Coronavirus, Systemic Police Brutality, Traumatic Stress & Resilience: Fostering Cultural and Epistemic Justice in Counseling

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Overview

◦ Coronaviruses and COVID-19
◦ Systemic Police Brutality
◦ Traumatic Stress & Cultural Marginalization
◦ Historical Trauma & Resilience
◦ Epistemic Social Justice in Counseling & Psychotherapy
◦ Culture-centered Disaster Mental Health
If they had died of COVID-19 at the same rate as White Americans, about 12,000 Black Americans, 1,300 Latino Americans and 300 Asian Americans would still be alive.
Poll: How confident do you feel in the information being shared about COVID-19 in relation to Black and Latinx communities?
What do we know/not know about Coronavirus?

- What we know:
  - highly pathogenic HCoV
  - acute respiratory syndrome
  - Droplets can fall from air to surfaces but may be airborne
  - Needs a host (typical entry is the nasal track)
  - Attacks the lungs (and other organs)
  - Some recovered patients have become ill again
  - Staying home; avoiding close contact works

What do we know/not know about Coronavirus?

- Evolving Knowledge:
  - How to quickly treat the symptoms to avoid distress/death
  - What other organs are impacted by COVID19
  - The lasting effects of COVID19
  - How this coronavirus began in the first place
  - How long this coronavirus has been present in the U.S.

Disproportionate Rates

Rate of Black and Latino coronavirus cases, compared with white cases

- Latino: 3 times that of white cases
- Black: Close to the white cases

Source: Centers for Disease Control and Prevention | Note: Data is through May 28.
Who has been most impacted by COVID-19 (so far)?

- African Americans, especially those in low-income neighborhoods
- Latinx individuals, particularly immigrants, migrant workers, and the undocumented
- Native American Indians/Indigenous living on reservations
- The elderly, veterans, incarcerated, people with disabilities, and others in residential facilities
- Anyone with pre-existing health conditions
- **BUT anyone can potentially be at risk OR be a carrier.**

TeleHealth, COVID19, & Listening Skills teleconfer
The Navajo Nation

- 4002 coronavirus cases in a population of 173,667
- Infection rate of 2304.41 cases per 100,000 compared to 1806 cases per 100,000 in NY
TeleHealth, COVID19, & Listening Skills

Thread

disparate rate compared with white people. One of the most alarming hot spots is also one of the wealthiest: Fairfax County, just outside of Washington, D.C."

The Fullest Look Yet at the Racial Inequity of Coronavirus

By Richard A. Oppel Jr., Robert Gebeloff, K.K. Rebecca Lai, Will Wright and Mitch Smith
July 5, 2020

11:28 AM · 7/6/20 · Twitter for iPhone
Biased Encounters with the Health Systems…

- In medical settings, non-English speakers are at a huge disadvantage — especially when they don’t have language interpreters.
- One woman went to a community health center after being sick for four days with symptoms consistent with COVID-19. There were no interpreters available.
- The woman was communicating with doctors in signs, and they sent her home with some acetaminophen (Rios, 2020).
- At Massachusetts General Hospital, an estimated 35% to 40% of patients admitted to the hospital with the coronavirus are Latino — that's a 400% increase over the percentage of patients admitted before the outbreak who were Latino.

Tartak & Khidir, 2020)
Familiar Patterns of Racial and Economic Bias
In Healthcare Delivery

- Doctors may be less likely to refer African Americans for testing.
- According to the Boston-based bio-tech data firm, Rubix Life Sciences, a review of billing records indicated that an African American with symptoms like cough and fever was less likely to be given one of the scarce coronavirus tests.
- Delays in diagnosis and treatment can be harmful, for racial or ethnic minoritized groups that often have higher rates of diabetes, high blood pressure and kidney disease, leading to more severe cases of COVID-19.
- The distribution of testing sites shows a disparity in access to medical care.
- Inequitable distribution of the medical resources.
- The Centers for Disease Control (CDC) had not been reporting any data on race until public outcry.
- Subjectivity in assessment of coronavirus symptoms (Farmer, 2020)
Slave patrols were established to maintain, through violence and the threat of violence, the submission of enslaved people. Later, the deliberate choice to abolish slavery, [except as] punishment for crime, left a gigantic loophole that Southerners used to suppress acts of liberation and made them subject to criminal sanction. (Vox.com, June, 2020)
In the late 1800s and early 1900s, police brutality was permitted against citizens who challenged big industries. Also, police brutality was used to oppress labor strikes. Many fatal police altercations are ultimately ruled in favor of the law enforcement officer, providing impunity (HG.org, 2020). As African Americans migrated North, they became the target of police brutality as well.
Today, with the whitening of American ethnicity, African-Americans make up 13 percent of the U.S. population but account for 24 percent of people fatally shot by police. They are 2.5 times as likely as Whites to be killed by police officers. (Smithsonian Magazine, 2020)
Systemic Police Brutality in the U. S.

- Academicians, scholars, and practitioners, across all disciplines, have played a significant role in endorsing, indoctrinating, and entrenching police brutality and ultimately, White supremacy in the U. S.
Historical Trauma

- Definition: *Trauma that is experienced intergenerationally despite the absence direct exposure to a traditional traumatic stimulus* (Davidson & Mellor, 2000; Nagata, 1990)

- Research developed from the study of Jewish Holocaust survivor’s children (Danieli, 1998)

  - Extended to studies exploring family members of veterans from World War II and the Vietnam War, indigenous peoples, individuals and groups living under repressive regimes, experiencing domestic violence and crime, and living with infection and life-threatening diseases
A few Historical Reasons why People of Color Tend to Distrust Mainstream Systems

◦ Ma’afa The Black Holocaust
◦ Psychological Hegemony
◦ Racism in Research
◦ Trail of Tears/Residential Schools (Canada)
◦ Internment of Japanese Americans during WW II
◦ Removal of Mexicans from their homelands (*when you move the border, does that make me an alien?*)
Transgenerational Trauma

- Mental health literature on trauma is based on the *DSM-V* definition of a traumatic event provided in the criteria for PTSD.

- Transgenerational trauma is excluded because a traumatic event must be directly experienced (Burstow, 2003; Danieli, 1998).

- Systemic oppression as transgenerational trauma is ruled out because it does not necessarily refer to an event that is physically dangerous (Burstow).
Transgenerational Trauma

- Symptoms may include
  - depression,
  - anxiety,
  - suicidal ideation and behavior,
  - substance abuse, and
  - violence

(Duran, Duran, Yellow Horse Brave Heart & Yellow Horse-Davis, 1998; Felsen, 1998; Raphael, Swan & Martinek, 1998; Simons & Johnson, 1998)
Traumatic Stress Theory

- Continuous traumatic stress (CTS) differs from traditional views of trauma theory:
  - Acknowledges that the environment is pathological.
  - Focuses on present and future traumatic events (rather than those in the past)
  - Observes the trauma as unpredictable and sudden
  - Acknowledges that the trauma occurs with impunity through institutional means

Frenkel, L., Swartz, & Baantjes, 2018.)
The **Additive** Effect of Traumatic Stress & Cultural Marginalization

- How individuals cope with trauma is dependent upon their social positioning prior to the onset of traumatic experiences.

- Some groups of people, such as:
  - poor people, the elderly, culturally diverse, and mentally/physically impaired,
  - are disproportionately affected by traumatic events and experiences,
  - based upon institutionalized and historical biases in society.
Traumatic Stress & Cultural Marginalization (cont.)

- Lack of access to institutional resources and lack of power to control those institutions creates a cycle of socio-cultural abuse that threatens the psyche of culturally diverse individuals (Sue & Sue, 2008).

- Yet, mental health and educational professionals have been slow to acknowledge environmental issues related to pervasive trauma & chronic stress due to cultural hegemony (Holdstock, 2000; Ibrahim, Roysircar & Ohimshi, 2001; Kambon, 1996; Whitbeck, 2006).

- For culturally diverse clients, for example, this has meant assessment based upon models of normalcy for middle-class Whites (can explain the overrepresentation of African American and Latinx students in special education categories).
Traumatic Stress & Cultural Marginalization (cont.)

- Research has shown that systemic oppression has deleterious physical and mental health effects (Harrell, Hall & Taliaferro, 2003), such as high blood pressure, cardiovascular problems, oral health issues, premature labor among pregnant women, low birth weight, and eating problems.

- Traumatic stress and psychological distress has been shown to be evident in several studies (Carter, 2007; Paradies, 2006; Williams, Neighbors & Jackson, 2003), including depression, anxiety, substance abuse issues, and suicidality.

- Chronic stress/pervasive trauma, related to systemic oppression, is transgenerational in nature: it is contextualized by historical & systemic oppression resulting in discriminatory legislation and racism in the U.S. (Cross, 1998).

- Current effects of systemic oppression and trauma may be additive to the historical trauma experienced by previous generations (Dass-Brailsford, 2007; Goodman & West-Olatunji, 2008).
Physical Health (Mullings, Schulz, Schulz, & Mullings, 2006; NCCDPHP, 2004).

Psychological Health (Harrell, 2000; Raphael, Swan, & Martinek, 1998).

Educational Achievement (Goodman, Miller, & West-Olatunji, 2012; West-Olatunji et al., 2010).
Traumatic Stress & Resilience

◦ “Resilience is the ability to ‘bounce back’ after significant adversity and risk”
  
  (Echterling, Presbury & McKee, 2005, p. 10)

◦ Offers explanation for differential outcomes

◦ Mental health professionals can use resilience to focus on strengths of an individual or group and promote healthy functioning despite adversity
Traumatic Stress & Resilience

**Self-advocacy.** One participant comforted another by saying, “Don’t carry this hurt personally. Do what your son has always done. Create something in his honor…Create something in his honor to help people…..”

Another participant shared, “You’ve got to know how to fold the grief up, put it in a box. And, she [the counselor] said, ‘take it out when you need it, when you need to…’ But you just have to learn to deal with it. Because she said the love for him is never going to go away.”

◦ Quotes from the Resiliency Conversations about Gun Violence and Loss of Sons in Low-income Black and Latinx Communities.
Culture-centered Disaster Mental Health

- Using a psychosocial approach, I developed a comprehensive, online, 31-hour program, Culture-centered Disaster Mental Health Counseling (C-DMHC).

- The training focuses on the history, theories, and interventions associated with disaster mental health counseling, with emphasis on working with culturally diverse individuals and vulnerable client populations.

- The program encompasses the full spectrum of disaster mental health counseling service provision from learning the requisite theories and background for clinical practice …

- …through to preparing for deployment, arriving and working effectively with disaster-affected communities, and re-entry to normal work and personal routine.
Culture-centered Disaster Mental Health Service Provision in the age of Coronavirus

Challenges:

- Achieving emotional intimacy while social distancing
- Telehealth issues (limited or no internet; no printer; not tech savvy; lack of privacy at home)
- Health insurance; billing; ability to pay for services
- Mental health service providers’ emotional status
- Health Counseling with technology
Self-care & Emotional Fatigue

- Drink water throughout the day
- Schedule a good night’s rest
- Practice some form of mindfulness regularly
- Vacillate between caring for others and caring for self (alone time and social time)
- Eat healthy foods
- Listen to your body
Epistemic Social Justice in Counseling & Psychotherapy

- deep listening,
- taking social action, and
- employing strength-based cultural practices.
Deep Listening

- mandates a level of clinical interest that minimizes clinician bias
- allows the clinician to engage in the trans-subjective process of hearing
  - examining one’s one biases
  - incorporating cultural knowledge,
  - making meaning of the client’s expression
- is a trans-subjective experience
- can only occur when clinicians work toward reducing their biases toward clients from diverse and minoritized groups.
Social Action

- environmental factors, such as structural racism or systemic poverty, should be considered
- clients are deeply affected by external factors as well as intrapsychic ones
- clinicians should seek to remove structural barriers to clients’ self-actualization.
Strength-based Cultural Practices

Involves:

◦ increasing knowledge about the cultural practices of the clients we serve

◦ learning new clinical skills that are culturally informed.

◦ using cultural narratives,

◦ fostering self-actualization within clients’ own cultural frameworks of wellness,

◦ establishing alliances with children & their families.
Epistemic Social Justice Interventions (long-term)

- Community Engagement Practitioners: Conduct OUTREACH!
  - Educators: Incorporate SERVICE LEARNING into your teaching (teach for critical consciousness)
  - Parents/Caregivers: Connect your child to the world to facilitate IDENTITY and EMPATHY

- Humanity-oriented, Earth-oriented (be a better human)
Epistemic Social Justice Interventions (long-term)

- Engaged Scholarship
  - Partner with community stakeholders to design, implement, interpret your research
  - Address real world problems (reduce the temptation to perpetually sample students in higher education settings)
  - Conduct longitudinal studies to explore issues over time
  - Collaborate across disciplines
  - Employ emancipatory research methods
More Interventions...

- Historical Trauma Conversations
  - Joseph Gone’s group work with Native American communities.
  - Association of Black Psychologist (ABPsi)
    Emotional Emancipation Circles Initiative
- Rite of Passage Programs (youth)
- Restorative Justice programs
- “Never, ever be afraid to make some noise and get in good trouble, necessary trouble.” (Late Sen. John Lewis)
Culture-centered Interventions

- Begin with culture-centered theories
- Employ interventions that are framed within the client’s cultural worldview
- Cuento Therapy (narrative)
- NTU Therapy (balance)
- Ayeli (centering)
- Testimonios/Testifying (Resistance to Oppression)
Connect With me...

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