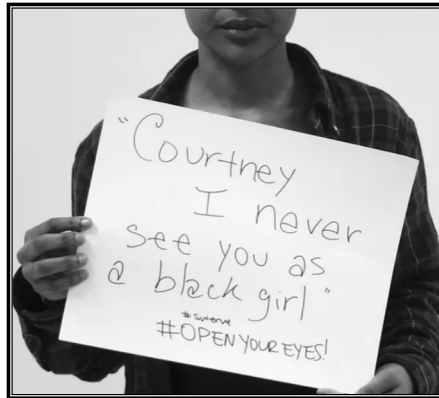
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Microaggressions

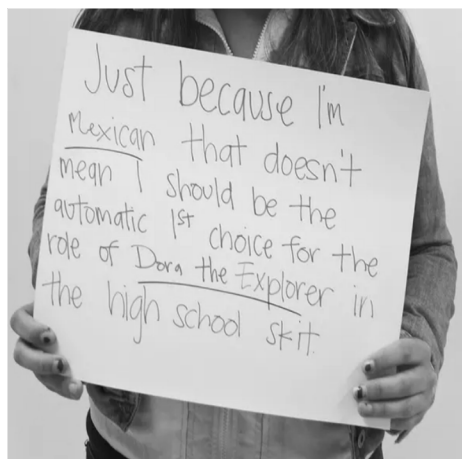
- **Microaggression** is a term used for brief and commonplace daily verbal, behavioural, or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative prejudicial slights and insults toward any group.
- The new face of racism

112

Adult Trauma



113



114

Stereotypes can lead to microaggressions



I'm not lazy



I'm not an illegal immigrant



I'm Hispanic, not Black



I'm not promiscuous



I'm not limited in all ways.



I'm don't do martial arts



I didn't grow up on a reservation

115

Minding your language

1. You're so articulate
2. Does race really have anything to do with your depression?
3. (When race is mentioned) You're externalizing. Let's focus on your eating disorder.
4. You're not really Black!
5. I can't believe it
6. You're so strong
7. You don't look like (you're transgender, Black, LatinX, etc.)
8. Where are you actually from?

116

White Fragility



117

Cultural humility

- A process of on-going self-reflection of one's biases and stereotypes
- Being open to learning about a client's culture, perspectives, values and worldview
- Putting the client's culture, beliefs, etc. as a priority
- Being aware of your own limitations
- Continuing to grow and change over time

118

Cultural Humility

- ☐ Do I know what my own cultural identity is?
- ☐ I am open to and believe I can explore values that are different than my own without losing my integrity
- ☐ I am open to exploring my clients cultural identity and ask questions when I'm not sure
- ☐ I am curious and interested in learning about my clients beliefs, values and world view
- ☐ I am willing to learn by interacting with people whose cultural identity is different than my own
- ☐ I am willing to get expert help when needed

119



Exercises in Cultural Competence

- If this is a new patient for you – for depression and insomnia
- What do you assume about his cultural identity?
 - White
 - American
 - Christian
 - Heterosexual
- What would change in how you manage him if you learn that he is:
 - An Immigrant
 - Gay or Trans
 - Low income?
 - **Biracial**
- How does knowing these his social identities help you contextualize his symptoms?

120

Helping clients deal with microaggressions

- When have you experienced microaggressions?
 - As a woman
 - As a Person of Color
 - Immigrant
 - About your religion
 - Sexual orientation
 - Socio-economic status
- 1. Can you tell me how the protests are affecting your stress and anxiety? (response by race)
 1. I am not feeling safe.
 2. This is bringing up my past experiences with racism.
- 2. Are you sure your problems at work are due to your race?
 1. Never have to worry about this.
 2. Always have to worry about this.

121

Exercises in Cultural Competence

- Questions to help you learn more about your client's social identities:
 - How does the client describe themselves?
 - What does the client think about others in their cultural groups?
 - How does the clients identities intersect?
 - Which social identity is most prominent for your client and have the most influence in their world view?

122

Aspects of cultural identity – going deeper

- Historical events – may have an impact on current lives of Native Americans, Black or other people of color.
 - Lingering damage from history of forced attendance at boarding schools
- Socio-political issues
 - Immigration and its' impact on LatinX clients
- Cultural values
 - Dominant groups value of independence may conflict with collectivism and family dominance in Black families
- Cultural practices
 - Private space – not as valued in some BIPOC cultures

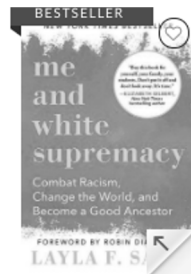
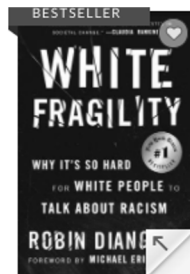
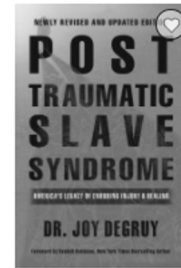
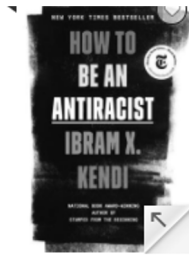
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Cultural Competence

1. Practice cultural humility and be open and curious to learn
2. Do your own work. Don't expect people of color to educate you.
3. Learn to empathize with other people's experiences of microaggressions, discrimination, oppression
 1. "I want to make sure I understand your perspective...."
 2. I may not fully understand your background, so I'm open to feedback.
 3. At end of session, "I want to ask you how things went for you today...."
4. If you're confronted about a misstep – address it and apologize

124

Resources



125

Videos, movies and podcasts

- White Rage
- <https://youtu.be/YBYUET24K1c>
- Racism in Britain
- <https://youtu.be/2vJZdeSqfFY>
- White Fragility
- <https://www.youtube.com/watch?v=45ey4jgoxeU>
- <https://onbeing.org/programs/resmaa-menakem-notice-the-rage-notice-the-silence/>
- <https://onbeing.org/programs/robin-diangelo-and-resmaa-menakem-in-conversation/>
- Movies:
 - The Hate U Give
 - Little Fires Everywhere

126

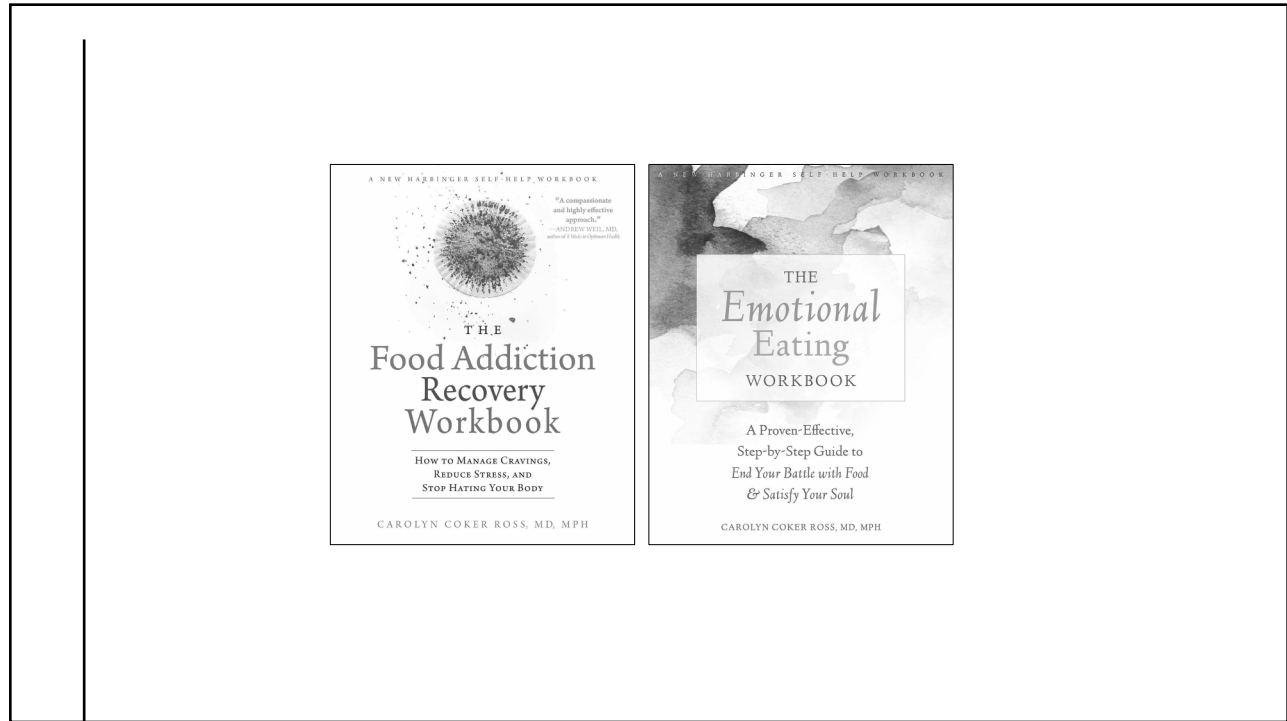


127

Institute for Antiracism and Equity

- **Mission Statement:** To promote and increase access to antiracist, equitable and unbiased mental health care that includes a deep understanding of the impact of multiple layers of historical traumas, discrimination, and systemic barriers that people from ethnic minority groups and those in LGBTQ+ communities face on a daily basis.

128



129



130

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136