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## Healing Racial Trauma and Reframing the Miseducation of U.S. America: Altering Exclusionary Textbooks as a Therapeutic Experiential

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**Healing Racial Trauma and Reframing the Miseducation of U.S. America:  
Altering Exclusionary Textbooks as a Therapeutic Experiential**

By

Kamaria Erin Wells

A culminating thesis, submitted to the faculty of Dominican University of California in partial fulfillment of the requirements for the degree of Master of Arts in Marriage and Family Therapy

Dominican University of California

San Rafael, CA

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## Abstract

This exploratory mixed-methods, arts-based research investigated the therapeutic impact of fusing art therapy, group therapy, altered book making and alternative therapeutic modalities on self-efficacy, self-awareness, community efficacy and awareness, and reduction of racial trauma symptomology. The intention of the study was to understand the experiences of mental health professional participants (n =5), consequent to four therapeutic group sessions. Participants disclosed experienced symptoms of race-based PTSD pre and post sessions via the University of Connecticut Racial/Ethnic Trauma Survey, in addition to qualitative data. Qualitative data consisted of artwork, written responses, and exit interviews confirming the hypothesis that this radical healing experiential would be cathartically empowering and renewing for participants, fostering a renewed perspective of their self and community efficacy and awareness. The findings determined intersectional implications for future research, art therapy psychology, and the field of education to facilitate research on new healing experientials to reduce symptomology of racial trauma, and to challenge and change the omissive and emotionally abusive status quo.

*Keywords:* art-based research, art therapy psychology, altered book making, critical consciousness, intersectionality, narrative theory, racial trauma, race-based trauma, radical healing, self-efficacy, public education

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## **Chapter I: Introduction**

In a utopia, the educational experience would be wonderfully equitable for all children and adults; equal resources, accurate and equal representation of influential figures and quality caring staff for all. Unfortunately, this is not the case for many children, especially students of Color. The added dimension of the experience for students of Color is the traumatic deliberate delivery of misinformation, omission of historical events that reinforce a culturally violent white supremacist agenda (Grinage, 2019; Mcgee & Stovall, 2015; Woodson, 1933) The psychological impacts of an oppressive, exclusionary, and alienating education are lifelong and unmeasurable.

### **Problem Statement**

Race was created in the nineteenth century to excuse the inhumane treatment of people of Color (DeGruy, 2005; Smedley & Smedley, 2005; Talwar, 2019). In the United States, it is the social construct that labels people according to their skin complexions, language and features (Carter, 2007c; DeGruy, 2005; Smedley & Smedley, 2005; Talwar, 2019). This ideology created an education system that has inevitably made racial trauma an inescapable aspect of the educational experience (Carter, 2007a; Davis & Francois, 2021; Grinage, 2019; Offutt-Chaney, 2019; Souto-Manning & Emdin, 2020)

Racism is defined as the discriminatory treatment of members of an ethnic or racial group as a result of unfavorable opinions of said group (Carter, 2007; Chou et al., 2012; Polanco-Roman et al., 2016). Recent studies have linked traumatic symptomology to racial trauma (Pieterse & Carter, 2010; Solórzano, 1998), also referred to as race-based traumatic stress (Carter, 2007b; Carter & Forsyth, 2007) . Among groups of Asian Americans, Black Americans Hispanic Americans, Latinx Americans, and Black Americans. Symptoms of racial trauma have

included disassociation, posttraumatic stress disorder, major depressive disorder, anxiety, intergenerational trauma, increased cortisol levels, high blood pressure, poor self-concept, hopelessness, anhedonia, agoraphobia, substance use disorders, agoraphobia lacking a history of panic disorder (Carter, 2007b; Carter et al., 2019; Chou et al., 2012; Comas-Díaz et al., 2019; Franklin-Jackson & Carter, 2007; Kang & Burton, 2014; Polanco-Roman et al., 2016).

Racist encounters occur everywhere, it is an inescapable part of life for people of Color living in a society dominated and controlled by interconnected multilevel cultural violence that is white supremacy. Systemic racism has impacted accessibility and equity in every aspect of livelihood: healthcare, education, housing, employment, daily living, relationships, careers, community development and safety.

In pre-COVID childhood, people spent a significant amount of time in school, for the typical child, more time than at home. The powerful and inevitable mental health impact that school experiences have on individuals has been repeatedly proven. Fortunately, mental health is moving to the forefront of psychological research, therefore it is an ethical obligation to observe the negative impacts of an education system created to support a culturally violent agenda.

Imagine being able to count the number of significantly personal representational historical figures presented in textbooks, in fourteen years of schooling, on one hand. This coupled with having predominately white teachers and classmates, throughout the educational experience. This is only if high school is the last level of education achieved, as this exclusionary experience continues throughout schooling and seamlessly transitions into professional life. Contextually, most mainstream textbooks for elementary, middle, high school, undergraduate and graduate levels are intentionally historically, and remain, culturally omissive and dismissive regarding pioneers of Color in various respective fields (Talwar, 2019; Woodson, 1933). Some

textbook companies have gone as far as blatantly lying about the history of chattel slavery in the United States and the experiences of enslaved people (Billington, 2021; Keller et al., 1996; Khan, 2021; Patel et al., 2019; Strickland, 2014; Wasburn, 1997). This repeated exposure to inaccurate and harmful material adversely impacts all exposed, especially as it relates to interpersonal relationships and expectations of others.

Racist encounters are unavoidable for anyone of Color. In an educational environment there are guaranteed interactions with racist classmates, teachers, school personnel, and professors, in addition to daily life transactions, at every level. This is often perpetuated via inappropriately labeling by assuming that disengaged students need testing instead of appropriately adjusting their teaching style to meet the various learning styles present in the classroom. This also contributes to the labeling that feeds into the pipeline to prison. Teachers who solely distribute worksheet packets, sans any engaging lessons, also presume students have behavioral problems or learning disabilities instead of assessing the impact of the environment. Four-year-old children are smart enough to observe preferential treatment, especially due to of skin Color, this has lasting effects of esteem and wellbeing (Davey, 1977; Guerrero et al., 2011; Spencer, 1984). Experiencing racism in an educational setting has been a normalized rite of passage (Mcgee & Stovall, 2015; Woodson, 1933), it is time to make that passage right and closely analyze the impacts of ongoing racist encounters in an environment that should be empowering for everyone.

### **Personal Significance**

A perspective of privilege asserts that school is a safe space for everyone. I am sad to say, this is untrue for most people, especially nonwhite students. Unfortunately, I have been subjected to racist professors and gaslighting throughout my graduate experience,

even being told that my symptoms of racial trauma, in the form of distrust, was a “personal problem to work through” in group supervision amongst supervisees. On another occasion, I asked a different professor if I could look at her books to determine which to buy, the immediate response was “Aren’t you going to buy your own?” In a subsequent class, this same professor happily volunteered to share a book with a student who happened to be white. Another professor, who once worked at a historically Black college, felt the need to reiterate this every single class and proceed to speak about Black people as though we were foreign and not part of U.S. society. After a different professor emailed her new students to come to campus to purchase her assigned pamphlet for class. Because the administrative assistant was out of the office, I was looking in a common area where the pamphlets may have been. The professor interrupted her doctoral class to ask “can we help you?” I had never witnessed a professor stop their class to question someone’s presence.

This professor also blatantly ignored the two Black students, out of nine students present, during this class, throughout the 16 hours we spent in class over the weekend. In another class, she refused to learn the names of students with non-Anglo names, in spite of leading daily name games where everyone had to repeat their name. These experiences coupled with the pin drop of silence that followed sharing encounters with racism, in comparison to the eager words of support in response to accounts of family members with mental illness or people disclosing their own struggles was disappointing and disheartening. Some of these events were reported, none were addressed. Not all were reported due to the response or lack thereof to the problematic behavior of professors and the culture of the school.

Curriculum content ignored the contributions of pioneering art therapists of Color, to the extent that I had to reach out to an outside source to obtain a copy of a dissertation by Dr. Lucile

Venture, the first person to earn her doctorate in art therapy, who happens to be a Black woman. Dr. Venture, nor other pioneers of Color were spoken of in three credit classes. The one course offered on cultural humility was a three-week course, only offered in the summer, a mere two weeks was reserved for cultural relations, the third week was dedicated to studying mandalas. These are merely some of my graduate school experiences, adding to the other racial aggressions I started experiencing in school, at six years of age.

### **Underlying Principle**

As experiences are reframed, it is important to reflect upon the individuals of Color who have survived white supremacy and are now in the helping fields, especially mental health professionals. As countertransference with racist encounters is almost inevitable, especially if they have not been presented with the opportunity to process their racial trauma. Many people of Color in therapy with white therapists do not discuss their racial trauma because of the discomfort that arises and wanting to appease the therapists' needs, instead of their own (Joseph, 2006; Talwar, 2019).

Numerous people of Color have experienced racism within the therapeutic setting because they had a therapist who was practicing outside of their scope (Hamrick & Byma, 2017; Joseph, 2006; Talwar, 2019). Clients have endured minimizing and prejudicial commentary and expectations; metamorphosing an experience from therapeutically empowering to traumatizing and ostracizing (Hamrick & Byma, 2017; Talwar, 2019). The substantial majority of practicing therapists are white women who have minimal experiences with and training on racial trauma (Hamrick & Byma, 2017; Joseph, 2006). Ethics courses do not review systemic racism ethically or soundly. Discomfort with racial matters is common and therefore a rarely explored in therapy; leaving significant unresolved trauma for the client to carry. It is of the utmost importance to

provide the space for healing, for the significantly few therapists of Color (French et al., 2020; Hamrick & Byma, 2017; Martínez et al., 2010; Talwar, 2019).

The severity of racial trauma can have lasting impacts on the collective community, if not rectified. The state of the U.S.' Black community is a good example of a community that has been repeatedly terrorized, traumatized and impaired at the hands of white supremacist systems (French et al., 2020). Although this is an extreme comparison, therapists who carry regularly reinjured trauma are likely to carry this into sessions, have consequential physical health symptoms and burnout (Talwar, 2019).

### **Research Question**

This study was a mixed methods approach, applying qualitative and quantitative data to determine the effectiveness of this intervention. This design model was chosen to enhance insight of the experiences and processes of respondents, as qualitative methodologies aim to understand individual experiences on a personal, not empirical level (Leavy, 2017). A sequential exploratory design with an emphasis on the qualitative data will facilitate understanding of the respondents' experiences. The primary research question is: How does processing educational racial trauma utilizing exclusionary educational texts illuminate self-awareness, self-efficacy, and the therapeutic experience for human service professionals of Color? This research study examined participant responses in a series of therapeutic group sessions that encompassed various forms of art making, reflective writing, altered book making, and a consistent closing group grounding ritual. It is critical to do research to determine how much racial trauma impacts therapists. Not only are therapists of Color carrying their trauma, but they are also at risk of vicarious trauma and potential subsequent burnout. This is exacerbated when the therapist is working in an environment where they are consistently experiencing implicit and explicit racism.



Based upon theoretical research, this study offers the potential of providing insight into the benefits and effects of art therapy and its perspective relationship with racial trauma processing and symptomology relief. It has the potential to offer individuals insight into systemic oppression as it relates to the educational process and racial trauma, thus increase resilience and resistance from internalizing racism, and relief from some symptoms of PTSD.

## Chapter II: Literature Review

### Origins of Race, White Supremacy and Capitalism

Race is a concept that was developed in the nineteenth century to reinforce rationalization for the maltreatment and elimination of others (Carter, 2003; DeGruy, 2005). Racialized or Darwinian scientists adapted these beliefs to justify the variance of intellect, health, wealth and education among various ethnicities within colonized societies and circumstances (Hirschman, 2004; Smedley & Smedley, 2005). The pre-existing ethnocentrism supported the monocultural gravitation that typically occurs within societies, however, it does not encompass the intentional and deliberate harm that racism causes (Hirschman, 2004).

Africans historically integrated into European society without any prejudice due to their physical differences. Emphasis and value was placed on religion and language through the Middle Ages through the fourteenth century, artwork from these times reinforce this history of harmonious integration (Hirschman, 2004; Smedley & Smedley, 2005). The foundation of racism began when Christians established regional dominance and began ostracizing Jews and Muslims in certain regions of Europe during the late thirteenth century, even those who converted, because they were not “pure Christians” (Hirschman, 2004). The way early Christians were treated by non-Christian groups is referred to as “othering.” This occurs when groups of people differentiate themselves from other groups in order to create a societal hierarchy (Carter, 2007b; Smedley & Smedley, 2005). As a psychological term, ethnicity refers to a group of people who share commonalities among language, diet, customs, place of origin, religion and history (Hirschman, 2004; Smedley & Smedley, 2005).

It is important to note that this does not translate into a homogenous subgroup; diversity is embraced and indistinctness within ethnic groups is the standard (Hirschman, 2004). This has occurred within ethnic groups on a myriad of microlevels, including socio-economic status, skin-complexion, education level, religious affiliation and sexuality (Adams & Vincent, 2019). There is evidence of precolonial instances of colorism within various ethnic groups, however this was due to complexions correlating with outdoor work and leisure, racism was not yet a developed concept (Golash-Boza, 2016). It is also significant to note that physical features should never be associated with a particular ethnicity. Variations exist within ethnicities because of migration patterns and intermarrying. However, due to the nature of racialized propaganda assumptions are a commonality (Smedley & Smedley, 2005).

While these separations occur within ethnic groups and cultures, other phenomenon simultaneously develop; an easier identifiable recognition of one's own race and ethnocentricity, especially if an individual is primarily exposed to one ethnic group during their first year of life, termed the other-race effect (Anzures et al., 2013; Hirschman, 2004; Smedley & Smedley, 2005). As migration to various parts of the world occurred, "othering" transformed into a man-made racial stratification system that differentiated people solely on complexion, physical features and hair texture (DeGruy, 2005).

In the 17<sup>th</sup> century, whilst chattel slavery was becoming increasingly popular, categorizations of "race" simultaneously emerged from Europe (Hirschman, 2004; Smedley & Smedley, 2005). Classifying certain groups of people as inferior made it easier to accept the terrorism that was committed against these populations. It made turning a cheek to the ongoing rape, exploitation, and genocide of Native, Black, Latino and Asian bodies feasible and justifiable; the colonizers felt it was part of social order (DeGruy, 2005; Talwar, 2019). By

classifying groups of people who physically appear different as subhuman, these Christians had no qualms with capturing, kidnapping, and enslaving people. As colonization occurred, religious colonization was also imperative. To discourage rebellion and strengthen psychological control, the Bible was censored and given to enslaved persons without chapters condemning slavery, merely containing 14 of the 66 Protestant books of scripture, intentionally omitting the story of Exodus; the story of Moses leading the enslaved out of captivity (Shepherd, 2019).

### **The Foundation of the United States of America**

As the U.S. was developed and created, the founding white men created legislation and systems that upheld and reinforced their positions of power and white supremacy (Golash-Boza, 2016). The center of white supremacy facilitated division amongst the disenfranchised, thus leading to an ongoing battle for civil rights that persists to present day. In 1785, Thomas Jefferson was the first politician to write about the “inferiority of the Negro” in his book, *Notes of the State of Virginia*, where he vehemently rationalized chattel slavery and other inhumane and hypocritical practices (Smedley & Smedley, 2005). Smedley (2005) reveals this book was originally published in Paris, as it was used to justify and galvanize the support of chattel slavery. The text was subsequently published in the U.S. to support the racist agenda set forth. This inspired racialized “scientific” explorations that would support and implement this social order, only to have zero scientific merit (Golash-Boza, 2016; Smedley & Smedley, 2005; Talwar, 2019).

The systems and legislation developed around racial exclusion continue to impact every single aspect of livelihood and we continue to adhere to rules of racial stratification despite knowing race does not exist. Racist ideology is strategically interwoven into the foundational fabric of the U.S. Golash-Boza (2016) describes racist ideology as values having two major

components; divide people into racial groups and serve the interest of one group. Critical Race Theory was developed in the mid-1970s by Derrick Bell, Alan Freeman and Richard Delgado during the Critical Legal Studies Movement (Caldwell & Crenshaw, 1996) based upon Karl Marx and Frederick Engels' idea of Critical Theory described in their book, *The German Ideology* (Golash-Boza, 2016). The foundation of this theory postulates that the concepts of dominate class are the sole concerns of said class (Golash-Boza, 2016). Throughout the history of the U.S. through present day, there has only been one dominate group, white people.

### **Societal Impact**

The significance of racial trauma has resulted in substantial mental health disparities amongst all populations of Color. Due to the nature of racial trauma, occurring daily and intergenerationally, it is important to analyze and observe it cumulatively. Indigenous people in the United States suffer from depression, substance abuse, intergenerational trauma and unresolved grief (Brave Heart et al., 2011; Carter et al., 2019; Pieterse et al., 2010).

Collectively and similarly, Black people have significant rates of depression, anxiety, heightened cortisol levels, obesity, higher occurrences of substance use disorders, and a shorter life span (Bryant-Davis, 2007). The consequences of colonization have impacted communities of Color significantly, despite their education level or socio-economic status, as alienation and insecurity indubitably contribute to mental health challenges (Carter, 2007c; DeGruy, 2005; Joseph, 2006; Pieterse et al., 2010). Recently, researchers have determined that racial trauma is a form of Posttraumatic stress disorder with a substantial impact on most of the population, including individuals of European decent (DeGruy, 2005). Not only are people suffering from mental and physical symptoms of racial trauma, there are also collective areas of life adversely impacted.

## **Economic Impact**

According to a recent study conducted by Citigroup, systemic racism has cost the United States economy \$16 trillion in growth potential (McEnergy, 2020). Traditional discriminatory practices of banks account for approximately \$13 trillion, due to refusal to loan to Black owned businesses. Income inequality has cost approximately \$2.7 trillion, while Black unemployment has consistently been significantly higher than other groups, despite job market strength (McEnergy, 2020).

Ironically, in Compton, CA, approximately one in five residents are living below the poverty line, double the national average. In an effort to combat this, the Compton Pledge was developed (Aklilu, 2020). This program will guarantee income for 800 low-income residents for two years in an effort to “challenge the racial and economic injustice plaguing both welfare programs and economic systems,” stated Mayor Aja Brown (Aklilu, 2020). The Compton Pledge will also be accessible to the “irregularly or informally employed residents, immigrants of varied legal status and formerly incarcerated”(Aklilu, 2020). The Citigroup study effectively determined if discriminatory practices cease, especially regarding banks scarce lending to Black businesses, over the next five years the economy could grow by \$5 trillion (McEnergy, 2020). It has been estimated that 70% of Black children who grew up in the middle class will fall out of this classification as adults. Ultimately, this continued economic wealth gap will cost the U.S. economy between \$1 trillion and \$1.5 trillion between 2019 and 2028 (Noel, N ; Pinder, D ; Stewart, S; Wright, 2019)

## **Intersectionality Theory**

Compartmentalization of identity is impossible for people of Color in spaces controlled by whiteness. Kimberlé Crenshaw introduced the world to the framework of intersectionality,

while addressing the intertwined societal issues of Black and Latina women in shelters. Intersectionality incorporates categories like race, gender, sexuality, socio-economic status and other sources of identity to challenge single-axis theories applied to people facing multiple levels of oppression (Crenshaw, 1989; Harris & Leonardo, 2018). As systems have developed, the interconnectedness of various elements of life are inevitable. First and foremost, the perceived race of a person in the U.S. will influence the experiences of said person. It will likely impact how they are treated at a store, the expectations some educators have of them, their mobility at work, the assumptions servers make about tipping potential, the list is never ending. The education level, socio-economic level, sexual orientation, gender orientation, political affiliation, ability level, have reflexivity, as Collins (2015) and Talwar et al (2019) describe. Reflexivity is when one uses themselves as a point of reflection as it regards to their social position and understanding how interactions are shaped by politics, society, culture and systems (Cole, 2009; Collins, 2015; Harris & Leonardo, 2018; Talwar, 2019).

### **Healthcare Disparities**

When reflecting upon experiences and circumstances, it is critical to observe significantly impactful systemic patterns on macro and micro levels. While someone may belong to an affluent socio-economic class, being classified or perceived as a Black, or another minoritized person, informs experiences in “spaces of affluence”, typically in a negative manner because the foundation of these spaces is built upon white supremacy and dominance (Harris & Leonardo, 2018). As evidence has repeatedly shown, an educated upper-class Black woman will not receive the same treatment in a healthcare facility as an educated upper-class white woman, solely because of the color of her skin. All Black women share the same health disparities because of a discriminating system that has reinforced the stereotype of them having a higher threshold for

pain. Furthermore, there is a common general disregard for what Black patients disclose to most health professionals due to trust issues (Howell & Zeitlin, 2017). Black women are more likely to die from pregnancy related complications than white women, Native Americans, Asians, Pacific Islanders and particular subgroups of Latina women also suffer from heightened maternal mortality rates (Howell & Zeitlin, 2017). Awareness of these disparities reinforces racial trauma and problems with trusting systems and may contribute to pregnancy complications. These disparity rates have not changed despite improved medical interventions and technology.

Recently shortened telomeres have been linked to racial trauma, especially among Black populations (Lu et al., 2019; Thomas et al., 2021). Telomeres are the caps at the end of each strand of DNA that protect our chromosomes, similar to plastic coating on the end of shoelaces. This coating protects the ends, if they wear down, they become tattered and unfunctional, just as without telomeres, DNA strands become damaged, and our cells can't perform optimally. The length of the telomere is deemed of aging and premature morbidity and mortality, which have been connected to chronic stress and racism (Chae et al., 2020; Lu et al., 2019; Thomas et al., 2021).

### **Intergenerational Trauma/ Historical Trauma Response**

Internationally across cultures, traditions, rituals, practices, customs, and religion are passed down intergenerationally. Unfortunately, along with positive things shared among generations are also negative habits and practices, even those developed out of resilience. Intergenerational trauma, also referred to as historical trauma, is trauma that has been passed down through families. According to the DSM-5, trauma is “directly experiencing the traumatic events actual or threatened death, serious injury or sexual violence, witnessing, in person, the



events as it occurs to others and experiencing repeated or extreme exposure to aversive details of the traumatic event” (American Psychiatric Association, 271).

Diagnostic criteria for Post-Traumatic Stress Disorder (PTSD) in adults include “recurring distressing memories of traumatic events, dissociation, distressing dreams of the trauma, persistent avoidance of the stressor and associated stimuli, changes in cognitions and mood about self-concept, alterations in arousal and reactivity” (American Psychiatric Association, 2013). Wilkin and Hillock (2015) acknowledge and highlight that since PTSD’s first appearance in the DSM-III, there has been no acknowledgement of the intersectionality of trauma. Feminist theorists have criticized this diagnosis, as it is contextless (Wilkin & Hillock, 2014) . Factors such as identified racial or ethnic group, gender, sexual orientation, socio-political climate, socio-economic status, education, and other interconnected factors are not acknowledged as influential factors on life experiences.

The DSM-5 has also omitted the physical long-term health consequences of any trauma. Robert T. Carter (2007) developed the Race-Based Traumatic Stress Injury Model due to the significance of racial trauma and it not being recognized in the DSM-5. Despite the American Psychological Association’s (APA) negligence in contextualizing trauma, independent research has connected symptomology of elevated blood pressure, increased cortisol levels, chronic disassociation, anhedonia, substance use disorders, agoraphobia sans a history of panic disorder to racial trauma (Bryant-Davis, 2007; Carter, 2007b; Chou et al., 2012; Comas-Díaz et al., 2019; Franklin-Jackson & Carter, 2007; Kang & Burton, 2014; Polanco-Roman et al., 2016) .

The APA first published the DSM in 1952, based upon clinical research and feedback from drug and insurance companies, the legal system, and policy makers (Talwar, 2019). Diagnoses were based upon theories of biology, medical and psychoanalysis; homosexuality was

categorized as a psychiatric disorder until 1973, when this was modified. The National Institute of Mental Health postulates that the DSM is a subjective and unempirical reference manual (Talwar, 2019). The APA earns \$5 million yearly from the publication, additionally there are benefits from pharmaceutical companies that remain undisclosed (Talwar, 2019). These are elements of systems created to support systemic categorical oppression, the capital that is deeply intertwined with these actions, and how they impact generations of communities of Color. In 1851, the height of the antebellum South, Samuel Cartwright, a physician from Louisiana, created the term drapetomania to describe the “diseased Negros” who ran away to save their lives, minds, and families for freedom.(Bynum, 2000).

As individuals are exposed to traumatizing situations, emotional issues develop (Carter, 2007b; DeGruy, 2005; Kang & Burton, 2014). These emotional issues transform into projections onto children and other family members; thus, creating intergenerational or Historical Trauma (HT) (Lev-Wiesel, 2007). Attachment styles are also learned intergenerationally, attachment patterns are especially significant because they impact all relationships, communication styles and perceptions of the world. Lez- Wiesel’s (2007) research on intergenerational trauma of three generations with three Israeli families illustrated how consequential emotional states of trauma; sadness, anger and shame have been passed down via secondary trauma. Secondary trauma results when an individual learns of a family member or loved one’s traumatic experiences and develops symptoms congruent to PTSD (Lev-Wiesel, 2007).

The mass genocide and forced dislocation of Native American people has subsequently lead to significant occurrences of depression and substance abuse; a Native person is five times more likely to die from alcohol related reasons than a white person (Brave Heart et al., 2011). Brave Heart (2011) identifies HT as the “cumulative emotional and physiological wounding

across generations, including the lifespan, which emanates from massive group trauma.”

Depression and anger are particularly prevalent among Native and Black populations in the US (Brave Heart et al., 2011; Carter, 2007b; Franklin-Jackson & Carter, 2007; Kang & Burton, 2014).

These populations have also been effectively omitted from mainstream educational textbooks and narratives (Chatmon & Watson, 2018; Woodson, 1933), Native peoples more so than Black people, which inevitably impacts identity formation, self-esteem, self-confidence and hope (Du Bois, 1903; Sinha & Rasheed, 2018; Woodson, 1933). The personality and resilience level of an individual is an important factor in whether one inherits intergenerational trauma or secondary trauma (Lev-Wiesel, 2007). Carter (2007) asserts that significant research has determined that people of Color experience stress whenever encounters with racists individuals, institutions and cultures occur. Therefore, because all colonized populations are coping with racial trauma on a myriad of levels it is critically important to provide spaces and opportunities for healing. This includes continuing the dialog on the impacts of racism in spite of discomfort in situations, acknowledging and naming racism for what it is (Banerjee et al., 2020; Bryant-Davis, 2007). Most significantly, identifying the role white supremacy has played in the educational system; traumatizing students throughout their childhood and adolescence, impacting and informing self-concept and perspective (DeGruy, 2005; Sinha & Rasheed, 2018).

### **The University of Connecticut Racial/ Ethnic Trauma Survey (UNRESTS)**

The UNRESTS was created utilizing the format of DSM-V's Cultural Formulation Interview, unfortunately, this DSM-V survey neglects analyzing the role of racism in relation to identity (Williams et al., 2018). The student researcher chose the UNRESTS for data collection because it encompasses qualitative questions, and most significantly utilizes aspects of the DSM-

V that would enable clients to be appropriately diagnosed and receive care more suited to their symptomological needs.

Symptomatic qualifications for posttraumatic stress disorder according to the DSM-V include the following:

A. Exposure to actual or threatened death, serious injury or sexual violence. includes. This includes direct experience, witnessing or learning the traumatic event(s) occur to a close family member or loved one, or experiencing repeated or extreme exposure to aversive details of the traumatic events.

B. Presence of one (or more) of the following intrusive symptoms associated with traumatic events beginning after the traumatic event, occurred. Recurrent involuntary and intrusive distressing memories of the events. Recurrent distressing dreams in which the content and/or effective the dream(s) are related to this traumatic event. Dissociative reactions in which the individual feels or acts as if the traumatic events were occurring.

C. Persistent avoidance of stimuli associated with the traumatic event(s) beginning after the traumatic event occurred, as evidenced by one or both of the following. Avoidance of efforts to avoid distressing memories, thoughts, or feelings about. Or closely associated with traumatic events. Avoidance of or efforts to avoid external reminders, including people, places, conversation, or activities. Objects in situations that arouse distressing memories, thoughts, or feelings about or closely associated with the traumatic events.

D. Negative alterations in cognitions and mood associated with the traumatic events beginning or worsening or after the traumatic event occurred as evidenced by two or more of the following. Inability to remember an important aspect of the traumatic event. Distorted cognitions about the cause that lead to self-blame or others.

E. Marked alterations in arousal and reactivity associated with the traumatic events. Beginning or worsening after the traumatic events occur, as evidenced by two or more of the following: Irritable behavior and angry outbursts. Reckless or self-destructive behavior. Hypervigilance, exaggerated, startled response problems with concentration, or sleep disturbance.

F. Duration of disturbance (criteria, C, D, and E) is more than one month.

G. The disturbance causes clinically significant distress or impairment and social, occupational, or other important areas of functioning.

H. The disturbance is not attributable to the physiological effects of a substance or another medical condition.

## **Narrative Therapy**

For these research purposes, a narrative is defined as an account of an event or events, commonly referred to as storytelling. Throughout civilizations, storytelling has been utilized to carry on traditions, share family history as well as societal history (White & Epstom, 1990). A

story can empower people to become the best versions of themselves or discourage and disenfranchise them. A dominant story is one that is told by the ruling class that is omissive and biased. The power of storytelling drew the attention of David Epstom and Michael White, eventually inspiring them to co-create narrative therapy. White and Epstom (1990) looked at Bruner's work with Native American populations to understand how dominant stories impact oppressed communities. Similarly, other people of Color have been intentionally excluded from dominant stories in education curriculum, thus impacting identity, self-efficacy, expectations of success. By utilizing narrative therapy approaches, the researcher can aid participants in externalizing the problem of white supremacy and change their relationship with the problem and their experiences (White & Epstom, 1990). White and Epstom analyze dominant stories for accuracy, realizing that dominant stories are not accurate for most individuals lived experiences.

Externalization will provide space for individuals to access alternative meanings for their problems, revise their relationship with the problem and navigate ways of coping with systemic oppression (White & Epstom, 1990). Narrative therapy allows the individual to re-examine truths for self and determine options for dealing with the externalized problem by redefining the story, which also empowers the individual (White & Epstom, 1990). Reframing stories to produce unique outcomes is ideal for marginalized populations to understand their experiences from a new lens. This approach also entails asking individuals questions that are; deconstructive, reconstructive, encourage story development, interpret meaning, and extension of future. In order to help reinforce and redefine their new story, clients are also encouraged to write letters (White & Epstom, 1990).

## **Art Therapy and Altered Books**

The American Art Therapy Association defines art therapy as “an integrative mental health and human Services profession that enriches the lives of individuals, families, and communities through our active artmaking, creative process, applied psychological theory, and human experience within a psychotherapeutic relationship...art therapy is used to improve cognitive and sensory-motor functions, foster self-esteem and self-awareness, cultivate emotional resilience, promote insight, enhance social skills, reduce and resolve conflicts and distress, and advance societal and ecological change.”(2017, p. 1) This creative process can include painting, collaging, drawing, sculpting, and other 3-D creations. Art therapy functions is an approach to psychotherapy that creates a bridge amongst unconscious thoughts and feelings, difficult to articulate experiences and emotions.

Venture (1977) discusses the need for art therapy in Black communities throughout her dissertation, in an article written 29 years later, Joseph (2006) reiterates the same need, as well as the incredible potential to reach this community via art therapy. Furthermore, Joseph (2006) highlights the significance of intersectionality for people of Color and the importance of societal factors for individuals in a therapeutic setting. According to Rubin (2001) the foundation of art therapy is art with two principal elements, symbolizing and seeing. Art is a creative process that allows the artist to tell a story of experience, the implementation of symbols by the art maker is a nonthreatening way of sharing a narrative. There is also variation and significance of symbols that exists amongst Black communities. Because of the diaspora, it is imperative for therapists to communicate with the patient around the significance instead of projecting significance (Joseph, 2006)

Kramer (2001) describes art as a storyteller of transformation that provides the space for witnessing. The significance of utilizing books to process racial trauma in the educational setting is key, especially for marginalized populations that were once punished by death for becoming or attempting to become literate and educated. Altered book making is an ideal experiential to facilitate the manifestation of externalization, reframing, and resilience to racial trauma because it naturally encompasses aspects of storytelling due to the nature of books. Altered book making helps explore various narratives within the dominant story, externalize problems and envision unique outcomes (Cobb & Negash, 2010).

The altered book I created was a response to enduring twenty-four years of culturally violent education. I was given an assignment to create an altered book and an accompanying statement following narrative therapy theory. I examined and sat with three very different books for about a month, the others were a National Geographic and book on making small fountains. The choice was a visceral and intergenerational response, integrating the traumas I inherited from my parents, grandparents, great-grandparents, great-great grandparents, and great-great-great grandparents endured as they were trying to better their lives and the lives of future generations. The process and the product were liberating, a sense of advocacy and urgency flooded me. While it was a beautiful experience to create this response art, I felt the need to continue so that others may share this sense of empowerment and strength that I never truly experienced in a history class. All of my history teachers in high school were white men, I have a distinct memory of wanting to correct one of them for his butchering of Dr. Du Bois' name, but I was afraid of the consequence of correcting him in front of the class. I whispered the correct pronunciation to my friend and classmate instead. Merely one of countless of instances I felt it

was unsafe to share my knowledge, creating a conflict within and developing grudges against myself because I put my grades before my integrity and knowledge.

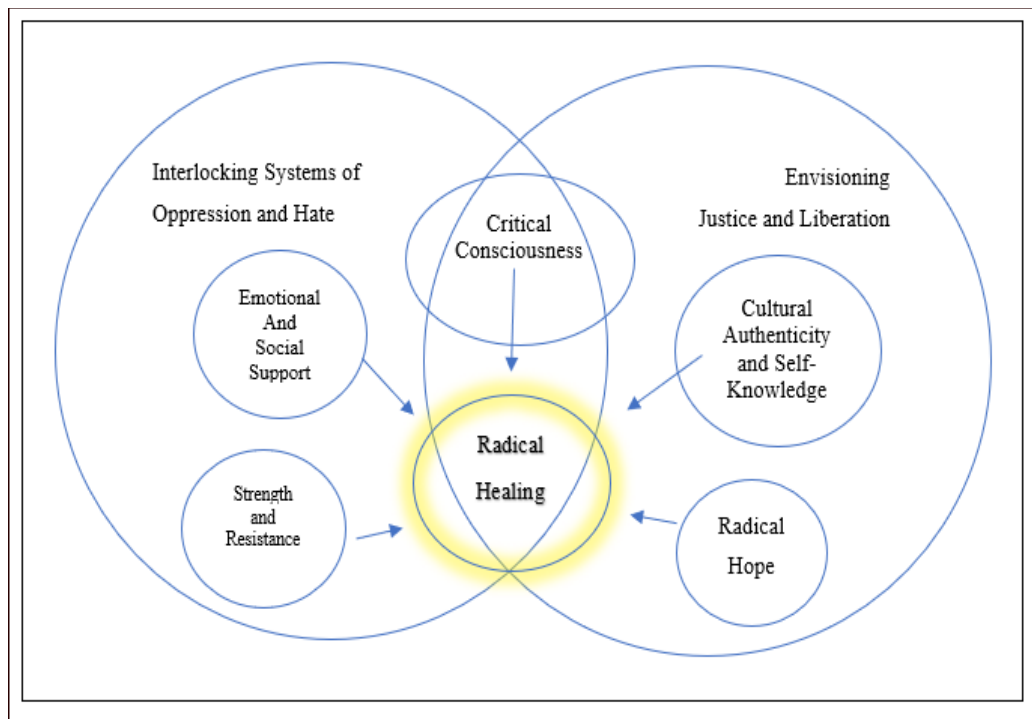
### **Radical Healing and Critical Consciousness**

Critical consciousness has been determined to be an essential element in understanding the process of healing for marginalized populations (El-Amin et al., 2017; Ginwright, 2010). It entails analyzing and recognizing the inequality that systems continuously reinforce and committing oneself to combating these systems. Paulo Freire conceptualized the term while working with disenfranchised laborers in Brazil in an effort to help them understand their plight better and learn how to combat it (El-Amin et al., 2017). Significant research indicates that critical consciousness of one's oppressive systems can change sentiments of self-blame and isolation as it relates to engagement and a collective struggle for social justice (El-Amin et al., 2017; Ginwright, 2010). Carter (2008) postulated that when critical consciousness is taught within the context of a racialized society, Black students are especially motivated to actively resist oppression and defy negative academic stereotypes.

Radical healing is a conglomeration of various psychological theories that challenge the Eurocentric status quo in order to foster real healing. Ginwright (2010) formulated radical healing to encompass a Venn diagram of interlocking systems of oppression and hate with envisioning justice and liberation integrated with critical consciousness, cultural authenticity and self-knowledge, radical hope, emotional and social support, and strength and resistance. This theory is illustrated in Figure 1. Black psychology, Liberation psychology, Ethnopolitical psychology, intersectionality, and testimonies are key theoretical components for radical healing to occur (Comas-Díaz, 2000; French et al., 2020; Ginwright, 2010).



Black psychology postulates that Eurocentric psychology has minimal application to Black lives and experiences; facilitating the liberation of people of the African diaspora requires an element of self-determination to cultivate an appropriate and applicable for community needs, reinforcing Du Bois' (1903) concept of double consciousness (French et al., 2020). French (2020) explains that Liberation psychology describes the impact of oppression and the significance of working towards justice in order to free oneself from oppression. Ethnopolitical psychology is centered around a curated emancipatory framework for healing from racial trauma(Comas-Díaz, 2000; French et al., 2020).



*Figure 1 This is an illustration of the components of radical healing.*

### **Community-Defined Evidence**

Community-defined evidence challenges the status quo of Eurocentric standards that do not account for the needs of minoritized communities (Bernal & Scharro-del-Rio, 2001; Lucero,

2011; Martínez et al., 2010; Miranda et al., 2003). Evidence-based Practice (EBP) adheres to limited and exclusionary empirical standards, they typically reference “well-defined manualized interventions and treatments that show evidence of positive impact in randomized controlled trials (Martínez et al., 2010).” EBP was designed under the parameters of the dominant culture’s standards and norms, that are exclusionary by design. The parameters of these standards do not account for the complexity of the intersectionality of life as it pertains to marginalized populations. In order to properly combat racism, it is imperative to challenge systems and methodologies that reinforce these standards. The Community Defined Evidence Project (CDEP) recommends analyzing practices used by communities that they have determined to produce positive results overtime (Aguilar-Gaxiola et al., 2010; Martínez et al., 2010). In order to help bridge the gap of disparities, it is important to explore innovative ways of healing that can be tailored to the needs of neglected and mistreated populations.

### **Chapter III: Methodology**

This chapter will report the specific methods implemented during this study, approaches to collecting and analyzing data. Additionally, this chapter will discuss the population studied, location, protection of human participants, measurements implemented, the design study, procedures, data analysis, confidentiality, and matters of consent.

#### **Research Questions and Hypothesis**

This study was a mixed methods approach, utilizing qualitative and quantitative data to determine the effectiveness of this intervention. This design model was chosen to better understand the experiences and processes of respondents, as qualitative methodologies aim to understand individual experiences (Leavy, 2017). The study examined participant responses in a series of therapeutic group sessions that encompassed various forms of art making, reflective writing, altered book making, and a consistent closing group grounding ritual. The primary research question was:

How does processing educational racial trauma utilizing exclusionary educational texts illuminate self-awareness, self-efficacy, and the therapeutic experience for therapists and human service professionals of color? It was hypothesized that:

1. Symptoms of racial trauma would decrease after participating in four 90-minute sessions integrating art therapy, narrative art therapy and altered book making, as measured by the University of Connecticut Racial/ Ethnic Stress and Trauma Survey (UNRESTS)
2. Qualitative responses will indicate a renewed and improved sense of self-efficacy, self-actualization, and community collaboration

3. The artwork would be a symbol of strength for participants, refocusing, reframing, and externalization of the problem. This will be assessed by self-report scales and the qualitative questionnaire.

### *Exploratory Questions*

Additional exploratory questions were: What themes, meanings and testimonies will emerge from artwork and qualitative questions asked of participants? How will this impact self-efficacy? How may this impact individual's view of global colonialism? How will these art interventions impact participant's daily life and interactions related to their professions?

### **Participants**

The participants involved in this student research project were Asian, Black/ African, Latina and Indigenous adults working in human service fields who had experienced racial trauma directly and vicariously in various stages of their life. While the area of focus was education, the workplace was also a commonly reported location of racial aggression. Due to this being an online experience, it allowed participants to partake in this experience from California, Connecticut, and Washington D.C.

Adult participants were recruited utilizing social media, snowballing and email requests. Due to the nature of the study, and the student researcher wanting to work with people intrinsically motivated to process their racial trauma, incentives were not offered to participants. The student researcher felt this may have impacted reported outcomes and wanted to maintain integrity with regards to any materialistic influence.

The participants were adults of Color working in human service fields, including two art therapists, a school-based counselor supervisor/ Licensed Clinical Social Worker, a public health graduate student, and an art therapy graduate student. Each participant identified the

public modern-day lynching of George Floyd by police officers as a source of collective trauma. In order to maintain integrity with regards to the humanizing and radical healing aspects of this research, pseudonyms were used in lieu of numbers or letters for participants. These are a few responses to a pre-session interview that inquired about historical educational experiences. The first question asked was “How did educational experiences impact your self-efficacy?” The transcripts of the interviews can be viewed in the Appendix I.

“This is one of the biggest things I’ve thought about, in elementary school I was still in Agawam I had friends who saw me as really shy. I was shy, moving to a new town allowed me to put those things behind me. In middle school I felt unpopular, I did well, but I didn’t feel like I could fully be myself with others, talking to certain people. It got better in High school but felt really behind and eventually I stopped trying. In college, I started finding people I could fully be myself with.”

“School was really challenging, making friends and assignments in math were difficult. School was a safe place generally because I could get away from home.”

“Self- efficacy was very connected to education, I felt very capable, I skipped three grades. I know that if I did badly, it was because I didn’t put in the work.”

“Extremely, I would definitely say knowing the history of things and having the ability to critically think has given me the tools to understand racism and how I can combat it and knowing I have blind spots, schooling and education on your own can enhance yourself.”

“My dad was a teacher; education has always been valuable and enabled me to have conversations in different spaces in academia.”

Table one provides more information about the demographic information of participants.

*Table 1 Descriptive Statistics: Participant Demographics (N=5)*

	N
<b>Gender</b>	5
Men	1
Women	3
Non-binary	1
<b>Race: Latinx</b>	5
Non-latinx	3
Latinx	2
<b>Race: Asian</b>	5
Non-asian	4
Asian	1
<b>Race: Black</b>	5
Non-black	3
Black	2
<b>Sexual orientation: heterosexual</b>	5
Not volunteered	2
Heterosexual (volunteered)	3
<b>Marital Status</b>	5
Unmarried	2
Married	3
<b>Age</b>	5
29 and under	2
30-39	2
50 and Over	1
<b>Education: Highest Degree</b>	5
Bachelor's degree	2
Master's degree	3

*Note The two participants with BAs were in graduate programs during this study.*

Prior to the treatment, participants were also asked questions to score their level of ethnic identity, scores ranged from seven to twelve out of a possible twelve. Ethnic identity incorporates values, ideals, behaviors, and opinions one has as it regards their membership of a distinguishable group (Utsey et al., 2002; Williams et al., 2018). Utsey (2002) further explains that ethnic identity is a way of understanding how in depth one has investigated the meaning of

their identity. According to Williams et. al (2018) assessing for a baseline of ethnic identity and socialization allows the clinician to better understand the client's distress contextually. Ethnic identity score can range from 0-12, scores ranging from 0-3 are considered low, 4-8 average, and 9-12 high, for people of Color. Cari scored a 7, average range, while Gayle, James, Katie, and Rosalyn scored in the high range. Table 1 shows the respective scores of participants.

**Table 2** This table displays ethnic identity scores measured pre-sessions

<i>Participant</i>	<i>Ethnic Identity Score (12 max)</i>
Cari	7
Gayle	9
James	10
Rosalyn	11
Katie	12
Mean	9.8

The study occurred from March 13, 2021 to April 3, 2021. Participants submitted a total of 40 images of their artwork to a shared online album. Each session was facilitated by the student researcher, three participants, Cari, James, and Gayle, were able to partake in all four sessions.

### **Location**

Due to the international impacts of the pandemic, participants were able to participate from various regions of the country. Adults with access to Wi-Fi, a computer, and Zoom were able to participate. The student researcher initially had a goal of recruiting thirty participants but was only able to recruit five. Three participants were residents of California, one was a resident of Connecticut, and one a resident of Washington D.C.

## **Confidentiality**

All data was stored behind two locks, including a password protected computer. Names and identifying information are stored separately from the data. All data will be kept for seven years. Only the student researcher will have access to the data. All participant names were changed to pseudonyms to protect their identities and humanize their results, as using letters or numbers as identifiers is sterile and has dehumanizing implications.

## **Design**

This study was a mixed methods approach, utilizing qualitative and quantitative data to determine the effectiveness of this intervention. This design model was chosen to better understand the experiences and processes of respondents, as qualitative methodologies aim to understand individual experiences (Leavy, 2017). Qualitative elements included an open-ended questionnaire section as part of the UNRESTS Survey, and qualitative questions curated by the student researcher, as well as the artwork created by participants. Participants were asked to complete pretest and posttest scales to collect quantitative data, self-report inventories for symptoms of racial trauma accounted for in the UNRESTS were analyzed. Understanding of the respondents' experiences were gained by utilizing a sequential exploratory design with an emphasis on the qualitative data. Qualitative data was collected via interviews before and after the therapeutic experiential. Each session concluded with two strength-based questions that were evaluated alongside other qualitative data.

An art-based research (ABR) approach was included in the qualitative data and analyzed as a symbol of strength. ABR acknowledges the presumption that art can uniquely inform and educate us about experiences unmatched by other research methods (Barone & Eisner, 2012). Furthermore, art articulates new perspectives and experiences that may not be explored simply



through dialogue due to complexity. As respondents reprocess their experiences of education related racial trauma, they can begin to externalize some of their experiences and utilize the consequential art as a symbol of strength. The troubling complication regarding race-based trauma is that it has been normalized as a part of daily life for many. Media amplification of racist tragedies also compounds this trauma. Additionally, blatant legal double standards are common experiences within the United States for the global majority. Artwork will be analyzed alongside artist statements and reported symptoms for student researcher analysis.

### **Measures**

The student researcher better understood the context of the participants' experiences of racism within their cultural and community context, as well as the resultant symptomology of racial trauma utilizing the UConn Racial/ Ethnic Stress & Trauma Survey (UNRESTS) (APPENDIX c) via an interview pre-treatment and post-treatment. Qualitative demographic questions were utilized for baseline data, and session conclusion questions (APPENDIX f) were assessed for participant experience evaluation. Additionally, the altered books, in conjunction with participant explanations and responses to strength-based questions, and other artwork was evaluated via researcher assessment. The survey used is free from copyright. The statements of free and public use are included in the appendices with the survey.

Due to the ethical significance and integrity, the student researcher did not create a control group. The idea of a control group reinforces colonial norms that are by design exclusionary and limited in scope and understanding. Therefore, the most significant factors measured are individual symptomology over time. In an effort to achieve validity and reliability, qualitative, quantitative, and art-based measures were applied, including an anonymous qualitative survey shared with participants at the conclusion of the sessions.

## **Procedure**

The goals of the sessions were to help participants reframe the dominant, oppressive, exclusionary narrative typical educational curriculum reinforces, with a new perspective of accuracy. This was done to support processing racial trauma differently with increased resilience and resistance to internalization. Resources for racial trauma support were provided prior to the sessions starting, and at the conclusion of the study.

1. Participants selected a book, with direction that it should be fitting of the typically ommissive and stereotypical narrative.
2. The student researcher met participants for a total of four sessions, in addition introductory and conclusionary interviews phone or Zoom calls.
3. Each session included creative warm-ups, art making, and strength-based qualitative questions, and concluded with a ritual of guided deep breathing, guided visualization meditation accompanied by therapeutic frequency music.
4. Sessions three and four included letter writing to help reinforce the narrative reframing and problem externalization.

## **Prescreening**

Prior to the first session, the student researcher communicated with the perspective participants via phone to thoroughly explain the research, answer questions and determine eligibility of the participant. In order to build rapport and personalize the experience, as well as create a bridge to the sessions, the researcher collected information for the surveys via an interview on the phone or via Zoom. The length of conversations ranged from 1.5 to 2.5 hours. The nature of racial trauma is complex and an ongoing aspect of life. It was important to establish a space of trust and safety with each participant prior to the initiation of the group

sessions to support the possibility of vulnerability and courageous conversations. The student researcher explained the purpose of the research study, potential risks, benefits, confidentiality limitations, and the freedom to withdraw at will sans consequence. Additionally, the number of and duration of sessions, time requirement, and informed consent forms (APPENDIX B) required for the study. Participants were asked to review and sign consent forms and complete the UNRESTS pretest survey (APPENDIX C) via an interview, prior to the first session, and respond to qualitative questions. Participants will have the opportunity to ask any questions about the study. Participants will also be asked to sign artwork release forms so the researchers can use artwork, surveys and research information provided in the sessions for research purposes (APPENDIX B).

## **Sessions**

The initial two sessions were categorized as deconstruction because participants were invited to commence the intellectual, psychological, and physical deconstructions of their books. At that time, we observed text with a critically conscious and brazen lens, empowered to challenge and refute the mistruths and obstructions of integrity. The third and fourth sessions were categorized as filtration because participants were encouraged to filter through their experiences and books with a new lens that offered opportunity for reframing and refocusing. During the first session, participants were invited to utilize exclusionary texts, preferably one that was used in a class they took to fully reprocess their experiences. Material choices were person centered; participants were given a list of suggested materials and given the option of utilizing whatever spoke to them for their healing needs. Such items included pens, markers, highlighters, pencils (colored and regular), scissors, Xacto knife, three-hole punched lined paper, tissue paper, envelopes, construction paper, paper of various colors, glue, mod podge, yarn,

string, ribbon, stencils, stickers, hole punch, photographs, found items, fabric, art they wanted to incorporate, old projects or papers, report cards, assessments, and evaluations.

### *Deconstruction*

#### *Session 1*

Session one was predominately an introductory meeting to foster a sense of community and safe space so that participants felt comfortable processing their trauma with unfamiliar people. The session began with emotional check-ins to make everyone feel welcome as they were and to check for sources of potential emotional distress. The student researcher showed examples of altered books and reviewed the agenda for the sessions. The student researcher introduced herself to the group, explain the motivation of the research, shared the video of her altered book and accompanying statement, found here [https://youtu.be/p\\_diDZCAGKk](https://youtu.be/p_diDZCAGKk).

Participants were invited to introduce themselves and the books they choose. Introductory inquiries were: “Who do I admire and why? What brought you to this group? What does this research mean to you?” “I chose these books because.”

After looking at books with new perspective, participants were invited to warm up with a response scribble or line drawing for a few minutes and selecting the book to alter, as some participants were still deciding. The session closed with a ritual of guided deep breathing and a visualization meditation written by the student researcher. In an effort to support energetic, the student researcher consulted an energy specialist grounding, the student researcher played 417 HZ frequency music during the closing ritual, also holding the space with a potted rose plant, and burning palo santo. These elements of the session are akin to traditional means of healing that challenge Eurocentric norms and welcome alternative solutions to healing. She played music of the Solfeggio Frequency of 417 Hz, because it is connected to removing negative energy from

the body, home and other spaces, countering negative thoughts and behavioral patterns, undoing situations and facilitating change (Hart, 2017). Palo santo has been used for thousands of years by shamans and traditional healers, originating in Peru in Ecuador, palo santo is burned, referred to as smudging, in order to cleanse and repel evil spirits (Slade, 2020). Roses aid in healing emotional pain and support strengthening self-love that impacts love for others (Hunter, 2019).

### *Session 2*

The second session started with a check-in to begin on a grounding and care-based baseline. This was followed by a warm-up of scribble development. While warming-up, participants were asked to reflect upon their world lens and if it has been impacted by a refreshed perspective of the influence of colonial education. Next, participants were guided in creating an origami butterfly to inspire the metamorphic process of healing. If they were still deciding on a book, participants were asked to review the book that elicited the strongest response with these questions in mind: What are your observations? What emotions did you experience? What, if any memories come to mind? How does this make you want to alter your book? What materials are you drawn to? What is the most significant modification you want to do to the book? As participants worked on books independently for 40 minutes, the space was held by playing a soundscape of ocean waves, the student researcher verified that this was a comforting sound for everyone. Participants were encouraged to initiate conversation on the reactions they may have experienced while processing their books during shared independent co-creation time. After working on books independently, participants were invited to write a letter to their younger self. Qualitative questions to ponder and potentially write about or discuss were: what were your strengths as a child, and how did you feel after writing a letter to your younger self? The session closed with the same ritual of guided deep breathing and a visualization meditation written by the

student researcher accompanied by 417 Hz frequency music, burning palo santo and a potted rose plant.

### *Filtration*

#### *Session 3*

The third session began with check-ins to evaluate potential psychological distress, especially as it related to societal events. Followed by a warm-up of spiral drawings, with reflective question what does metamorphosis mean to you? and asking contributors to describe their resilience. Images of altered books were displayed while everyone worked collectively in separate spaces, held together by the sound of the ocean. The session concluded with the same ritual of guided deep breathing and a visualization mediation written by the student researcher accompanied by 417 Hz frequency music, burning palo santo and a potted rose plant.

Qualitative session conclusion sessions: How did your book incorporate inclusivity? How historically accurate is your book?

### *Reconstruction*

#### *Session 4*

The fourth session began with check-ins to evaluate potential psychological distress. Proceed by a warm-up of drawing swirls. Participants were invited to write a letter to a teacher they wanted to thank or whom they wanted to correct. Participants were allotted time to continue working of their books while space was held with an ocean soundscape. Images of altered books were continuously displayed. The session concluded with the same ritual of guided deep breathing and a visualization mediation written by the student researcher accompanied by 417 Hz frequency music, burning palo santo and a potted rose plant. Qualitative session conclusion

sessions: Observing your altered book, what emotions and sensations are you experiencing?

Describe your favorite sparkling moments in your journey.

At the beginning and the conclusion of the four sessions, a debriefing statement with the researcher's contact information, resources for mental health services and relevant organizations with appropriate resources was provided (APPENDIX G). Due to the social unrest society was collectively experiencing, the student researcher deemed it more ethical to share these resources prior to sessions commencing. Additionally, participants were given a post-survey questionnaire (APPENDIX H) to evaluate scales, the art activities, and the reconstructive storytelling process.

### **Data Collection**

The research study used qualitative and quantitative measures to evaluate the value and experience of the participants in the study. The URESTS was used to evaluate the context of racial trauma experience and subsequent symptomology. The prescreen demographic questions will be used for baseline qualitative data. The responses to strength-based session conclusion questions, letter to younger self, letter to book, and letter to teacher, artwork and artist descriptions will be used to measure qualitative effectiveness of the study. Participants were asked to submit photographs in a secured cloud space. Identity has been protected by assigning participants numbers for them to use on their art, letters, and responses, if they wished.

### **Data Analysis**

In an effort to be complicit with the process of radical healing, as well as approach this research with a community-defined evidence model, the researcher did not use an interrater assessment approach. The Community Defined Evidence Project (CDEP) asserts that typical evidence based practices based upon empirical measures do not account for what is most impactful for communities of color, this is also pertinent to facilitating a treatment for radical

healing, a relatively new concept in the psychology field (French et al., 2020; Martínez et al., 2010). Typically, students are encouraged to follow the blueprint of evidence-based practice, which follows the empirical standards with specific forms of evidence that can actually omit helpful interventions. Arts-based data was analyzed by observing the drawings and markings, color usage, and text usage/ interactions with pre-existing text alongside their qualitative responses. The student research found the accompanying written responses an imperative part of the analysis because of importance of the participants' voice and experience.

Quantitative data was analyzed according to the article written to explain the premise of the creation of UNRESTS (Williams et al., 2018), as well as to guide clinicians who are utilizing it in their practice. This assessment also includes a section that evaluates ethnic identity on a Likert Scale, qualitative life experience questions, as well as a symptomology portion. The thoroughness of this survey is why the student researcher selected it to utilize for this research project. Due to the sample size of participants being limited to five, the statistics cannot be generalizable, however they can be an indicator for future research.

### **Benefits**

Potential benefits of the research include increased self and community efficacy, self-awareness, decreased symptomology of racial trauma, such as relief of stress, anxiety, and depressive symptoms, as a consequence of externalizing oppressive narratives and reframing their experience. Additional benefits include improved resilience and resistance to future racist encounters, being able to provide better services for clients and students and developing a community of support with other survivors of racism.



## **Risks**

Emotional safety was key, which is why the researcher closed each session with a consistent grounding ritual via deep breathing and visualization. Risks for the study included emotional distress due to emotional flooding from exploring materials from their past that could have been triggering. Potential emotional flooding was mitigated by implementing a strengths-based approach and focusing on healing. The community space was held with a mutually agreed upon background sound of ocean soundscapes when independent co-creating occurred. A closing grounding ritual was also established at the conclusion of the initial session. It included guided deep breathing and a guided visualization meditation written by the student researcher.

Music therapy and alternative energetic healing modalities aligned with cultural healing traditions not present or considered in traditional western therapeutic practices. This was incorporated to reduce discomfort with sharing personal experiences in a group setting. Alternative therapies also supported allaying potential hesitance with experimenting with art approaches and materials the researcher facilitated different warm-up activities to do collectively. The participants were shown examples of altered books and displayed social justice art. To protect the participants from emotional risk, the debriefing statement provided in the first session included information for local therapists and counselors who accept sliding fee and organizations that provide resources for racial trauma (APPENDIX G).

## **Protection of Human Participants**

This research study followed the ethical guidelines of Notre Dame de Namur University, APA, and the Art Therapy Credentials Board (ATCB). The research proposal was approved by Notre Dame de Namur University's Institutional Review Board prior to the research being conducted.

## Chapter IV: Results

Chapter four explores the experiences of participants and the findings of this mixed methods study. Participants created altered books utilizing books they selected. They also completed qualitative writing prompts during the sessions and responded to qualitative questions post sessions.

The primary research question explored was: How does processing educational racial trauma utilizing exclusionary educational texts illuminate self-awareness, self-efficacy, and the therapeutic experience for therapists and human service professionals of color? Further explored was how this experience can impact their action and advocacy in professional roles and community activism.

### Findings

Consistent themes observed in the art entails superficial or transformational alterations, strength in isolation, humanizing, affirming, and illuminating, use of text, rejecting white supremacy, and transformational energy. These themes also emerged in qualitative responses, providing an articulation of the art and experiences they had, most significantly, increasing self-awareness and efficacy via affirming and illuminating, naming white supremacy, and the significance of a shared healing practice in managing this form of trauma.

Text was used in various ways; interacting with highlighted and/or underlined published text, as well as responding to bar graphs, maps, and imagery. Written art text themes independent of published text was parallel to written reflections and responses. This complimented the reported changes in symptoms of negative cognition, reported in the UNRESTS survey. Origami was used as a tool of energetic shifting and self-soothing when the material became too intense. Vivid colors were used alongside vibrant, diverse artwork and photography.

## Overarching Themes

Artwork was evaluated to determine themes present in art that were also reflected in written responses. Several themes emerged in art and writing displayed in Table 3.

**Table 3** *These are themes consistently present in artwork*

Content	Affirming and Illuminating
	Strength in Isolation
	Humanizing
	Rejecting white supremacy
	Transformational energy
Process/Materials	Superficial or Transformational Alterations

### *Strength in Isolation*

Exuding strength means resilience and resistance. In this context, it conveys rising above the limitations projected onto oneself and rejecting the second-class citizen status quo many people of Color are expected to accept. During session number one, participants were asked to create a drawing in response to the researcher's altered book video. In order to protect the identities of participants and to humanize them, pseudonyms are used instead of letters or numbers. Gayle, Cari, James, and Rosalyn responded with depictions of characters in solitude exuding strength, triumph, and determination, with elements of isolation. The postures of each the characters are standing upright, all with markings that show movement, illumination, or exertion. Three of the depictions utilized bright colors in their drawings. Each figure stands alone, sans symbolism of community or support.

Strength was depicted in drawings of people and of a cartoon personified brain. This imagery is a component in healing, as one must believe in their personal power and ability to navigate through and cope with challenges. When an individual believes in their strength, and the strength of the collective community, it is easier to overcome obstacles and difficulties. Belief in strength is a source of motivation to continue persevering and resisting unjust circumstances. Strength is what has held minoritized communities together and what supported focus on positive possibilities. While these images offer strength, they also illustrate the loneliness and isolation that most people of Color experience in white dominant settings. These images show people and representations of people alone, without community. The burden of correcting problems they are not responsible for can also be felt in some of this imagery.

A power pose is exhibited by a man in solitude in figure 3, drawn by Gayle.

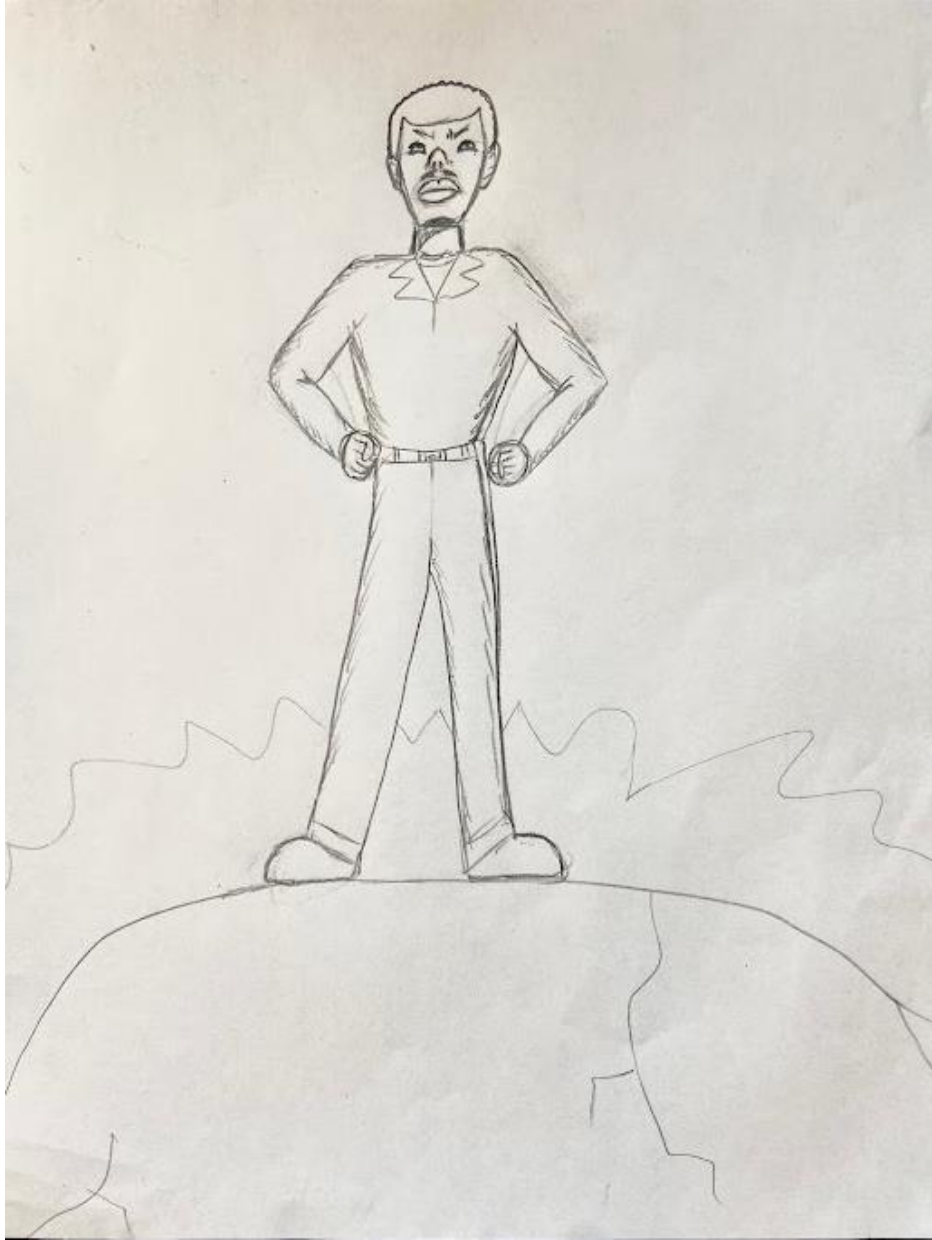
This character's hands are boldly postured on his hips, looking upright, standing on top of the world. Markings above the world that indicate illumination and power. When an individual stands erect with their chest out, looking upwards, hands brazenly postured on their hips, they exude the energy of power and strength. The man is also alone and without community, implying a solitary journey to triumph.

Figure 4, drawn by Cari, implies a struggle to maintain the balance and weight of the book, it contains upward moving markings, that suggest an exertion of resilient strength, in order to hold the weight of the metaphorical message and implications for societal standards and relationships. Cari drew a person carrying a heavy book on their back with markings illuding to movement and rising. Above and alongside their drawing, Cari wrote "Take out pages about BIPOC, gather, create beauty out of them, CENTER them. Memorialize sparking moments." This character is alone and doing the work without help.



*Figure 2 Artwork created by participants in response to the researcher's altered book video.*

James created a cartoon humanized brain with an uncertain expression gazing above, lifting heavy boulders while beads of sweat appear. Marks around the brains' knees indicate it using the strength of its legs to support it and push the heavy boulders into the air.



*Figure 3 Artwork created by Gayle in response to the researcher's altered book video.*

The brain presses the large boulders up and above its body, displaying ultimate strength and perseverance. The brain simultaneously exhibits strength, uncertainty, and a tinge of doubt by pushing the extremely heavy boulders over their head and the droplets that resemble the sweat of “blood, sweat, and tears” that are necessary for any arduous task

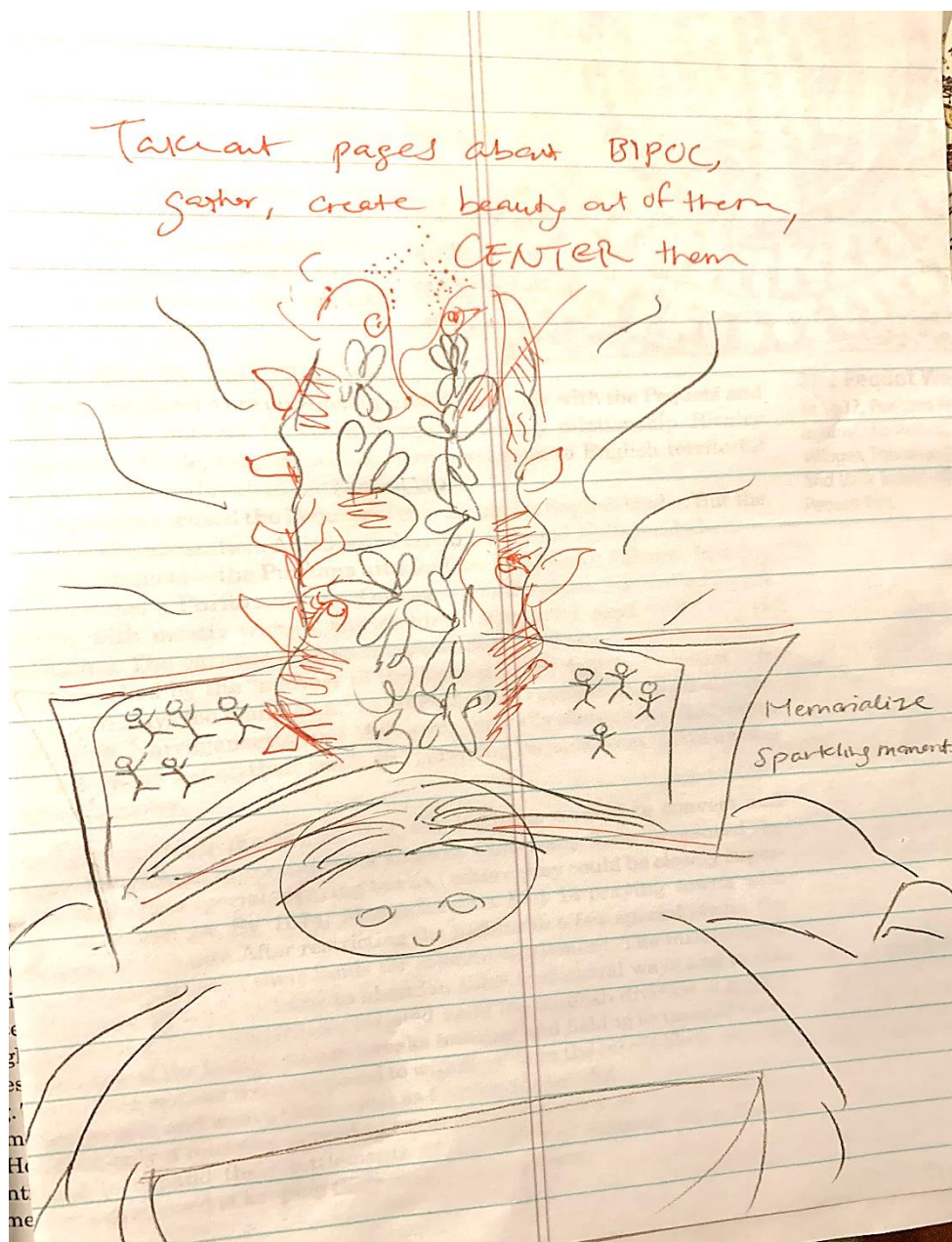
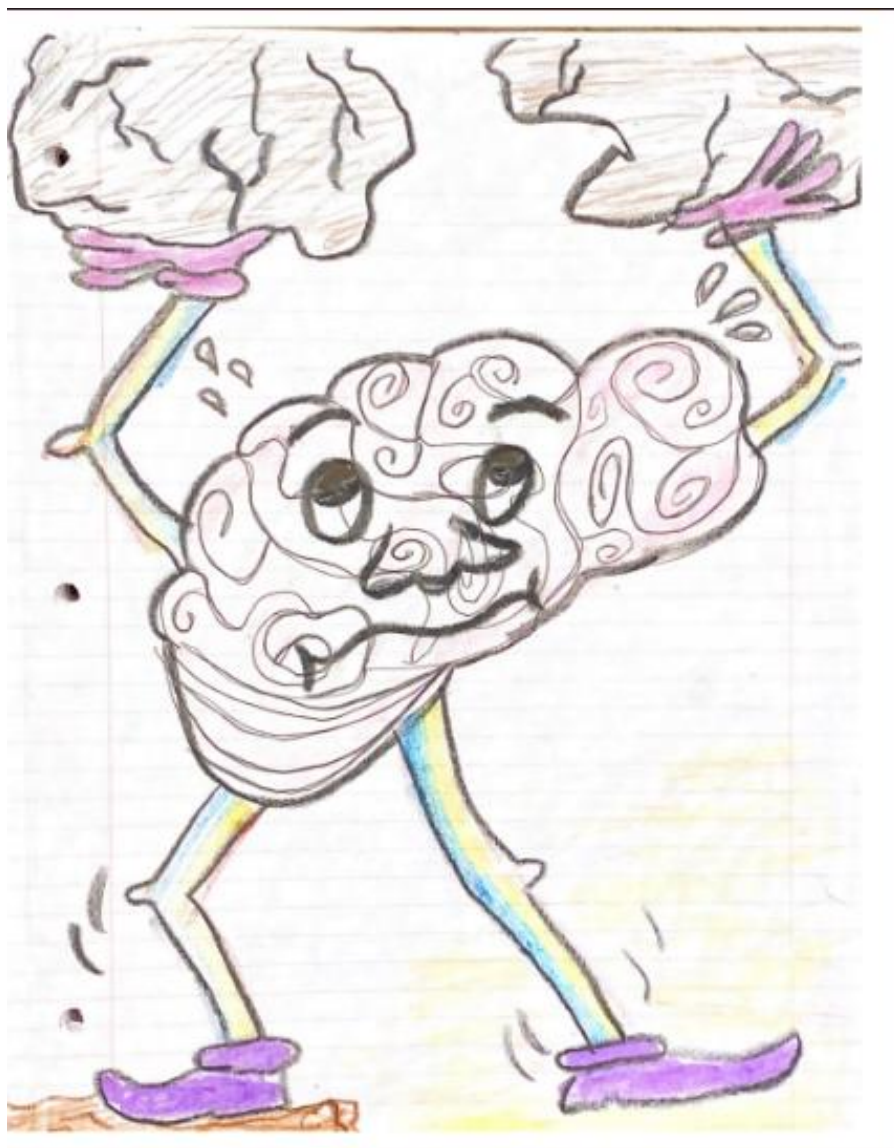


Figure 4 Artwork created by Cari in response to the researcher's altered book video.

There is also an element of the threat of being crushed by these huge items being pressed above the figure with great determination and grit. This character is isolated and doing the hard work sans assistance. Rosalyn drew an image to represent Tonantzin, meaning “Our Sacred Mother” in Nahuatl. She was a goddess worshipped by Aztecs and later altered to fit the Catholic





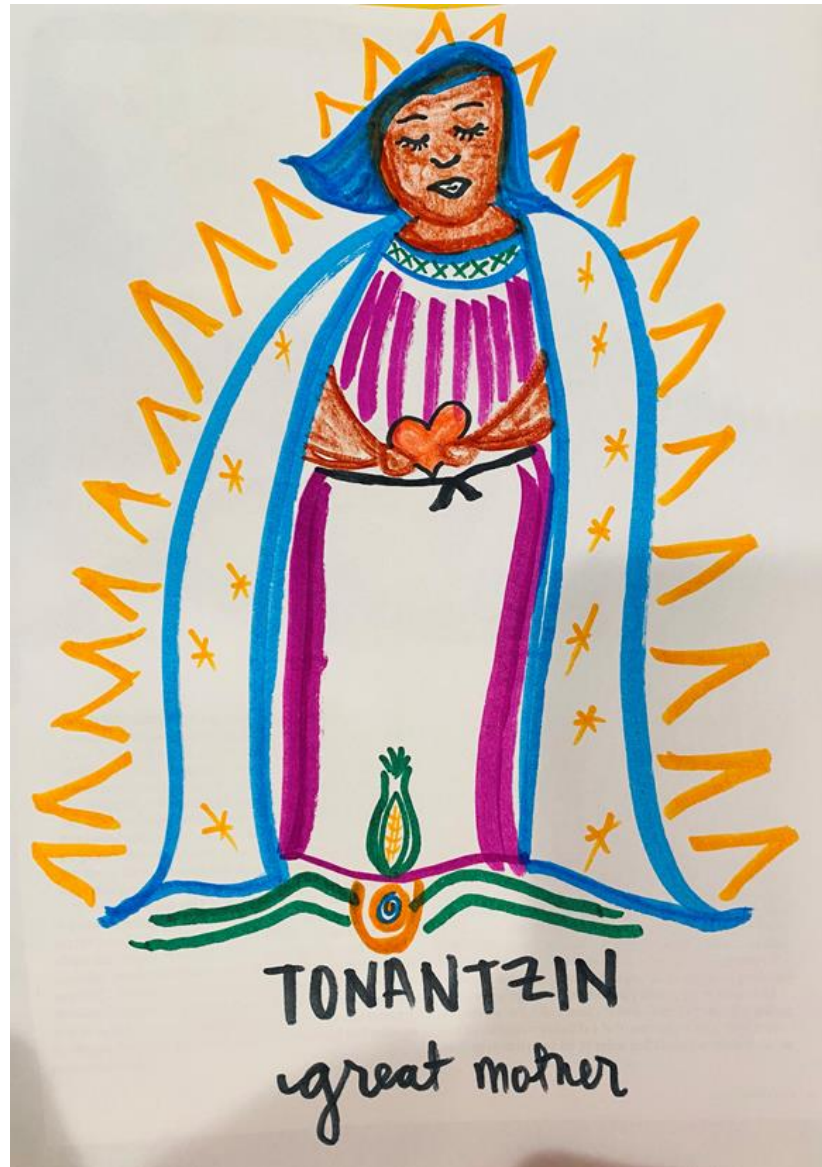
*Figure 5 Artwork created by James in response to the researcher's altered book video.*

version of the Virgin of Guadalupe. Vivid colors were used throughout the drawing, notably outlining the figure with yellow markings that convey an illumination and greatness. She too is standing alone in her environment.

### *Humanizing*

Humanizing is a significant element because of the level of depersonalization prevalent when textbooks recount narratives of enslavement, likely to evade guilt and accountability





*Figure 6 Artwork created by Rosalyn in response to the researcher's altered book video.*

This depersonalization can lead to dehumanizing, which also informs the unconscious and subconscious idea that Black people are subhuman. Thus, further amplifying the cognitive dissonance that permeates throughout society that causes people to respond to Black Lives Matter with all lives matter. Gayle and Cari both reignited imagery found in their respective texts to highlight the humanity of oppressed people represented in a sterile and matter of fact manner.

Humanizing images of enslaved and discarded individuals in educational text is important because of the role personalization plays with empathy. A diagram of captured humans aligned on a boat like retail products for sale reinforces an othering for many, that enables and encourages subhuman standards. When people are seen as others or significantly different, people are less likely to have compassion for their plight and circumstances, encouraging cognitive dissonance. Cognitive dissonance is a contributing factor in the subpar lived experiences of marginalized and minoritized populations. Two participants chose to challenge imagery of this nature, one added identifier like “mommy, daddy, daughter and son”, another adorned images with flowers and a crown.

Gayle repurposed imagery of enslaved people, adorned them with origami flowers, foliage, and a golden crown. She utilized pages from other parts of the books to create flowers, also using shades of coral, grey, and black paper for the tailored flowers. These adornments act as accessories, softening the images, showing care and honor. Flowers are gifts for loved ones, and a crown is reserved for royalty.

Cari modified the graphic labeled ‘Middle Passage’ by humanizing the depiction of kidnapped Africans. They wrote “protect” in green above the key labeled “Enslaved Africans, 1500-1870” personifying and humanizing the tightly packed individuals by writing “Daddy, Mommy, Aunty, Uncle, Mommy, and Daddy” in red. Green dashes were added between the identifiers to indicate the need for protection, per the add to the key.

Adding identifying labels to diagrams of humans displayed like livestock changes the trajectory of the messaging, both blatant and implied. The personalization of impersonal imagery can also facilitate a connection, by showing that we share more commonalities than differences. Provoking empathy, these identifiers also trigger elements of ethics that can broaden and



*Figure 7 Artwork created by Gayle and Cari that humanizes imagery.*

enhance perspectives and understandings of peoples' plight.

### *Rejecting White Supremacy*

Rejecting white supremacy is particularly important because of the nature of this research study, as well as the generalized common experience of participants in schools and society. The

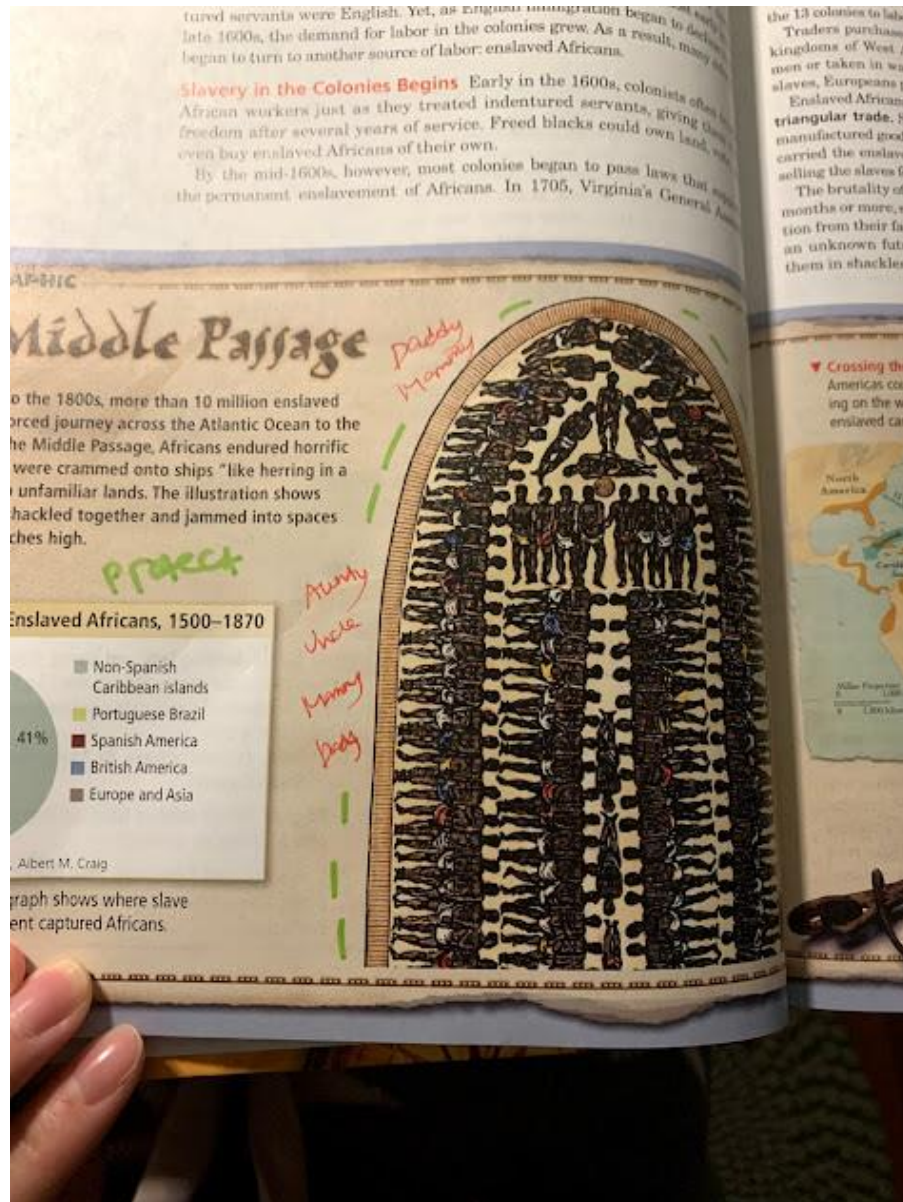


Figure 8 Humanizing artwork created by Cari

foundation of the United States declares that white is the standard and status quo, deliberately excluding the importance and contributions of people of Color to our society. A minimum experience of thirteen years of an exclusionary and racist education can have a significant impact on self-esteem and self-worth, rejecting this standard is important. Refuting white supremacy was a significant emerging theme that appeared in a myriad of ways.

Disallowing white supremacy is important because it is what has weighed many down, emotionally, physically and spirituality. Eliminating this mark of oppression is a way of revoking power and reclaiming not only an individual's right to self-love and appreciation, but also communal support, love, and appreciation. Refusal of accepting an oppressive ideology is advocacy for self and an illumination of self-efficacy. White culture and white beauty standards are even reinforced by color idioms that imply white is right. For example, white lies, white collar crime, white noise compared to blackmail, black ice, and black sheep. These societal colloquialisms, preferences and assertions consciously, subconsciously, and unconsciously negatively impact the development of self-esteem, ethnic-esteem, and identity.

The most simplified version of rejecting white supremacy was by Katie, she simply scribbled over the preface of her book, in a child-like fashion. Gayle utilized traditional methods of highlighting and underlining texts, utilizing yellow for the highlighter and red underlining, to bring attention to and reject it. The text reads "the phenomenal rise of British capitalism in the eighteenth century was based to a considerable extent on the enslavement of Africans," Gayle wrote in large cursive underneath this text "you're not welcome" with a heart extending from the e. This is blatantly rejecting the notion that people were happy to have contributed to the demise of the Black family and the unethical economic advantage colonizers gifted themselves.

In another section of her book, Gayle underlined a section that identified the place enslaved people were "obtained" from as "Black Africa" she highlighted in yellow and underlined black, drawing a blackout map of Africa, with a green arrow pointing to it and "Black Africa" written, used in the same black marker. Adding this element to the book questions the messaging being implied with the language used.





*Figure 9 Artwork created by Gayle that confronts and rejecting white supremacy.*

What did the authors intend when using the phrase “Black Africa”? A different section of the book is revealed below this by the removal of other sections of the book. Highlighting and underlining in the same yellow highlighter and red marker used to reject the afore mentioned section, draws attention to a section that mentions numerous countries “All were supported by the slave trade in Africa”. “In my book, there contains a silver envelope which contains, essentially, our deed to America and the lands we built,” Gayle explains the significance and describes the area of her altered book with the silver envelope.

Rosalyn created a new version of her book and its cover, retitling it “Revised Edition of Art: A Enhanced Visual History.” Enhanced is written in purple and added to the title with an editor arrow, starkly contrasting the blue ink used for most of the title. In a response to a question asking about the amount of inclusivity, she stated

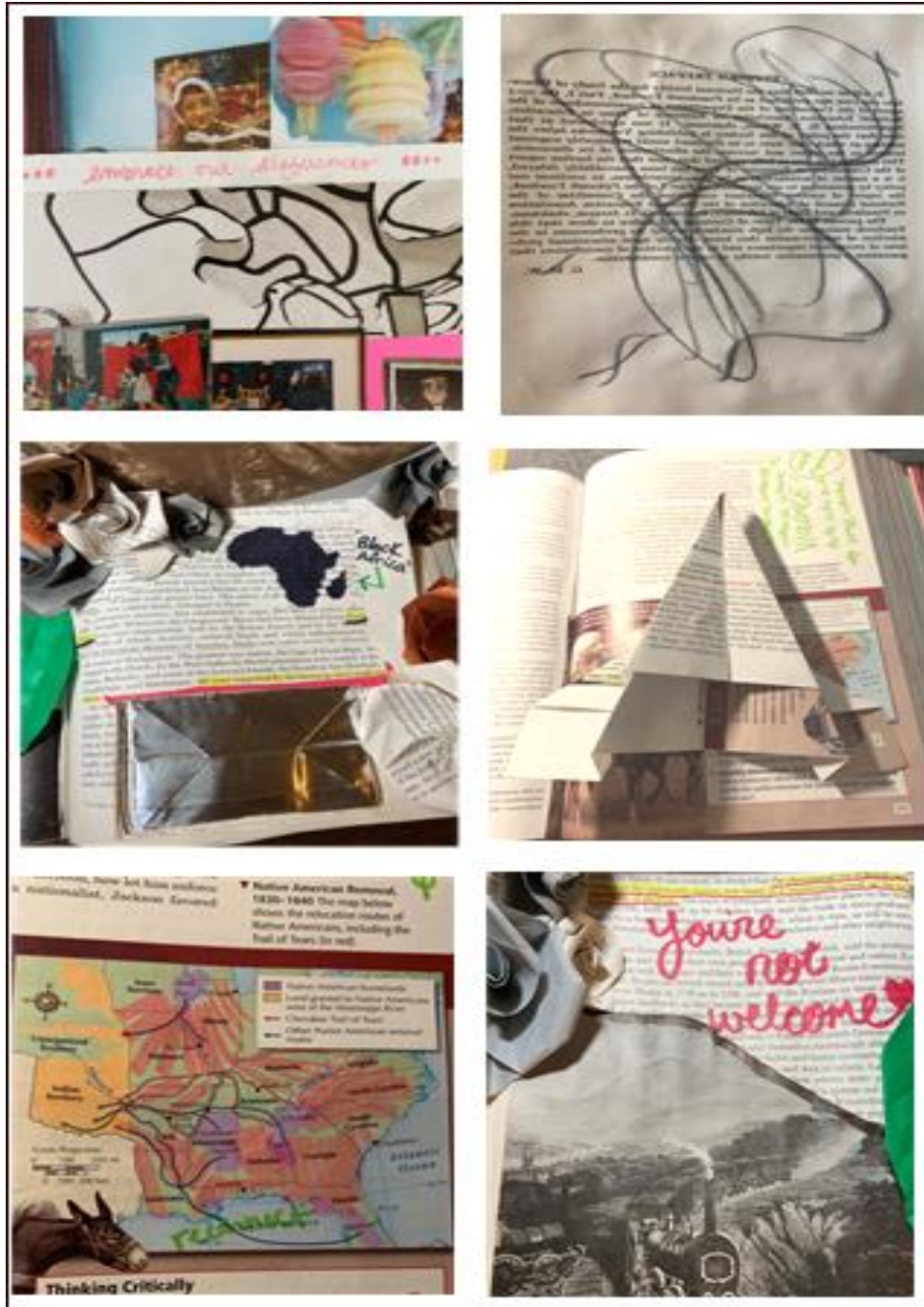
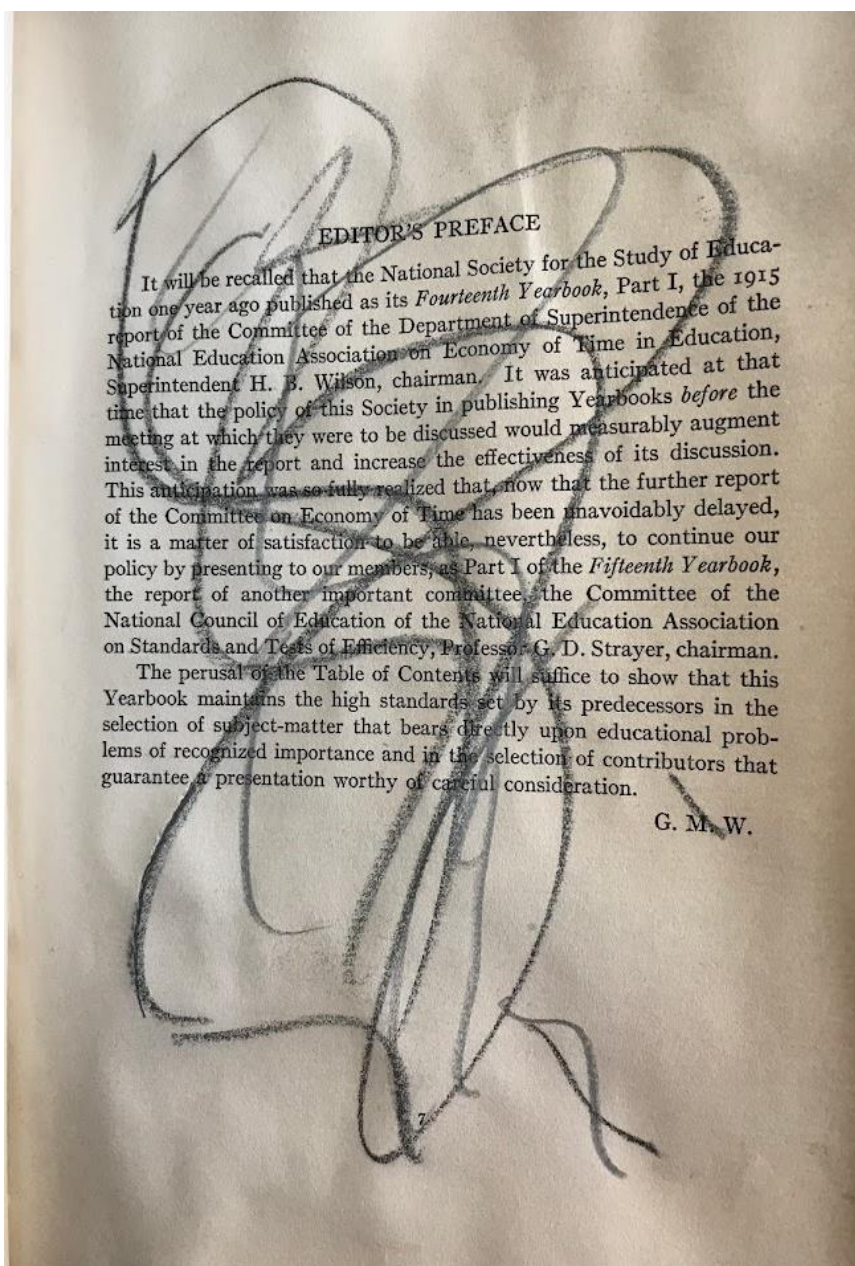


Figure 10 Artwork by participants rejecting white supremacy

“It attempted to highlight a few artists of color in a very small section at the end of the book.” Below this title is a vibrant pattern of abstractly colored rabbits and foliage, popping with shades of red, green, and yellow.



*Figure 11 Katie's artwork rejecting white supremacy*

Cari utilized three different methods to reject white supremacy; they used origami, highlighting and recoloring, as well as collage. They described their process, "I didn't have purple ("Native American homelands") but I had pink, so I tried to reconnect the homelands.





Figure 12 Artwork rejecting white supremacy

I hate how the white states look like default, like what was already there, while the Native ones look implanted.”

### *Transformational Energy*

The use of origami as an energetic shift was described by Gayle and Cari. In moments of emotional overwhelming, they utilized the transformational process of origami to self sooth and calm. They utilized pages that described horrific historic moments to make into beautiful objects of adornment.

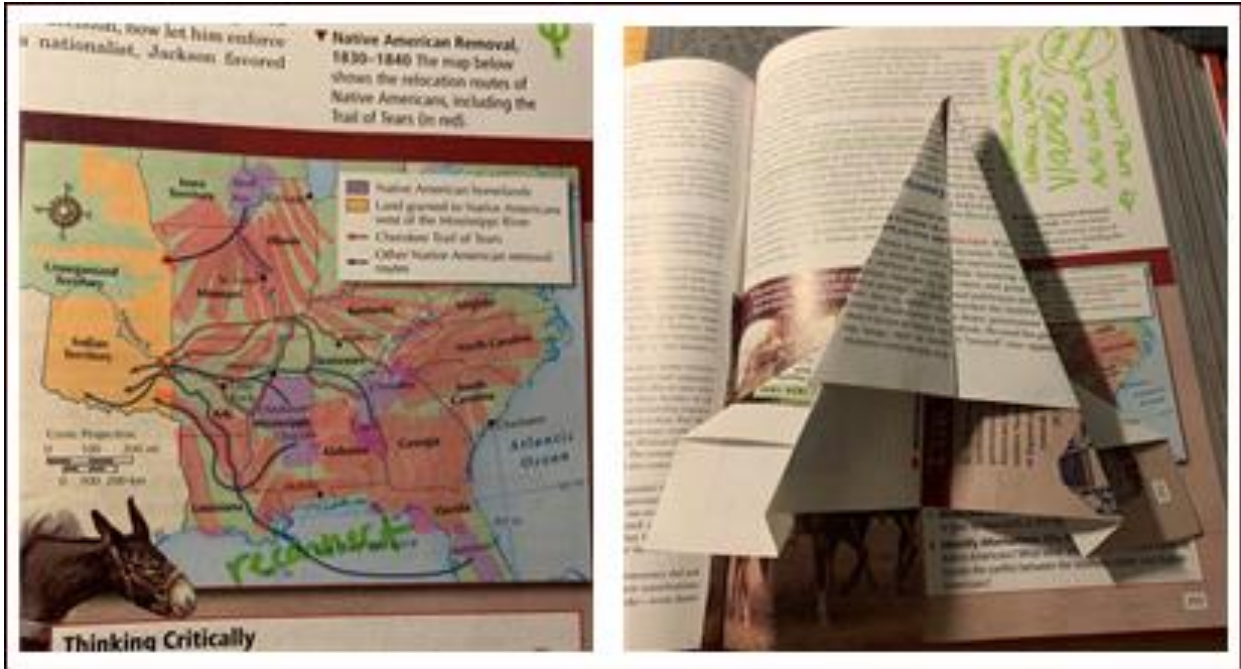


Figure 13 Artwork created by Cari that rejects white supremacy.

Transformational energy inspired them to transform their respective pages into an assortment of 3-dimensional art, flowers, leaves, a crown, cranes, and a plane were created from pages of their books. Transforming damaging text into something illegible, while holding a shape of beauty and tranquility is empowering.

Participants described this creative process as a calming agent to the emotionally charged experience of confronting texts about human welfare. Participants described creating origami as a calming method and a tool to convert energy from negative to positive. When describing sparkling moments, Cari explained, “Another sparkling moment was when I was able to make a crane out of a page that particularly frightened me. And the crane neutralized its power, kind of ate it up, absorbed it, transformed it into something I could hold in my hand and maybe even face.” Gayle also shared a similar sentiment.

Cari described their process, “from pages about Andrew Jackson and his trail of tears the People walked on, I made something. From the energy, my hands guided me, and it seems

it is some kind of aircraft...” The objects that Cari created in an effort to transform the energy they were experiencing also have the ability of flying, one a crane that is symbolic of grace, purity, and wisdom. The plane is a human-made invention that allows people to travel further with more efficiency. Gayle described origami as her favorite part of the process, “During the art making process I most enjoyed the calming nature of origami when making flowers adorning Black images found in the book and reuniting the Black story in America.”

### *Affirming and Illuminating*

Words and images of affirmation and illumination were implemented in a myriad of ways by all five participants. While some participants added words to interact with published text, others created a dialogue alongside the text to question and challenge the content. Illustrations exuding illuminating energy was also used by participants. Illuminating and affirming themes emerged in response drawings and text challenging the published material. Illumination means light and clarification

. When participants demonstrated illumination, they were also externalizing their epiphanies regarding the role that education played in their relationship with the world. Understanding the role that an indoctrinating education played on their subconscious, unconscious, and conscious is key, notably as it relates to internalized racism and implicit bias against one’s own community (Du Bois, 1903; Woodson, 1933). Affirmations are commonly integrated statements used to improve self-esteem and self-worth, using affirmations to respond to oppressive material is a way of restoring strength and taking back one’s power. These are important elements to healing. Katie interacted with her book via language, challenging the information being presented about the “percentage of retardation in Montclair schools.”



*Figure 14 Artwork created by participants that transformed stressful energy to calming energy*

On the bar graph, she wrote “A spark-meant to shine bright my light- your light- meant to illuminate all the ways forward- together. Individual lights created to amplify the spark we each hold and share.” Writing over the table of contents, Katie responded to one of reflective question that inquired, “what is the difference between education and indoctrination?” Katie’s response was “True education provides information and the tools to evaluate and form new and ever-changing conclusions and opinions based on what is known in the present.





*Figure 15 Artwork created by Cari that facilitated energy transformation*

Rosalyn created her own version of the book she altered by extracting images and reinserting them into a new book she made, Rosalyn reiterated the strength of diversity and inclusion by speaking of it directly and incorporating empowering language with words such as “valid, loved, unique, strong, and success.

James’ simple illustration of a lantern with markings implying an exuding light significantly beyond itself is a defining symbolic illustration of illumination and affirmation. It is also a representation of the light that lies within oneself. Gayle’s image of strength in isolation also represents an image of affirmation, illustrate and illumination. Her figure stands proudly erect and with markings behind it that imply a vibrance and illumination of capability and resilience.

### **Art Process Themes**

In art observations the student researcher analyzed figures present, whether there was a community or isolation present in drawings, color usage, materials used, text used and whether there was artistic interaction with the book and how. Themes of text, as well as what participants shared about their process



*Figure 16 Artwork that transformed energy*

### *Superficial or Transformational Alterations*

There was a variety of modifications level made to the books during the sessions. Some participants made significant modifications to their books, while other participants did not make any alterations at all but created reactions and interactions alongside it. Gayle was the only participant to complete an altered book. She transformed the structure of the book, highlighting certain images and adorning her book with origami. Gayle is also an art therapist who is comfortable with this process. Katie shared that altering a book was uncomfortable because respect and honor for books was ingrained in her. Interestingly, Katie is an art therapist. The

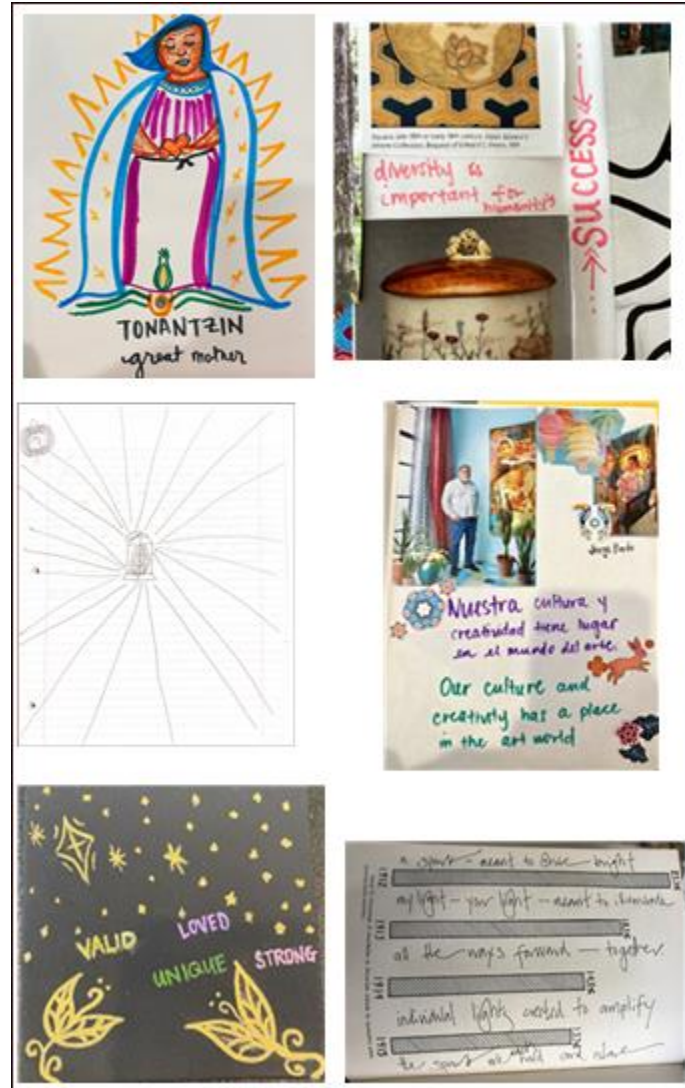


Figure 17 Affirming and illuminating artwork

youngest participants, Gayle and Cari, made the most transformational alterations in their books.

### *Use of Colors*

While some participants created art that was full of vivid colors, others kept some elements of imagery simpler with black and white or with minimal accent markings of color. The use of vivid colors is seen across the spectrum of art created within this process.

Bright colors can be seen in the illustrated imagery of an Aztec Goddess and used in that traditional form of highlighting. This time to facilitate a new conversation about the information

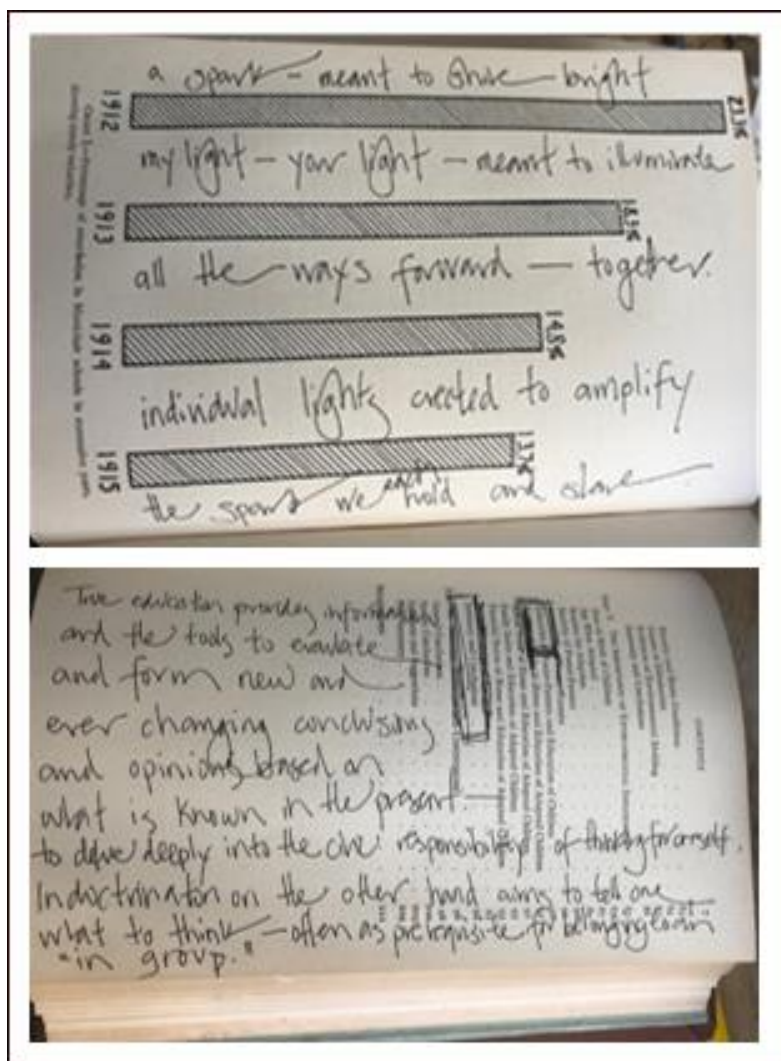


Figure 18 Affirming and illuminating artwork created by Katie.

in the text, the accuracy, and ethics of them. Colors were used to add figurative life to drawn images, in addition to emphasizing published text presented as a history lesson.

### *Use of Text*

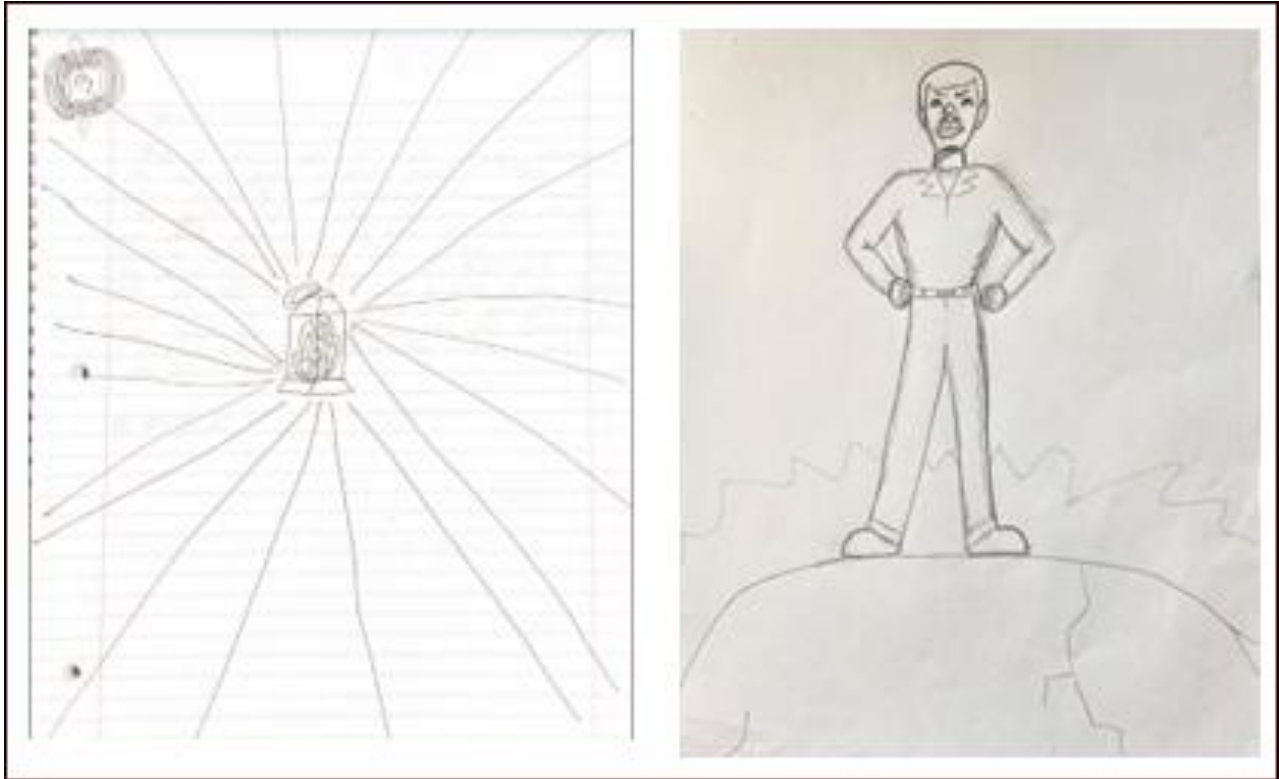
Text was used in a variety of affirming ways throughout this process. Some participants highlighted existing text to create a centered questioning and/or rejecting dialog around it, while others used text in their own versions of work for positive words of affirmation and resilience.





*Figure 19 Affirming and illuminating artwork*

Text was consistently used to interact with and carry a conversation about the impact of white supremacy. Participants utilized traditional methods of emphasizing text; underlining and highlighting text in bright colors, then added their unique commentary to challenge and reject it. Participants also added confrontational imagery to respond to offensive text. This matters because of the lasting psychological impact a dehumanizing education can have on the self-esteem of individuals who rarely, if at all, witness ethnic and cultural representation throughout their academic encounters.



*Figure 20 Artwork created by James and Gayle that illustrate affirmation and illustration*

Most commonly, added text was used to challenge the pre-existing text in an effort to alter the written history and question its validity. Gayle calls out the description of “Black Africa” in her book by underlining, highlighting and drawing Africa and shading it black. Gayle also highlights and underlines a portion of the book that discusses the capital gains that resulted from enslavement, responding in large red cursive with “you’re not welcome” with a heart attached. Rosalyn utilized added text throughout her artwork to illuminate the positive aspects of multiculturalism in various aspects, stating “Life’s rich experiences are multilayered.” Cari used a highlighter to add text and call out the cultural violence prevalent in her writing “violence violence violence VIOLENCE! Awful awful awful etc wrong, violates,” concluding with white supremacy circled. Katie utilized text to share a message of strength, collectivity and illumination in between bar graphs from the early 1900s that measured “retardation levels in schools.”



Figure 21 Sections taken from participant artwork showing levels of alteration to their books

### Reported Symptomology

The implications of this student research study suggests that processing race-based trauma in a multi-ethnic group setting is beneficial for self- efficacy, self-awareness, and inter-ethnic community development. All participants disclosed becoming aware of ethnicity and race very young in childhood, most commonly citing preschool or first grade as reference points. James, Gayle, Cari, and Rosalyn recounted feeling excluded because of their perceived ethnicity /race in childhood, while Katie did not experience this until college. All participants reported

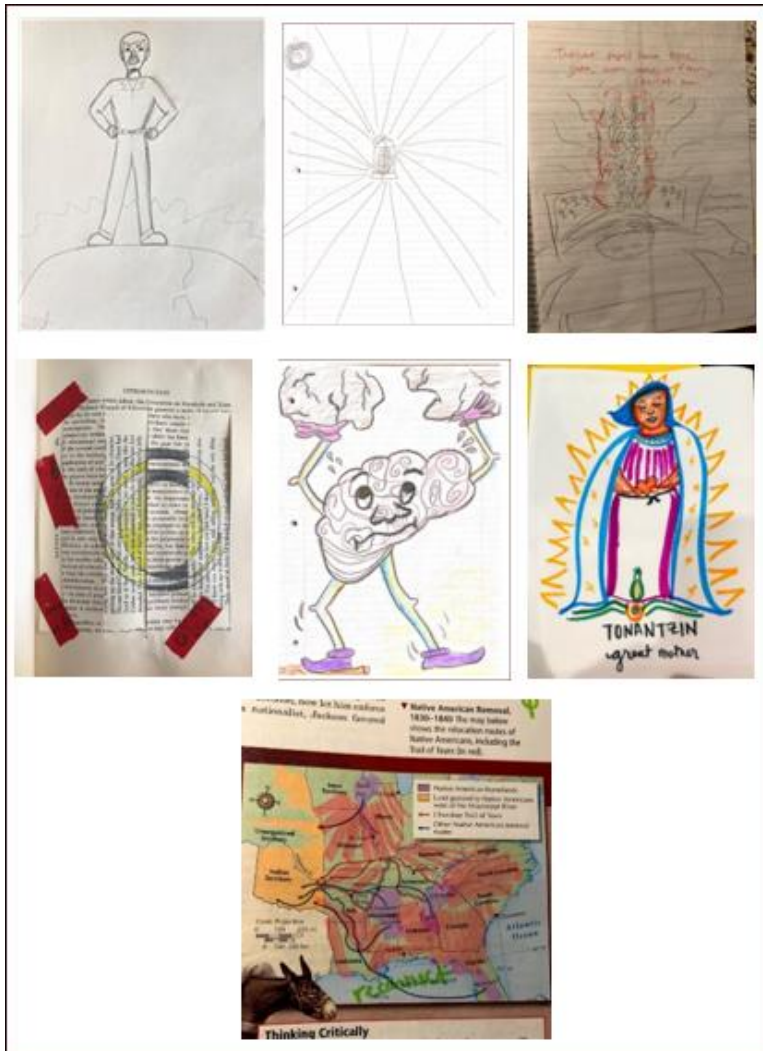


Figure 22 Sections taken from participant art showing varied use of color

experiencing race-based discrimination in school and at work, in various stages of life. Prior to the study, all participants qualified for race-based PTSD per the UNRESTS assessment. While there was not substantial time to reduce all symptomology from this form of trauma, the quantitative and qualitative post-session results indicate potential opportunity of relief for symptoms in future sessions over a longer period of time.



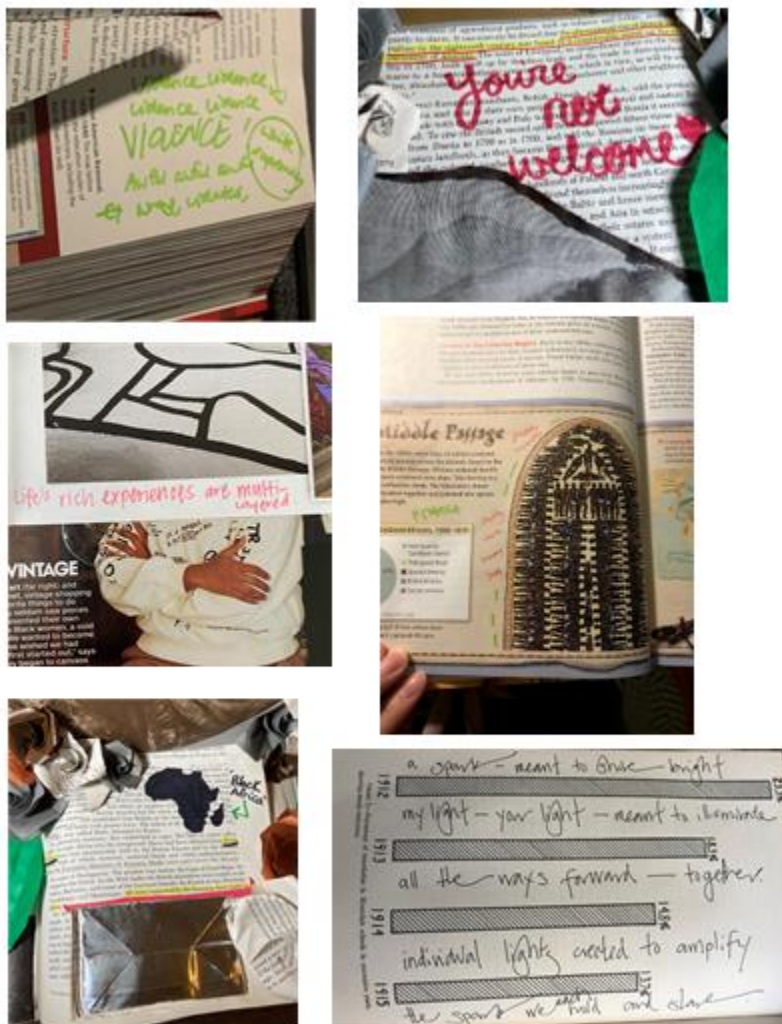


Figure 23 Artwork created by four out of five participants who utilized text

Symptomatic qualifications for posttraumatic stress disorder according to the DSM-V include the following:

A. Exposure to actual or threatened death, serious injury or sexual violence. includes. This includes direct experience, witnessing or learning the traumatic event(s) occur to a close family member or loved one, or experiencing repeated or extreme exposure to aversive details of the traumatic events.

B. Presence of one (or more) of the following intrusive symptoms associated with traumatic events beginning after the traumatic event, occurred. Recurrent involuntary and intrusive distressing memories of the events. Recurrent distressing dreams in which the content and/or effective the dream(s) are related to this traumatic event. Dissociative reactions in which the individual feels or acts as if the traumatic events were occurring.

C. Persistent avoidance of stimuli associated with the traumatic event(s) beginning after the traumatic event occurred, as evidenced by one or both of the following. Avoidance of efforts

to avoid distressing memories, thoughts, or feelings about. Or closely associated with traumatic events. Avoidance of or efforts to avoid external reminders, including people, places, conversation, or activities. Objects in situations that arouse distressing memories, thoughts, or feelings about or closely associated with the traumatic events.

D. Negative alterations in cognitions and mood associated with the traumatic events beginning or worsening or after the traumatic event occurred as evidenced by two or more of the following. Inability to remember an important aspect of the traumatic event. Distorted cognitions about the cause that lead to self-blame or others.

E. marked alterations in arousal and reactivity associated with the traumatic events. Beginning or worsening after the traumatic events occur, as evidenced by two or more of the following: Irritable behavior and angry outbursts. Reckless or self-destructive behavior. Hypervigilance, exaggerated, startled response problems with concentration, or sleep disturbance.

F. Duration of disturbance (criteria, C, D, and E) is more than one month.

G. The disturbance causes clinically significant distress or impairment and social, occupational, or other important areas of functioning.

H. The disturbance is not attributable to the physiological effects of a substance or another medical condition.

After reviewing reported symptomology, symptoms of negative changes in cognition, re-experiencing, physiological arousal, and distress and interference decreased. Avoidance increased and the symptom of dissociation remained constant.

Re-experiencing, negative changes in cognition, physiological arousal and reactivity respectively decreased. The results of the post-session inventory of reported symptoms of avoidance increased while levels of dissociative symptoms remained consistent on average.

Prior to the treatment, participants were asked questions to score their level of ethnic identity, scores ranged from seven to twelve out of a possible twelve. There was a correlation with treatment over time and symptomology reduction, seen in table four and figure 23. Results also suggest that those with higher ethnic identity scores are less likely to experience symptomology.

The mean scores for categories of re-experiencing, negative changes in cognition, physiological, and distress, decreased. Dissociative was the least experienced and remained

unchanged, while avoidance, increased. Emotional avoidance is a symptom of trauma, especially racial trauma (Weiss et al., 2021). Due to the circumstances of race-based trauma being an ongoing series of events, and the significant impact of societal temperament, it is not surprising that avoidance of specific stimuli increased. Analyzing the ethnic identity score alongside the reported symptomology shows a correlation of significant cultural community identity impacting the intensity of racial trauma symptomology.

The diagnostic criteria are very sensitive, in each category a single additional affirmative report can alter the clinical diagnosis. Even though the overall reported symptomology decreased by 51%, the PTSD diagnosis increased by 21.8%, due to the increase in avoidance reported.

Table five compares the pre and post session mean reported symptomology.

*Table 4 Pairwise correlations: Time and Symptomology Measures*

Variables	(1)	(2)	(3)	(4)	(5)	(6)	(7)
(1) Time	1.000						
(2) Re-Experiencing	-0.063	1.000					
(3) Avoidance	0.229	0.276	1.000				
(4) Negative Changes in Cognition	<b>-0.671**</b>	0.421	0.406	1.000			
(5) Physiological Arousal	-0.465	-0.081	0.307	0.383	1.000		
(6) Dissociative Symptoms	0.000	0.181	-0.515	-0.075	-0.380	1.000	
(7) Distress & Interference	<b>-0.603*</b>	0.038	-0.208	0.496	0.596	0.123	1.000

\*\*\*  $p < 0.01$ , \*\*  $p < 0.05$ , \*  $p < 0.1$

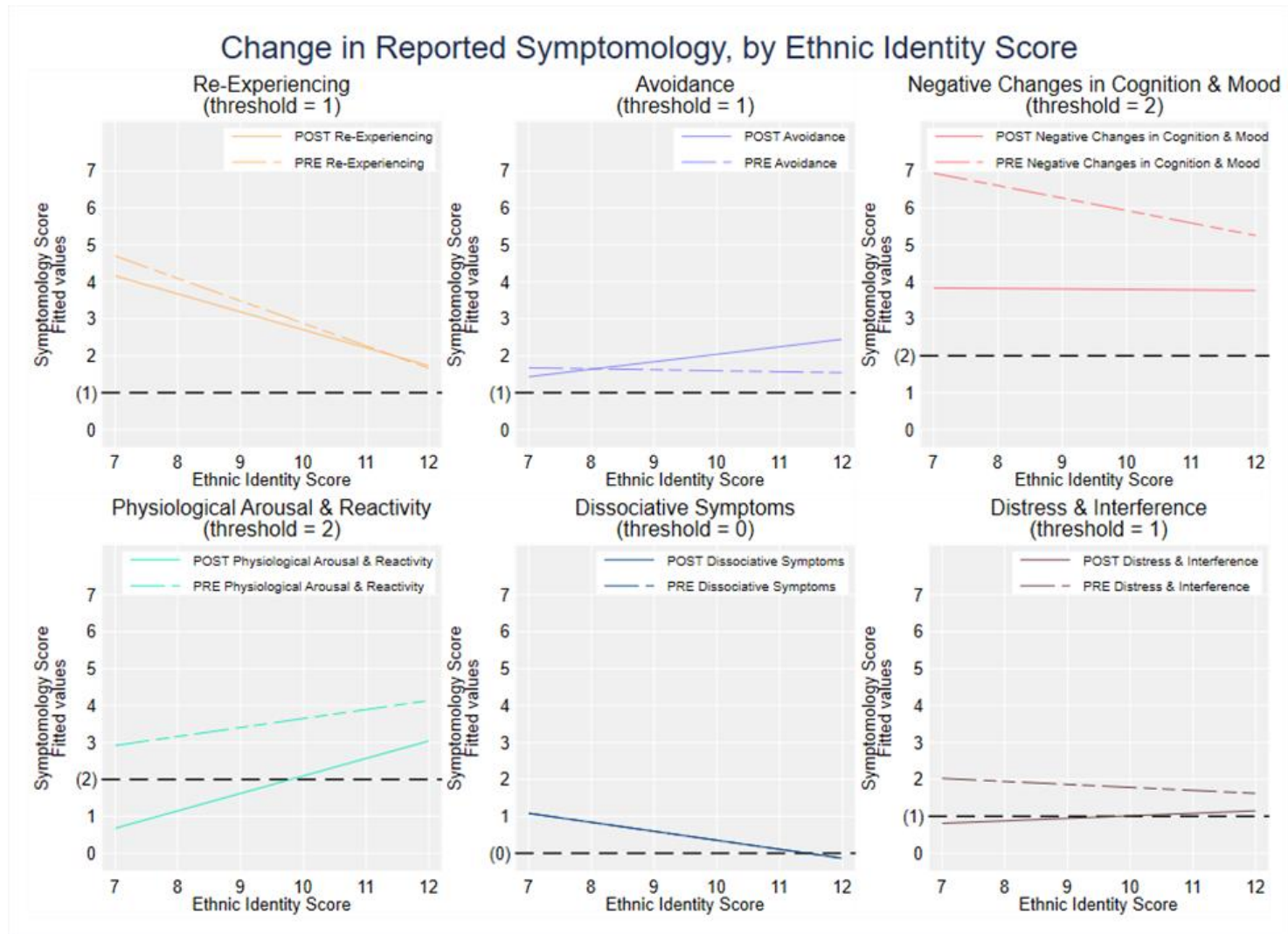


Figure 24 There graphs display the reported changes in symptomology after sessions



*Table 5 Summary statistics: Symptomology Scores, by time*

<b>Time: Pre</b>	Mean Score	SD	Min	Max
Re-Experiencing	3	1.871	0	5
Avoidance	1.6	1.140	0	3
Negative Changes in Cognition	6	1.414	5	8
Physiological Arousal	3.6	1.517	1	5
Dissociative Symptoms	.4	0.548	0	1
Distress & Interference	1.8	0.447	1	2
<b>Time: Post</b>				
Re-Experiencing	2.8	1.643	1	5
Avoidance	2	0.707	1	3
Negative Changes in Cognition	3.8	1.304	3	6
Physiological Arousal	2	1.871	0	5
Dissociative Symptoms	.4	0.548	0	1
Distress & Interference	1	0.707	0	2

## Reflections

Participant reflections on their experiences indicate that this series of group sessions was beneficial in a number of ways, most significantly self-awareness and self- efficacy.

“Regarding being creative and healing with other BIPOC people, I felt more capable, more hopeful. I think it was a really good practice in listening to myself practice responding in a creative way, I don’t normally have the space to be creative,” stated Cari in the post-session interview.

“It was definitely a reminder that I’m not alone, that there are other people of Color who’ve been impacted, going all the way back to school until now. I had never looked at it that way, I had not looked at it comprehensively. I feel a little bit better about speaking up more, I’m in a leadership position and interview for positions. I have added questions to the interview process to ask about experience with diverse populations ‘please provide an example of when you included equity and inclusion with social worker interns’.... I am going to find more ways to make our experiences visible,” stated James. James shared in his pre-session interview that work

has consistently been a source of racial trauma and discrimination. One co-worker apologized for her tone during a meeting because she “was used to helping people who looked like him.”

“I think they [sessions] helped highlight how deeply and how early in our lives racism can impact us. And then also the complexities of trying to prepare to see others with problems that are different from your own. It was really meaningful and also really difficult work. The invitation to create a product helped process the information, I felt it was empowering and increased self-efficacy,” Katie explained.

“This helps to recognize and bring to the forefront that people of color have struggled with not only a denial of current realities but a full expression of humanity. It reminds me that this work (psychology/therapy) is so needed for our communities, and it is important to do so with understanding, compassion, and real intentional care.” stated Rosalyn.

“When observing my altered book, the emotions I experience range from pride to gratitude to sadness. The feelings of pride and gratitude reflect the strength and resilience of my/our ancestors, while the feelings of sadness are due to my empathy for those living through such awful times.” explained Gayle.

Gayle described origami as her favorite part of the process, “During the art making process I most enjoyed the calming nature of origami when making flowers adorning Black images found in the book and reuniting the Black story in America.”

All participants affirmed this was an enlightening and empowering experience that would positively impact the way they work with and advocate for marginalized communities.

### **Intervention Experience**

An anonymous survey was sent to all participants at the conclusion of the sessions, three out of five participants completed the survey. In response, three out of three participants stated

this research is important and a way to amplify voices of the marginalized. Three participants also stated they liked meeting people with similar experiences and hearing their stories as it regards to racism, education, and trauma. All participants stated this research impacted them by encouraging them to think more thoroughly about how racism impacts them and other marginalized populations.

The significance of showing up for communities of Color, and the sharing of experiences allowed the isolating feelings related to these experiences to dissipate. All five participants stated they felt their self- efficacy was positively impacted and this was an experience that supported their agency and ability to be a force for positive change. All participants stated they would recommend this the experiential to others four out of five indicated they would participate further, with one response of “maybe.” Participants stated this experience was a reminder to be mindful of the lens of the author of books before internalizing and validating the information presented.

## Chapter V: Discussion

This chapter will discuss the implications of the artwork created by participants, as well as their qualitative and quantitative data. The implications for the field of art therapy, psychology, public education, healthcare, and economic impact will also be reviewed. Recommendations for future research will also be reviewed.

### Societal Context

The year before this research study occurred, Breonna Taylor was murdered while sleeping in her home by the police, who have yet to be held accountable for their crimes, as of December 2021. Ms. Taylor's home was raided because the police were at the wrong home, confusing her abode for another. George Floyd's public lynching by a police squad of four, was played on repeat for the world to witness. Just before the international lock down, Ahmaud Abernathy was hunted down and murdered while trying to exercise in his neighborhood. Asian hate was everywhere because of the origins of COVID-19 in Wuhan, China, the hateful speech spewed on television and social media by politicians and other ignorant people normalized racist and hateful propaganda. Tension seeped from our collective pores, Gayle explained how our societal predicament influenced her process with her altered book, "There were times when I struggled to finish this book due to ongoing social injustice in America. Multiple police shootings, the Floyd trial etcetera, left me feeling the need to step back from such topics at times, however, the desire to rewrite our story served as a motivation for me."

The defeat of Donald Trump in the 2020 presidential election resulted in him accusing democrats and The Left of stealing the election. This rhetoric was consistently spread through the end of the 2020 and continued throughout 2021. On January 6, 2021, he incited and enraged racist conservatives to commit treason by breaking into the United States capital building to

disrupt the transfer of power to newly elected Joe Biden. In 2020, when people were peacefully protesting in the name of police brutality, on behalf of Black Lives Matter and other oppressed communities the heavily armed national guard was preemptively present. Some law enforcement and government officials were aware of the plans for the attempted coup, however, there was no military presence. There is significant troubling footage of numerous police officers aiding and abetting the rioting criminals who committed treason and threatened the lives of their colleagues and government officials.

The blatant and egregious discrepancies in which the ways the groups were treated, by the United States government, was a triggering reminder of the racial and ethnic hierarchies that prevail and dictate the temperament of the U.S. and beyond. It was a reminder that people of Color are still seen as subhuman and disposable. Protests were everywhere in 2020. The international community shared a frequency, we all had to be still, process, and feel, minimally distracted whilst in quarantine. This experiential was created to provide a safe community space for healing, self-actualization, and growth, while facilitating a process that supported processing, documenting, and reframing experiences of racism. The international rage against racism was ablaze, people took to the streets everywhere to show their disdain for the injustice and intolerance for others simply because of skin color. Diversity, equity, and inclusion soon became trending buzz words amongst organizations and leadership.

### **Overview of Findings**

Results from this study suggests that making altered books with historically exclusionary educational texts specifically to reject and reframe white supremacist propaganda is healing and therapeutic. Several overarching themes of empowerment and resilience existed among art and written responses. Participants shared the relief they felt on a myriad of levels. The art created

was empowering and affirming, while the group experience was uniting. Other results suggests that participants, on average, experienced reduced symptomology of racial trauma, with the exception of avoidance.

Analyzing the data collectively shows that artwork, qualitative and quantitative data support one another in measuring the impact of this experience. The art created affirmed varying degrees of self-awareness; participants displayed advocacy for self and community in forms of overcoming obstacles, resilience and rejecting what was once forcibly accepted, in order for promotion. The qualitative data shared supported improving inner strength, and an increase in self-efficacy and sense of community. For James, this translated into changing hiring protocol to ensure appropriate personnel are hired to work with marginalized people.

### **Key Themes**

Art is a means of externalizing inner dialogue that improves knowledge of self (P. B. Allen, 1995). The design of this research prioritized a safe inner dialogue to grapple with the difficulties of racism, specifically the significance of consistently of being culturally omitted throughout educational experiences. Observing the written responses, artwork created, and reported changes in symptomology, per the UNRESTS post-session results, reveals an overarching correlation of hope, resilience, and inspiration. The various mediums shared a fluid story of unique outcomes and sparkling moments, in defiance of limitations commonly forced upon the minoritized. The combination of qualitative, quantitative, and arts-based data provided a multimodal lens to analyze the impact and effectiveness of this study, which is also a means of evaluating radical healing (French et al., 2020).

The opportunity to support human service professionals of Color in utilizing exclusionary books to create altered books illuminated a new form of self-awareness and self-efficacy that

translated into community awareness and efficacy. Helping participants to see they are not alone in their experiences and have the ability to inform the experiences of others, especially when done collectively. The cohesion that manifested amongst the group allowed people to see how much influence and power they share when working collectively towards the goal of rejecting and correcting racism.

The session space was intentionally uniquely created to defy the typical healing parameters placed upon minoritized communities. Many spaces reinforce the rules of segregation; keeping people with parallel experiences of cultural violence separate and unable to witness the analogous pain they too have experienced, directly, vicariously, explicitly, and implicitly. The realization that different marginalized ethnic groups have similar symptoms of racial trauma was also a form of radical healing and recovery.

The reflective writing participants completed during and following this research reinforce these themes via text articulation. It is also significant to note that no abstract imagery was created throughout this process, suggesting the significance of realness and imperative concrete confrontation for this healing process. Unfortunately, there are no research studies specifically pertaining to racial trauma and art therapy to draw from. Fortunately, the results of this research are promising and an indication of a new method of addressing and processing race-based trauma in a racist society.

### **Changes in Reported Symptomology**

Table three shows the symptomology changes reported by participants. Interestingly, while negative changes in cognition decreased by 67%, avoidance, a symptom of PTSD, increased by 40%. It is important to keep in context the most commonly reported spaces of discrimination and racism were work and school. These are spaces that can be navigated

cautiously once one knows the culture. The unprecedented societal climate and global pandemic are also important variables to account for the year prior to and up until the time of the sessions. The media was constantly reminding society of the drastic increase in racially motivated violence, also perpetuated by police officers, who frequently dodge accountability. The student researcher believes that avoidance, in the context of racial trauma, is a form of psychological preservation that fuels resilience, especially when able to accurately predict the awaiting aggressions, biases and rejection. The student researcher has avoided unwelcoming spaces for a significant portion of her life, this is also an intergenerational survival skill. The quarantine and subsequent opportunity to work remotely was a relief for a significant number of people of Color who were exhausted of being in unsafe and unwelcoming spaces. Consequently, a significant number of people of Color have resisted resuming working in the office. There is a significant increase in people of Color who are co-creating organizations and community spaces throughout the country.

## **Reviewing the Literature**

### ***Racism as a public health crisis***

According to the CDC, the life expectancy of White Americans is four years longer than Black Americans. Race-based PTSD is a preventable disorder. The pervasive nature of racism allows it to appear in all elements of life, consciously, unconsciously, and subconsciously. In order to mitigate the epigenetic and intergenerational features of racism, it is critical to develop treatments to help relieve symptomology and facilitate experientials that may deter and impact bias, implicit and explicit. Telomeres are the protective area on DNA strands, the length of telomeres has been linked to racial trauma. The length of a telomere is a predictor of lifespan, chronic stress/trauma can expedite the shortening of telomeres. Significant research has



determined that the shortening of telomeres is directly connected to racial trauma and stress(Chae et al., 2020; Lu et al., 2019; Thomas et al., 2021).

### ***Radical Healing***

Radical healing is a blend of liberation and resisting oppression and simultaneously creating the environment in which one would like to live (French et al., 2020; Ginwright, 2010). According to French et. al. (2020), radical healing is a compilation of liberation psychology, Black psychology, ethno-political psychology and intersectionality. The qualitative and quantitative results of this research demonstrate how the altered book experiential fostered a unique exploration of the impact of educational oppression and the importance of reframing the lens of the authors of stereotypical exclusionary texts as a white supremacist propaganda enthusiast. This provided a space for participants to reframe and refocus the experiences of their younger selves in order to externalize the negative messaging delivered implicitly and explicitly.

Black psychology identifies strengths and rejects the harmful Eurocentric assumptions about communities of the African diaspora (French et al., 2020). This experiential provided the space to focus on the strengths of marginalized peoples while challenging the status quo. Ethno-political psychology examines the impact of racism, subjugation, and political suppression on individuals, their communities and collective societies (Comas-Díaz, 2000; French et al., 2020). Reprocessing oppressive educational experiences through this new lens also facilitated a renewed perspective of the significance of influence on a global society as it impacts various intersections of life. Most significantly, radical healing encompasses a multisystemic methodology framework focused upon wellbeing and healing. This experiential facilitated via a multi-ethnic group process, dialogue, art making, and reflective therapeutic writing.

Furthermore, each session concluded with a ritual of collective group grounding to deepen the impact, understanding and the energetic shift these sessions facilitated.

The testimony of participants is the defining element of the evaluation of an experiential. All five participants provided multimodal testimony that affirms the effectiveness of this process. Artwork, written responses, exit interview statements, and reported symptomology support the efficacy of this mixed-methods art based research.

### ***Art Therapy and Art-Based Research***

According to Dennis (2021), art-based research is the “systematic use of the artistic process, the actual making of artistic expressions in all of the different forms of arts, as a primary way of understanding and examining experience by both researchers and the people involved in their studies.” This experiential entailed bilateral scribbles, scribble development, origami, response art, and altered book making. Processing racial trauma by means of art therapy is especially unique and relatively uncharted territory. The dominant parties of society have just recently accepted and acknowledged that experiencing racism is indeed a form of trauma. Art therapy is a way of processing and discovering what the individual knows and needs for healing (P.B. Allen, 2001; P. B. Allen, 1995; Dennis, 2021). The nature of this healing modality is the essence of radical healing via art therapy; it challenges toxic universal Eurocentric norms reinforced throughout the educational process and in all intersections of life. The focus of this study is the human experience of the marginalized and minoritized global majority.

The phenomenology of art therapy facilitates a dual experience that allows clients to create art and witness its impact on them (Rubin, 2016). Furthermore, the intent of the creative process allows the art to be an expression of consciousness with significant symbolizing and externalized processing, facilitating a new understanding and connotation of experiences.

### ***Narrative Therapy and Altered Book***

Narrative therapy encompasses empowering individuals to tell their stories. This is why this book altering experience was paired with a narrative approach. The books altered by participants symbolized personal experiences in education that silenced, censored, and excluded representations of themselves. The significance of storytelling and re-authoring one's story, in addition to the nature of books being created to share stories and knowledge, is why utilizing this theory is imperative. There is significant research to support narrative therapy is very effective for minoritized communities, as it allows them to dissect matters and reframe experiences. James, a school-based counselor who transitioned into a leadership role shared that this experience encouraged him to ask more diversity related questions during the hiring process. He also shared that after a meeting a coworker apologized for her tone because she was "used to helping people who looked like him." Realizing the power he has and the role that he can play in ensuring the hiring process properly vets candidates is invaluable. Especially in regard to the potential damage that could occur because of people similar to James' coworker working with people of Color.

### **Limitations of the Research**

Due to the pandemic, sessions were held via Zoom, instead of in person, the nature of the intensity of this work may have produced more symptomology reduction if sessions were held in person. Five participants partook in this study, due to the small sample size of this study generalizability is not feasible. However, the results may imply this experiential to be effective. The collective quarantine due to the pandemic, the limited time available, as well as the limited number of participants are significant limitations to this research. Unfortunately, the student researcher did not have the resources to send participants the same art supplies and textbooks.

Providing participants with the same materials would have created more fluidity with the experience and potentially the results. The ability to hold the sessions in person, or via a hybrid model, would have also impacted experiences.

Another limitation was the means of recruitment and Zoom fatigue. Recruiting was mostly implemented via social media, listservs, and word of mouth, which limited the number of people who learned about this. Additionally, the participants were expected to supply their own books to alter and supplies to utilize. This also limited the number of participants, especially if they needed some encouragement regarding comfort with art making. This study occurred a year into quarantine, many people who were unaccustomed to working from home declared their exhaustion, especially because of doing virtually everything online.

### **Strengths**

This research was conducted during unprecedented times, while the international community was surviving a pandemic, participants were also managing their racial trauma and triggering social unrest targeted at marginalized people. Emotional safety was key, which is why the student researcher closed each session with a consistently grounding ritual. According to Leavy (2018), the usefulness, significance, or the substantive contribution are essential areas for consideration when determining whether arts-based research is warranted. The social significance of this research is also present, as race-based trauma is currently a public health crisis that needs to be addressed in a multifaceted fashion.

Facilitating this experience with a diverse group of participants was key to the collective healing experience and radical healing. For too long, people have been segregated per ethnic group and made to believe their experiences are separate and different. This is not reality. Minoritized ethnic groups share parallel thin narratives within the thick dominant White status

quo, typically resulting in wounded ethnic identity and pride. For example, colorism is an enormously damaging and impactful consequence of colonization that supports the ideology that people with lighter skin complexion are superior to those of darker complexions. This mindset is harmful to everyone, reinforcing damaging ideas that shade of color one falls upon on the spectrum of complexion matters more than character.

The student researcher found it imperative to include members of the Black/African community the Latinx community, and pan-Asian communities. This is because of the colonial commonality of segregating minoritized people, occasionally referred to as divide and conquer. The realization that people of Color across ethnicities have had very similar experiences is extremely empowering and unifying. Many assume their experiences vary greatly when in actuality there are many parallels. Each participant said they would participate in a comparable study again as well as encourage others to partake in similar sessions. The realization that all communities of Color have to cope with the standard of white was solidified.

### **Validity**

This research study was found to be valid, it did measure what it was purported to measure with tools that yielded consistent results. The student researcher was able to measure qualitative, quantitative data, and arts-based data created to evaluate the effectiveness of this study. Upon evaluation, each tool of measure supported one another, reinforcing the effectiveness of this process. While a section of the UNRESTS measured symptoms quantitatively, the art created, and qualitative inquiries were responded to in ways that supported the traditional empirical Eurocentric means of measurement and evaluation.

## **Triangulation**

According to Kapitan (2018) and Leavy (2018), triangulation is utilizing various sources of data, including qualitative data and other data points to determine consistency. In this study, the student researcher utilized qualitative data, quantitative data and art created to determine consistency, this is referred to as data source triangulation. This was done to ensure the accuracy of translation of the data. The cross-disciplinary methodology also facilitated theoretical triangulation. Implementing the principles of radical healing within an art therapy lens allowed the power of creating in community to positively influence the mental health of individuals significantly impacted by racism.

Images of created art, written activities within the experiential and qualitative responses were used to analyze the research question from various perspectives and to determine effectiveness. The student researcher was able to compare artwork, qualitative data, and quantitative data and observed a fluency amongst them that was supportive in demonstrating a positive impact. Participants created observable inspiring art of empowerment, testified their experiences were powerfully moving, and reported symptomatology reduction in four of seven reported categories.

## **Internal Validity**

Internal validity is accomplished if the design and methodology of a study are suitable for the research question. The nature of arts-based research is personal and unique because it allows the individual to create from their perspective and externalize their unique lived experience. This externalization process is composed of elements from the unconscious and conscious, facilitating the expression of emotions that may have not been verbalized. The altered book group process did make encouraging differences for participants. Survey results displayed a decrease in racial

trauma symptomology, qualitative data also revealed testimony of the positive impact this experiential group experienced in the sessions that carried over to other areas of life. Participants shared they were more comfortable advocating in situations they may have previously avoided due to potential conflict.

Because of the international pandemic, selection bias was present, a majority of the participants were in the field of art therapy, and all participants enjoyed art making. The student researcher did not ensure participants were a representation of the general public. The researcher had direct contact with participants throughout the process, opting to collect initial data for rapport and community building.

### **External Validity**

External validity is accomplished when results are generalizable and repeatable, if useful for populations outside of the study. Participants were required to answer extremely personal and triggering demographic questions before and after the study. Due to the small size of this research study, five participants, the effects of this study cannot be generalized ethically, creating a threat to validity. However, the data does indicate that this experiential could be extremely beneficial to marginalized populations as well as dominant populations for a new sociological perspective. Other benefits include cross-cultural community building and healing and participating in a unique space for minoritized people to collectively heal from the oppressive white supremacist regime.

### **Implications for Education**

As the APA and the CDC have declared racial trauma a public health crisis, it is vital for the United States Department of Education to analyze its role in the pervasive systemic racism, traumatization of generations, and the reinforcement of white supremacy. All students should be

inspired and inquisitive, all students should experience seeing ethnically representational figures throughout history, because they exist. Education has been a source of trauma not only because of staff with racist ideologies and implicit bias, but also because of decades of using textbooks and materials that were consistently historically censored and exclusionary. The educational standards that currently exist were designed to engage and motivate white students only. It is time for all students to be inspired and motivated when they peruse through textbooks given to them by public schools, funded by everyone's tax dollars. It is unfair for children to continue to attend school where their culture is not valued or recognized, and members of their community are not acknowledged for their contributions to civilization.

### **Implications for Art Therapy**

The findings of this research implicate potential for a new experiential in the field of art therapy. Expounding upon addressing the limitations of this research will facilitate growth and new areas of exploration for this process. The complexity of racial trauma requires a multifaceted approach to help address challenges, many ongoing as society has not changed at the core. Art allows the processing of emotions that cannot be articulated such as the experience of living with ongoing racism. Utilizing altered books in this targeted manner provides a new unique space for reprocessing and safely rejecting harmful material. Typical historical narratives are harmful for everyone, including those often perceived to benefit from it.

Due to the intensity and complexity of this process and research, the student researcher would like to refine it further, and create a certification process prior its integration in art therapy practice. The results indicate that purpose-focused altered book making done alongside reflective writing and in a group setting can be substantially empowering. This empowerment is even more profound when human service professionals are able to realize their power and strength that



pervasive oppression has muted. Recognizing the power of self-love and self-efficacy translates to love and empowerment for one's community, including advocating in spaces where voices of people of Color are often a whisper, if heard at all.

Venture (1977) created a crisis intervention that would have benefited millions of people, had it been embraced when she curated it. Unfortunately, as a Black woman, she was not acknowledged or accepted. Challenging the norms of Eurocentric art therapy with the Crisis Art Therapy program made her even more brazen and "militant." Borrowing a descriptor in her dissertation that was used by white professors to describe Black art therapy students who were expelled from their programs for challenging toxic norms. Her successful methodology continues to go unseen and unheard by those who do not intentionally seek out her wisdom independent of curriculum suggestions.

Venture (1977) and Joseph (2006) have reiterated the need for art therapy in Black communities, the researcher would add that it is needed in all marginalized communities. Art can explore and express inarticulable emotions. It is critically important for collective healing to include new approaches that challenge the "norms" that are inappropriate and abnormal for ostracized populations. The student researcher knows it would be highly beneficial to integrate various elements of traditional healing methods to enhance this form of healing and impact.

### **Internal Dialogue and Autoethnography**

According to Leavy (2017), it is critical for the researcher to examine their own emotional, carnal, intellectual, and psychological state. Ross (2018) states that autoethnography allows the researcher to embrace their subjectivity as an element of research. The nature of this study was inspired by an assignment to create an altered book sans creative parameters. Personal and vicarious experiences throughout education, inspired the original video shown to participants

in the initial session. I am a Black woman who moved to California from North Carolina, specifically for graduate school, this is relevant to the mental health and emotional state the researcher experienced throughout this process.

### *Housing*

This relocation required an unexpected cultural awareness shift pertaining to the sugar-coated style of racism prevalent in Northern California. Witnessing the egregious amount of poverty pervasive throughout the Bay area, tent encampments, and knowing the local government has the resources. California has a steadily increasing income of taxes, fees and fines collected to correct this, it was impossible to accept. I experienced the housing crisis firsthand, having lived in six vastly spread cities within two years. I soon learned that per observation and analysis of the housing patterns over the last three decades, applying critical race theory to the greater San Francisco area, it has earned the title as the most racist region in the U.S (Carrol, 2021; Frank, 2021). A new form of AntiBlackness was experienced in various elements of life; daily interactions in stores, with colleagues, supervisors, property management/landlords, strangers, people of Color, and even some Black people.

### *Education*

Unfortunately, I was also subjected to racist professors and gaslighting throughout my graduate experience, even being told that her symptoms of racial trauma in the form of distrust were a “personal problem.” On one occasion, I asked another professor if I could look at her books to determine which to buy, the immediate response was “Aren’t you going to buy your own?” In a subsequent class, this same professor happily volunteered to share a book with a student who happened to be white. Another professor, who once worked at a historically Black college, felt the need to reiterate this every single class and proceed to speak about Black people

as though we were foreign and not part of U.S. society. After a different professor emailed her new students to come to campus to purchase her assigned pamphlet for class. Because the administrative assistant was out of the office, I was looking in a common area where the pamphlets may have been. The professor interrupted her doctoral class to ask “can we help you?” I had never witnessed a professor stop their class to question someone’s presence in that space, which was a constant given that it was a shared supply closet and kitchenette.

This professor also blatantly ignored the two Black students, out of nine students present, during this class, throughout the 16 hours we spent in class over the weekend. In another class, she refused to learn the names of students with non-Anglo names, in spite of leading daily name games, where everyone had to repeat their names, to begin every day of class. These experiences coupled with the pin drop of silence that followed sharing encounters with racism, in comparison to the eager words of support in response to accounts of family members with mental illness or people disclosing their own struggles was disappointing and disheartening.

Curriculum content ignored the contributions of pioneering art therapists of Color, to the extent that I had to reach out to an outside source to obtain a copy of a dissertation by Dr. Lucile Venture, the first person to earn her doctorate in art therapy, who happens to be a Black woman. Dr. Venture, nor other pioneers of Color were spoken of in three credit classes. The one course offered on cultural humility was a three-week course, only offered in the summer, a mere two weeks was reserved for cultural relations, the third week was dedicated to mandalas. These are merely some of my graduate school experiences, adding to the other racial aggressions I started experiencing in school, at six years of age.

*Isolation*

Further complicating this experience was managing my own posttraumatic stress disorder related to racial and other traumas, without a local community. For the first time in my life, I experienced intense depression and even suicidal ideation. This provided new insight on suicidality completion and how disappointing and hurtful it is for people to ignore blatant signs, especially therapists and therapists in training. Fortunately, my will to live and push through was greater than the temporary pain I experienced. I would repeatedly discuss my isolation and loneliness in classes, even breaking down in tears, unfortunately, no students ever reached out to check on me. I consistently extended an olive branch via sharing resources and extending effort to build community outside of class I had never experienced this as not a form of community building.

Not having a community of support in California created indescribable emotional turbulence. This was an extremely foreign experience because I was accustomed to having various groups of friends and a very active social life. I have lived in various regions of the country, five different states as an adult, and even abroad, having never experienced anything similar. This propelled me to build community with mental health professionals of color throughout the country in order to fill this void. Antiracist work is consistently triggering and intensifies isolation.

### *Professional development*

During my practicum, I worked with thirty-five students during my training, zero were white. All five of my supervisors were white and seemed to have minimal experience with supporting the life experiences of people of Color. Throughout the year I would ask about practices, interventions, and experientials that would support marginalized communities of Color, especially those significantly impacted by gang and gun violence. The inquiries were

typically met with silence, the professor who denied my racial trauma PTSD told me more research was needed. Ethnicity nor race was openly discussed, if it was, I brought it up and was met with discomfort. Intersectionality pertaining to ethnicity and race was never openly and comfortably discussed during any group supervision. It was a blatant given I could never speak with them about the pervasive multimodal microaggressions that were an everyday occurrence. This was especially disappointing while training under an organization that operated throughout the entire state of California, a state that prides itself on diversity and liberal ideals. I was completing training hours at a school where the school counselor's behavior was so egregiously anti-Black, I was asked to meet with human resources following a meeting. Vicarious trauma from students I was working with further complicated matters, as I noticed a troubling discrepancy in the advocacy efforts for Black students.

After this organization added an intake section inquiring about race and ethnicity, the administrators decided their curriculum needed modification to suit the needs of the demographics they were serving. Instead of hiring licensed professionals and experts, trainee employees were recruited to modify curriculum. We were not offered any supplementary compensation for the additional work white trainees were not asked to do, because it was "during scheduled work hours." I proudly declined this unethical opportunity.

### *Personal significance*

This work is exceptionally personally significant to me because of my ongoing experiences, as well as the experiences of my ancestors, family, friends, acquaintances, strangers, and individuals I have worked with. My great-great-great grandmother was born enslaved, owned by her father. Following her emancipation, she became a nurse and an actively instrumental source of support in her community, inspiring her sons and others to do the same.

They were extraordinarily supportive of community who did not have the privilege of education by assisting illiterate community members with reading and/or completing documentation. The funeral home her grandsons started was instrumental in assisting people escape from lynching, by way of casket. This ancestor was honored with a library named in her honor in Macon, GA, which mystically resembles the altered book the student researcher created that inspired this collective healing practice. Imagery of my great-great-great Grandmother alongside the original library paying homage to her and my altered book can be viewed in Appendix I.

Due to the intensity, proximity, and uniqueness of the study, I internalized pressure and experienced significant anxiety in a concerted effort to do this well and correctly, resulting in two thesis extensions. Synchronicity led to connecting with both a trustworthy therapist and mentor, invaluable additional support for this very trying process. It is absolutely imperative that any person of Color doing antiracist work have a reliable and consistent community of support for their mental wellness, stability, and conviction.

### **Recommendations for Future Research**

This therapeutic experiential was created to provide a safe community space for processing and healing racial trauma. The student researcher believes that expounding upon this research would be beneficial. In order to maintain consistency and have a similar experience with tools utilized in this process, the student researcher recommends directly distributing the same materials to participants, including art materials and the same textbook to unify the experience. Conducting more sessions for shorter durations of time would also be advantageous to participants. In order to increase group unity, community, and solidarity, it would have been ideal to have more sessions for a number of reasons; time to orient and build rapport amongst group members, time to share conversations, and time for creative co-collaboration while

working on their altered books. Participants stated they desired becoming better acquainted which may have also impacted the creative process and inspiration. With more time, healing would become more comprehensive. Community building could deepen, as well as offer an extended opportunity to continue community work in complementary areas.

Conducting this process with all white audiences would be beneficial to help understand a different perspective, increase empathy, and hopefully decrease implicit bias and stereotyping.

### **Conclusion**

The CDC recently declared racism a public health crisis, therefore it is imperative to explore and research unique modalities of healing to help relieve physical and psychological impacts of race-based trauma for collective societal health. Providing a safe space for cross cultural community building and processing race-based trauma via a beneficial art making experience proved this to be useful and relevant for research. The layered complexity of racial trauma, as it is ongoing and never ending, proves further reason to provide space to artistically process intricate emotions and experiences.

The educational experiences of the majority of people of Color are consistently disengaging and excluding. The opportunity to reprocess oppressive experiences via art making is transformative in many ways. It enables the artistic narrator to externalize the pervasive problem that is racism and become the author of this story as it relates to racism. When given the opportunity to reject and unload the weight of racism, the symptoms of that weight can also be relieved, as untreated and unresolved psychological symptoms often transform into physiological symptoms (Carter, 2007b; Utsey et al., 2002; Williams et al., 2018).

Art making provides a unique experience that allows individuals to deeply process their identity, experiences, and emotions. Creating art that refutes negative oppressive messaging,

especially that received in the form of books throughout formative years and beyond, is extremely empowering. Healing manifested in an inter-ethnic group setting also enabled rare community building dialog that decreases feelings of isolation in these experiences of racist oppression. This is also a form of defiance of the status quo of segregation amongst minoritized groups. All themes that emerged from the art created were empowering and liberating. The realization of parallel experiences is another form of liberating empowerment. Throughout the U.S., Black Indigenous People of Color support groups and organizations are manifesting co-creation and mutual support. Collective healing is an element of critical consciousness that we need for radical healing to occur. The healing will empower people to continue challenging abusive norms and facilitate necessary change for the collective good.

It is imperative that general standard curriculum changes so that history is told with integrity and honesty. Mainstream books continue to ignore the contributions of nonwhite people, with the exception of a few historical figures deemed “safe.” Exclusionary education impacts everyone, leaving some uninspired and disengaged and reinforcing negative programming and stereotyping for others. This is an experiential process that could open the eyes of many, allowing them to experience life from a more loving and open perspective, as well as reclaim their life story and the roles they play in society. As stated in chapter two, racism has cost the United States 19 trillion dollars and counting, no one wins with oppression. We are all deeply interconnected in this complex intersectional world.

Love is seeing potential through flaws; it is working through pain to reach harmonious beauty. This is a patriotic act of love. Like the love one has for a troubled loved one who makes painful choices, but you know could do so much better. Instead of burning or banning harmful books, we embraced them and transformed them into symbols of strength and beauty.



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**APPENDIX A**

**Recruitment flyer**

APPENDIX a

## **Participants Needed for Research Study**

**Are you an adult person of Color who's  
experienced racial trauma?**

**Are you a mental health provider,  
educator or in the human service field?**

**If you've answered yes, then you can  
participate in my research study!**

**All you need is access to zoom, a general  
education book and art supplies!**

This is a research study conducted by a graduate student at Notre Dame de Namur university which aims to look at the potential benefits of using altered books as therapy to process racial trauma in the education experience. This research has been approved by the Institutional Review Board at Notre Dame de Namur.

For more information, please contact Kamaria Wells at  
[alteredbooksandstoriesresearch@gmail.com](mailto:alteredbooksandstoriesresearch@gmail.com) or (209)691-3065.

**APPENDIX B**  
**Informed Consent**





## Agreement to Participate in Research

RESPONSIBLE INVESTIGATOR: Kamaria Wells

TITLE OF RESEARCH PROJECT: Relieving symptoms of racism by altering dominate history with narrative therapy and altered books

I have been asked to participate in a survey-based research study that is investigating the use of altered books as therapy to reduce stress in people of Color who are experiencing symptoms of racial trauma. The results of this study should further our understanding of using altered books as therapy and overall racial trauma symptomology relief and resilience with these practices.

I understand that:

1. I will be asked to take four surveys prior to the first session that should take approximately sixty (60) minutes to complete.
2. The possible psychological risks of participating in this study are considered minimal and may include some discomfort based on reaction to the art directives. Should any feelings be elicited based on my participation in this study, I will be provided with a list of low-cost agencies that provide psychological services.
3. There may be minor benefits to me personally in the area of stress, anxiety, and depression reduction, and well as physiological relief and future resilience to internalization of racist encounters. The results of this study will help expand our knowledge of stress reduction through the use of photography.
4. Although alternative procedures may be used, the present procedure is the most advantageous and economical.
5. The results of this study may be published, but any information from this study that can be identified with me will remain confidential and the data will be pooled to maintain anonymity.
6. Any questions about my participation in this study will be answered by Kamaria Wells through email or by telephone ([alteredbooksandstoriesresearch@gmail.com](mailto:alteredbooksandstoriesresearch@gmail.com) or 209-691-3065). Any questions or concerns about this study should be addressed to Sarah Kremer at [SKremer@ndnu.edu](mailto:SKremer@ndnu.edu). Complaints or concerns about this study may be addressed to Amy Backos at [Abackos@ndnu.edu](mailto:Abackos@ndnu.edu).
7. My consent is given voluntarily without being coerced. I may refuse to participate in this study or in any part of this study, and I may withdraw at any time, without prejudice or with any future contact with NDNU.
8. I have received a copy of this consent form for my record.

I HAVE MADE A DECISION WHETHER OR NOT TO PARTICIPATE.

Please check one:

\_\_\_\_\_ YES, I agree to participate in this research study and I agree to have my art and written responses as part of the study data.

\_\_\_\_\_ NO, I do NOT agree to participate in this research study and I agree to have my art and written response as part of the study data.

\_\_\_\_\_  
Print Participant's Name

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Investigator's Signature

**APPENDIX C**  
**Unrests**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**UConn RACIAL/ ETHNIC STRESS & TRAUMA SURVEY (UnRESTS)**

<b>Guide for Interviewer</b>		<b>Interview Questions</b> <i>(Instructions for interviewer are italicized.)</i>
	<b>A</b>	<b><i>Introduction to the Interview</i></b>
<p><i>Note the difference between <b>race</b> (the group society puts a person in based on their appearance) and <b>ethnicity</b> (a person's culture based on their heritage). They may be different or the same.</i></p> <p><i>The US Census recognizes several specific racial categories, including Black, White, Asian, and Native American. Hispanic is an ethnic group, but many consider Hispanic/Latino a race, which is acceptable for this interview.</i></p>	A1	<p>Sometimes people have very bad experiences that cause feelings of stress or even trauma. Some people have several difficult experiences over a lifetime that are manageable individually, but together they lead to feelings of stress or trauma. I want to talk to you about some of your experiences of stress or trauma as it relates to your race or ethnicity.</p> <p><i>If patient's racial and ethnic group is unclear: How would you describe your race and ethnicity?</i></p>
<p><i>Ensure that discussion only includes incidents where at least one of the involved factors was race or color.</i></p>	A2	<p>People may be discriminated against or mistreated for many different reasons (e.g., gender, sexual orientation, age, disability, faith, etc.) but I am interested in experiences connected to your race – or your race as perceived by others. However, if you have experienced discrimination due to a combination of factors (i.e., gender+race, such as being called “an angry Black woman” because you stood up for yourself), we can talk about that too.</p>
	<b>B</b>	<b><i>Racial and Ethnic Identity Development</i></b>
<p><i>If yes, ask the patient to elaborate.</i></p>	B2	<p>Are there other racial or ethnic groups that people assume you belong to based on your appearance?</p>
<p><i>Ask the patient to describe this.</i></p>	B3	<p>When was the first time you became aware of race or ethnicity?</p> <p>When was the first time you remember feeling different, excluded, or singled out because of your apparent race or ethnicity?</p>
<p><i>Assess for things like positive messages from parents, racial socialization, negative messages from others, media, stereotypes, etc.</i></p>	B4	<p>What sort of things, positive or negative, did you learn about your race and ethnicity growing up? <i>(May not apply to immigrants.)</i></p>

<p><i>Assess for feelings of ethnic/racial pride and/or stigma/shame.</i></p> <p><i>Rate each question (1-6) based on response from patient.</i></p> <p><i>For each affirmative answer, solicit an example.</i></p> <p><i>For each negative answer, ask "why not?"</i></p> <p><i>Ethnic/Racial Identity Score: (B5) Total _____</i></p>	B5	<p>I want to understand a bit more about how you feel about being a(n) (<u>enter race &amp; ethnicity here</u>) person. I'm going to ask you a few questions about that.</p> <p>1. Would you say that you feel strong attachment to your ethnic (or racial) group? <i>Very Much (2) - Somewhat (1) - No (0)</i></p> <p>2. Would you say that you have a lot of pride in your ethnic group and its accomplishments? <i>Very Much (2) - Somewhat (1) - No (0)</i></p> <p>3. Would you say that you are active in groups that include mostly members of your own ethnic group? <i>Very Much (2) - Somewhat (1) - No (0)</i></p> <p>4. Would you say that you have a strong sense of belonging to your ethnic group? <i>Very Much (2) - Somewhat (1) - No (0)</i></p> <p>5. Would you say that you think a lot about how life is affected by your group membership? <i>Very Much (2) - Somewhat (1) - No (0)</i></p> <p>6. Would you say that you have often talked to others about issues related to your ethnic group? <i>Very Much (2) - Somewhat (1) - No (0)</i></p>
	B6	<p>How much of your free time do you spend with people from your own racial/ethnic group?</p>
<p><i>Assess for wish to be White, non-stigmatized, and/or privileged group member.</i></p>	B7	<p>Many people note that it can be difficult to be an ethnic or racial minority. Have you ever wished you were a member of the majority group (i.e., a White person)?</p>
<p><i>Assess for composition of workplace/school and racial climate.</i></p>	B8	<p>What is the ethnic/racial environment like in your place of work/school? How comfortable do you feel there as a (<u>enter race here</u>) person?</p>

	<b>C</b>	<b>Experiences of Direct Overt Racism</b>
<p><i>Give examples, if needed. This may include harassment at work, threats, victimization by law enforcement, etc.</i></p> <p><i>Elicit a description of the event.</i></p>	C1	<p>Can you share with me a time you were impacted by racism? This could be something that someone else either said or did to you. I am especially interested in any experiences where you were <u>concerned about your safety</u> and the event was <u>very upsetting</u>.</p> <p><i>If needed: If you can't think of any instances like that, then any racist experience will be fine (i.e., being followed in stores, called racial slurs, etc.).</i></p>
<i>Determine when the event occurred.</i>	C2	How old were you when this happened?
<i>Be careful not to communicate doubt that this was in fact a racist event.</i>	C3	What led you to believe this event happened due to your race?
<i>Assess for degree and type of distress experienced, e.g., anger, depression, anxiety.</i>	C4	How upset were you by this experience? <i>If distress was present: Are you still upset by it?</i>
<i>Determine if experience was a trauma.</i>	C5	Did you fear for your life, health, or safety? <i>If yes: In what way?</i>
<i>Assess for adaptive versus maladaptive coping strategies.</i>	C6	How did you cope with this experience?
<i>Assess for availability and use of support system.</i>	C7	How did other important people in your life respond when you told them about this?
<i>Ask about other experiences of racism.</i>	C8	Can you tell me about another experience of racism like that? <i>If necessary: This can be any other situation where you were fearful, <u>concerned about your safety</u>, or if the event was <u>very upsetting</u>.</i>
<i>Determine when the event occurred.</i>	C9	How old were you when this happened?
<i>Be careful not to communicate doubt that this was in fact a racist event.</i>	C10	What led you to believe this event happened due to your race?
<i>Assess for degree and type of distress experienced, e.g., anger, depression, anxiety.</i>	C11	How upset were you by this experience? <i>If distress was present: Are you still upset by it?</i>
<i>Determine if experience was a trauma.</i>	C12	Did you fear for your life, health, or safety? <i>If yes: In what way?</i>
<i>Assess for adaptive versus maladaptive coping strategies.</i>	C13	How did you cope with this experience?
<i>Assess for availability and use of support system.</i>	C14	How did other important people in your life respond when you told them about this?

	<b>D</b>	<b>Experiences of Racism by Loved Ones</b>
<i>Elicit a description of the event.</i>	D1	Can you share with me a time you were impacted by racism as a result of something that happened to <u>someone close to you</u> ?
<i>Determine when the event occurred.</i>	D2	How old were you when this happened?
<i>Be careful not communicate doubt that this was in fact a racist event.</i>	D3	What led you to believe this event happened due to race?
<i>Assess for degree and type of distress experienced, e.g., anger, depression, anxiety.</i>	D4	How upset were you by this experience? <i>If distress was present: Are you still upset by it?</i>
<i>Determine if experience was a trauma.</i>	D5	Did you fear for the life, health, or safety of that person?
<i>Assess for adaptive versus maladaptive coping strategies.</i>	D6	How did you cope with this experience?
<i>Assess for availability and use of support system.</i>	D7	How did other important people in your life react to this?
<i>Elicit a description of the event.</i>	D8	Can you share with me another time you were impacted by racism as a result of something that happened to <u>someone close to you</u> ?
<i>Determine when the event occurred.</i>	D9	How old were you when this happened?
<i>Be careful not communicate doubt that this was in fact a racist event.</i>	D10	What led you to believe this event happened due to race?
<i>Assess for degree and type of distress experienced, e.g., anger, depression, anxiety.</i>	D11	How upset were you by this experience? <i>If distress was present: Are you still upset by it?</i>
<i>Determine if experience was a trauma.</i>	D12	Did you fear for the life, health, or safety of that person?
<i>Assess for adaptive versus maladaptive coping strategies.</i>	D13	How did you cope with this experience?
<i>Assess for availability and use of support system.</i>	D14	How did other important people in your life react to this?

	<b>E</b>	<b>Experiences of Vicarious Racism</b>
<i>Give examples as needed, e.g., shooting of unarmed Black teen, racially-motivated hate crime, wars due to ethnic cleansing, etc.</i>	E1	Can you share with me a time you were impacted by racism as a result of something you learned about – for example, on the news or in your community – that involved someone you did not know personally?
<i>Determine when the event occurred.</i>	E2	How old were you when this happened?
<i>Be careful not to communicate doubt that this was in fact a racist event.</i>	E3	What led you to believe this event happened due to racism?
<i>Assess for degree and type of distress experienced, e.g., anger, depression, anxiety.</i>	E4	How upset were you by this experience? <i>If distress was present: Are you still upset by it?</i>
<i>Determine if experience was personally traumatic.</i>	E5	Did this event make you worry about your own well-being, health, or sense of safety?
<i>Assess for adaptive versus maladaptive coping strategies.</i>	E6	How did you cope with this experience?
<i>Assess for availability and use of support system.</i>	E7	How did other important people in your life react to this?
	<b>F</b>	<b>Experiences of Covert Racism</b>
<i>Microaggressions include brief, exchanges, in the form of seemingly innocent and innocuous comments, subtle or dismissive gestures, and tones that send denigrating messages to people of color because they belong to a minority group.</i>	F1	Often minorities are the target of subtle or covert racist experiences in the form of what we sometimes call "microaggressions." <i>Define if needed.</i>  How often would you say that you experience these?
<i>Elicit a description of the event.</i>	F2	Can you give me a recent example?
<i>Elicit a description of the event.</i>	F3	Can you give another example?
<i>Elicit a description of the event.</i>	F4	Can you give another example?
	F5	How stressful is it for you when these sorts of things happen to you?
<i>Assess for adaptive versus maladaptive coping strategies.</i>	F6	How do you cope with these experiences?
	F7	Have you experienced any changes in your ability to manage microaggressions?

*Note: Sections C-F may be duplicated to capture additional events.*



### **G. Racial Trauma Assessment**

*Assess for PTSD if any experiences previously described qualify for DSM-5 Criterion A event.*

Think about all of the experiences we discussed concerning racism and discrimination as you answer the following questions:

*Note: For each positive response, ask for an example and note frequency.*

#### **Re-Experiencing (Need 1 for PTSD diagnosis)**

G1. Have you had reoccurring, unwanted distressing memories about racism-related experiences?	YES	NO
G2. Have you been having bad dreams or nightmares related to racism, or about feeling powerless or excluded?	YES	NO
G3. Have you had the experience of feeling as if a past racism-related event was happening to you all over again (like a flashback)?	YES	NO
G4. Do you get very <i>emotionally</i> upset when reminded of racism-related experiences?	YES	NO
G5. Have you had negative <i>physical</i> reactions when reminded of racism-related experiences (e.g., stomach ache, heart racing, shaking)?	YES	NO

#### **Avoidance (Need 1 for PTSD diagnosis)**

G6. Have you been trying hard not to think about upsetting racist experiences you've had?	YES	NO
G7a. Have you tried to avoid activities, places, things, or situations that remind you of the racism-related experiences you have had?	YES	NO
G7b. Have you tried to avoid certain types of people because you worry they will behave in a racist way (i.e., White people, law enforcement, bosses, etc.)?	YES	NO

#### **Negative Changes in Cognition & Mood**

*(Need 2 for PTSD diagnosis - count only one from #9 and/or #10)*

G8. Are there any important parts of your experiences with racism that you cannot remember?	YES	NO
G9a. Have you been viewing yourself in a more negative way because of racism (e.g., "I should be a stronger person")?	YES	NO

G9b. Have you been viewing others in a more negative way due to racism (e.g., "I can't trust White people")?	YES	NO
G9c. Do you feel as if the world is a dangerous place because of your experiences with racism?	YES	NO
G10a. Have you blamed yourself for your experiences of racism, or for things that may have happened afterwards due to racism?	YES	NO
G10b. Have you blamed others who were not involved for your experience, or for things that may have happened afterwards?	YES	NO
G11. Have you had ongoing negative feelings such as fear, horror, anger, guilt or shame because of your racism-related experiences?	YES	NO
G12. Have you lost interest in activities you used to enjoy?	YES	NO
G13. Have you been feeling detached, cut-off, or alienated from other people?	YES	NO
G14. Have you had difficulty experiencing positive feelings? Or do you feel emotionally numb?	YES	NO

#### ***Physiological Arousal & Reactivity (Need 2 for PTSD diagnosis)***

G15. Have you been more irritable or (physically or verbally) aggressive?	YES	NO
G16. Have you been taking more risks or doing things that might harm you or others (e.g., reckless driving, taking drugs, having unprotected sex)?	YES	NO
G17. Have you been overly alert or on-guard (e.g., checking to see who is around you, sitting in places where you can see everyone, etc.)?	YES	NO
G18. Have you been jumpy or more easily startled?	YES	NO
G19. Have you had a hard time staying focused or concentrating?	YES	NO
G20. Have you had a hard time falling asleep or staying asleep?	YES	NO

#### ***Dissociative Symptoms (Need 0 for PTSD diagnosis)***

Note: These may be more likely when you get upset or stressed, esp. when triggered by experiences of racism.

G21. Do you ever have times that you feel detached from your body, disconnected from your sense of self, or like a robot? ( <i>depersonalization</i> )	YES	NO
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G22. Do you ever have times that everything seems rather unreal, dreamlike, distant, or distorted? ( <i>derealization</i> )	YES	NO
<b><i>Distress &amp; Interference</i></b> ( <i>Need 1 for PTSD diagnosis</i> )	<i>Clinically significant</i>	<i>Not clinically significant</i>
G23. Have these difficulties been upsetting for you? ( <i>all symptoms discussed so far</i> )	YES	NO
G24. Have these difficulties been getting in the way of your everyday life (e.g., relationships, work, school, parenting, or other important activities)?	YES	NO
<b><i>Duration of Disturbance</i></b> ( <i>Need 1 month or more for PTSD diagnosis</i> )	<i>1 month or more</i>	<i>Less than 1 month</i>
G25. How long have you been feeling these things?	YES	NO

For a DSM-5 diagnosis of PTSD, the examinee must have:

- at least 1 symptom in the ***Re-Experiencing*** category,
- at least 1 symptom in the ***Avoidance*** category,
- at least 2 symptoms in the ***Negative Changes in Cognition & Mood*** category (count only one from #9 and only one from #10),
- at least 2 symptoms in the ***Physiological Arousal & Reactivity*** category,
- at least 0 symptoms in the ***Dissociative Symptoms*** category,
- at least 1 symptom from the ***Distress & Interference*** category
- The ***Duration of Disturbance*** must be a YES answer.

Reference the DSM-5 for exclusion criteria.

**LIKELY DIAGNOSES:** \_\_\_\_\_

**APPENDIX D**

**Qualitative demographic questions**

How did educational experiences impact your self-efficacy?

Have you had a teacher of your same ethnicity? How was/were that/those experience(s)?

Reflecting on your educational experiences, did you ever want to correct your teacher for sharing historical inaccuracies they shared? How did that impact you? -

How did an education celebrating racist historical figures impact you?

Can you describe any texts or lessons that changed your mood? How did your peers respond?

How did/do you resist educational oppression?

What do you love about your culture?

How do you celebrate your identity?

**APPENDIX E**

**Qualitative Session Conclusion Questions**

- 1-1. What was it like to observe educational text with this new experience?
- 1-2. What is the distinction between education and indoctrination?
- 2-1. How did your book incorporate inclusivity?
- 2-2. How historically accurate is your book?
- 3-1. What does metamorphosis mean to you?
- 3-2. Describe your resilience.
- 4-1. How did it feel to write a letter to your book?
- 4-2. What did this letter signify?
- 5-1. What were your strengths as a child?
- 5-2. How did you feel after you wrote a letter to yourself?
- 6-1. Observing your altered book, what emotions and sensations are you experiencing?
- 6-2. Describe your favorite sparkling moments in your journey.

**APPENDIX F**  
**Debriefing Statement**



Thank you for your participation in this research on racial trauma symptom reduction through the use of altered book making. Scale questionnaires, artwork, and reflection questions were used with adult people of Color in mental health and human service fields in this study. The goal of the questionnaires was two-fold: to gather information on the context of the experiences of racial trauma and evaluate how it impacted you. The artwork was an attempt to see if the use of altered books can help an individual experience stress reduction, personal insight, and the ability to reframe racist encounters. The prediction is that though the use of altered books, chronic stress, anxiety, depression, and dissociation reduction can be achieved for overall better health in people who are experiencing racial trauma. The reflection questions are meant as a way to allow the participant to reflect upon the previous experiences and allow the book and reflective writing to evoke some of those same feelings. The questions will be evaluated for usefulness regarding the use of altered books and overall personal insight.

If you would like to learn more about coping with racial trauma, please see the references listed below.

Free community care resource for people of color, community organizers, activists and others supporting frontline communities available from TRACC4 Movements at [COVID CARE | TRACC4Movements](#)

[Self-care tips](#)

[Racial trauma toolkit](#)

[8 Mental Health Resources for People of Color | The Mighty](#)

If you feel that you need assistance with stress as a result of this study, a list of therapy resources are included below.

[Therapy In Color ® | Mental Health for Black, Indigenous & People of Color](#)

[Therapy for People of Color – Where people of color connect with culturally-competent therapists and wellness.](#)

[African American Mental Health Providers](#)

[About — Therapy For Black Girls](#)

Current research has found that racial trauma serious health concern. Your participation was important in helping researchers understand the use of altered books in therapy, as well as a potential solution to health risks caused by daily assaults. Final results will be available from the Investigator, Kamaria Wells, by May 1, 2020. You may contact me at [alteredbooksandstoriesresearch@gmail.com](mailto:alteredbooksandstoriesresearch@gmail.com) to receive an email copy of the final report. All results will be grouped together; therefore individual results are not available. Your participation, including your name and answers, will remain absolutely confidential, even if the report is

published. If you have any additional questions regarding this research, please contact Kamaria Wells at [alteredbooksandstoriesresearch@gmail.com](mailto:alteredbooksandstoriesresearch@gmail.com).

**APPENDIX G**

**Transcripts of Pre-Session Interviews**

**1. How did educational experiences impact your self-efficacy?**

Extremely, I would definitely say knowing the history of things and having the ability to critically think has given me the tools to understand racism and how I can combat it and knowing I have blind spots, schooling, and education on your own can enhance yourself.

**Have you had a teacher of your same ethnicity? How was/were that/those experience(s)?**

Yes, I would say when we had the special populations class, she had a Spanish speaking person who is working in the community, that made me feel good.

**Reflecting on your educational experiences, did you ever want to correct your teacher for sharing historical inaccuracies they shared? How did that impact you? –**

I can remember one time I was in 3<sup>rd</sup> grade we were learning about slavery; I felt a lot of what we were learning was being washed over. The teacher omitted important details of cruelty. I remember thinking there was more to the story, we had to write a summary and I said people were kidnapped, shackled, some jumped off the ships. My mother was honest with us with history, she was always amazed at the history taught, she was educated in Colombia.

**How did an education celebrating racist historical figures impact you?**

I didn't come into awareness of historical figures that were celebrated until college; I think it was cause I was in a bubble in a private school. SF State was like an explosion of awareness.

**Can you describe any texts or lessons that changed your mood? How did your peers respond?**

I don't remember discussion in class, it was more of an indoctrination.

**How did/do you resist educational oppression?**

By trying to inform myself on different perspective, I find myself trying to investigate the history behind things more to understand the origin of stuff.

**What do you love about your culture?**

Oh, I love that we have a warm glowing spirit, the cultural that we have dancing and being in enjoyment, I like that a lot about the Latino community, the food, the jokes, innuendos.

Colombians really have this love for life, this bright spirit, and I really love the music, dancing. i

**How do you celebrate your identity?**

By really embracing the stuff that reminds me of being Latina, when I do art. I do things that reflect my experiences with my Grandma, religious symbology, cooking food, music, dancing, sending memes to cousins.

**2. How did educational experiences impact your self-efficacy?**

School was really challenging, making friends and assignments in math were difficult. School was a safe place generally because I could get away from home.

**Have you had a teacher of your same ethnicity? How was/were that/those experience(s)?**

In Milwaukee public schools, yes, after I was transferred I had 1. The first time I was called the N word I went to staff and addressed it.

**Reflecting on your educational experiences, did you ever want to correct your teacher for sharing historical inaccuracies they shared? How did that impact you?**

I was the only Black person in his classroom, they'd always ask me to be the Black voice, as a kid I didn't feel safe or want to speak up.

**How did an education celebrating racist historical figures impact you?**

I definitely remember thinking they hid the accomplishments of Black people. I remember only seeing pictures of Black people groveling in texts. They only taught us about a few Black figures. The message I received was we need their help and only a few of us are capable.

**Can you describe any texts or lessons that changed your mood? How did your peers respond?**

I was in HS, where many of us were bussed in. Around the time of applying to college I remember people saying I was only admitted because I'm Black. That to me is not true, it is racist.

**How did/do you resist educational oppression?**

With my career choice, my son, choosing a school that celebrates Black people and diversity. I am big on wearing pro-Black shirts that provoke dialogue.

**What do you love about your culture?**

We're joyful, witty, resilience, hope, strength, power, intelligence, humor, and creativity. It's different for us. I love that we will try to make a community and connect what we can.

How do you celebrate your identity?

Through visuals, we have many positive images of Black people at home. I want to make sure in this sanctuary we have that joy. Buying Black, connecting with and celebrating with other Black fathers and friends.

**3. How did educational experiences impact your self-efficacy?**

Self- efficacy was very connected to education, I felt very capable, I skipped 3 grades. I know that if I did badly, it was because I didn't put in the work.

**Have you had a teacher of your same ethnicity? How was/were that/those experience(s)?**

Yes, overall, I prefer having Black teachers because they better understand experiences, they're also better with classroom management.

**Reflecting on your educational experiences, did you ever want to correct your teacher for sharing historical inaccuracies they shared? How did that impact you?**

Yes, I felt a need to speak up and be nice about it.

**How did an education celebrating racist historical figures impact you?**

It may have impacted me more because I knew about the Black history that wasn't told. I was upset in high school and felt it wasn't fair. I knew as a little girl that Columbus didn't discover America. Lincoln getting praise he doesn't deserve.

**Can you describe any texts or lessons that changed your mood? How did your peers respond?**

When I was a little girl and first learned about chattel slavery at 5, my world perspective changed.

**How did/do you resist educational oppression?**

Get on top of it is I see something happening, respectfully educate and provide my experiences.

**What do you love about your culture?**

Resilience, we're very caring and forgiving, for the most part we're kind and forgiving people. We just want equality; we don't want to suppress others. The fun spirit.

**How do you celebrate your identity?**

Recently physical expression, my hair. When I was younger it was typically straightened, wearing my hair natural when I gained the confidence to do it proudly. Clothes, African inspired clothing from Ethiopia wearing brightly colored prints, unapologetically. Spiritually, I've always had a spiritual pride about Blackness.

**4. How did educational experiences impact your self-efficacy?**

This is one of the biggest things I've thought about, in elementary school I was still in Agawam I had friends who saw me as really shy. I was shy, moving to a new town allowed me to put those things behind me. In middle school I felt unpopular, I did well, but I didn't feel like I could fully

be myself with others, talking to certain people. It got better in High school but felt really behind and eventually I stopped trying. In college, I started finding people I could fully be myself with.

**Have you had a teacher of your same ethnicity? How was/were that/those experience(s)?**

The one time I had a teacher who was Asian was an intro to Asian studies course, I couldn't identify with her b/c she was really fem, gender issues were more prevalent for me then. I had a counselor one time who was Asian, I called her my mom away from home, but I didn't really talk to her, we were just both Asian.

**Reflecting on your educational experiences, did you ever want to correct your teacher for sharing historical inaccuracies they shared? How did that impact you?**

When I was in school, K-12, I never liked history classes, I now see it was the white man's version of history that I didn't like. I remember one time he was talking about China the teacher showed pictures of poor Chinese.

**How did an education celebrating racist historical figures impact you?**

I think it made more of an impact in college, I feel a sense of grief, it was literally a genocide followed by enslavement.

***Can you describe any texts or lessons that changed your mood? How did your peers respond?***

We read Huckleberry Finn in HS, we had a discussion of why we were forced to read this, the conversation was led by white men and boys. I really didn't like Huck Finn, I never understood why we read that. We also read Toni Morrison, but I don't think we spoke about them like we should.

**How did/do you resist educational oppression?**

I go through IG a lot, to see how people respond to things happening in the news.

**What do you love about your culture?**



I wonder what is my culture, there's Chinese culture, Asian culture, I feel I identify BIPOC culture because of the focus on solidarity to everyone's struggles and healing trauma.

**How do you celebrate your identity?**

I don't really celebrate it publicly, I'll have dance parties by myself and post photos, talking to my queer Asian friends with pride of resilience.

**5. *How did educational experiences impact your self-efficacy?***

My dad was a teacher, education has always been valuable and enabled me to have conversations in different spaces in academia.

**Have you had a teacher of your same ethnicity? How was/were that/those experience(s)?**

I studied abroad in Spain and had Hispanic teachers there.

**Reflecting on your educational experiences, did you ever want to correct your teacher for sharing historical inaccuracies they shared? How did that impact you?**

When we were studying Columbus, I remember stating that there was no discovery involved, it was a space safe to have these conversations. Felt welcoming and empowering

**How did an education celebrating racist historical figures impact you?**

I was very into learning the other history, had a naïve notion of digging a little deeper. Didn't understand the systems of exclusion and was just thinking of things as an outline

**Can you describe any texts or lessons that changed your mood? How did your peers respond?**

I noticed the relationship to food, for indigenous pops, is very different than Euro-American's

**How did/do you resist educational oppression?**

Speaking up, raising my hand, talking back when they make mistakes. I got so tired at Indiana

**What do you love about your culture?**

I love so many things about my culture, it's sense of caring and hospitality, the family strong core, the social structure that's inviting. My sons had tios & tias who aren't bio. I love that I can go into stores, start speaking Spanish and have a great conversation.

**How do you celebrate your identity?**

The way I pronounce my name, I keep my family name, where I spend my dollars and my time, local minority businesses.

**APPENDIX H**

**Qualitative Post-Session Questions**

1. Overall, how do you feel about the research?
2. What did you like best about the research?
3. What did you like least about the research?
4. How did this research impact you?
5. If given the opportunity, would you participate in similar research?
6. Would you recommend this experiential to anyone else?

**APPENDIX I**

**Image of Ancestry**

