

GENERAL ARTICLE

A Framework for Race-Related Trauma in the Public Education System and Implications on Health for Black Youth

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ABSTRACT

BACKGROUND: A combination of increased suicide in the past decade, documented high rates of anxiety and depression, and the preponderance of other behavioral and emotional regulation challenges place black youth at risk for school suspension and involvement in the juvenile justice system. Pointing to deficits in black youth and their families negates how forces of racism, whether unconscious or conscious, can disrupt well-being.

METHODS: A framework for race-related trauma in the public education system illustrates the interplay between macro-level forces, such as institutional and symbolic racism, and micro level forces of racism such as racial discrimination and violence. Identifying causal links between these forces and adverse academic and health outcomes for black youth can inform interventions and strategies to reduce race-related trauma.

RESULTS: The framework for race-related trauma is a multi-level analysis of racism and recognizes school districts facing economic restraints and school personnel turnover may face significant challenges in designing intervening strategies.

CONCLUSION: The framework guides change effort towards improving school climate and culture through preparing school professionals to meet the diverse needs of youth, strengthening family and community collaboration, and tackling those policies and behaviors that exclude and disconnect black youth.

Keywords: adolescents; black; children; health; racism.

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Black youth represent one of the most vulnerable groups across health indicators in the United States.^{1,2} In the past decade, for instance, suicide rates among black children and adolescents have increased.³ Further challenges in behavioral and emotional regulation contribute to a higher risk of involvement in special education programs, out-of-school suspension, and for referrals into juvenile court.⁴⁻⁷ Drawing attention to deficits in black youth, their family, and neighborhoods as predictors of poor health outcomes negates the effects of racism. Several scholars argue racism in the United States is a significant predictor of health inequalities.⁸⁻¹¹

Acts of violence and discrimination from racism parallel trauma.¹⁰ To date, there exist no specific models on racism as trauma nor have any research focused mainly on the public education system. In this paper, we offer a framework for understanding racism as race-related trauma and illustrate the interplay between macro- and micro-level forces and how the prevalence of alienation, discrimination, and violence are detrimental to the health of black youth in the public education system.

We draw from several bodies of literature in education, social sciences, and public health to provide a review of the literature and discuss

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the extent of meso- and micro-encounters with alienation, discrimination, and violence on adjustment and health. We revisit the framework to guide a discussion on how schools and advocates can intervene in the lives of not only black youth but other racially marginalized youth populations. Implications for school health include working with school districts and personnel to evaluate school policies and practices that lead to racial inequity, strengthen collaborations across multi-systems, and build culturally responsive and representative schools.

CONCEPTUALIZING A FRAMEWORK FOR RACE-RELATED TRAUMA

Racism is an ideology “based on erroneous principles of racial superiority [that] bestows power and privilege on those who define, enforce, and establish the institutional mechanisms that maintain it.”¹¹ Racism is salient in institutional policies, practices and manifests through interpersonal interactions that harm young people based solely on their race.⁸⁻¹¹ The concept of race-making accompanied by policies and practices designed to enforce the superiority of one group and the subjugation of another further aggravates interpersonal relationships, contributes to intergenerational conflict, and adverse health outcomes.⁹ Interactions with racism, whether institutional or individual acts, contributes to heightened levels of arousal, hypervigilance, and symptoms associated with anxiety and depression.^{10,12-16} Racism is trauma when black youth continue to encounter more physical, psychological, and social harm. We define this form of trauma as race-related trauma and outline how the presence of macro and micro level forces disrupt well-being.¹⁴⁻¹⁷

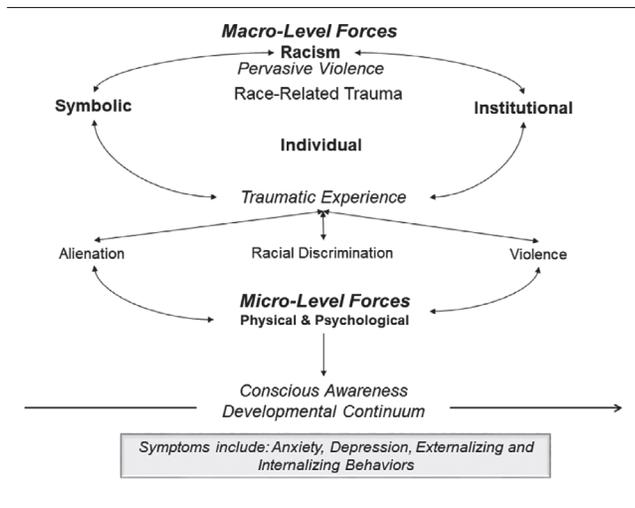
Race-related trauma is an adverse interaction, either continuously or daily, with institutional, symbolic, and individual acts of racism. It can be explicit and perceived at the conscious level like someone calling a black child “stupid” or it can be implicit like depicting science from the lens of Europeans in a classroom where the students are racially diverse. We define institutional and symbolic racism as beyond individual acts and through macro-level interactions that take place in often unconscious ways.¹⁸ Institutional racism, for example, depicts system-level policies and practices that create conditions where black youth more often attend under-resourced and over-policed schools.^{4,6,19,20} School policies that lead to the overrepresentation of black youth in remedial education and suspended go unquestioned when individuals see these outcomes as something associated with deviance in the child or their family. Symbolic racism parallels institutional racism and reinforces notions of racial preference by obstructing the culture of racially diverse youth in schools.¹⁹ For example, the overrepresentation of black youth in suspension data

and low ability groups can posture racial inferiority. History books often devalue the contributions enslaved people made to the United States and romanticize historical figures.²¹ Schools often reject policies that aim to be inclusive of black vernacular and make associations between “black” language and lower intelligence.²¹ Interactions with institutional and symbolic racism influence how young people see themselves and how society characterizes them.

In more tangible ways, race-related trauma parallel characteristics of trauma outlined in the Diagnostic and Statistical Manual of Mental Disorders-5.²² The Diagnostic and statistical manual of mental disorders-5 describes trauma as an encounter or experience that leads to serious injury, either actual or the threat of death. When black youth made their way into segregated schools, they encountered violence from protesting mobs.^{23,24} More recent research indicates black youth experience higher levels of physical violence from teachers and peers when compared to other racial groups.²⁵⁻²⁷ School resource officers will exert more force against black youth and arrest them at higher rates.²⁰ Youth will experience psychological harm from interactions that are less blatant; for example, racial micro-aggressions and micro-invalidations in school can be harmful. Past research on micro-aggressions found such encounters contribute to elevated levels of psychological distress.²⁸ Psychological harm can also occur in other indirect ways. According to the Diagnostic and statistical manual of mental disorders-5, individuals can develop trauma-induced disorders when they encounter secondary trauma through witnessing or the retelling of the event. With the recent release of videos online in the past few years depicting school resource officers (SROs) accosting and assaulting black youth, youth observe and continue to witness violence through various social media platforms.^{29,30}

The framework for race-related trauma in the public education system illustrated in Figure 1 aims to demonstrate the interplay between macro and micro-level forces of racism. The model proposes institutional structures and symbols devalue or subjugate racially diverse groups. Youth will internalize racial representations into cognitive schemas that influence their perceptions. In turn, institutional racism creates and forces policies that validate these representations, whether truthful or not.¹⁸ Individual interactions within this model translate into more direct physical and psychological harm through alienation, discrimination, and violence. Conscious awareness of these encounters may require youth to cope with related stress and tension where they begin to exhibit outcomes associated with negative externalizing and internalizing behaviors. The proceeding review of the literature focuses on the extent to which alienation, discrimination, and

Figure 1. A Framework for Race-Related Trauma in the Public Education System



violence are prevalent in schools and the micro level effects these encounters have on the health outcomes of black youth. We apply this framework to propose causal links between racism, its dimensions, and physical and psychological behaviors that emerge for black youth from elementary to high school.

LITERATURE REVIEW

The review included qualitative and quantitative studies investigating and interpreting how alienation, racial discrimination, and violence manifest in the public education system and implications on adjustment and well-being. The review seeks to draw connections between macro and micro level forces of racism and academic and health outcomes for black youth. Findings from the review will inform our discussion on how schools can undertake specific efforts to improve the well-being of racially diverse youth populations.

Alienation

Alienation is a physical and psychological disruption to emotional, relational, and physical connectedness.³¹ Black children begin to perceive distinctions in their learning experiences and experience alienation as early as elementary school.⁷ Authors found perceptions of differences in learning and feelings of alienation lead to a lower sense of connectedness to school and feeling less valued among black youth.⁷ A study exploring the school trajectory of a sample of male students who dropped out of high school identified feelings of alienation contributed to high levels of insecurity and distrust towards adults in the school.³¹ The authors revealed several patterns in the participants' experiences in school to include reduced attendance, academic challenges, and engagement in truant behaviors.

The combined effects of punitive discipline disconnecting youth from school, criteria used to exclude black youth from gifted programs, and culturally unrelated curricula can lead to varied forms of alienation.^{6,7,11} School suspension and expulsion will alienate black youth from school resources and can lead to further gaps in learning.^{25,32} Frustration may emerge from challenges in learning, and some young people may seek other forms of validation or drop out of school altogether.^{31,33-35} Young people who begin to display a lack of school attendance and skip school to hang out with peers are at risk for other adverse health outcomes.^{33,36} Young people who are likely to experience alienation in school often display more oppositional attitudes towards school.^{31,33}

Alienation can also induce feelings of helplessness and powerlessness in youth when they perceive they are unable to address the injustices they experience in school.^{31,33} Alienation can induce a stress response and lead to psychosomatic symptoms to include increased headaches and backaches.³⁶ Racially marginalized youth and those who come from lower socioeconomic households may not have the resources to challenge the power structure in schools.³⁷ Young people may identify other ways to exercise power and opposition to schools at the interpersonal level. Some researchers suggest dissociation and other acts of aggression towards others may be one way to exercise power.³⁸ Black youth may begin to show express anger, violence against others, and other behaviors as a response to alienation. Removing black youth from school and activities are perceived as a threat to their identity; consequently, bullying behaviors and other aggressive acts may be a response to that threat.^{25,38} Increased aggression and other health complications can serve as barriers to learning and well-being.

Racial Discrimination

Racial discrimination is the process of excluding, isolating, or discriminating against a group or individual based on their race. Similar to alienation, black youth report encounters with racial discrimination as early as elementary school and, disturbingly, these encounters persist well into high school.^{39,40} A study exploring the relationship between racial discrimination and behavioral outcomes among black youth found increased encounters with racial discrimination placed youth at risk for increased participation in delinquency and suicide ideation.^{12,13} Research across several studies reveal young people who report more encounters with racial discrimination are at risk for developing depressive symptoms and other risk-oriented behaviors.^{39,41} One particular study found experiencing racial discrimination from teachers can lead to feelings of alienation and low levels of motivation.⁴² Research also indicates young people who report more encounters

with racial discrimination demonstrate more problem behaviors and use of alcohol and marijuana.^{43,44} Encounters with racial discrimination can also lead young people to react and retaliate in ways that are violent to others or themselves.^{13,43}

Gender and socioeconomic status may moderate the relationship between racial discrimination and adverse health outcomes. A study exploring the racial experiences of low and moderate-income black youth found males from lower socioeconomic status groups were more likely to report higher levels of racial discrimination and exhibit low levels of academic self-concept.⁴⁵ Another study found black males are more likely to report receiving harsher discipline and encountering more messages that communicate intellectual inferiority when compared to females.⁴⁶ The authors found both black males and females reported experiencing racial discrimination equally; however, racial discrimination was more likely to lead to more depressive symptoms in males. Further analysis revealed males displayed more feelings of hopelessness, sadness, and increased agitation.

The racial demographics of a school may not negate black youth from encounters with racial discrimination. Researchers in one study reported black youth who attend schools with a higher percentage of white students have more depressive and somatic symptoms such as sadness and headaches.⁴⁷ Another body of research indicates black youth will experience similar levels of racial discrimination despite attending predominately white or black public schools.⁴⁸ The authors found black youth may report experiencing more mistreatment and unfair discipline at predominantly white schools, but the prevalence of racial discrimination and depressive symptoms are comparative across both types of school. These findings may be particularly relevant regarding how the diversity of the school does not negate black youth from experiencing racial discrimination or adverse health outcomes.

Violence

Violence is both physical and psychological; it can transpire through bodily harm, emotional, and other psychological abuse. Racially diverse youth exist in a cycle of violence from discriminatory institutional policies to those adverse interpersonal interactions. Existing in a cycle of violence can lead victims of violence to mimic the violence used against them on others.⁴⁹⁻⁵¹ Research findings indicate black youth are more likely to be victims of violence in school compared to other racial groups.²⁵⁻²⁷ One study found peer students more often perceived black youth as being both perpetrators and victims of violence in school.²⁷ The authors further detailed how black youth experienced more incidents of name-calling

and mockery from their peers when compared to other racial groups. Violence against black youth can manifest at the intergroup and intragroup level.⁵¹⁻⁵³ Violence not only occurs from peers, but research also indicts teachers and school personnel as perpetrators of bullying and physical assault against black youth.⁵⁴

Gender and socioeconomic status can moderate the kinds of violence experienced in school and outcomes. Black youth report higher levels of violence-induced stress when attending predominately-black schools with high concentrations of poverty.^{38,53} One study examined incidents of racial violence across youth and reported black females were more likely than males to report encounters with racial slurs, threats, and other verbal attacks.²⁶ At the intragroup level, another study investigating dating violence among black youth in middle school reported females were more likely to experience sexual violence while black males experience higher levels of physical violence.⁵⁵ Scholars propose black males may experience higher levels of physical violence due to perceptions of masculinity and them as a physical threat.^{19,56,57}

Gender and class can moderate the expression of violence-induced responses among black youth. A systemic review of the literature on violence among urban youth demonstrates victims and perpetrators of violence equally report substance use and symptoms of depression.⁵³ A study found males may be more likely to display externalizing behaviors, such as aggression, while females demonstrate more internalizing behaviors, including fearfulness and social withdrawal.⁵⁴ The intersection between class and race in school further marginalizes young people when they have less access to mental health services and highly qualified school personnel. Prolonged exposure to violence can lead to declines in academic performance and elevated levels of substance use.^{38,49}

The findings from this review suggest school interactions, particularly those encounters associated with alienation, racial discrimination, and violence have adverse effects on the well-being of black youth. The framework for race-related trauma articulates the interplay between macro and micro levels forces and illustrates how interactions can uniquely and simultaneously translate into academic disassociation and other adverse health outcomes. Findings from the review indicate these encounters influence adjustment but also can result in heightened levels of anxiety, depression, and risk-oriented behaviors such as substance use and aggression towards others. In the next section, we reflect on the framework to offer recommendations for those advocates, educators, and practitioners who seek to build a culture of health in public schools and increase the well-being of black youth as well as other racially marginalized and disenfranchised youth populations.

IMPLICATIONS FOR SCHOOL HEALTH

The framework for race-related trauma is a multi-level analysis of racism and recognizes school districts enamored with economic challenges, school personnel turnover may face significant challenges in designing intervening strategies. We propose strategies may require less reliance on improving economic resources but rather target change effort towards improving school climate and culture. Improving a school's cultural climate involves preparing school professionals to meet the diverse needs of youth, strengthening family and community collaboration, and tackling those policies and behaviors that exclude black youth. In this section, we focus on school suspension as an example of modeling change. School suspension policies and practices intersect alienation, discrimination, and violence, addressing suspension require direct efforts at minimizing tension and conflict in schools and reducing discipline policies and practices that contribute to inequity.

Increase Collaborative and Restorative Practices

The US Department of Justice and US Department of Education released guidelines to support state efforts to improve school climate and address the school-to-prison pipeline.⁵⁸ A key aspect of changing a school's climate is integrating a high degree of transparency and creating opportunities for community stakeholders to inform school governance. The SECURE (School-based Enforcement through Collaboration, Understanding, and Respect) rubric outlines how families, school administrators, and local law enforcement collaborate in drafting memorandums of understanding that align with civil rights requirements. Accountability occurs by providing spaces for youth, their families, community members, and school personnel to provide feedback on policies and policy revisions. Recommendations include transparency in hiring practices of SROs and providing explicit policies that prohibit SROs from enforcing school codes of conduct and discipline. School districts can use the checklist in the rubric to acknowledge and recognize how they are addressing racial equity and identify areas to improve professional development and training.

Creating a culture of health in school depends on integrating other interlocking systems to include the family and community. Increasing dialogue between school personnel and parents to talk about issues of race and racism cultivates a culture of respect and trust.⁵⁹⁻⁶¹ A vital aspect of such change efforts includes sharing evidence on school suspension to guide discussions on reducing bias and improving decision-making. Integrating families and other community partners in implementing school improvement plans have several benefits. Research findings across several interventions for racially diverse youth revealed

collaboration with community stakeholders help schools to improve academic and health outcomes for youth.⁶² The family and community can play an essential role in designing interventions rooted in the ethnic, racial, and linguistic realities of black youth.^{62,63} Using informal and formal focus groups comprised of parents and community representatives throughout each phase of the design provided a way to reduce racial tension and minimize distrust in the Cognitive Behavior Intervention for Trauma in Schools (CBITS) model.⁶³ Findings on the CBITS model suggest those youth involved in the program demonstrated academic improvements and reported a decline in depressive symptoms.^{63,64}

Modeling restorative practices in school accompanied by an emphasis on positive behavioral interventions can also improve student-school connections and relationships.⁶⁵⁻⁶⁷ The Supporting and Responding to Behavior published by the US Office of Special Education Programs proposes positive behavioral interventions that emphasize fair consequences, de-escalation, alternative learning opportunities where both teachers and students learn how to model other ways to deal with conflict can begin to address the root causes of racial inequality in school suspension.⁵⁷ A review of school practices that lead to declines in school suspension found students were less likely to engage in truant and delinquent behavior when they perceived teachers as fair and felt valued.^{61,65} Working with school professionals in addressing their biases to respond to culturally and racially diverse youth in valuable ways potentially improve student-teacher relationships and increase school connectedness.^{61,67} Giving opportunities for students to talk about conflict and recognize where they can improve decisions and model alternative ways to deal with conflict rather than suspend them helps to alleviate behavioral problems and school suspension rates.⁶⁵ Research suggests schools that increase opportunities for teachers and students to communicate with each other in restorative circles and learn from these shared experiences report a reduction in discipline referrals.^{66,67}

Provide De-Escalation Strategies in School

The use of alienation and even violence may be a result of a need to establish or re-establish and maintain power and control.⁶⁸ Youth may act out against the teacher if they perceive the teacher as a threat to their social status and the teacher may act against the student if they perceive the behavior as a threat to their authority or control. Perceptions of race can potentially gird tension between school personnel and youth when individuals are unable to recognize their biases and manage their emotional response. Not only do school professionals need bias reduction and racial equity training but support in

behavioral and emotional de-escalation strategies. Behavioral and emotional de-escalation strategies are beneficial to school personnel and youth. For instance, mindfulness focuses on improved breathing techniques accompanied by cognitive approaches that help individuals learn how to reappraise a stressful event and reduce negative affect.^{69,70} Research shows several benefits of instituting mindfulness in schools in majority low-income and racially diverse school. Scholars found mindfulness practices improve efficacy among teachers in reducing discipline challenges and efficacy among youth in managing and lowering stress.^{69,70}

Interventions designed to improve de-escalation strategies targets how individuals respond to conflict and tension specifically. Schools that institute conflict management, problem-solving, and emotional regulation as a core feature in curriculum and professional development demonstrate positive outcomes for teachers and students. One model in the research includes the conditions for learning (CFL) model. CFL provides teachers with professional development plans and coaches for modeling emotional regulation, applying positive reinforcement and redirecting inappropriate behaviors. Research demonstrates schools report higher rates of student engagement and more positive interactions between students and teachers when they improve how school personnel and students manage conflict and emotional de-escalation.⁶¹

Integrate Culturally Responsive and Representative Models

Our findings suggest there is a need to increase the use of culturally responsive practices and representativeness in schools.⁷¹ Notably, changing a school's culture includes intentional efforts in retaining and training professionals in the field who represent the diverse background of the students or, at a minimum, apply culturally responsive practices. When schools integrate the lived experiences and cultural realities of youth and promote a high degree of educational excellence, youth are likely to demonstrate increased academic performance and a strong sense of belonging.^{71,72} Black youth in the United States enter schools where there is a minimal representation of teachers and other school professionals who look like them.^{73,74} School professionals are often from homogenous racial backgrounds may have limited exposure to racially diverse youth. Teachers may be unaware of their biases or may not be cautious about how they perpetuate race-related trauma. A focus on training school personnel to identify correlates between racism, health, and learning among racially diverse populations can position school personnel to serve as advocates in changing the school's culture.

School districts can also increase efforts to hire and retain professionals from racially diverse populations. These efforts may not ameliorate race-related trauma but are essential in bringing in models that represent the racial makeup of students. Frequently, black youth are required to overcome conflict because teachers misinterpret their cultural expression and norms. Increasing more professionals in the workforce who represent the cultural backgrounds of young people can improve how schools reduce bias.⁷² When youth have access to cultural models and messages that reinforce positive racial socialization they begin to develop a positive racial regard.⁷⁵ Research indicates young people who possess a positive racial identity are more likely to perform better in school and possess a high level of assuredness and confidence in their social relationships.⁷⁶

Conclusion

The framework for race-related trauma proposes causal links between macro- and micro-level forces of racism and effects on the well-being of black youth. Mitigating race-related trauma begins by building a school culture that values the cultural realities of racially diverse youth, entails transparent practices, and integrates families and community members in governance and decision-making. These recommendations may seem unattainable for schools immersed in varied political, economic, and cultural contexts; however, the recommendations offered in the discussion provide models for schools serving a high degree of diverse students and families. Building a culture of health in schools for youth require schools to uphold the ideal of racial equity and their stakeholders to hold them accountable in achieving this ideal. Opportunities that allow young people, their parents, community partners, and school personnel to engage in conversations around race and racism and access the supports needed to reduce conflict and promote restorative practices offer some promise.

REFERENCES

1. US Centers for Disease Control and Prevention. Health of Black or African American non-Hispanic population. 2016. Available at: <https://www.cdc.gov/nchs/fastats/black‐health.htm>. Accessed November 10, 2017.
2. US Department of Health and Human Services. Mental health and African Americans. 2016. Available at: <https://minorityhealth.hhs.gov>. Accessed November 10, 2017.
3. Bridge JA, Asti L, Horowitz LM, et al. Suicide trends among elementary school-aged children in the United States from 1993 to 2012. *JAMA Pediatr.* 2015;169:673-677.
4. Bradshaw CP, Mitchell MM, O'Brennan LM, Leaf PJ. Multilevel exploration of factors contributing to the overrepresentation of black students in office disciplinary referrals. *J Educ Psychol.* 2010;102:508-520.

5. Skiba RJ, Horner RH, Chung CG, Karega Rausch M, May SL, Tobin T. Race is not neutral: a national investigation of African American and Latino disproportionality in school discipline. *School Psychol Rev.* 2011;40(1):85-107.
6. Gilborn DA. Selection, and institutional racism in schools. In: Olssen M, ed. *Culture and Learning: Access and Opportunity in the Classroom.* Greenwich, CN: Information Age Publishing; 2009:279-297.
7. Lleras C, Rangel C. Ability grouping practices in elementary school and African American/Hispanic achievement. *Am J Educ.* 2009;115:279-304.
8. Clark R, Anderson NB, Clark VR, Williams DR. Racism as a stressor for African Americans: a biopsychosocial model. *Am Psychol.* 1999;54:805-816.
9. Gee GC, Ford CL. Structural racism and health inequities: old issues, new directions. *Du Bois Rev.* 2011;8:115-132.
10. Harrell CJ, Burford TL, Cage BN, et al. Multiple pathways linking racism to health outcomes. *Du Bois Rev.* 2011;8:143-157.
11. Franklin AJ, Boyd-Franklin N, Kelly S. Racism and invisibility: race-related stress, emotional abuse, and psychological trauma for people of color. *J Aggress Maltreat Trauma.* 2006;6:9-30.
12. Bogart LM, Elliott MN, Kanouse DE, et al. Association between perceived racial discrimination and race/ethnic disparities in problem behaviors among preadolescent youths. 2013. *Am J Public Health.* 2012;103:074-1081.
13. English D, Lambert SF, Ialongo NS. Longitudinal associations between experienced racial discrimination and depressive symptoms in African American adolescents. *Dev Psychol.* 2014;50:1190-1196.
14. Bryant-Davis T, Ocampo C. Racist incident-based trauma. *Couns Psychol.* 2005;33:479-500.
15. Carter RT. Racism and psychological and emotional injury: recognizing and assessing race-based traumatic stress. *Couns Psychol.* 2007;35(1):13-105.
16. Harrell SP. A multidimensional conceptualization of racism related stress: implications for the well-being of people of color. *Am J Orthopsychiatry.* 2000;70(1):42-57.
17. Helms JE, Nicolas G, Green CE. Racism and ethnoviolence as trauma: enhancing professional training. *Dent Traumatol.* 2010;16:53-62.
18. Feagin J, Bennefield Z. Systemic racism and U.S. health care. *Soc Sci Med.* 2013;103:7-14.
19. Christians JC. *Understanding the Black Flame and Multigenerational Education Trauma: Toward a Theory of Dehumanization of Black Students.* Lanham, MD: Lexington Books; 2014.
20. Merkwae A. Schooling the police: race, disability, and the conduct of school resource officers. *Michigan J Race Law.* 2015;21:147-180.
21. Deák J. African American language and American linguistic cultures: an analysis of language policies in education. 2017. Available at: <https://repository.upenn.edu/cgi/viewcontent.cgi?article=1191&context=wpel>. Accessed October 1, 2016.
22. American Psychiatric Association (APA). *Diagnostic and Statistical Manual of Mental Disorders-5.* Falls Church, VA: APA; 2013.
23. Gellerman B. "It was like a war zone": busing in Boston. Available at: <http://www.wbur.org>. Accessed September 5, 2015.
24. "With an even hand": Brown v. Board at fifty. Available at: <http://www.loc.gov/exhibits/brown/brown-aftermath.html>. Accessed September 5, 2015.
25. Peguero AA. Violence, schools, and dropping out: racial and ethnic disparities in the educational consequence of student victimization. *J Interpers Violence.* 2011;26:3753-3772.
26. Sanders-Phillips K. Racial discrimination: a continuum of violence exposure for children of color. *Clin Child Fam Psychol Rev.* 2009;12:174-195.
27. Peskin MF, Tortolero SR, Markham CM. Bullying and victimization among black and Hispanic adolescents. *Adolescence.* 2006;41:467-484.
28. Sue DW, Capodilupo CM, Holder AMB. Racial microaggressions in the life experience of black Americans. *Prof Psychol Res Pr.* 2008;39:329-336.
29. Ford D, Botelgho G, Conlon K. Spring Valley high school officer suspended after violent classroom arrest. 2015. Available at: <http://www.cnn.com/2015/10/27/us/south-carolina-school-arrest-video/index.html>. Accessed October 30, 2015.
30. Yan H. Male officer slam female high school student to the floor. 2017. Available at: <http://www.cnn.com/2017/01/04/us/north-carolina-officer-body-slams-student/>. Accessed January 15, 2017.
31. Schulz LL, Rubel DJ. A phenomenology of alienation in high school: the experiences of five male non-completers. *Prof Sch Couns.* 2011;14:286-298.
32. Houchins DE, Shippin ME. Welcome to the special issue about the school-to-prison pipeline: the pathway to modern institutionalization [introduction]. *Teach Educ Spec Educ.* 2012;35:265-270.
33. Hatt B. Still I rise: youth caught between the worlds of schools and prisons. *Urban Rev.* 2011;43:476-490.
34. Payne YA, Brown TM. The educational experiences of street-life-oriented black boys: how black boys use street life as a site of resilience in high school. *J Contemp Crim Justice.* 2010;26:316-338.
35. Factor R, Williams DR, Kawachi I. Social resistance framework for understanding high-risk behavior among nondominant minorities: preliminary evidence. *Am J Public Health.* 2013;103:2245-2251.
36. Natvig GK, Albrektsen G, Adderssen NO, Qvarnstrom U. School-related stress and psychosomatic symptoms among school adolescents. *J Sch Health.* 1999;69:362-368.
37. Walker LJ, Goings RB. A dream deferred: how trauma impacts the academic achievement of African American youth. In: Finigan-Carr N, ed. *Linking health and education for African American Students' Success.* New York, NY: Routledge; 2017:3-11.
38. Basch CE. Aggression and violence and the achievement gap among urban minority youth. *J Sch Health.* 2011;81:619-625.
39. Fuller-Rowell TE, Cogburn CD, Brodish AB, Peck SC, Malanchuk O, Eccles JS. Racial discrimination and substance use: longitudinal associations and identity moderators. *J Behav Med.* 2012;35:581-590.
40. Pachter LM, Bernstein BA, Szalacha LA, Coll CG. Perceived racism and discrimination in children and youths: an exploratory study. *Health Soc Work.* 2010;35:61-69.
41. Sanders-Phillips K, Kliewer W, Tirmazi T, Nebbitt V, Carter T, Key H. Perceived racial discrimination, drug use, and psychological distress in African American youth: a pathway to child health disparities. *J Soc Issues.* 2014;70:279-297.
42. Chavous TM, Rivas-Drake D, Smalls C, Griffin T, Cogburn C. Gender matters, too: the influences of school racial discrimination and racial identity on academic engagement outcomes among African American adolescents. *Dev Psychol.* 2008;44:637-654.
43. Tobler AL, Maldonado-Molina MM, Staras SA, O'Mara RJ, Livingston MD, Komro KA. Perceived racial/ethnic discrimination, problem behaviors, and mental health among minority urban youth. *Ethn Health.* 2013;18:337-349.
44. Respress BN, Small E, Francis SA, Cordova D. The role of perceived peer prejudice and teacher discrimination on adolescent substance use: a social determinants approach. *J Ethn Subst Abuse.* 2013;2:279-299.
45. Chambers BD, Erausquin JC. Race, sex, and discrimination in school settings: a multilevel analysis of associations with delinquency. *J Sch Health.* 2018;88:159-166.
46. Cogburn CD, Chavous TM, Griffin TM. School-based racial and gender discrimination among African American adolescents:

- exploring gender variation in frequency and implications for adjustment. *Race Soc Probl.* 2011;3:25-37.
47. Walsemann KM, Bell BA, Maitra D. The intersection of school racial composition and student race/ethnicity on adolescent depressive and somatic symptoms. *Soc Sci Med.* 2011;72:1873-1883.
 48. Seaton EK, Douglass S. School diversity and racial discrimination among African American adolescents. *Cultur Divers Ethnic Minor Psychol.* 2014;20:156-165.
 49. Cooley-Strickland M, Quille TJ, Griffin RS, Stuart EA, Bradshaw CP, Furr-Holden D. Community violence and youth: affect, behavior, substance use, and academics. *Clin Child Fam Psychol Rev.* 2009;12:127-156.
 50. Daisy NV, Hien DA. The role of dissociation in the cycle of violence. *J Fam Violence.* 2014;29:99-107.
 51. James SE, Johnson J, Raghavan C, Lemos T, Barakett M, Woolis D. The violent matrix: a study of structural, interpersonal, and intrapersonal violence among a sample of poor women. *Am J Community Psychol.* 2003;31:129-141.
 52. Albdour M, Krouse HJ. Bullying and victimization among African American adolescents: a literature review. *J Child Adolesc Psychiatric Nurs.* 2014;27:68-82.
 53. Cedeno LA, Elias MJ, Kelly S, Chu BC. School violence, adjustment, and the influence of hope on low-income, African American youth. *Am J Orthopsychiatry.* 2010;80:213-226.
 54. Gower AC, McMorris BJ, Eisenberg ME. School-level contextual predictors of bullying and harassment experiences among adolescents. *Soc Sci Med.* 2015;147:47-53.
 55. Taylor BG, Stein N, Burden FF. Exploring gender differences in dating violence/harassment prevention programming in middle schools: Results from a randomized experiment. *J Exp Criminol.* 2010;6:419-445.
 56. Goings RB, Walker LJ. Disrupting the myth of Black male inferiority. In: Beachum DF, Obiakor FE, eds. *Improving Educational Outcomes of Vulnerable Children: Starting from the Bottom.* Svedala, Sweden: Oakleaf Books; 2008:101-116.
 57. Townsend Walker BL. Teacher education and African American males: deconstructing pathways from the schoolhouse to the "big house". *Teach Educ Spec Educ.* 2012;35:320-332.
 58. US Department of Education. School climate and discipline. 2014. Available at: <https://www2.ed.gov/policy/gen/guid/school-discipline/index.html>. Accessed November 26, 2018.
 59. Johnson SL, Burke JG, Gielen AC. Prioritizing the school environment in school violence prevention efforts. *J Sch Health.* 2011;81:331-340.
 60. Osher D, Fisher D, Amos L., Katz J, Dwyer K, Duffey T, Colombi DG. Addressing the root causes of disparities in school discipline: an educator's action planning guide. 2015. Available at: <https://safesupportivelearning.ed.gov/addressing-root-causes-disparities-school-discipline>. Accessed November 26, 2018.
 61. Osher D, Cogshall J, Colombi G, Woodruff D, Francois S, Osher T. Building school and teacher capacity to eliminate the school-to-prison pipeline. *Teach Educ Spec Educ.* 2012;35:284-295.
 62. Henderson DX, DeCuir-Gunby J, Gill V. "It really takes a village": a socioecological model of resilience for prevention among economically disadvantaged ethnic minority youth. *J Prim Prev.* 2016;37:469-485.
 63. Ngo V, Langley A, Kataoka SH, Nadeem E, Escudero P, Stein BD. Providing evidence based practice to ethnically diverse youth: examples from the cognitive Behavioral intervention for trauma in schools (CBITS) program. *J Am Acad Child Adolesc Psychiatry.* 2008;47:858-862.
 64. Kataoka S, Jaycox LH, Wong M, et al. Effects on school outcomes in low-income minority youth: preliminary findings from a community-partnered study of a school trauma intervention. *Ethn Dis.* 2011;21:S1-S71.
 65. Gregory A, Clawson K, Davis A, Gerewitz J. The promise of restorative practices to transform teacher-student relationships and achieve equity in school discipline. *J Educ Psychol Consult.* 2016;26(4):325-353.
 66. Fronius T, Persson H, Guckenburger S, Hurley N, Petrosino A. Restorative justice in US schools: a research review. 2016. Available at: <https://www.wested.org/resources/restorative-justice-research-review/>. Accessed November 15, 2017.
 67. Anfara Jr. VA., Evans KR, Lester JN. Restorative justice in education: what we know so far. 2015. Available at: <https://www.tandfonline.com/doi/pdf/10.1080/00940771.2013.11461873>. Accessed October 15, 2017.
 68. Stevenson HC. Fluttering around the racial tension of trust: proximal approaches to suspended black student-teacher relationships. *Sch Psychol Rev.* 2008;37:354-359.
 69. Black DS, Fernando R. Mindfulness training and classroom behavior among lower-income and ethnic minority elementary school children. *J Child Fam Stud.* 2014;23:1242-1246.
 70. Greenberg MT, Harris AR. Nurturing mindfulness in children and youth: current state of research. *Child Dev Perspect.* 2012;6:161-166.
 71. Borrero NE, Flores E, de la Cruz G. Developing and enacting culturally relevant pedagogy: voices of new teachers of color. *Equity Excell Educ.* 2016;49(1):27-40.
 72. Dobbie W, Fryer RG Jr. Are high-quality schools enough to increase achievement among the poor? Evidence from the Harlem Children's zone. *Am Econ J Appl Econ.* 2011;3:158-187.
 73. American Psychological Association. Health disparities and mental/behavioral health workforce. Available at: <http://www.apa.org/about/gr/issues/workforce/disparity.aspx>. Accessed April 15, 2016.
 74. US Department of Education. The state of racial diversity in the educator workforce. 2016. Available at: <https://www2.ed.gov/rschstat/eval/highered/racial-diversity/state-racial-diversity-workforce.pdf>. Accessed November 1, 2016.
 75. Hughes D, Rodriguez J, Smith EP, Johnson DJ, Stevenson HJ, Spicer P. Parents' ethnic-racial socialization practices: a review of research and directions for future study. *Dev Psychol.* 2006;42:747-770.
 76. Sellers RM, Copeland-Linder N, Martin PP, Lewis RH. Racial identity matters: the relationship between racial discrimination and psychological functioning in African American adolescents. *J Res Adolesc.* 2006;16:187-216.