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Systematic Literature Review: Identifying the Challenges Mental Health Professionals
Experience when Assessing and Measuring Racial Microaggressions in African Americans in the
United States

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An abstract of
A thesis submitted to the Faculty of the
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Abstract

Systematic Literature Review: Identifying the Challenges Mental Health Professionals Experience when Assessing and Measuring Racial Microaggressions in African Americans in the United States

By

Charlene F. Njoroge

As racism, in particular racial microaggressions, becomes increasingly recognized as a source of mental health stress for African Americans, it is important to understand how to identify, assess and measure the impact racial microaggressions have on African American's mental health. Racial microaggression is a fairly new type of discrimination towards many minority groups such as African Americans and Asian Americans. Similar to the effects of racism, racial microaggression has a significant impact on one's mental and physical health. In order to lessen the impact on one's mental and physical health, it is important to research some of the barriers for mental health treatment.

The purpose of this systematic review is to explore what the literature says are challenges mental health professionals face in assessing and measuring daily racial microaggression experiences in African American clients. The methodology used in this systematic review involved the development of a search string related to racial microaggression that would yield a wide range of articles to address the research questions developed within this systematic review. After the literature results, the systematic process included applying my inclusion and exclusion terms to the literature and then I extracted the data from articles into a database which narrowed down my literature to the final articles. The final 13 articles used for this systematic review were

analyzed by grouping articles together with similar themes that relates to the research questions and offered recommendations. The literature identified some of the challenges which included: 1) researchers and mental health professionals heavily rely on self-reporting for data collection; 2) racial microaggression is a fairly new term and research is limited on the subject and 3) there is a lack of awareness about racial microaggressions among mental health professionals. These challenges provide a unique opportunity to research possible recommendations to combat the aforementioned challenges. The recommendations includes exploring additional research methods, such as observing behaviors and journals over a long period of time, and building awareness of racial microaggression among mental health professionals.

Combating these challenges will improve the relationship between African Americans and the mental health community and as a result will improve the mental and physical health of African Americans.

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Chapter 1:

Introduction

Racism has been documented for hundreds of years, but just within the last few decades racism has been studied for its impact on the mental and physical health of all races. This systematic review will explore what the literature says are challenges mental health professionals face in assessing and measuring racial microaggressions towards African Americans.

According to the Oxford Dictionary, “racism is defined as prejudice, discrimination or antagonism directed against someone of a different race based on the belief that one’s own race is superior” (12 April 2017, Retrieved from <https://en.oxforddictionaries.com/definition/racism>). The theory of racism (as described by Oxford Dictionary) is the belief that all members of each race possess characteristics or abilities specific to that race, especially so as to distinguish it as inferior or superior to another race or races.

It is important to study the different types of racism. According to Clark et al. (1999), research reveals there is a direct correlation between how racist experiences are categorized and their physical and mental effects. Long term racism and daily racial discrimination can cause a significant impact on one’s physical and mental health. Daily small racial events are categorized as racial microaggressions. According to Sue et al. (2007, p. 271), “racial microaggression is defined as brief, commonplace and daily verbal, behavioral, and environmental slights and indignities directed towards African Americans in the United States.”

Racial microaggressions can be intentional or unintentional acts. Further referencing Sue et al. (2007), racial microaggressions can appear in three different forms: microassault, microinsult and microinvalidation. Microassault is considered as the “old fashion” type of discrimination such as verbal or nonverbal attacks. A few examples of microassault are name calling and not providing a service to someone because of their race. Microinsults are described

as rudeness and insensitivity behavior such as demeaning someone's racial identity or heritage and are typically subtle and are conveyed through hidden messages. The third type of microaggression is microinvalidation, which is described as communications that exclude, negate, or nullify the psychological thoughts, feelings, or experiential reality of a person of color (Sue et. al., 2007). An example of microinvalidation is when someone asks "what are you?" when inquiring about someone's race.

The research is plentiful in making the connection between the mental and physical effects of racism on African Americans, but the gaps in the research are related to how mental health professionals identify, assess and measure racial microaggressions toward African Americans in the United States.

Problem Statement

As racism, in particular racial microaggressions, become increasingly recognized as a source of mental health stress for African Americans, it is important to understand how to identify, assess and measure the impact racial microaggressions have on African American's mental health.

Purpose Statement

The purpose of this systematic review is to explore what the literature says are challenges mental health professionals face in assessing and measuring daily racial microaggression experiences in African American clients.

Research Questions

The research questions addressed within this systematic review are:

- What are the challenges mental health professionals face when assessing racial microaggressions in African Americans?

- What are the challenges mental health professionals face when measuring racial microaggressions in African Americans?
- How do mental health professional assess racial microaggressions in research and in a clinical setting when relying heavily on self-reporting?

Significance Statement

By understanding the challenges of assessing and measuring racial microaggressions in African Americans, education tools can be developed to help mental health professionals treat African Americans who are experiencing the mental health effects of racial microaggressions.

Definition of Terms

Assessment of Racial Microaggressions: The assessment of racial microaggression refers to “the act of identifying and categorizing microaggressions based on the cognitive, emotional and behavioral effects and consequences of racial microaggressions towards African Americans” (Utsey, 1998).

Measurement of Racial Microaggressions: There are a number of stress models designed to measure the anxiety and stress related to daily life events that affects an individual’s mental and physical health. There are several models developed and used to measures the severity of the physical and mental stress associated to racial microaggressions (Nadal, 2011).

Summary

This chapter provided an overview of the systematic review including an introduction to the issue to be explored, problem and purpose statements, research questions and statement of significance.

Chapter 2

Overview

This systematic literature review will explore what the literature says are challenges mental health professionals face in assessing and measuring racial microaggression towards African Americans. According to the 2015 United States Census, African Americans make up 13.3% of the United States population (2017, April 12, Retrieved from <https://www.census.gov/quickfacts/table/PST045216/00>). Adult African Americans are 20% more likely to report psychological distress over adult white Americans. According to the National Alliance on Mental Illness, approximately one-third of African Americans seek mental health care compared to 40% of whites (12 April 2017, Retrieved from <http://www.nami.org/Find-Support/Diverse-Communities/African-Americans>).

This chapter discusses racism and microaggressions as well as discusses physical and mental effects of racial microaggressions, and the importance of assessing and measuring racial microaggressions.

Definitions

Racism

Bobo and Fox define racism “as a set of institutional conditions of a group inequality and an ideology of racial domination, in which the latter is characterized by a set of beliefs holding that the subordinate racial group is biologically or culturally inferior to the dominant racial group” (Bobo & Fox, 2003, p. 319). Racism can be placed in two categories: attitudinal and behavioral. Attitudinal racism and ethnic prejudice have both been used to represent attitudes and beliefs that denigrate individuals or group affiliation (Yetman, 1985). Behavioral racism, in contrast, is any act of an individual or institution that denies equitable treatment to an individual or a group because of phenotypic characteristics or ethnic group affiliation (Yetman, 1985). Another racism

taxonomy defines racism in four groups: environmental, intuitional (systematic), discrimination and microaggression (Clark et al., 1999).

Environmental Racism

Environmental racism is the disproportionate impact of environmental hazards on minority and low-income communities. Environmental racism includes actions and process such as the following:

- the increased likelihood of one race being exposed to environmental hazards such as air and water pollution;
- disproportionate negative impact of environmental processes, policies and procedures;
- deliberately targeting and siting noxious facilitation in particular communities and neighborhoods;
- environmental blackmail, when a worker is forced to choose between hazardous jobs and environmental standards;
- segregation of ethnic minority workers in dangerous and dirty jobs;
- lack of access to or inadequate maintenance of environmental amenities such as parks and playgrounds;
- inequalities in environmental services such as garbage removal and transportation. (Clark et al., 1999)

Institutional (Systemic) Racism

Institutional racism is a societal pattern of social intuitions such as governmental organizations, schools, banks and courts of a law that oppress a group of people base on their race (Clark et al., 1999).

Discrimination

Discrimination is a “complex system of social relations” involving actions, subtle or overt, that serve to limit the social, political or economic opportunities of a particular group. Discrimination may be either direct or indirect and may have both short and long-term consequences (Bobo & Fox, 2003).

Microaggressions

Racial microaggressions are brief and commonplace daily verbal, behavioral, or environmental indignities, whether intentional and unintentional, that communicate hostile, derogatory, or negative racial slights and insults toward people of color (Sue et al., 2007). Perpetrators of microaggressions are often unaware that they engage in such communications when they interact with racial/ethnic minorities. There are three types of microaggressions; microinsult, microassault and microvalidations.

- *Microinsults*

Microinsult are verbal, nonverbal and environmental communication that subtly convey rudeness and insensitivity that demeans a person’s racial heritage or identity (Sue et al., 2007).

- *Microassault*

Microassault is an explicit racial derogation characterized primarily by a verbal or nonverbal attack meant to hurt the intended victim through naming calling, avoidant behavior, or purposeful discriminatory actions or behaviors (Sue et al., 2007).

- *Microinvalidation*

Microinvalidation are a communication that subtly exclude, negate or nullify the psychological thoughts, feelings or experiential reality of a person of color (Sue et al., 2007).

Mental Health Professionals

For the purpose of this systematic literature review, the term “mental health professional” will be used and this term will include any health professionals who cares or treats one’s mental health which includes, psychiatrists, psychologists, clinical social workers, psychiatric nurses, marriage and family therapist and licensed professional counselors (12, April 2017, Retrieved from <http://www.nami.org/Learn-More/Treatment/Types-of-Mental-Health-Professionals>).

Racial Microaggression and Health

According to the 2011 National Vital Statistics Report, African Americans (75.3 years) have the lowest life expectancy versus Whites (79.0 years) in the United States. There are three contributing factors which influence health disparities: 1) external influences of social space, 2) internal effects of the body and 3) brain functioning (Mays, Cochran, & Barnes, 2007). For the purpose of this systematic literature review the research will focus on how all three contributing factors in combination with daily racial microaggressions, can have an adverse effect on African American’s physical and mental health.

Racial Microaggressions, Physical Health, and Mental Health

Clark et al. (1999) discuss how racial microaggressions contribute to chronic health conditions such as high blood pressure, cardiovascular disease and low birthweight of their children. Clark et al. (1999) also links everyday discrimination (microaggressions) to heart disease.

In the same aforementioned study, the same participants were asked to report mental health conditions in addition to their discriminatory experiences and many of the participants reported experiencing low self-esteem, psychological distress, major depression, anxiety and other mental disorders (Clark et. al, 1999).

Assessing and Measuring Racial Microaggressions

Assessing and measuring microaggressions can present some challenges which can manipulate and skew the research. The literature reveals there is a distinct difference in assessing racial microaggressions and measuring racial microaggressions. Assessing racial microaggressions is the process of determining the validity of the racial experience from what is perceived and what is real by the individual (African Americans) and the mental health professional. Current research relies heavily on self-reported data from African Americans (Nadal, 2011).

Assessing Racial Microaggressions

According to Williams et al. (2003), assessing the racist event from an objective versus subjective point of view or from an individual versus clinical perspective can be difficult. Kaiser and Major (2006) studied self-reporting racial discrimination and have discovered two types of reporting, minimization bias and vigilance bias. The minimization bias is underreporting racial discrimination and vigilance bias is reporting more discrimination than actually exists (Kaiser & Major, 2006). In self-reporting, minimization bias occurs because the individuals often underestimate and deny the discrimination has occurred. Research has proven individuals with lower socio-economic status (SES) often under or do not report discrimination and often blame themselves (Clark et. al, 1999). Sometimes denial is a stress coping mechanism for those who experience stressful traumatic experiences. In direct opposite of minimization bias is a vigilance bias. Vigilance bias is often present when individuals of higher SES report racial discrimination (Kaiser & Major, 2006). Below are some examples of some racial discrimination assessments used in previous research:

Telephone Administered Perceived Racism Scale (TPRS) measures perceived racism from Black women and measures the effects of these racist events on Black women's health (Vines et al., 2001). These perceptions are measured within five scales:

1. Experience of Racism (by Blacks as a group and by respondents)
2. Emotional Responses
3. Behavioral Responses
4. Concern for Child(ren)
5. Past Experiences of Racism

Based on the respondent's answers, the experiences will be categorized as follows: passive emotions, active emotions, passive behaviors, internal active behaviors, and external active behaviors (Vines et al., 2010). In this article, the TPRS was administered through a telephone survey of 476 Black women, inquiring about their racist experiences on their job or in public. This scale works in reverse, the women are surveyed on perceived racist events. If they experienced these identified racist events, the women are surveyed on how they responded to the events. Their response to the racist event, determines the health outcome. For example, if a Black woman has a passive response, does not speak up for herself when targeted for a racist event, this is linked to hypertension because the respondent is internalizing this response. One who has a more active response, speaking up for him or herself is linked to poor health. On the flip side, those who respond to racist experiences by praying, research shows their health outcome is better than those who are more passive (Vines et. al, 2010).

Perceived Stress Scale (PSS) is a self-reporting measurement tool used by psychologist to measure the perception of stress (Cohen et al., 1988). This scale measures the degree to which situations in one's life are assessed as stressful. This scale does not measure specific events in

one's life, but assesses how PSS is used to measure depressive symptoms in a severely depressed population. This scale is used for community samples with low education levels. This scale can be used in public health research to show a correlation between health and stress measurements, self-reported health and health services measurement, health behavior measurement and help seeking behavior (Cohen et al., 1988).

Schedule of Racist Events (SRE) is a self-reporting assessment that examines the frequency of recent and long-term (lifetime) racist discrimination in one's life. Research has shown a strong link between the racial discrimination and poor mental and physical health (Landrine & Klonoff, 1996).

Measuring Microaggressions

Once the racial microaggression experience is assessed, the next step is to measure the microaggression for the effects on one's mental and physical health. As mentioned earlier within this chapter, measurement tools are still new within mental health research. Below are examples of some popular racial microaggression measurement scales.

Racial Microaggression Scale (RAMAS) is a scale developed to measure racial microaggressions (Torres-Harding et al., 2012). This measurement tool was developed as a result of a study that included 406 participants, from a several different ethnic groups, who were surveyed about racial microaggression experiences. This scale used Sue's model of racial microaggressions (Sue, 2010; Sue et al., 2007) which categorizes racial microaggressions into three categories, microassault, microinsult and microinvalidation. The participants were asked to label the racial microaggressions experiences using the following factors:

- Invisibility factor – being treated as if one is of lower status, not visible, not seen as a “real” person and being dismissed or devalued.

- Criminality factor – being treated as if one is aggressive or dangerous, or a criminal.
- Low-Achieving/Undesirable Culture factor – being treated as if people from one’s racial background are interchangeable, uniformly incompetent, incapable, low achieving, and dysfunctional, and as if successes are due to unfair entitlements and special treatments.
- Sexualization factor – being treated in an overly sexual manner and being subject to sexual stereotypes.
- Foreigner/not belonging factor – being made to feel as if one is not a “true” American or does not really belong because of one’s racial background.
- Environmental invalidation factor – negative perceptions that derive from observing that people from one’s racial background are largely absent from work, school, or community settings or from position of power.

Racial and Ethnic Microaggressions Scale (REMS) is also a scale used to measure racial microaggressions. This scale was designed for mental health professionals to use when measuring racial microaggressions experiences by clients of color. This measurement scale was developed from a study that was conducted with 661 minority participants (Nadal, 2011). The participants were asked to place racial microaggressions events into the following categories:

- Assumption of Inferiority
- Second Class Citizen and Assumptions of Criminality
- Microinvalidation
- Exoticization/Assumptions of Similarity
- Environmental Microaggressions and
- Workplace and School Microaggressions
- Hopelessness

Index of Race-Related Stress (IRRS) measures the stress African Americans experience by everyday racism and discrimination (Utsey and Ponterotto, 1996). This scale is divided into four subscales:.

- Racial Discrimination Index (RDI)
- Racism Reaction Scales (RRS)
- Perceived Racism Scale (PRS) and
- Racism and Life Experience Scale (RaLES)

Conclusion

This chapter outlined and defined the important terms and concepts that will be discussed throughout this systematic literature review and listed some popular racial microaggression assessment and measurement tools currently used by public health and mental health professionals.

Chapter 3

Introduction

This chapter includes a complete description and step by step process of how I obtained my articles for this systematic literature review. This chapter will include search terms, exclusion and inclusion criteria, the creation of the data dictionary used to obtain a final list of articles, and the literature database.

Article Selection and Search Strategy

The purpose of this systematic review is to explore what the literature says are challenges mental health professionals face in assessing and measuring daily racial microaggression experiences in African American clients. This research was exempt from the institutional review board (IRB) process because no live humans were involved in the research. In order to proceed with this systematic review, the following questions served as the foundation to this systematic review:

1. What are the challenges mental health professionals face when assessing racial microaggressions in African Americans?
2. What are the challenges mental health professionals face when measuring racial microaggressions in African Americans?
3. How do mental health professional assess racial microaggressions in research and a clinical setting when relying heavily on self-reporting?

The articles used in this systematic review will provide data for the aforementioned research questions.

Information Sources

Racial microaggression is a fairly new term, which has only been around in literature since 1970 (12 April 2017, Retrieved from <https://www.psychologytoday.com/blog/microaggressions-in-everyday-life/201010/racial-microaggressions-in-everyday-life>). This literature review is specifically related to minority men and women in the United States. As stated earlier, there are different types of microaggression and for the purpose of this systematic review I focused on racial microaggression.

PubMed was selected because this database contains a wide variety of public health researched journal articles. The keyword search term in PubMed developed for this systematic literature review was (micro-aggression* or microaggression*) and (black or blacks or African-American* or racial or racism). This literature search yielded 55 articles.

Eligibility Criteria: Inclusion/Exclusion Criteria

After 55 articles were found searching the PubMed database with my search string, I imported the articles within EndNote™. I immediately eliminated 15 articles that did not have full article access through Emory University PubMed. By reading the article titles and literature abstracts, the remaining 40 articles were narrowed down using the following inclusion and exclusion terms based on my research questions.

Inclusion Criteria:

- Articles which discuss racial microaggressions in African American women and men in the United States.
- Articles published after the year 1990.
- Articles which discuss mental health professionals and racial microaggressions.
- Articles which discuss measuring and/or assessing racial microaggressions.

- Articles which discuss mental and physical health effects of racism or racial microaggressions.

Exclusion Criteria:

- Articles focusing on microaggressions towards the LGBT community.
- Articles focusing on microaggressions towards people with HIV/AIDS.
- Articles discussing microaggressions related to beauty and body image.
- Articles discussing microaggressions experienced in higher learning settings (universities)
- Articles discussing microaggressions experienced by minorities in the healthcare field.
- Articles discussing microaggressions towards service employees.

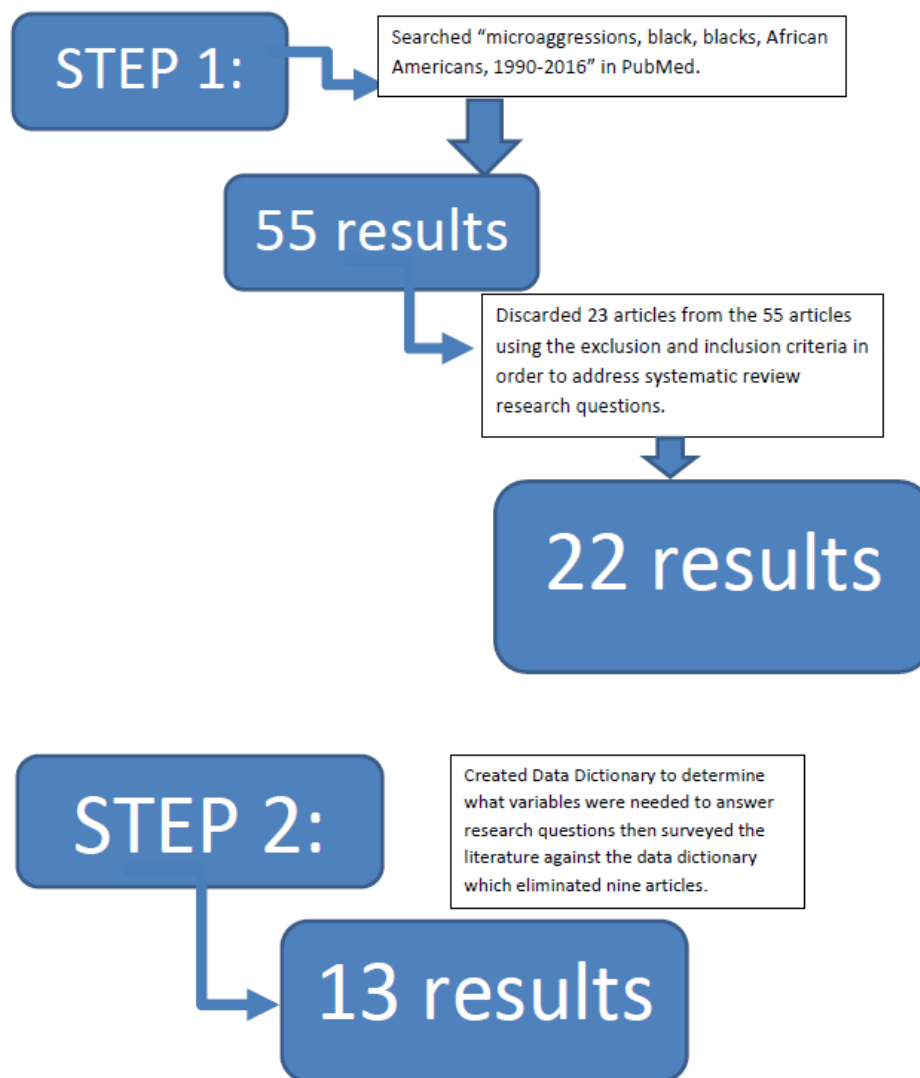
After applying these exclusion and inclusion criteria, 22 articles remained.

Data Extraction Process

In order to ensure that the remaining literature related to my research questions, I created a data dictionary by reading the article titles and abstracts and looking for key words from my inclusion and exclusion criteria. The data dictionary was created using variables (key words) from the three research questions and included the following primary variables: article title, author's name, journal name, publication date, race and gender of literature subjects, type of microaggression, mental health ailment, method of reporting, research location, measurement and assessment method used, method of reporting, study participants, and key findings. Using the variables in my data dictionary, I abstracted data from each of the 22 articles using an Excel spreadsheet. After creating my database, if some of the articles did not include the variables from my data dictionary, those articles were eliminated. After reviewing each article against the data dictionary, 13 articles remained.

In an effort to make sure all possible literature on the subject was captured, I ran the same search strings through additional psychology-related databases (PsycInfo, Sociological Abstract, PsycARTICLES and Psychiatry Online) which resulted in no additional articles. Figure 1 is a flow chart of the process of identifying the 13 articles.

Figure 1: Flow Chart



Data Analysis

Confident that all relevant articles were captured through the systematic literature search, I read each article in its entirety and began to analyze my data (literature) within the spreadsheet created using my data dictionary. The data analysis included grouping literature into groups by themes related to each research questions. As themes were identified, tables were created, which can be found in Chapter 4.

Chapter 4

Introduction

This chapter will analyze the data captured from the systematic literature review described in Chapter 3. The data captured from the systematic literature review addresses the following three research questions:

1. What are the challenges mental health professionals face when assessing racial microaggressions in African Americans?
2. What are the challenges mental health professionals face when measuring racial microaggressions in African Americans?
3. How do mental health professional assess racial microaggressions in research and a clinical setting when relying heavily on self-reporting?

This chapter includes four tables. Table one gives an overview of the characteristics of all literature used in this systematic literature search and the remaining three tables address the research questions.

Table 1 Literature Characteristics

This table gives a brief overview of the literature used for this systematic review.

Author/ Year	Purpose of Article	Type of Literature	Literature Subjects/Study Participants	Key Findings/ Results	Recommendations
Wong, Derthick, David, et al., 2014	Review the literature on racial microaggressions in order to answer the questions of what are racial micro-aggressions, why are racial microaggression important to examine and how	Systematic Review	African Americans and other minority groups as a focus of research. Members of the psychology field as benefactors of research.	The key findings of this article explored the What, Why and How of Racial microaggression. The “what” defined what racial microaggression is, the “why study”, is significant to	This article recommended expanding available literature by conducting additional research and consider using longitudinal and naturalistic research designs.

	are racial microaggressions currently being examined?			examine the mental and physical impact and the “how” examined how we should study racial microaggression, which relies heavily on self-reporting.	
Hook, Farrell, Tongeren, et al., 2016	This study was used to examine how often racial microaggression occurs during counseling sessions.	Cross-Sectional Study	African Americans who are currently seeking counseling from white or non-white counselors. This research also studies psychological clinicians.	The key findings in this article discussed how many counselors often have racial and cultural biases that are carried into their counseling sessions with clients.	It was recommended that researchers use longitudinal or experimental designs to further research racial microaggression during counseling sessions. It was further recommended that mental health professionals participate in training and education on racial microaggression, cultural awareness and stereotypes.
Schacht, Thomas, 2008	The article examined racial microaggression in counselling sessions where the counselors are being microaggressive towards their clients.	Literature Research	Counselors of all races who treat minorities.	This article discussed how counselors are sometimes racially microaggressive toward their clients and how this can add to the mental health effects of the clients seeking treatment.	It was recommended to build awareness among the counselors to avoid these instances of racial microaggression within the counseling sessions.
Goodstein, Renee, 2008	This article discussed how racial bias often occurs in clinical settings when the counselor and client (African	Literature Research	Counselors of all races who treat minorities.	This article discussed the lack of awareness about racism within clinical work. White clinicians	It was recommended to increase the awareness on the realities of racism in a clinical setting. This awareness and

	Americans) are of different cultural backgrounds.			sometimes inject their personal stereotypes and bias within their counseling sessions with minority clients.	education for clinicians.
Torress-Harding, Andrade, Jr. Diaz, et al., 2015	This article/study examined the reliability and validity of the Racial Microaggression Scale distress subscales, which measure the perceived stressfulness of six types of racial microaggression experiences.	Cross-Sectional Study	Minorities from a local college and community.	This study surveyed minorities to determine the best method to measure racial microaggressions in people of color. The study revealed the best measurement tool is the Racial Microaggression Scale. This tool assesses perceptions of racial microaggressions by people of color.	This article recommended the development of additional distress scales that might further examine the stress appraisal process by the study subject, the emotional reactions of people of color, and the short term and long term impact on physical and psychological health caused by racial microaggression. It was further recommended to increase the awareness among health professionals about the impact of racial microaggression on their client's health.

Gonzales, Davidoff, Nadal, Yanos, et al., 2015	This study examined the effects of racial microaggressions on people who have mental illnesses.	Exploratory Study	Adult mental health consumers who were diagnosed with mental illness	This article studied the psychological effects of racial microaggressions towards people with mental illnesses. Identified psychological effects were feeling inferior, shaming of mental illness, and fear of mental illness. This article concluded that further research was needed related to the perpetrators of micro-aggressions.	This study recommended education of health professionals about racial microaggression and its impact. Many of the clinicians were unaware of some of the offensive comments to their clients.
Harris, Rafael S., 2008	The purpose of this article was to discuss the perception of racial microaggression by two different individual.	Editorial Article	Minorities in the United States	This article discussed how one's perception of racial microaggressions may be different from others. In this article the author recounted an experience from another researcher of racial microaggressions and both perceived the experiences differently.	There were no recommendations stated in this article, this was a researchers response to an article published earlier.
Liao, West, Weng, et al., 2016	The purpose of this study was to investigate where the cultural facts and dispositional characteristics would serve as risk factors or protective factors	Cross-Sectional Study	African Americans	This study investigated the link between how one's connectedness with their culture influences or shapes their perception of	It was recommended that counselors working with Black American students can examine the association between their experiences of racial microaggression and

	in the association between perceived racial microaggression and anxiety symptoms in a sample of African Americans.			racial microaggressive experiences. The study concluded that the connectedness to the participants' community served as a buffer and intolerance of certain acts.	anxiety symptoms. It is also important to educate Black Americans on the how external stressors can contribute to anxiety and this knowledge will help to lessen the self-blame. Also important to educate larger systems on social policies that contribute to racial microaggressions.
Hill, Mercer, Wallace, et al., 2011	This article described the development of and initial validation of the Inventory of Microaggressions Against Black Individuals (IMABI). IMABI is a scale used to measure racial microaggression.	Cross-Sectional Study	African American college students	This study investigated the perceived stress of micro-aggressions. The IMABI was used to measure stress level associated with racial micro-aggressions. The study confirmed IMABI as a reliable measure of both microinsult and micro-invalidation. It recommended that the scale be implemented into clinical practices as a way to start a discussion between clinical staff and the black population regarding race relations and the negative impact of racial micro-aggressions.	It was recommended that additional scales be developed to study racial microaggressions.
Nadal, Kevin L., 2011	The purpose of this article was to examine the validity of the	Cross-Sectional Study	African American college students (online)	This study was used to develop and validate the Racial and Ethnic	This article recommended the development of additional scales to

	Racial and Ethnic Microaggression Scale (REMS).			Microaggression Scale (REMS). This study determined that REMS is a valid scale used to measure racial microaggressions .	measure racial microaggression. Until these scales are developed it is further recommended to increase the awareness among clinicians on the various types of racial microaggression.
O'Keefe, Wingate, Cole, et al., 2015	This article examined connection between racial microaggression, negative mental health outcomes and suicide risks.	Cross-Sectional Study	Young adults of color	This study examined if racial microaggressions predict suicidal ideations in those who exhibit symptoms of depression. It was recommended that clinicians become educated on racial microaggressions and their effects on adults of color.	This article recommended increasing the awareness of racial microaggressions and their impact on one's mental health.
Sue, Capodilupo, Torino, et al., 2007	This article discussed racial microaggressions and the implications of racial microaggression in a clinical setting.	Literature Research	African Americans, psychology professionals	This article examined the different forms of racial microaggressions and their effects on minorities' mental and physical health. This article recommended clinicians have open and honest dialogue regarding race and racism; and further recommended extensive training and education regarding racial	This articles stressed the important of training and education for counselors regarding racial microaggressions.

				micro-aggressions, in particular for non-minority clinicians. Further research is needed on coping strategies for minorities living with the effects of racial micro-aggressions.	
Torress-Harding and Tasha Turner, et al., 2012	The purpose of this study was to develop a scale to measure racial micro-aggressions. This study also tested the reliability and validity of the Racial Microaggression Scale (RMAS), which is used to measure the perceived stress of six types of micro-aggressions.	Cross-Sectional Study	Minorities within the United States	The study concluded African Americans reported higher distress than other groups in response to environmental microaggressions such as governmental policies and laws. This study recommended using measurement tools such as RMAS to help researchers and health professionals further understand the impact of racial microaggressions towards minorities.	It was recommended that the scale developed within this study would be used to further examine the effects of racial microaggressions.

As seen in Table 1, of the 13 articles included in the systematic review, 1 was a systematic review, 7 were cross-sectional studies, 1 exploratory studies, 1 editorial articles and three literature research articles. The study participants included a broad range of individuals from African American all ages ranging from young college students and older adults, minorities

with mental illness to white counselors. In addition, there were 3 articles discussing racial microaggression, 5 articles discussing racial microaggression in a clinical setting and 5 articles discussing measuring and assessing racial microaggression in African Americans.

Table 2

Research Question 1: What are the challenges mental health professionals face when assessing racial microaggressions in African Americans?

Assessment Challenge	Mental Health Professionals Referenced within the Literature?	Literature Subject Demographics	Key Findings	Article
Validating the perception of racial microaggression	No	African American and Asian American	This article discussed how two minorities experienced the same racial microaggression, but they both perceived the experience differently. One was offended and one was not sure if it was valid racial microaggression.	Harris, Rafael, 2008
	No	126 Black college students	Study participants were surveyed regarding their connectedness to the black culture, their experience with racial microaggression and their anxiety (mental health disorder) associated with their racial microaggression experience. The article suggested clinicians should encouraged the African American students to become more connected to their culture and community. It was also suggested that it is important to raise awareness about the effects of racial microaggressions in African Americans to large systematic entities such as public education systems.	Liao, West, Weng, 2016

General awareness of culture of clients of color (e.g., white therapist may have biases, stereotypes or assumptions about clients of color that affect assessment)	Yes; Psychologist	N/A	This article recognized the challenges white therapists face when servicing clients of color who may experience racial microaggressions. This article suggested mental health professionals, specifically white mental health professionals become educated and trained on racial microaggressions.	Sue, Capodilupo, Torino, et al., 2007
Lack of education among mental health professionals regarding racial microaggressions	No	2,212 clients of color	This study examined racial microaggressions experienced by clients of color within the counseling sessions. This article recommended counselors educate themselves on the various types of racial microaggressions and the types that are most commonly used in counseling sessions by counselors. Counselors were also encouraged to educate themselves about their client's culture to lessen the chances of inputting bias and stereotypes towards the clients.	Farrell, Tongeren, Utsey, et al., 2016
Bias, stereotypes and avoidance of discussing cultural issues				
Lack of tools for assessing racial microaggressions	Yes- listed as general mental health professionals.	Various minorities	This study tested the reliability and validity of the Racial Microaggression Scale. The study concluded that African Americans reported higher distress than other groups in response to environmental microaggressions such as governmental policies and laws. This study recommended using measurement tools such as RMAS to help researchers and health professionals further understand the impact of racial microaggressions towards minorities.	Torres-Harding and Turner, et al., 2015

As illustrated in Table 2, the primary challenges mental health professionals face when assessing racial microaggressions in African Americans include differing perceptions of racial microaggressive behavior, lack of awareness regarding the African American culture, lack of education among mental health professionals regarding racial microaggressions, personal stereotypes and bias about African Americans among mental health professionals, and lack of tools to assess racial microaggressions. Education and training tools are the best method to combat the stated assessment challenges.

Table 3

Research Question 2: What are the challenges mental health professionals face when measuring racial microaggressions in African Americans?

Measurement Challenges	Mental Health Professionals Referenced within the Literature?	Literature Subject Demographics	Key Findings	Article
Lack of knowledge among counselors regarding microaggressions and their mental and health effects.	Yes	385 African Americans/ Black	To measure racial microaggressions, study participants completed a survey that was associated with general distress and perceived stress. This study was designed to educate mental health professionals about the effects of racial microaggressions, more specifically microinsult and microinvalidation. It was recommended that additional research concerning racial microaggressions be conducted to better understand the African American culture. It was further recommended that	Mercer, Hill, et al., 2011

			the Inventory of Microaggressions Against Black Individuals (IMABI) scale be incorporated into clinical settings.	
	Yes, psychologists	443 college students of color	The student participants were given a survey to measure racial microaggression experiences on a Likert scale. This scale measures the perception of racism, the impact and the stress that racism has on the participant's life. Recommendations include educating clinicians on the various types of microaggressions that their client's experience and suggested coping mechanisms.	Nadal, Kevin, 2011
Lack of measurement tools for mental health professional to use when servicing clients of color	Yes, psychologists	443 college students of color	The student participants were given a survey to measure racial microaggression experiences on a Likert scale. This scale measures the perception of racism, the impact and the stress that racism has on the participant's life. Recommendations include educating clinicians on the various types of microaggressions that their client's experience and suggested coping mechanisms.	Nadal, Kevin, 2011
	No	406 people of color	The Racial Microaggression Scale (RMAS) is a tool to assess perceptions of racial microaggressions by people of color. Although this scale has some flaws	Torress-Harding, Andrade and Diaz, 2015

			and needs improvements, it is a start in measuring racial microaggressions.	
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Measuring racial microaggressions in African Americans can present challenges for mental health professionals. Table 3 illustrates that the challenges outlined in the literature include lack of measuring tools, lack of education about racial microaggressions and its effects among mental health professionals. The literature also recommends creating measurement tools, such as the tools outlined above that will help mental health professionals identify racial microaggressions that African Americans experience in every day. In conjunction with measurement tools, training should be required for all mental health professionals to learn more about racial microaggressions.

Table 4

Research Question 3:

How do mental health professionals assess racial microaggressions in research and clinical settings when relying heavily on self-reporting?

Assessment Challenge	Mental Health Professionals Referenced within the Literature?	Literature Subject Demographics	Key Findings	Article
Proving the validity of claims of racial microaggression in a clinical setting	Yes, psychologist and counselors	African-Americans	There are number challenges: <ul style="list-style-type: none"> - Validating the racial microaggression - The perpetrators not aware they are committing racial microaggressions against another. - How do you respond to racial microaggression? Many often let it go because of further stereotypes if you 	Sue, et al., 2007

			address the racial microaggression.	
Relying heavily on self-reported data is a significant limitation in assessing racial microaggressions in research.	Yes, psychologist	African Americans and other minority groups as a focus of research	In order to address this limitation is recommended to use alternative study design such as longitudinal and naturalistic design. The naturalistic study design allows you to monitor behavior over a period of time.	Wong, Derthick, et al., 2014
	Yes, psychologist	Various minority groups	In order to address this limitation is recommended to use alternative study design such as longitudinal and naturalistic design. The naturalistic study design allows you to monitor behavior over a period of time.	Hook, Farrell, et al., 2016

As seen in Table 4, racial microaggression research relies heavily on self-reporting. This is a serious limitation within the research, but it has been recommended to introduce alternative study design such as longitudinal and naturalistic designs, to combat this limitation. Using alternative study methods would be beneficial in a clinical setting because it provides an alternative method to collect data on racial microaggression, which can be used to educate mental health professionals while treating their African American clients in a clinical setting.

Chapter 5

Introduction

This chapter brings all the data together to summarize key findings of the literature obtained during the systematic review. The key findings are not without limitations and implications which are also summarized in this chapter. In order to address the public health problem and research questions, suggested recommendations are discussed.

Summary of Key Study Findings

The literature shows that African Americans are less likely to seek treatment from mental health professionals and as we know, racial microaggression contributes to poor mental health (12 April 2017, Retrieved from <http://www.nami.org/Find-Support/Diverse-Communities/African-Americans>). In order for mental health professionals to help treat African Americans, it is essential that mental health professionals are equipped with the proper tools. This systematic literature review unveiled a number of key findings regarding the challenges mental health professionals face when assessing and measuring racial microaggressions in African Americans. The literature revealed that there are some significant barriers that contribute to some of the challenges mental health professionals experience in assessing and measuring racial microaggressions.

Racism vs. Discrimination vs. Racial Microaggression

Racism is defined “as a set of institutional conditions of a group inequality and an ideology of racial dominations, in which the latter is characterized by a set of beliefs holding that subordinate racial group is biologically or culturally inferior to the dominant racial group” (Bobo & Fox, 2003, p. 319). Discrimination can be overt or subtle and is designed to limit the social, political or economic opportunities of a specific group (Bobo & Fox, 2003). Discrimination is

not always race related. One can be discriminated against because of age, sex or sexual orientation. Racial microaggressions are brief commonplace daily verbal, behavioral or environmental indignities, whether intentional and unintentional, that communicate hostile, derogatory, or negative racial slights and insults towards people of color (Sue et al., 2007).

The key finding related to these three definitions is that racism and discrimination are typically overt and not as commonplace as racial microaggressions. Racial microaggressions are small things that happen on a daily basis that one may not recognize or may become immune to the behavior but racial microaggressions may still have health effects that are not immediately recognized without education and training by medical professionals. The implications of this finding is that racial microaggressions may contribute to chronic physical and mental health effects among African Americans (Clark et al., 1999).

Racial Microaggression and Health Effects

The literature illustrates that racial microaggressions against African Americans contribute to both poor mental and physical health. The mental effects include low self-regard, depression, and anxiety. Some of the chronic physical illnesses contributed to racial microaggression include high blood pressure, cardiovascular conditions and respiratory and pain conditions (Wong et al., 2014). The implications of this finding are that once again, it is important for health care and mental health professionals to recognize and assess racial microaggressions because reducing racial microaggressions can improve both the mental and physical health of African Americans.

Assessing and Measuring Challenges

With respect to the research questions examining the challenges mental health professionals face when assessing and measuring racial microaggressions towards African

Americans, there surfaced some significant key findings such as lack of varied research methods, a disconnect between mental health professionals and the African American community, and a lack of assessment and measurement tools for mental health professionals to use during clinical sessions. The implications of these key findings are significant because addressing these findings can assist in diversifying the type of research related to racial microaggression. Additionally, these findings can be used to build trust among the African American community and mental health professionals, and to provide education and training tools for mental health professionals to use when treating their patients.

Limitations

Self- Reporting

The other significant research question of this systematic review was to examine how to assess racial microaggression in clinical and research settings while not relying heavily on self-reporting. Most of the data collected in the literature of this systematic review relied heavily on self-reporting from a variety of study participants. Self-reported data presents a number of challenges. One significant challenge was assessing and measuring the validity of the data provided. For example, most of the data were collected through a survey which often has long recall time between the actual experience and the reporting time.

Lack of Education about Racial Microaggressions, Bias and Stereotypes

Wong, Derthick, et al. (2014) mentioned it is difficult to educate or address racial microaggression in perpetrators because many do not know they are being offensive. Racial microaggressions are socialized into Eurocentric values, beliefs, standards and norms; perpetrators are often unaware. Mental health professionals who do not share the same culture or race background as their clients often bring their own biases and stereotypes into the counseling

sessions, which does not allow them to completely relate to their client and the client's cultural experiences.

Lack of Measurement and Assessment Tools

As stated in the tables found in Chapter 4, the literature recommends mental health professionals use some of the assessment and measurement tools currently available to measure and assess stress levels in everyday life. It is further recommended that these tools be expanded to measure and assess racial microaggressions. There are some tools available, but more tools would be helpful in expanding the available research.

Recommendations

In order to address racial microaggressions the following recommendations are made.

Additional Research using New Research Methods

Currently there are limitations in conducting research on racial microaggression during a research study and/or clinical sessions. Many research designs regarding racial microaggression rely heavily on self-reporting in order to collect data. Wong et al. (2014) suggested that longitudinal and naturalistic research design methods should be used. These two study designs require following participants' behavior over a long period of time. Based on the mentioned recommendations from the literature above, I recommend researchers partner with mental health professionals and have the professionals provide their clients with a journal. The clients could provide daily journal entries of daily experiences. At the end of the study researchers would examine the journal for racial microaggression experiences. This research method still relies heavily on self-reporting, but the researcher is able to capture data over a longer period of time as it occurs.

New Assessment and Measurement Tools

As mentioned in this systematic review, another limitation and challenge includes lack of assessment and measurement tools for mental health professionals to assess (identify) racial microaggression within their client's daily life experiences. In previous research, assessment and measurement tools have been modified from their original intent and tweaked to study racial microaggression. For example, Cohen et al. (1988) suggested the Perceived Stress Scale (PSS) can be used to measure and assess racial microaggressions because these are stress life events, which is what the scale was used to measure and assess. This scale was designed for general everyday events not racial microaggression events, specifically. In order to more accurately capture data, I further recommended that a scale be developed where clients can rank their racial microaggression experiences as they occur by writing in their daily journal as mentioned in the previous recommendation.

Education and Training Tools

Education and training for mental health professionals is important in understanding the cultural background of their clients and for this type of research, which would include African Americans. Sue et al. (2007) suggests training programs that foster safe and productive learning environments thereby supporting trainees in overcoming their fears and resistance to talking about race. It was further recommended by Sue et al. (2007) for therapists to participate in training that increases awareness about microaggressions.

I further recommend training for both mental health professionals and their clients. Based on the literature within this systematic review, it is important to bring both parties, African American clients and mental health professionals, together to participate in training where they learn about each other's culture and talk openly about racial microaggression. It is important to

include cultural awareness activities for both parties. The purpose of the training is to educate the client, African Americans, about mental health professionals in an effort to reduce the stigma associated with seeking mental health treatment; and to educate the mental professional in order to reduce the likelihood of mental health professionals unintentionally being racially microaggressive towards their clients.

Conclusion

In conclusion, it is imperative to address racial microaggressions in the African American community in order to protect their current and future mental and physical health. This systematic review revealed the challenges mental professionals face are lack of education and awareness about racial microaggressions and their African American client's culture. In addition there is a lack of research regarding racial microaggression and in order to expand the research it is suggested to explore additional research methods, such study methods that can capture over a long period of time. In order to address these challenges, it is suggested that training and education about racial microaggression should be developed for mental health professionals and their African American clients. In addition to creating measurement and assessment tools that can be used by mental health professionals and their African American clients.

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