

How Racism Is Bad for Our Bodies

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'Stop and Frisk' is a threat to public health on a large scale.



Eduardo Munoz/Reuters

Trial in the federal class action lawsuit on the NYPD's stop-and-frisk policy, *Floyd, et al. v. City of New York, et al*, begins on March 18. At stake is whether the controversial tactic is a racial profiling practice, which violates civil and constitutional rights. Filed by four plaintiffs who were stopped and frisked, the suit represents the entire class of people who have been racially profiled.

But racial profiling is not only a danger to a person's legal rights, which guarantee equal protection under the law. It is also a danger to their health.

A growing literature shows discrimination raises the risk of many emotional and physical problems. Discrimination has been shown to increase the risk of stress, depression, the common cold, hypertension, cardiovascular disease, breast cancer, and mortality. Recently, two journals -- *The American Journal of Public Health* and *The Du Bois Review: Social Science Research on Race* -- dedicated entire issues to the subject. These collections push us to consider how discrimination becomes what social epidemiologist Nancy Krieger, one of the field's leaders, terms "embodied inequality."

A breakout moment in the study of discrimination and health came in 1988, when the CDC recorded a disturbing disparity in black-white infant mortality. In response, *The American Journal of Preventive Medicine* published a special supplement, "Racial Differences in Preterm Delivery: Developing a New Paradigm." What was this new paradigm? By this time, we already

knew there were significant racial disparities in health. But these scholars offered a new explanation for them. What they argued is that we must focus on the everyday experience of these women -- and think about how social stressors might be harming their health, even causing preterm delivery.

Merely the anticipation of racism, and not necessarily the act, is enough to trigger a stress response.

A new study by Kathryn Freeman Anderson in *Sociological Inquiry* adds evidence to the hypothesis that racism harms health. To study the connection, Anderson analyzed the massive 2004 Behavioral Risk Factor Surveillance System, which includes data for over 30,000 people. Conceptually, she proposes a simple pathway with two clear steps. First, because of the prevalence of racial discrimination, being a racial minority leads to greater stress. Not surprisingly, Anderson found that 18.2 percent of black participants experienced emotional stress and 9.8 percent experienced physical stress. Comparatively, only 3.5 and 1.6 percent of whites experienced emotional and physical stress, respectively.

Second, this stress leads to poorer mental and physical health. But this is not only because stress breaks the body down. It is also because stress pushes people to cope in unhealthy ways. When we feel stressed, we may want a drink and, if we want a drink, we may also want a cigarette. But discrimination is not just any form of stress. It is a type of stress that disproportionately affects minorities.

Here we see how racism works in a cycle to damage health. People at a social disadvantage are more likely to experience stress from racism. And they are less likely to have the resources to extinguish this stress, because they are at a social disadvantage.

It gets worse. Just the fear of racism alone should switch on the body's stress-response systems. This makes sense -- if we think our environment contains threats, then we will be on guard. But it raises a question that is prevalent in the study of the impact of discrimination on health. How can we test the relationship with experimental, rather than correlational, methods?

Pamela J. Sawyer and colleagues ran an experiment to test the link between the anticipation of prejudice and increased psychological and cardiovascular stress. Appearing in *The American Journal of Public Health's* special issue on "The Science of Research on Racial/Ethnic Discrimination and Health," their experiment paired Latina college students with white females. The white females served as confederates (that is, accomplices to the researchers). Each participant filled out attitude forms, which included questions on racial stereotypes. Some confederates answered the questions as a racist might, others did not.

Here's where it gets interesting. The researchers had each Latina student prepare a three-minute speech on "what I am like as a work partner" for their white partner. But before each student gave her speech, she read her partner's responses -- and, among other things, knew if the person evaluating her speech held racist beliefs. To monitor stress during the speech, the researchers hooked the speakers up to blood pressure cuffs and sensors to measure other cardiovascular data, including an electrocardiogram and impedance cardiography.

When Latina participants thought they were interacting with a racist white partner, they had higher blood pressure, a faster heart rate, and shorter pre-ejection periods. What this shows

is an increased sympathetic response, or what is often called the "fight or flight response." Merely the anticipation of racism, and not necessarily the act, is enough to trigger a stress response. And this study only involved a three-minute speech.

What if someone feels she lives under the constant threat of racism? This is the implication for racial profiling. Stop-and-frisk policies do not only affect the people who come into contact with law enforcement. They also affect the people who fear they could be next. In addition to battling the constitutional impact of Stop and Frisk as co-counsel in *Floyd v. New York*, the Center for Constitutional Rights released the report, "Stop and Frisk -- The Human Impact: The Stories Behind the Numbers, the Effects on our Communities." The report summarizes 54 interviews with people who have been stopped and frisked -- and what it meant for them emotionally and physically. It tells alarming stories about inappropriate touching, sexual harassment, threats, and humiliation. And it also connects us with the Sawyer team's study on anticipating prejudice.

"The scale and scope of stop-and-frisk practices in communities of color have left many residents feeling that they are living under siege," the CCR authors write. When we read the NYCLU's 2012 report on Stop and Frisk, it is easy to see why. In 2011, there were 685,724 stops. In 70 of 76 precincts, greater than 50 percent of stops targeted blacks and Latinos. In 33 precincts, that number skyrockets to over 90 percent. Perhaps most shockingly, the number of stops of young black men (168,126) actually exceeded the number of young black men in New York City (158,406).

However, supporters of Stop and Frisk argue that it is an effective crime control tool and, if you want to avoid a stop, then do not commit a crime. The problem is that 90 percent of black and Latino men stopped were innocent. What might this mean in terms of heightened vigilance and stress? Not only must black and Latino people in New York anticipate acts of prejudice from the police, but they also must know innocence does not reduce the risk of harassment.

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