Chapter 4: Race and Racism

African American Psychology
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Definition of Race

Merriam-Webster:
- “A category of humankind that shares certain distinctive physical traits”
- Visual characteristics

Ethnicity: people who share common cultural traits, language, geographic origin, religion, history, traditions

U.S. Census
- Self-identification
- “Black or African American:” “a person having origins in any of the Black racial groups of Africa”
Conceptualizing Race

Historical perspectives: phenotype, “inferiority”

20th century perspectives
- Biological, genetic differences
- Physical appearance, social and cultural behavior differences
- Helms: Race is physical, no psychological implications
- Genetic diversity within racial groups

Problems
- Official designation may not match self-identification
- Biracial or multiracial identification
- Race as an independent variable
- Used to study racial disparities in housing, education, health
Discussion Question

What are the advantages of conceptualizing race as a genetic difference or as a social construct?
Diversity Among African Americans

● 2000 - 2005
  ○ 353,000 African / 281,000 Caribbean and Latin American

● Why is this important?
  ○ Are likely to have different cultural beliefs, social behaviors, and health outcomes.
  ○ Differences among African Americans from rural and urban areas.
Race and Genetics

- Human Genome Project
  - Geographic Ancestries, Distinguishing Population Groups, Identify Genetic Diseases
  - Pros
  - Cons
  - Conclusion → Race in psychology has less biological meaning. It is socially and politically constructed.
Defining Racism

- Working Definition → Includes beliefs, attitudes, institutional arrangements, and acts that denigrate individual or groups because of phenotypic characteristics or group affiliation.
- J. Jones’ Definition
- Privilege and Power of one group over another
- Individual vs. Institutional
Discussion Questions

1. What do you think about the use of the human genome project? Do the pros outweigh the cons or is this simply exacerbating race issues?

2. Given that racism occurs at both an individual and institutional level, where do you think research should focus when trying to decrease racist attitudes? Should they focus on changing individuals or institutions?
Experiencing Racism

● America is not Post Racial
● Examples of current racism:
  ○ Racial Microaggressions on college campuses
  ○ In dorms, dining halls, and on an environmental level
  ○ In the class setting
● Perceived racial discrimination was associated with a large range problems including academic (e.g., performance anxiety), interpersonal problems (e.g., dating concerns), and emotional problems (e.g., depression)
Types of Racism

Individual Racism:
- Assumes superiority of one’s own racial group

Institutional Racism:
- Policies/Practices within an organization/institution that contribute to discrimination for a group of people.

Cultural Racism:
- Assumed superiority of a language/dialect, values, beliefs, worldviews, and cultural artifacts dominant in a society.
Symbolic Racism:
- Whites that claim “racial discrimination is no longer a problem in this society and that African Americans have not obtained success because they simply have not worked hard enough for it.”

Aversive Racism:
- Most Whites will not engage in overt racist behavior, but when such behavior can be attributed to a reason other than racism, Whites are more likely to engage in such behavior.

1. DQ: Do you all more so agree with Symbolic Racism or Aversive Racism?
Consequences of Racism

Criminal Justice

- Disproportionate amount of African American (especially men) in the criminal justice system
  - Why? Institutional Racism
- Education’s role:
  - The Jena 6 case
  - Driving While Black
  - Incarceration
Evidence of Racism in Research

- African American subjects are perceived as more threatening
- Using the First Person Shooter Task (FPS), college students favored the “shoot” response over “don’t shoot” when target was African American compared to another race. Police correctly responded quickly to “guns” but more slowly to “no guns” when the target was African American
Health:

1) Health Disparities are created by racism

2) African Americans have high morbidity, mortality, disability rates, shortest life expectancy, and least access to health care

3) The gap between African Americans and White in accessing health care has remained the same—and in some ways increased over time.

4) Estimated the number of deaths would not have occurred if health technology improved, and if the people had been white. The medical advances prevented over 176,633 deaths, but had they been White the prevention would have been 886,202 deaths. They found that the average rate of death for Black people was 26% higher than for White people.
Health:

5) Health Disparities in African Americans compared to other ethnic groups:
   a. African Americans and Hispanics receive lower quality health in regards to both diseases and clinical services.
   b. Disparities are found regardless of stage of disease, presentation, comorbidity, age, or severity.
   c. These disparities are found in public, private, and non-teaching hospitals.
   d. Disparities in care are associated with higher mortality rates among people who are not White.
   e. There are differences in receiving diagnostic service tests. [Cancer Diagnostic, HIV, etc]
   f. Disparities in access to and treatment of mental health services.

6) Racism limits socioeconomic access, which means limited health opportunities. Discrimination also leads to stress, thus hurting physical and emotional well-being.
Housing:

1) Fair Housing Act
   a. This act makes all types of discrimination for housing based off of race, color, religion, sex, national origin, familial status, or disability is illegal. [Switch]
   i. However, despite this, housing discrimination occurs.

2) Housing Discrimination Study (2000) saw the amount of Housing Discrimination that occurs due to race.
   a. Results based on 4,600 paired tests in 23 metropolitan areas nationwide.
      i. African Americans less informed about housing opportunities compared to Whites.
      ii. African Americans quoted higher rents compared to Whites.
      iii. African Americans less likely to inspect the advertised housing compared to Whites.

3) African Americans have a higher rate of foreclosure compared to Whites.
   a. This is due to African American segregation.
   b. Foreclosures happened in metropolitan areas where neighborhoods were segregated.
Psychological and Physical Well-Being:

1) Racism has been linked to stressors, inducing short and long-term stressors on psychological and physical well-being.

2) An increase to racial stimuli has been correlated with hypertension and risk of cardiovascular disease. Reports of racism has been linked with negative health outcomes.

3) A study, consisting of 122 African American adults, found the amount of daily stress and how it affected lipid levels. They found that stress was linked with higher low-density lipoprotein levels (LDL). This was a causation factor for a higher diastolic blood pressure.

   a. The source for what caused higher diastolic blood pressure was seen whether it originated from the workplace or from Non-African Americans.

      i. In this study, 197 participants reported stress from non-African Americans, and 95 reported discrimination from the workplace. It negatively affected systolic and diastolic blood pressure.
Psychological and Physical Well-Being:

1) Increased racism led to depression and anxiety.

   a. However, this can be lessened in severity via having a Higher Heart Rate Variability [HRV]. Men with a higher HRV, reported less psychological distress, even when exposed to higher racial stimuli.

   b. Racism was also linked to higher amounts of externalizing and internalizing symptoms. Externalizing—fighting and aggression in boys, while internalizing in girls—a lower sense of hopelessness and sense of self-concept.
Discussion Questions

1) In what ways can African Americans relieve mental distress incurred by racism?

2) What potential role can the medical-field have to prevent health problems caused by racism?
Coping With Racism

Africultural Coping:
- cognitive or emotional debriefing
- spiritual centered coping
- collective coping
- ritual centered coping
  - men and women differ in the relationship to race related stressors and africultural coping styles.

Racial Socialization
- a strategy used specifically by parents to help their children cope with racism.
Coping With Racism

Racial Socialization

- a strategy used specifically by parents to help their children cope with racism.

African American parents must provide their children with messages about...

- black culture and how to interact with other blacks
- interacting and getting along with other racial groups
- learning to cope with their status as an oppressed minority.

Other strategies for coping with racism

- range from passive and active coping strategies such as confrontation or withdrawal.
Coping With Racism

Colorism

- inequality based on skin color, hair texture, facial features and overall preference for eurocentric physical attributes over african attributes.
- colorism operates within society on several levels, cultural and institutional.

Discussion question: Do you think that children and young adults that deal poorly with racist experiences do so because of a lack of proper socialization by parents?
Methodological and Research

Measures of Racism:
● Direct and indirect
● Katz and Hass’ pro-Black anti-Black scale
● Racial Argument Scale (Saucier & Miller, 2003)
● Symbolic Racism Scale
● Physiological
● Index of Race-Related Stress (IRRS)
● Schedule of Racist Events
Evidenced-Based Practices for Reducing Racism

- What types of studies have been done?
- Where/What is best?
  - Schools are ideal places to change intergroup attitudes.
  - Contact Hypothesis
- So how can we apply this?
  - Superordinate Group Memberships
- How has society approached this problem?
Further Research

● Gaps in the literature
  ○ Concept of race is problematic
  ○ Too much focus on the negative consequences of racism
  ○ Study of racism has mostly been the study of white individuals’ reactions

● Next Steps
Discussion Question

1. What other consequences of racism that you have witnessed?

2. Although much of the research today has been conducted in schools, what are some other places that would be conducive to more positive outcomes?

3. What are your thoughts on the contact hypothesis? Do you really think that increased contact is the key to overcoming racism when those 4 conditions are met?