This article is part of the Special Issue "What Social Science Research Says About Police Violence Against Racial and Ethnic Minorities: Understanding the Antecedents and Consequences," Kristin N. Dukes, and Kimberly B. Kahn (Special Issue Editors). For a full listing of Special Issue papers, see: http://onlinelibrary.wiley.com/doi/10.1111/josi.2017.73.issue-4/issuetoc.

The Trauma Lens of Police Violence against Racial and Ethnic Minorities

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Police violence against racial and ethnic minorities has been researched through the lens of multiple social science disciplines including psychology. Within psychology, the study of trauma lends itself to understanding the dynamics of unjustified violence perpetrated by some law enforcement agents. These acts of aggression are not only examples of interpersonal trauma but also the trauma of racism, which is examined through the lens of intergenerational trauma, racist-incident–based trauma, and complex trauma. There is a history of violence against racial and ethnic minorities that contextualizes the traumatic experience of police violence. Additionally, the framework of trauma illuminates the causes and consequences of police brutality as a racist-incident trauma. Finally, survivors of police violence targeting racial and ethnic minorities are often persons who have been exposed to multiple traumas resulting in a cumulative effect. Filling a current gap in the literature, we discuss the clinical implications of applying trauma theories to police violence, as well as diverse ways racially and ethnically marginalized persons have coped with and resisted these acts. There is attention given to the need to attend to the intersecting identities of persons who are targeted such as ethnic minority women. Finally, we describe the need for further study of this complex and devastating phenomenon.

Feminist scholar, Audre Lorde, wrote, "this woman is Black so her blood is shed in silence" (De Veaux, 2004 p. 243). The blood of many racial and ethnic minorities has been shed by police officers who have sworn to protect and serve them. The trauma of police violence, or police brutality, has been attended to by some in the social science community but increased attention is needed to exploring

the causes and potential solutions to this ongoing problem (Aymer, 2016). The continued existence of racism and its mental health consequences have been well documented in the social science literature (Pieterse, Todd, Neville, & Carter, 2012; Robinson, 2014; Wilby, 2009). One of the understudied manifestations of racism is police brutality against racially and ethnically targeted groups; these acts of aggression have been increasingly the focus of public outcry and as a consequence have received increased attention from media outlets and political campaigns (Aymer, 2016; Grills, Aird, & Rowe, 2016). Police brutality is a form of unwarranted physical violence perpetrated by an individual or group symbolically representing a government sanctioned, law enforcement agency as opposed to an individual perpetrator who only represents themselves.

Attention to police use of deadly force increased in the 1960s as a result of multiple ethnic minority communities having uprisings, or riots, in the aftermath of police killing members of their community (Fyfe, 1988). Police brutality occurs within the context of police officers possessing privilege and often assumed justi-fication for their actions as they have sworn to protect and serve the community. Police are armed and trained to defuse crises; yet, many of the police officers ac-cused and, in rare cases convicted of, unwarranted violence report being afraid of ethnic minorities who in most circumstances are unarmed and outnumbered. Re-search finds that there is a "blue code of silence," whereby police officers indicate that they view a police officer's illegal acquisition of money or property as more unethical and problematic than a police officer using illegal force with a suspect and that officers are very unlikely to report such behavior (Westmarland, 2005). As renowned trauma researcher Herman (2015) notes, it is easier to side with the perpetrator of trauma because the only thing perpetrators require is silence. Con-versely to support victims requires the observer to bear witness, speak, support, and take action to facilitate safety and recovery. While police brutality and the ways in which systems organize to protect unethical officers has been examined under various social science lenses, the lens of psychological trauma is an im-portant but often overlooked point of reference for understanding the antecedents and consequences of this form of violence (Aymer, 2016; Grills et al., 2016). The purpose of this article is to review and integrate the literature of police brutality and racially motivated traumas to elucidate the therapeutic needs of help-seeking racial and ethnic minority survivors. Highlighting the therapeutic needs of this population and providing counseling recommendations fill a gap in the current literature on survivors of police violence.

Brief Overview of Trauma

Psychological interpersonal trauma occurs when an individual has an expe-rience that threatens his or her life or bodily integrity, which overwhelms his or her ability to cope by creating feelings of hopelessness or intense fear (Herman,

1997). According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), the traumatized person may be the direct victim of the act of aggression, may witness or learn that it has happened to someone close to him or her, or may be repeatedly exposed to the details of the event (American Psychiatric Association, 2013). Psychological trauma may result in posttraumatic stress disorder (PTSD; intrusive thoughts, avoidance, and hypervigilance) but it is also associated with depression, distrust, affect dysregulation, panic, substance dependence, self-harming behaviors, shame, and difficulty focusing and functioning (Bryant-Davis & Ocampo, 2005). Applying this definition to police brutality against racial and ethnic minorities, we define racially motivated police brutality trauma as an act of violence or the threat of violence perpetrated by police officers against racial or ethnic minorities. Ethnic minorities who have experienced police brutality, directly or indirectly, may think about these instances when they do not want to think about them (nightmares, flashbacks, etc.), attempt to avoid interface with police officers (running from police, etc.), and remain in a psychological state of high vigilance, on guard against the possibility of abuse at the hands of the police (Aymer, 2016).

Statement of the Problem: A Brief Overview of Police Brutality

The United States Department of Justice statistics are based on small percentage of police departments that voluntarily submitted their case numbers. Other institutes and agencies have begun collecting and disseminating data on police misconduct and the numbers are alarming. In 2015, 1,307 people in the United States were killed by police officers. Every 7 hours, police officers kill an American citizen. Black Americans are more than twice as likely to be unarmed when killed by police as Whites and Black American boys and men are three times more likely to be killed by a police officer than White boys and men (Johnson, Hoyer, & Heath, 2014). Native Americans are the only group as likely to be killed by police as Blacks. Excessive force is one of the most common forms of police misconduct. According to the Cato Institute's National Police Misconduct Reporting Project, 57% of these cases involve physical violence such as use of a baton and 23% involve use of a fire arm. For every 1,000 people killed by police officers, only one is convicted of a crime. The homicide indictment rate for citizens is 90% but the indictment rate for police officers is 1%.

Methodology for Critical Review of the Literature

We conducted a review of the psychological literature by searching in the various databases such as PSYCHINFO utilizing police, police brutality, and police violence, along with the search terms race-based traumatic stress, racist-incident–based trauma, racism and trauma, intergenerational trauma, and complex trauma.

Inclusion search terms were police, violence, brutality, trauma, race, racism, traumatic stress, and historical trauma. The primary focus of the article is the United States, although there is brief mention of global police violence. There has been a small but noteworthy subset of scholars within the study of racist incidents such as racially motivated police brutality that have adopted the framework of traumatology (Aymer, 2016; Grills et al., 2016; Pieterse et al., 2012). We add to this literature by attending to intersectional identity factors, challenges to the trauma model of police violence, and counseling suggestions.

Trauma-Induced Effects of Police Brutality

Helms, Nicolas, and Green (2010, p. 68) categorize police violence against racial and ethnic marginalized persons as a "direct cataclysmic racial and cultural event." These events can range from witnessing police violence against another person and racial microaggressions such as being called a racial slur by a police officer to threat of harm, physical assault, or even murder (Helms et al., 2010). Police misconduct and brutality has been identified as a contributing factor to experiences of dehumanization for racially and ethnically marginalized persons (Grills et al., 2016). Scholars have addressed the way in which police violence impacts the health and social development of African American boys in particular. Staggers-Hakim (2016) discussed the degree to which exposure to police violence through the media has an adverse effect on the mental health of African American teenage boys. She suggests that the frequency of assaults is related to the racial stereotypes, often adopted to justify the killing of ethnic minorities. Staggers-Hakim (2016) conducted focus groups with African American boys to discuss the impact of police violence and found many of the boys believe they are perceived by the larger society, including police officers, to be a threat and as a result, the boys live in fear of the police and attempt to be cautious in their dress and behavior in order to survive.

Racist-incident–based actions, impacted by adopted racial stereotypes and biases, can take many forms. Peterson and Ward (2015) compare lynching to a racialized form of terror committed by the law and those representing the law. Others consider White supremacy as a method to limit where ethnic minorities can go and what they can do (Johnson, 1982; Leary, 2005; Petersen & Ward, 2015). With either lynching or White supremacy, the racial predicament of communities' leads people to live with traumatic reactions. Traumatic events leading up to each digital activism hashtag (i.e., #ICantBreathe, #HandsUpDontShoot) instill fear, despair, and anxiety throughout the course of ethnic minorities' lives (Brunson & Miller, 2006; Rich & Grey, 2005).

When communities witness or experience chronic police brutality, they may deal with a variety of challenges after these events, such as depression, anxiety, anger, fear, trust, and other psychosocial problems (Ford, Chapman, Connor, &

Cruise, 2012). Further, those who have been victimized by this type of crime are likely to develop PTSD (Ford et al., 2012). For African Americans, Bridges (2010) noted the link between racism and stress-related diseases like heart disease, cirrhosis of the liver, and cancer. According to Fullilove et al. (1998), people from an inner-city community were found to have behavioral problems (i.e., drug addictions), physical problems (i.e., insomnia), but also people felt as though they were less free to move in their own neighborhoods due to fearing harassment and violence from police.

Mistrust and fear instilled as a consequence of institutionalized police brutality may prevent racially marginalized communities from seeking assistance, which can increase a sense of isolation and dehumanization (Grills et al., 2016). The constellation of these problems leads to a perpetuation of a cycle effecting affect regulation; take, for example, the death of Antonio Zambrano-Montes, a California minority man killed by police brutality and excessive force—his death sparked outrage in the nation causing defiant reactions and law-breaking triggering police to also get angry (Sherman, 2010). While others react with anger and violence, there are those who experience physiological reactivity or even "shut down" when presented with stressful situations (National Child Trauma Stress Networks [NCTSN], n.d.). The powerful impact of emotions and biological structures of interactions between police and citizens are similarly associated with dysregulation in the brain areas as well as an increase in stress reactivity (Violanti et al., 2009). This dynamic is crucial in the awareness of how police brutality can impact the brain and development.

Conceptualizing Race-Based Trauma

There has been a dearth of literature related to the experience of racist-incident–based trauma due to most researchers focusing on interpersonal physical trauma and natural disasters, while neglecting and undervaluing the traumatic impact of societal oppression (Helms et al., 2010). Race-based trauma or racist-incident–based trauma refers to the psychological impact of oppression based on race. Spanierman and Poteat (2005) suggest that racist incidents are most comparable with the established conceptualization of trauma, when they are overt, distinct, and experienced directly by an individual. We suggest that racist incidents are less comparable to the established definition of trauma, when the aforementioned characteristics are more ambiguous. This definition is, however, limiting because it minimizes the impact of covert as well as institutionalized racism. Bryant-Davis and Ocampo (2005) suggest that in order to more fully assess the trauma of racism, it is necessary to consider the role of covert and/or nonphysical racist incidents as well. With regard to racism, it is also necessary to consider the role of power (Helms et al., 2010). Racism parallels sexual assault and intimate partner violence in the sense that all three are motivated by the need to impose one's sense of power

over someone who is afforded less power within the established, Euro American, male-dominant social structure (Bryant-Davis & Ocampo, 2005; Carter, 2007).

The effects of racism are far reaching, impacting an individual's self-concept, interpersonal relationships, health, and overall well-being (Comas-Diaz & Jacobsen, 2001). Foa (1997) asserts that traumatic and extremely stressful life events contribute to disruptive emotional changes in individuals' mental states as well as their overall quality of life. Several scholars have begun examining the degree to which traumatic response and related symptoms may result from experiences of racism and ethnoviolence (Bryant-Davis & Ocampo, 2005; Butts, 2002; Carter, 2007). As articulated by Scurfield and Mackey (2001), exposure to race-based trauma takes three forms: (1) *discrete* (single) or repeated experiences that have a lasting impact, (2) covert and subtle experiences, and (3) *insidious* exposure, which is chronic and pervasive exposure. There is evidence suggesting that communities of color exhibit greater occurrences of PTSD likely due in part to experiences of marginalization. For ethnic minority groups such as African/Black Americans, Latinos, Asian/Pacific Islanders, and Native Americans, prevalence rates for PTSD and related clusters, such as stressor-induced depression and generalized anxiety, may be much higher than is evident in aggregated population statistics (Helms et al., 2010).

Intersectional Perspectives

Understanding racist-incident–based traumatic stress from an intersectional perspective is also crucial to providing culturally competent trauma treatment. Essed (1991) coined the term, "gendered racism" to describe how sexism and racism intertwine under certain conditions into a hybrid phenomenon. More specifically, the confluence of racist attitudes can lead to injurious forms of sexism, such as sexual assault or sexual harassment, for ethnic minority women targeted by some police officers (Jones & Shorter-Gooden, 2003; Patel, 2007; Thomas, Speight, & Witherspoon, 2008). The way in which racism intersects with sexism and heterosexism is also an important consideration when striving to understand societal trauma (Milville & Ferguson, 2006).

Intergenerational Trauma

Intergenerational trauma, also known as historical trauma, refers to families or cultural groups that have experienced severe traumas such as war, extreme poverty, dislocation, enslavement, and genocide for which their descendants continue to suffer the consequences. This cumulative, collective trauma results in ongoing psychological distress and that can be passed across generations (Brave Heart, 2003; Leary, 2005). Descendants who did not experience the trauma directly can still evidence signs and symptoms of distress related to the trauma (Levin,

2006). In the database Psychiatry Online, there are 87 articles and chapters about intergenerational trauma but there are only 10 articles and chapters when one limits to the search to intergenerational trauma and police. The number goes down further to seven when one searches for intergenerational trauma and racism. Yehuda et al. (2014) who examine intergenerational trauma in descendants of holocaust survivors find parental PTSD results in genetic transmission of vulnerability to trauma symptoms. Children of parents with PTSD were significantly more likely to exhibit dissociative states and biomarkers of PTSD. Descendants of trauma survivors, who are culturally marginalized, such as American Indians, may have direct experiences of trauma in different stages of their lives, but these traumas should not be divorced from the historical, intergenerational trauma of their cultural communities (Robin, Chester, & Goldman, 1996).

We chose to start the examination of police brutality with intergenerational trauma as the behavior of both aggressors and victims are best understood in their historical context. The severity of traumatic symptoms may be difficult to understand if one examines only solitary contemporary, isolated incidents of police brutality. On the other hand, if one adopts the lens of intergenerational or historical trauma, there is a better framework for analyzing the antecedents and consequences of police brutality. Historically racial and ethnic minorities in the United States have experienced state-sponsored violence perpetrated against them including through the trans-Atlantic slave trade, internment, abusive detainment, sexual assault, murder, brutality, family separation, forced assimilation, denial of rights and resource access, and mass incarceration (Bryant-Davis, 2007; Leary, 2005; Pieterse et al., 2012). For immigrants and their descendants, the intergenerational trauma may take the form of forced migration as a result of conflict, natural disasters, chemical disasters, famine, and xenophobia and after the migration, they may have experienced stigma, racism, and discrimination. Some scholars have examined intergenerational poverty as an intergenerational trauma as well as it is often associated with denial of resource access, stigma, and feelings of helplessness, powerlessness, danger, and persistent psychological distress (Kneebone, Nadeau, & Berube, 2011). Numerous historical traumas were protected by laws and perpetuated by representatives of the law. Native Alaskans, for example, were taken from their parents and children and placed by White officials in boarding schools where they were denied access to their culture and families; the descendants of these children are noted by psychiatrists who serve them as being vulnerable to depression, substance dependence, and anxiety; serving this population is complicated as most of the mental health providers are White so establishing trust is challenging (Areheart-Treschel, 2003).

Social science research into acts of racially motivated aggression understands the antecedents to be greed, the desire for power, and racism (hatred and fear of those who are perceived to be racially or ethnically different combined with the power to marginalize them; Straus, S. (2012)). In an analytic study of 3,544 cases

of police–suspect interaction, one of five incidents that did not involve a resistant suspect, police officers escalated the use of force, highlighting that resistance is not the always the antecedent to police aggression (Terrill, 2005). Terrill & Mastrofski (2002) found that legal antecedents of police force include persons who resist arrest and persons who raise the safety concerns of police officers, while nonlegal antecedents include an individual's demographics. Specifically persons who are young, non-White, male, and/or impoverished are more likely to be treated with force regardless of their behavior. When considering the factor of the officer's perception of safety concerns, it should be noted that stereotypes of racial and ethnic minorities, particularly African Americans, Latinos, and Arab Americans include assumption that they are violent criminals (Sue & Sue, 2012). Police officers who have adopted these racist views are more likely to assume racial and ethnic minorities are dangerous even if they are not observed engaging in criminal activity.

The consequences of intergenerational trauma, whether perpetrated by agents of the state or individuals or not, that have been observed in descendants include depression, psychological distress, PTSD, anger, suicidality, aggression, substance dependence, distrust, and internalized oppression in which the individual adopts the view of oppressors resulting in self-hatred and self-destructive behaviors (Pieterse et al., 2012). More specifically, for example, enslaved Africans in America were considered by law as less than human and their owners could rape, torture, and lynch them without consequences (Leary, 2005). These acts of violence were often perpetuated publicly as a way of terrifying the enslaved to prevent them from rebelling or attempting to escape. These acts of aggression were to maintain control and power over enslaved persons (Leary, 2005). The long-term persistent effects of enslavement have been discussed in the psychological literature as posttraumatic slave syndrome and some scholars have further posited that instead of many ethnic minorities experiencing posttraumatic stress, they experience ongoing traumatic stress because of the continued widespread exposure to racism, violence, and intergenerational poverty (Leary, 2005).

Much of the research on intergenerational trauma has focused on the descendants of the holocaust and to a lesser degree the trans-Atlantic slave trade (Leary, 2005; Yehuda, Schmeidler, Wainberg, Binder-Brynes, & Duvdevani, 1998). Research reveals that the trauma of the elders of a community affect the descendants through the stories that are told, the warnings that are given, the survivor's approach to parenting including racial socialization, and the behaviors that are modeled (Hughes et al., 2006). The narratives include traumatic encounters with persons who had power and who were in various ways representative of the government. Berg (2009) describes the memories of African American women who participated in the civil rights movement who disclose numerous traumatic experiences, psychologically, physically, and sexually, often at the hands of police officers. Berg notes that the civil rights movement is often summarized as

triumphant but little space is given to the severe and repetitive traumas acted against everyday people who sought justice.

Racial socialization as a result of intergenerational trauma may include informing a child of the types of discrimination and rejection they may face (Hughes et al., 2006). This socialization process includes teaching African American and Latino children how to behave when interacting with police officers, some of whom are corrupt and commit murder without consequence (Sue & Sue, 2012). Parenting a racial or ethnic minority child responsibly has been understood by many parents to include preparing one's child to anticipate harassment by the police or other officials if one is driving while Black (DWB), shopping while Black, walking while Black, running while Black, and standing still while Black (Hughes et al., 2006). Racial socialization by those who have experienced and/or witnesses police brutality include taking steps to avoid encounters with the police, not making sudden moves with the police, attempting to speak in a placating tone, etc. (Hughes et al., 2006). Young people however have seen cases and experienced incidents when they or those they cared about did these actions and were still brutalized. In response to their sense of the failure of these tactics, more young people are attempting different steps such as knowing and reciting their rights as a challenge to unjustified harassment and violence and using phones to record incidents of brutality when they are witnessed. African Americans, Latinos, and Indigenous Americans have come of age with narratives of police brutality that extend through the generations before them. Most of these cases occurred without consequence to the officers.

Historical traumas that were legally supported and carried out by governmental agents such as police officers have had lasting impact on the direct victims and their descendants. For American Indians, for example, this trauma has been described as a complicated, unresolved grief after devastating losses that leave descendants suffering with guilt and yearning for a past that can never be recaptured. Based on a study with holocaust survivors, even when descendants of historical trauma have not experienced greater rates of direct trauma than comparison group members, they exhibit higher rates of PTSD and other psychiatric disorders than persons who are not survivors of historical trauma (Yehuda et al., 1998).

It is important to note that there have been some studies that have failed to observe an intergenerational transmission of trauma even when the original target of the trauma continues to show symptoms. For example, a study of holocaust (state sponsored violence) survivors who are currently grandmothers found the grandmothers still evidenced more trauma symptoms than a comparison group of grandmothers who were not holocaust survivors; however, their children did not evidence a transmission of trauma symptoms at a rate that significantly differed from the comparison families (Sagi-Schwartz et al., 2003). This finding does not erase the research that supports the possibility of intergenerational transmission of trauma but instead supports the call for greater research to understand in what ways and

with whom trauma is transmitted (Napoli, 1999). It is possible additionally that the measures that were given in the study did not capture the ways in which the holocaust survivor's trauma history influenced his or her parenting and his or her children's development. These findings may require in-depth qualitative explorations. Another category of trauma that can overlap with historical trauma is complex trauma, or the exposure to multiple potentially harmful events (Courtois, 2008).

Complex Trauma of Ethnic Minorities and Police Brutality

Complex trauma is best characterized as a subset of dangerous or harmful events in which the person suffers traumatic shock, and also severe disruption in the development of core self-regulatory competences (Cloitre et al., 2009; Ford, 2005). This occurs when individuals are exposed to long-term violence including but not limited to captivity, genocide, terrorism, torture, abuse, war, and forced displacement from home and community, according to Porter and Haslam (2005). It is multifaceted and involves repeated revictimization, which can occur through different forms (Courtois, 2008; Finkelhor, Ormrod, & Turner, 2009). In this context, police brutality fits the definition when it is a persistent, or repeated form of violence through unjustified, unnecessary acts of racial profiling, death, bodily injury, harassment, criminality, and political damage (Harkin, 2014). Police brutality may also contribute to complex trauma for racial and ethnic minorities who are targets of multiple traumas, including but not limited to police brutality. The emotional consequences of invasive, interpersonal aggression and the long-term impact to this type of exposure may lead to complex trauma in individuals (National Child Traumatic Stress Network [NCTSN], n.d.). Police brutality is often seen in minority communities in the United States and in countries with widespread, unmonitored corruption where there is deficiency in the democratic system (Costa, 2011).

It is noted in literature that victims of political oppression develop complex trauma based on the intergenerational maltreatment (Gleiser, Ford, & Fosha, 2008; Kira et al., 2006). The prolonged and repeated exposure to violent assaults triggers reactions that transfer from generation to generation within ethnic communities. Ethnic minority communities that live in constant fear of police brutality result in communities coming to expect and prepare their children for acts of racially motivated injustice and denial of safety. These cognitions influence modifications to physical appearance and behaviors, aligning with Du Bois' (1953) idea of "double consciousness" or the psychology of simultaneously holding in awareness the perspective of one's cultural heritage and the perspective of those who have historically been the perpetrators or beneficiaries of oppression. Within double consciousness, one becomes aware of the divisions in society created from history, and how this shapes the emotional struggles to coexist within marginalized communities (Du Bois, 1953).

The national epidemic of police brutality has been an ongoing struggle for ethnic minorities. Historically, police practices have been an endemic within society due to the racism and racial oppression in minority communities (Sue & Sue, 2012). Although there has been advancement in police practices, minority communities continue to be targeted in various forms. The effects of the corruption portrayed in the media have shown mostly African Americans as victims of police corruption. Contemporary avenues of activism have not only been used as a method to cope with this type of trauma, but it has also ignited the movement to review police practices in the communities and to highlight its lingering effects.

With an element of racism in police brutality, Jones (1997) posited that racism is multidimensional, and diverted racism into two forms; the first type of racism he described was individual racism. This type of racism is experienced as racial discrimination on a personal level, such as being followed at a store for being a particular ethnicity. Jones (1997) labeled the second type as institutional racism. This concept exposes political and ideological racism buried in the practices and institutional cultures of police work, court, education, and various other practices, while attempting to address the problem (Body-Gendrot, 2010 2010). An example of this would include state-level policies (i.e., Arizona's anti-immigrant legislation of racial profiling of Hispanics, New York's stop and frisk program; Billies, 2015; Toomey et al., 2014).

Efforts such as social justice reformation have transformed minorities' rights, but the evolution of racial profiling strategies continues to be an ongoing concern in minority communities. Aymer (2016) provides examples of racial profiling strategies, such as DWB, referring to African American men who are stopped and searched by police if they are "driving an expensive car, or happen to be in a neighborhood that is dissimilar to their own" (p. 370). Similarly, shopping while Black describes the racially prejudiced notion of "wrongdoing without probable cause" when shopping in a store (Aymer, 2016, p. 370). Gabbidon (2003) illustrates the usage of such racial profiling strategies as a method to protect property, reduce crime, and ultimately to keep the privileged safe. The foundation that brings negative attention to African Americans is the societal projections as thugs, criminals, and uneducated individuals (Aymer, 2016). Stereotypical racial assumptions from authorities raise the question of why ethnic minorities are perceived as threats and handled in inhumane ways (Sue & Sue, 2012).

Coping, Recovery, and Resistance to Racially and Ethnically Motivated Traumas

Within several communities of color, familial support is an integral component of coping. The family unit can provide a support against the experiences of invalidation experienced by ethnic minority individuals. Research also suggests that strong racial socialization enable culturally diverse individuals to navigate experiences of racism (Snyder, 2012). It is important that the coping strategies

employed by survivors of racist-incident–based trauma are explored in more detail, particularly as it relates to understanding coping following police brutality.

There are several, notable ways that individuals have coped with societal-based trauma. One of the ways that has helped people cope and recover from race-based trauma is use of religious coping strategies. Cooper, Thayer, and Waldstein (2014) found that African American women's use of prayer following racist incidents helped with traumatic stress symptoms such as cardiovascular reactivity. A study by Lewis-Coles and Constantine (2006) found that higher perceived cultural racism–related stress was related to greater use of collective coping strategies in African American men. Cultural racism is a form of covert racism, which manifests as structural unequal practices. Findings from this study also suggested that higher cultural racism–related stress was predictive of lower use of self-directing religious problem solving in African American women.

Researchers studying coping behaviors of minorities have found that "positive, problem-focused strategies have been related to better outcomes" (Bridges, 2010, p. 19). Society has controlled and shaped many minorities' life stories. Aymer (2016) found that by using a blend of narrative therapy, relational factors and critical consciousness development showed effectiveness in alleviation of feelings and adaptive coping. Through modification of traditional therapy, psychological conscious serves individuals as a coping strategy when facing injustice.

To heal from the trauma of police violence and other forms of racism, racially marginalized persons can participate in Emotional Emancipation Circles, which have been developed for people of African descent. These gatherings are groups that are aimed at overcoming powerlessness, marginalization, exploitation, systemic violence, and cultural imperialism through sharing their stories, learning emotional wellness skills, enhancing their relationships, and dismantling oppression by working together for social justice (Grills et al., 2016). There has been additional support found for group therapeutic formats for addressing police violence. Staggers-Hakim (2016) who conducted focus groups with African American male adolescents about exposure to and reflections on police violence, found that overall the adolescents found the discussion cathartic and indicated a desire to participate in further discussions or groups.

While a strong case can be made for family- and community-based interventions to address the trauma of police violence, Helms et al. (2010) note that shame that often accompanies racial trauma may necessitate individual treatment. Treatment must begin with a thorough assessment including a full history of racist experiences, which may or may not be the primary presenting problem, as well as a full assessment of posttrauma symptoms such as PTSD (Helms et al., 2010). Lack of assessment can result in racial and ethnic minority survivors of police violence being underserved.

Therapists may approach counseling survivors of police violence from the perspective of complex trauma, one of multiple traumas that the racial or ethnic

minority client may have experienced. With this framework, counseling would focus on affect regulation skills, processing the traumatic narratives, and building positive, therapeutic relationships (Briere & Scott, 2015). Along with attending to the potential for PTSD or depression, therapists would also want to be mindful of possible dissociation as is often seen with survivors of complex trauma.

Coping mechanisms are spreading with media outlets such as news sources and social media. The most thorough effort to document police brutality is the Stolen Lives Project, in which people send names, pictures, and stories about the people known to have been killed by law enforcement (Lindblom, Bayona, Seals, & Seals, 2000). Members of communities are also coping by becoming activists in their communities, whether that means recording and downloading the video online to raise awareness, or supporting others through protests. Unfortunately, some racial and ethnic minorities may utilize violence to express anger and frustration in response to abuse of civil rights, threats to immigration status (Sabina, Cuevas, & Schally, 2012), or threats by police to their bodily integrity. These acts of reactive violence may be utilized to justify further acts of police violence.

As opposed to resorting to violence or internalizing the shame of police violence, some racial and ethnic minorities choose resistance. Resistance is a step beyond coping as it requires the agency of the survivor in actively working to interrupt the trauma of oppression or its consequences (Bryant-Davis & Comas-Diaz, 2016). Resistance can include engagement in preventative activities such as filing complaints against officers, participating in community forums, protesting, organizing, and advocating for policy reform. Resistance can also take an internal focus in which the survivor works actively to hold a healthy self-view instead of adopting a view of internalized oppression. Internalized oppression can be defined as seeing one's self through the negative lens of the perpetrator. Resistance to state-sponsored violence, such as police violence, has often been gendered. Sometimes resistance movements have neglected the victimization and voice of racial and ethnic minority women and at other times centering their voices (Bryant-Davis & Comas-Diaz, 2016). Second-wave Black women, primarily those active in the feminist movement from the 1960s to the early 1990s, were known to deny or minimize the victimization, vulnerability, and trauma of Black women to attempt to create a narrative of strength and success (Peoples, 2008). Third-wave Black feminists, those active in the mid 1990s to the present who were influenced by postcolonialism and postmodernism, however have been intentional in their literature, art, music, scholarships, spirituality, and activism to break the silence and speak to the pain of their trauma, including trauma at the hands of police officers (Collins, 2000). The shattering of silence and shame is an integral part of healing the trauma of racially motivated police brutality. Some of the movements that have blossomed through social media and then developed a multiplatform movement including use of mainstream media, traditional protest marches, staged die ins, and development and advocacy for policy platforms are Black Lives Matter, Black

Girl Magic, and Black Girls Are From The Future (Bonilla & Rosa, 2015). These movements' activities include monitoring and disseminating information about violence against racially marginalized community members, advocating for changes in policies, and celebrating the lives, gifts, strengths, and skills of marginalized communities. Policies include both creation and enforcement of laws to protect marginalized groups and socioeconomic and political interventions to support the development of marginalized groups. Contemporary social change includes digital activism of hashtags such as #BlackLivesMatter after Trayvon Martin's killer was acquitted of murder (Bonilla & Rosa, 2015), #ICantBreathe refers to Eric Garner's fight for justice against police use of force, and #HandsUpDontShoot is used to show the unfair and inaccurate portrayal of African Americans of systemic profiling (Bonilla & Rosa, 2015). These efforts call attention to the arbitrary nature of racialized policing, the vulnerability of Black bodies, and the problematic ways in which blackness is perceived as a constant threat, according to Muhammad (2010). By asserting fundamental value in social media, the usage of hashtags has become the platform of the documentation and challenging incidents of police brutality.

Spirituality, creativity, and activism have been critical strategies to resisting the indignities of racially motivated acts of aggression (Gayle, 2011). Additionally, traditional healing practices have been used in their community context or incorporating and modified within psychotherapy. Three examples from the American Indian tradition are the four circles, which is an analysis of relationships and the search for balance within relationships, the talking circle which is similar to group therapy, and the sweat lodge, which includes usually single gendered groups coming together for hours to pray in a closed space with heated rocks (Manson, Walker, & Kivlahan, 1987). Additional American Indian psychologist, Brave Heart, in 1992 founded the Takini Network, an organization focused on healing American Indian communities from historical trauma (Levin, 2009). Likewise, the Association of Black Psychologists has also created a culturally congruent model for healing African American community groups of historical trauma. Considering cultural methods of healing, U.S.-based Bosnian refugees in an ethnographic study indicated utilization of such cultural coping strategies as language family, sticking together, religion, embracing urban hip hop cultures of resistance and resilience, building a future, taking pride in tradition, critiquing America, and seeking freedom to heal from historical traumas (Weine, Ware, & Klebic, 2004).

Policy Implications

Applying the framework of existing trauma-focused policies to targets of racially motivated police brutality calls for a number of specific recommendations for targets and offenders. For targets, there is a need for (1) the appropriate training

for those who will take their testimonies and those who will make decisions regarding their safety and justice; (2) provision of resources for their mental health care and restoration; (3) protection from retaliation from offenders and their supporters; and (4) accountability for those police departments, chiefs, and commissioners who know or should have known about the practices of their offending employees. For offenders and potential offenders, there is a need for (1) requirements for education and mental health services; (2) not placing offending officers in positions to do additional harm; (3) monitoring their behavior; (4) recognizing the need for enforcement of policies (not cover-ups) with the awareness that trauma perpetrators usually escalate when there are no consequences for their behavior.

Summary

We explored the available scholarship focused on police brutality perpetrated against racial and ethnic minorities from the lens of trauma studies. As with other forms of interpersonal trauma, perpetrators of police brutality use aggression to obtain and maintain power and control and these actions are associated with stereotyping, dehumanizing, and objectifying racial and ethnic minority men and women, boys and girls. The potential psychological consequences for the direct and indirect targets of racially and ethnically motivated police brutality may include, but are not limited to, distrust, fear, anger, shame, PTSD, isolation, and self-destructive behaviors (Bryant-Davis, 2007; Pieterse, Carter, Evans, & Walter, 2010). Survivors of police brutality may cope through counseling, spirituality, seeking justice, and social support. Survivors may make various efforts to resist brutality and its consequences including internalized oppression through social justice activism and positive racial socialization (Hughes et al., 2006). There is a need for greater empirical study of police brutality's antecedents, consequences, prevention strategies, and intervention models. Scholars must also continue to attend to the arguments made in opposition to the trauma model for racist incidents with openness to the ways in which particular incidents fit the model and the ways in which either new models or modified models are needed (Bryant-Davis & Ocampo, 2005). Brutality, abuse, and violence perpetrated by police officers who are charged with protecting the community must urgently be attended to by social science practitioners, policy makers, and researchers alike.

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