"Stop resisting!" : an exploratory study of police brutality and its impacts on Black and Latino males, their communities, mental health and healing

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MANUEL ORTIZ
“Stop Resisting!”: An Exploratory Study of Police Brutality and its Impacts on Black and Latino Males, their Communities, Mental Health and Healing

ABSTRACT

The purpose of this qualitative research study was to explore the impacts of police violence on Black and Latino males and their communities while also examining avenues of healing that could be helpful for survivors. Generally, this study focused on this question: What is the potential mental health effect of police brutality on Black and Latino males and what are avenues for healing for those affected? Twelve individual participants who identified as activists, advocates, or organizers in the Bay Area of Northern California participated in qualitative interviews that explored the impact of police violence and healing avenues. Participants were asked about the long-term impacts of police brutality on Black and Latino males and their communities, trends of police violence, barriers to healing, and healing avenues for survivors of police violence.

Major findings of this study suggest that Black and Latino males who survive police violence experience high levels of repetitive trauma, feel a sense of powerlessness through their experiences, internalize negative identities through those experiences, and struggle to share their emotions and stories due to challenges to their masculinity. Additionally, findings suggested that Black and Latino males could benefit from specific healing avenues including healing circles, engaging in advocacy and activism, and receiving support from culturally syntonic healers. The findings indicate a need to look further into how police violence affects communities of color and encourages social workers to be attuned to specific healing avenues for those impacted.
“Stop Resisting!”: An Exploratory Study of Police Brutality and its Impacts on
Black and Latino Males, their Communities, Mental Health and Healing

A project based upon an independent investigation,
submitted in partial fulfillment of the requirements
for the degree of Master of Social Work.

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This thesis could not have been possible without the love, support, and wisdom from a few very important people.

I dedicate this thesis to all those who have lost their lives to police violence and to the many survivors who continue to show their resilience and power in their journey towards healing. This thesis could not have been accomplished without the voices of the participants whose wisdom informs the meaning of this study.

First, I want to thank my parents, Manuel and Margarita, whose hard work, dedication, and love have provided me the privilege to achieve my goals and impact the lives of others in my community. To my brother Marcos, whose struggle, resistance, and wisdom influenced my passion to change the conditions around me and live a life of resistance. My sister Mabel, for being the rock of the family and showing me that going to college was possible. To my partner and loving companion Luu, you have always supported my work and have believed in my passion like no other. Thank you for your unconditional love, kindness, and the inspiration you give me every single day.

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CHAPTER I
INTRODUCTION

“The announced function of the police, ‘to protect and serve the people’, becomes the grotesque caricature of protecting and preserving the interest of our oppressors and serving us nothing but injustice. They are there to intimidate blacks, to persuade us with their violence that we are powerless to alter the conditions of our lives. Arrests are frequently based on whims...They encircle the community with a shield of violence, too often forcing the natural aggression of the black community inwards.”

- Angela Davis

“I don’t have a gun. Stop shooting.” --- Michael Brown, last words, August 9, 2014.

The purpose of this exploratory research study is to explore the impact police brutality may have on Black and Latino males’ lives, mental health and communities, along with what avenues of healing may be helpful for those impacted. This study seeks to answer the following basic question, “What are the possible mental health effects of police brutality on Black and Latino males and what are avenues of healing for those impacted?” For the purpose of this study, Police Brutality will be defined as “unmerited excessive and aggressive physical, mental, and/or emotional abuse, above and beyond the law, including repetitive and unmerited contact, enacted upon by an individual or groups of individuals in law enforcement” (Mitchell, 2000, p. 2). Police Brutality will also be used interchangeably with police violence in this study. Black males also include those identified as African American and Latino will include males identified as Hispanic and Chicano.

One reason for conducting this study is the noticeable increase in reported incidents of police brutality against people of color. Research demonstrates an increasing rate of police contacts and a significant amount of people experiencing excessive force or threat of force by police, with Blacks and Latinos more likely to experience force (Eith & Durose, 2011; Tuttle, 2009). A dramatic increase in police perpetrated killings of unarmed black men in the US has led
to noticeable public outrage and community uprisings and has placed police brutality at the forefront of social justice issues in the country. Between 1999-2011, American law enforcement officers reported killing over 4,500 people, a likely underreported number showing an average of 375 people a year (Males, 2014). A more accurate independent database of police killings shows that the amount of people killed in 2013 and 2014 by police was 1224 and 1179 respectively (Sinyagwe, 2015). Through the surge of police brutality across the country, Black Lives Matter has developed as a nationwide movement that not only challenges police brutality and demands police reform, but represents an overarching human rights struggle for black people (Tometi and Lenoir, 2015). African Americans, accounting for 13 percent of the population, are victims in 26 percent of police shootings and are killed by Law enforcement at 2.8 times the rate of white non-Latinos (Males, 2014). Latinos are victimized by police killings at a level 30 percent above average and 1.9 times the rate of White non-Latinos (Males, 2014). As more and more people are impacted by police brutality, especially Black and Latino males, one can reasonably assume that there will be an increase in social workers and other mental health professionals providing services for these individuals as well as related individuals impacted by police perpetrated killings. Hence, it is critical for social workers to understand the potential mental health effects and be better informed about how they can adequately support their healing.

Within the foundation of the social work profession are a set of core values, two of which are service and social justice (National Association of Social Workers, 2008). Under service, social workers’ primary goal is to help people in need and to address social problems. Under social justice, Social workers must challenge social injustice. With the wave of incidents of police brutality against people of color, the National Association of Social Workers (NASW) has issued statements urging reforms that would help end the excessive use of police force and has
encouraged its members and the wider social work community to become involved in activities and organizations that are active in bringing about police reforms (National Association of Social Workers: Social Work Blog, 2014). Social works’ core values and the NASW’s response for action demonstrates a need for awareness of these issues, knowledge of potential impacts on individuals, engagement in services and support for these individuals and communities, and participation in challenging police brutality and advocating for police reform.

Another reason informing the critical significance for conducting this study is the lack of literature addressing the very nature of police brutality and its effects on individuals. Much of the research has focused on the historical and statistical content along with the social impact of police brutality without much mention of its potential long-term impact on individuals. For instance, the researcher found much literature around the negative perceptions of Blacks and Latinos towards police, the historical progression of the policing of Blacks and Latinos, aggressive and harmful police tactics, and the rise in increase of complaints about police.

However, to date the researcher only found one study that directly focuses on the mental health and the long-term adverse affects of police brutality, showing the need to attend to this issue. The study has acknowledged that limited data is available to assess the health implications of police encounters, particularly for the urban populations at greatest risk for contact (Geller et al. 2014). At the same time, this study has shed some light to this issue by acknowledging some correlation with trauma symptoms and anxiety associated with police contact especially with intrusive encounters. For instance, participants who reported more police contact also reported more trauma and anxiety symptoms. Anxiety symptoms were related to the number of times the young men were stopped and how they perceived the critical encounter was conducted and higher anxiety was also related to more police intrusion (Geller et al. 2014). Trauma symptoms
were also higher among those who experience numerous police stops and who lived in public housing along with the fact that stop intrusion was a significant predictor of PTSD among these youth, with more invasive stops predicting higher levels of trauma (Geller et al. 2014). As incidents of police contact, excessive force, and killings of Black and Latino men are on the rise, this study may be helpful in developing more awareness of how social workers can detect and better understand the long term adverse effects that Black and Latino men may experience from police brutality and how they can provide the desirable support.

Healing comprises an integral component to this study due to potential harmful effects that Black and Latino men may experience. The researchers aim was not to view individuals and communities as victims, but more as survivors of these experiences and who are capable of healing and moving forward. More broadly current literature indicates that Latino and Black individuals suffer from mental health issues at highly disproportionate rates compared to the overall population (Crouch, Hanson, Saunders, Kilpatrick, & Resnick, 2000; Mikolajczyk, Bredehorst, Khelaifat, Maier, & Maxwell, 2007; Calloway, 2006; Alim, Graves, Mellman, Aigbogun, Gray, Lawson, & Charney, 2006). In addition, Black and Brown communities are underrepresented in mental health care access and use overall (Suite, La Bril, Primm, & Harrison-Ross, 2007). While Blacks and Latinos are underrepresented in mental health access and use, it is important to understand that individuals and communities heal differently and in very unique ways. The researchers aim was also to explore avenues of healing participants found helpful for individuals impacted and whether they saw mental health services as potentially beneficial.

The researcher conducted this study by interviewing a sample of 12 adult individuals who identify as community activists, advocates, or organizers who worked with or in service of Black
or Latino males who experience police brutality. The study was conducted in the Bay Area located in Northern California. A main purpose of this sample was to engage participants directly involved in issues of police brutality and explore their thoughts and perceptions about potential long-term impacts of police brutality based on their work, consider the impact on communities, and explore avenues of healing that they have found to be or consider may be helpful in their community work. Participants were recruited via snowball sampling from personal contacts and mentors and purposive sampling based on specific criteria of intended participants who were engaged in issues of police brutality. A semi-structured interview guide was used and included two identifying closed questions and nine open ended exploratory questions that emerged from the literature review, feedback from mentors, and the overarching research question that was developed.

The following chapters discuss the empirical and theoretical basis for this study, the methodology used to explore the research question, the post-interview qualitative findings, a discussion section that attempts to interpret and make meaning of the findings of this study, and implications for action and future research.
CHAPTER II
LITERATURE REVIEW

The main purpose of the literature review was to survey previous studies and research on police brutality in America. The purpose of this study was to explore the mental health impact of police brutality on Black and Latino males and identify avenues for healing. While the author only found limited research focusing directly on the impact of police brutality and healing from police brutality, the author focused on a wide range of issues surrounding police brutality in order to provide an extensive and relevant exploration of the literature pertaining to the subject. Generally, the researcher found literature on the history of policing, policing in communities of color, policing statistics across the country, perceptions of police by Blacks and Latino’s, mass incarceration and the war on drugs, and some literature on healing avenues.

The authors’ search of literature only drew one study that focused directly on the mental health impact of police violence on urban men titled, *Aggressive policing and the mental health of young urban men*. Similarly, the authors’ search of healing avenues were limited in the scope of survivors of police brutality, yet the author did find some literature focused on healing avenues for young urban men of color who are impacted by the criminal justice system and aggressive forms of policing. Overall, the literature suggests that aggressive forms of policing in the United States have been present and ongoing for over a century, that communities of color are disproportionately affected, that Blacks and Latinos have more negative perceptions of police than whites, indicate a surge in people of color killed by police in the recent years, and suggest that young men of color who are impacted by aggressive policing can suffer mental health consequences.

The limited research focused on police brutality suggested that the researcher focus more
broadly on the topic. The researcher focused broadly on several relevant sections including
statistics of policing and relevance to Latinos and Blacks, Latino and Black population
significance, policing of Blacks and Latinos, Black and Latino perceptions of police, mental
health of Black and Latino men, mental health impact of police brutality, and healing. This
chapter will review the following topics in this order: Police Brutality Defined, Police Contact
and Use of Force, Complaints Against Police Demonstrating Use of Force, People Killed by
Police, Latino and Black Population Significance, Poverty, Urban Population and Segregation,
Blacks and Latinos Incarcerated and Under Supervision, Homelessness, Policing of Black and
Latino Communities, Blacks and Latinos’ Perceptions of Police, Mental Health of Black and
Latino Males, Psychological Impact of Racism and Discrimination, Emotional and Physical
Abuse, Mental Health Impact of Police Brutality, and Avenues of Healing for Survivors of
Police Brutality. While a variety of approaches to the related literature might have been taken,
certain areas seem to deserve special attention because of their significance to Black and Latino
males, the researchers views of these topics not being largely addressed in literature, and because
they were identified by the researcher as areas that would best address the research question of
this study.

**Police Brutality Defined**

The issue of Police brutality has taken on many definitions throughout the years and is
defined differently among police, researchers, medical professionals, and community members
with no single definition accepted among all. For the purpose of this study, this author will be
utilizing the definition as defined by the Student National Medical Association. According to
Mitchell (2000), “Police brutality is defined as any act of unmerited excessive and aggressive
physical, mental, and/or emotional abuse, above and beyond the law, enacted upon by an individual or groups of individuals in law enforcement” (p. 2). This definition is critical due to its incorporation of not just physical but also mental and emotional abuse that is often unaccounted for.

Police physical abuse can have serious detrimental effects. While police brutality can come in various physical forms, Mitchell (2000) notes that physical injuries may develop from police actions as serious as shootings and baton beatings to something as simple as restraint holds. Mitchell (2000) states, “Police physical abuse can result in skin abrasion/laceration, bone fracture, asphyxiation, parenchymal nerve injury, contusion, concussion, skull fracture, epidermal & subdural hematoma, pneumothorax, and hemothrax” (p. 2). While physical abuse can have damaging negative consequences for the body, it can also formulate into a traumatic experience for the victim. However, less understood and detected are the psychological effects that can be as detrimental and lasting. Mitchell (2000) argues, “Psychological trauma faced by victims can also manifest itself in many ways such as stress, anxiety, fear, paranoia, distrust, insomnia, anorexia, and depression” (p. 2). It is reported that psychological stress in general often consumes many areas of life including job performance, ability to sustain employment, and everyday interactions with family and people in the community (Mitchell, 2000). Furthermore, family of fatally injured victims can often suffer many of the same psychological tolls.

**Police Contact and Use of Force**

Historically, research has shown that Blacks and Latinos experience more contact with police officers than any other ethnic group in the US. Furthermore, citizen and police contacts in general have dramatically increased in the last decade. In 2008, the U.S Department of Justice conducted a Police-Public contact survey where all persons age 16 or older in a national
A representative sample of households were asked about their contacts with police in the previous 12 months (Eith and Durose, 2011). The study found that an estimated 16.9%, or approx. 40 million, of U.S. resident’s age 16 or older had face-to-face contact with police. A subsequent study in 2011 found that the number of police contact jumped to over 26% of the total U.S. population or close to 63 million people (Tuttle, 2009). While it is unknown what percentage of these contacts included physical or emotional abuse, this same survey noted that an estimated 1.9% or 776,000 persons experienced force or the threat of force by police at least once in 2008, and that close to 75% of those affected said they felt it was excessive (Eith and Durose, 2011). With research showing an increasing rate of police contacts and a significant amount of people experiencing excessive force or threat of force by police, concerns arise around the impact of long term and complex exposure.

In regards to race and gender, statistics show that Blacks, males and younger persons were more likely to have contact with police that resulted in the use of force. In comparison to Whites, Blacks and Latinos were more likely to experience use of force based on total population with more than 70% Blacks and Latinos surveyed feeling that the threat or use of force was excessive (Eith and Durose, 2011).

Threatening behavior from law enforcement officers towards blacks and Latinos were represented on a continuum from physical to verbal abuse. For example, more than half of police use of force incidents involved the police pushing or grabbing the individual (Langton and Durose, 2013). In a national survey reporting on the behavior of police in traffic and street stops, of the about 14.5 million persons above age 16 involved in street stops, about 19% or 2.7 million of persons involved in street stops were searched or frisked by police (Langton and Durose, 2013). The majority of people who were searched and frisked did not believe the police had a
legitimate reason for the search. Being searched and frisked by police can be an overwhelmingly intrusive experience especially when citizens believe they are wrongfully frisked or frisked without permission. Studies have shown that people who experience stop-and-frisks report that they can be fairly intrusive, threatening, and demeaning (Levine and Small, 2008). This is added with the fact that Blacks and Latino’s are less likely than whites to believe that police behaved properly during a stop. This may involve having a gun unnecessarily pointed at you during a stop or feeling like unnecessary threatening language including shouting was used by the officer (Langton and Durose, 2013).

While this survey is not representative of the entire population, it suggests that of those surveyed, blacks and Latino were more likely to experience use of force and more likely to feel that the threat of use of force was excessive. Limitations of this study include the exclusion of people who are unable to participate due to physical, mental, or other reasons. The survey also did not take into account people who were homeless, caregivers, and people who were institutionalized. Thus the numbers and statistics may actually be higher than reported knowing that homeless and institutionalized populations may have a higher likeliness of contact with the police. Furthermore, the survey does not take into account people who may have experienced police contact and police brutality outside of the 12-month window that was questioned. However, the significant reporting of use of force or threatened use of force does mandate the exploration of how they may have psychologically impacted people whether justified or not.

**Complaints Against Police Demonstrating Use of Force**

Whether legitimate or not, data has demonstrated alarming rates of police use of force committed against citizens in this country. By and large, the US government does not collect much data around use of force by an officer and it is likely that use of force is underreported as
officers engaging in use of force may opt to report it as it can be consequential for them. In 2002, the Law Enforcement Management and Administrative Statistics survey collected data from a nationally representative sample of publicly funded State and local law enforcement agencies in the United States to explore complaints against police use of force. A total of 26,556 citizen complaints about police use of force were received by large law enforcement agencies (Hickman, 2006). This corresponds to overall rates of 10.9 per 100 full-time sworn officers responding to calls for service, however, most (84%) of all complaints were received by large municipal police departments located in urban areas accounting for 15.4 complaints per 100 full-time sworn officers responding to calls about police use of force (Hickman, 2006). While this demonstrates alarming rates, the study showed that only 8% of the total complaints were sustained meaning there was sufficient evidence to justify disciplinary action against the officers (Hickman, 2006). This shows an alarming rate of at least 10-15 complaints of use of force per individual officer a year along with an even more alarming rate of just about one complaint per every 10-15 resulting in disciplinary action towards the officer. While this low number of complaints sustained may say something about whether use of force was actually committed or warranted, it appears to demonstrate that use of force by officers is a normalized phenomena that often results in no disciplinary action towards officers and may normalize these experiences and discourage reporting from people who experience it.

Literature concludes that when an officer and victim have conflicting reports of use of force and no witnesses were present, the officers version usually becomes the official one (Alpert, 2015). This low rate of sustained complaints may deter victims of police use of excessive force in making complaints due to beliefs around the accountability of departments. What we do know is that regardless of whether officers were held accountable or not, complaints
indicate that people are reporting use of force at high numbers across the country, again pointing at the harmful impact that these interactions may have on citizens.

**People Killed by Police**

Threat of death or actual witnessed death at the hands of police officers can also impact a person's mental health and perceptions of the world. In fact, studies have shown that people who witness killings or murders in public may display symptoms of Post-Traumatic Stress Disorder (PTSD) (Elklit and Kurdahl, 2013). This is significant due to the fact that the rate of police killings, especially that of Black and Latino men, has drastically increased over the years. Between 1999-2011, American law enforcement officers reported killing over 4,500 people, 96 percent by firearms and 96 percent of them men (Males, 2014). According to Males (2014), these are called “legal interventions,” defined by the Centers for Disease Control and Prevention as “injuries inflicted by the police or other law-enforcing agents . . . in the course of arresting or attempting to arrest lawbreakers, suppressing disturbances, maintaining order, and other legal action” (p. 1). Legal interventions are often warranted police killings that departments choose to report and may not include accidental deaths, unwarranted police killings, and killings that the police choose not to report. Literature demonstrates that not only is there not a systemic way by the government of collecting data around police killings but police killings are fairly underreported as reporting is mostly voluntary (Kindy, 2015). Since 2011, less than three percent of the nation’s 18,000 state and local police agencies have reported fatal shootings by their officers to the FBI (Kindy, 2015).

Still, a significant factor is that both African American and Latino men are victims of police killings at higher rates than that of any other race. African Americans, accounting for 13 percent of the population, are victims in 26 percent of police shootings and are killed by Law
enforcement at 2.8 times the rate of white non-Latinos (Males, 2014). Latinos are victimized by police killings at a level 30 percent above average and 1.9 times the rate of White non-Latinos (Males, 2014). Not only do most police killings involve Black and Latinos, but close to 75% of those killed by police are young people under the age of 44 (Males, 2014). While research does indicate that the rate of police killings of African Americans has fallen by 70 percent over the last 40-50 years, their risk remains much higher than that of Whites, Latinos, and Asians (Males, 2014).

Due to underreporting and government disengagement in data collection around police killings, many organizations have taken it upon themselves to more accurately collect data of police killings in the country. In 2013 and 2014, a more accurate database of police killings shows that the amount of people killed by police was 1224 and 1179 respectively (Sinyagwe, 2015). The last decade has demonstrated an increasing number of police killings especially that of African American and Latino men. Compared to the overall U.S. population, Statistics show that Blacks and Latino’s continue to be killed by police at highly disproportionate rates compared to whites. If studies show that those who witness killings in public may develop PTSD symptoms, it raises the questions about how these public killings may be impacting Black and Latino communities alike and what they are doing to heal from these disproportionate incidents.

In recent years, the United States has witnessed an uprising by communities of color regarding the killings of unarmed black and Latino men at the hands of police. Through the surge of police brutality across the country, Black Lives Matter has developed as a nationwide movement that not only challenges police brutality and demands police reform, but represents an overarching human rights struggle for black people (Tometi and Lenoir, 2015). Black Lives Matter has garnered national attention and has been a front-line movement demanding justice
and accountability around state violence and police brutality against black people and other communities of color. Black Lives Matter is a movement responding to critical issues surrounding police brutality and repression of black people and brings the importance of mental health, justice, and healing from these issues to light.

**Latino and Black Population Significance**

Considering the disproportionate impact of police brutality towards Blacks and Latinos reflected in the literature, data suggesting an increase in both populations points to what may develop into an increase in contacts and incidents of police brutality among both populations. While African Americans and Latinos currently represent a small number of the total population, both populations are expected to grow, especially that of Latinos. The total US population as of 2014 is now estimated at 318,857,056 (United States Census Bureau, 2015). According to data from the US Census Bureau (2015), African Americans represented 13.2 percent of the total US population while Hispanics/Latinos represented 17.4 percent of the total population. White alone, not Hispanic or Latino, represented 62.1 percent of the total population (United States Census Bureau, 2015). By 2060, the African American population is expected to represent close to 15% of the population while the Latino population is expected to double to more than 30% of the total population (United States Census Bureau, 2012). While the African American population is not expected to grow much, it is important note that African males have the shortest life expectancy compared to any other race and gender. Considering the significant growth in population for Latino’s and the low life expectancy rate of African Americans, it is important to explore ways to support the mental health needs of these populations.
Poverty

Literature indicates that violent policing and police tactics are most often employed in low-income and impoverished communities. According to Macartney, Bishaw, and Fontenot (2013), over 25 percent of the total African American population was below the poverty level. During that same period, 23.2 percent of those identifying as Latino or Hispanic were below the poverty level (Macartney, Bishaw, Fontenot, 2013). As of 2014 African Americans living below the poverty level has increased to 26.2 percent (United States Census Bureau, 2014). Rates for Latinos have also slightly increased to 23.6 percent (United States Census Bureau, 2014). The increasing number of African Americans and Latinos in poverty demonstrates an imminent need to explore its correlation with the higher risk of police contact. With poverty serving as a risk factor for police contact with African Americans and Latinos, high rates of poverty among both populations presents an added component to exploring the needs associated.

Urban Population and Segregation

Racial segregation along with the concentration of poverty and growing economic inequality results in growing isolation of poor minority households. As earlier suggested, literature has shown that aggressive policing and police tactics are most often employed in poor neighborhoods. While segregation is slightly declining for blacks, it does not appear that this has translated into their being able to move into better neighborhoods. For example, in 1990, the typical black household with an income above $60,000 lived in a neighborhood where the median income was $31,585, compared with $46,760 for the typical white household in this income level (Squires and Kubrin, 2006). By 2000, these figures changed to $35,306 for blacks and $51,459 for whites with the same pattern holding for Hispanics (Squires and Kubrin, 2006).
Further staggering the intersection of place and race is the fact that in the year 2000 poor Blacks and Latinos were far more likely than poor whites to live in poor neighborhoods. Whereas over 18 percent of poor blacks and almost 14 percent of poor Hispanics lived in such areas, less than 6 percent of poor whites did (Squires and Kubrin, 2006). As previously stated, the concentration of poverty and the Black and Latino people who live in it as a result of urban segregation is a high risk factor associated with increased police contact and intentional targeting of police (Levine and Small (2008), Alexander (2012), Brunson and Miller (2006), Chaney and Robertson (2013)). This demonstrates that Blacks and Latinos are not only significantly targeted due to their socioeconomic positioning but also due to discrimination based on race, further highlighting the need to explore this phenomenon.

**Blacks and Latinos Incarcerated and Under Supervision**

Black males followed by Latino males are the most incarcerated groups of males relative to their representation of the population. Prison data from 2014 shows that 37% of imprisoned males were black, 32% were white, and 22% were Hispanic (Carson, 2015). In 2014, almost 3% of black male US residents of all ages were serving at least one year sentences in prison, compared to 1% of Hispanic Males, and 0.5% of white males (Carson, 2015). In the age range with the highest imprisonment rates for males, ages 25 to 39, black males were imprisoned at rates at least two and a half times greater than Hispanic males and six times greater than white males (Carson, 2015).

Outside of prison, data shows that Blacks continue to be incarcerated and supervised by law enforcement officials at disproportionate rates. In 2014, White inmates accounted for 47% of the total jail population, blacks represented 35%, and Hispanics represented 15% at midyear 2014 (Minton and Zhen, 2015). Of the over 850,000 adults on parole as of the end of 2011, 89%
were male and 11% were female with similar racial factors as described above (Maruschak and Parks, 2012). While Latino rates of low-level incarceration and supervision indicate a decrease in comparison, data still suggests that blacks and mostly males are impacted at disproportionate rates. Not only are black and Latino males disproportionately impacted by incarceration, but their incarceration rates demonstrate their increased contact with police officers who, as agents of social control, are those responsible with arresting those who are later incarcerated.

**Homelessness**

Homeless people frequently interact with police officers and paramedics, and these experiences may affect their health and future willingness to seek emergency assistance. A study by Zakrison, Hamel, and Hwang (2004) in Canada examined homeless people’s self-reported interactions with police and paramedics, and their level of trust in these emergency service providers. In a sample of 160 shelter users, 61% had interacted with police in the last 12 months, and 37% had interacted with paramedics (Zakrison et al. 2004). The proportion of subjects who expressed willingness to call police in an emergency was 69%, significantly lower than those willing to call paramedics in an emergency, 92% (Zakrison et al. 2004). The high rate of contact with police along with the willingness to contact police in an emergency leads to questions around the experiences that homeless populations are having with police.

For the most part, race is an indicator of those who are most likely to experience homelessness. Most data suggests that Black people represent the majority of those who are homeless along with Latinos in some areas. Among all of those staying in a shelter in 2010, 41.6% were White, 9.7% were Hispanic or Latino, and 37% were Black or African American. Among long-term stayers in emergency shelters, 56.6% were Black or African American and
28.7% were Latino or Hispanic (Substance Abuse and Mental Health Services Administration, 2011). Of all families living in shelters and transitional housing programs in 2010, 42% were African American, 31% were white non-Hispanic, and 12% were white Hispanic (SAMHSA, 2011). While whites account for a slightly larger percentage of those in shelters in 2010, among homeless populations in emergency shelters, transitional housing, and family shelters, black people were represented at higher rates. In fact, in New York City and Philadelphia, people experiencing transitional and episodic homelessness were predominantly Black (83.6% and 90.5% respectively) and male (81.5% and 81.8%) (SAMHSA, 2011).

While Latinos were not largely represented in several areas, they were disproportionately represented among long-term stayers in emergency shelters. This data may also be highly misrepresentative due to the exclusion of data around homeless populations who are not staying in shelters and are living on the street. The disproportionate rates of Blacks who experience homelessness adds to the association of risk factors and the higher mental health impact related to their ongoing contact with policing.

**Policing of Black and Latino Communities**

Special attention is given to the topic of policing in Black and Latino communities due to the historical roots of policing evolving from the era of slavery. Literature demonstrates comparable similarities between early forms of policing in Black and Brown communities to the more modern forms of policing in Black and Brown communities that we see today.

**Policing of Blacks**

As we explore the impact of police abuse on African-Americans, it is important to understand the historical context of policing as it relates to African Americans in the United
States. Most historical information around police interactions with African Americans in the 19th and early 20th century is accounted for by narratives and basic records as data around police interactions and use of force had not been recorded by the government until the late 1960’s (Alpert, 2015). History has shown us that African Americans in the United States have faced massive forms of oppression and repression that dates back to the years of slavery. The policing of black people also represented the emersion of the first publically funded police agencies in the 1700’s, known as slave patrols, responsible for the targeting of black populations in regards to searches of slave lodges, keeping slaves off of roadways, and disassembling meetings organized by groups of slaves (Archbold, 2012). Slave patrols were known for their high level of brutality and ruthlessness as they maintained control over the slave population. While health disparities have been less studied for those who experienced slavery, structural disadvantages that persist over time, including those faced by black people during slavery, can develop into historical traumas (BraveHeart and Debruyn, 1998).

After slavery ended, groups such as the federal military, the state militia, and the Ku Klux Klan took over the responsibilities of earlier slave patrols and were known to be even more violent than their predecessors (Archbold, 2012). During the late 1800’s, misconduct stemming from abuse of authority and misuse of force by officers was common. Police officers would use violence as an acceptable practice when they believed citizens were acting in an unlawful manner and it was believed to be justified in instances in which officers felt that they were being disrespected by citizens (Archbold, 2012). Police contact during this time with African Americans was utilized as a system of social control and for the maintenance of white supremacy and dominance. Jill Nelson (2001) provides a detailed account of various anthologies by black citizens in the early 1900’s who experienced police abuse and persecution without any due
justice. Nelson (2001) concludes in her book that historically black people have been seen as expendable and are at great risk of harassment, injury, and death by those who are meant to protect citizens. Furthermore, if citizens had a complaint regarding the actions of police officers, they had very little recourse, as police supervisors and local courts would usually side with police officers (Archbold, 2012). Literature indicates that this dynamic of officer accounts over citizens is still in effect when complaints are made against police officers (Alpert, 2015), leaving people with little or no recourse to deal with the abuse that they have faced.

Little is known about how these violent attacks on African Americans impacted their mental health, both as individuals and as a collective identity. It is likely that this developed and intensified feelings of fear, stress, low morale, and low self-esteem and may have translated into intergenerational effects (Anderson, 2013; Sawyer, Major, Casad, Townsend & Mendes, 2012, BraveHeart and Debruyn, 1998). Nelson (2001) adds “Fear, indifference, paranoia, passivity, alienation, and violence are a few of the byproducts of living in a society in which we are the victims of, or silent partners in, abusive, brutal, and racists behavior by the police” (p. 15). While these are very real factors that may be present by communities and individuals facing repression by law enforcement, few have focused on analyzing the direct and lasting psychological impact that these encounters may cause. The slim literature around the historical impact of police abuse on African Americans shows a striking need to add to the research.

**Policing of Latinos**

While police interactions and conflict with the Latino community is historically dated at a later time than that of African Americans, Latinos and their relationship with police has close similarities related to oppressions based on race, inclusion, and perceptions of criminality. Societal views towards Mexican Americans shifted in the first half of the 20th century to include
inherent criminality. During the era of the professionalization of policing in the 1920’s and 1930’s, there spurred a war on crime that targeted youthful offenders, most typically minorities (Montero-Sieburth & Melendez, 2007). Given societal perceptions of the link between race and criminal behavior, minority youth were the most likely targets of crime fighting efforts (Montero-Sieburth & Melendez, 2007). Arrests of Latino males rose during this time and was seen as a way to regulate boys who were darker skinned and allegedly more criminal (Montero-Sieburth & Melendez, 2007). Mexican youth in particular were viewed with suspicion and were typically associated with gangs and criminal activity in the 1930’s and 1940’s (Montero-Sieburth & Melendez, 2007). For Latinos, early confrontations related to immigration during depression-era deportation movements have been cited, and tensions between Latinos and police continued into the 1940’s with the Zoot Suit riots (Montero-Sieburth & Melendez, 2007). Latinos, like African Americans, were seen as an inferior race and were violently targeted due to perceptions of inherent criminality. These views of inherent criminality and inferiority were also deemed down into immigration policies that pushed to exclude Latino populations and encourage segregation and repression for those who were already in the country (Gee and Ford, 2011).

Los Angeles became the epicenter of an anti-Chicano movement and there was a series of violent confrontations between white police and Chicano youth in 1943 during which off duty cops would engage in vigilante searches through the barrios to beat up Chicano youth (Montero-Sieburth & Melendez, 2007). Strained interactions between Latinos and the police were highlighted in the 1970’s and 1980’s as part of a national recognition of a breakdown in relationship between police and minority communities (Montero-Sieburth & Melendez, 2007). The strained relationship between the Mexican American community and the police continued through political activism among Chicanos in Los Angeles. Nelson (2001) notes that Chicanos
were so often victims of police abuse in the west coast that the Los Angeles Police Department (LAPD) became flooded with complaints. Nelson (2001) further states that when activists demanded more police accountability from the LAPD, the department moved to destroy files to cover up for the pattern of violence against Latinos and Blacks. In an effort to endure the alienation and discrimination consistent with minority group status, Chicanos organized labor unions and civil rights groups during the 1960’s and 1970’s (Montero-Sieburth & Melendez, 2007). Latinos like African Americans, share a similar history of police abuse, repression, and activism. Collaborative efforts of activism to fight structural racism would later be seen in collective groups such as Black Panther Party and the Brown Berets.

Within the law enforcement agencies, attitudes towards Latinos influence the distribution of manpower and police deployment tactics in Latino neighborhoods, subjecting Latinos to increased scrutiny and social control. One example is the increase in the arrest, detention, and deportation of immigrants between 1995 and 2000 following the passage of the Illegal Immigration Reform and Immigrant Responsibility Act (IIRIRA) in 1996 (Montero-Sieburth & Melendez, 2007). One can assume that these exclusionary policies and actions can very detrimental impacts on Latinos. As suggested prior, Latinos like African Americans can also develop intensified feelings of fear, stress, low morale, low self-esteem and intergenerational effects based on these experiences (Anderson, 2013; Sawyer, Major, Casad, Townsend & Mendes, 2012; BraveHeart and Debruyn, 1998). Overall, few studies of policing in minority communities include Latinos and examine challenges that Latino communities face with law enforcement. History of police interactions with Latino’s prove that racism, repression, and violence towards Latino’s by police and its relationship to victims overall mental health is an
important area to be explored especially due to the significant increase in population that is developing.

Civil Rights Era and Police Repression

The Civil Rights era leading into the War on drugs signifies a critical period of time of tension between police and minority communities and points to crucial shifts of increased contact with and repression by police towards Blacks and Latinos. Alexander (2012) notes, “As the civil rights movement began to boil in the 1950’s and civil rights leaders and activists launched boycotts, marches, and sit-ins protesting the Jim Crow system, they were met with fire hoses, police dogs, bombings, and beatings by white mobs, as well as police officers” (p. 37). The uprisings resulted in a drastic increase in violent and abusive practices by police and a dramatic increase in the incarceration of individuals of color. Between autumn 1961 and the spring of 1963, twenty thousand men, women, and children had been arrested (Alexander, 2012). In 1963 alone, another 15,000 were imprisoned (Alexander, 2012). In a moment when minority communities were demanding equal rights and racial justice, government officials began to identify the civil rights uprising as a threat to law and order and media and political messaging began to depict protests, riots, and direct actions as crime that needed to be controlled. The Civil Rights era brought a new shift to the form of repression that communities of color would face at the hands of law enforcement officials.

During this time, activists argued that the uprisings were related to the widespread police harassment and abuse that the black community was experiencing. Leading up to the 1970’s and 80’s, tough on crime politics and racialized appeals led to a shift that diverted from white-collar crime and targeted street crime, especially drug law enforcement (Alexander, 2012). President Ronald Reagan officially announced the War on Drugs at a time when less than 2% of
Americans viewed drugs as the most important issue facing the nation (Alexander, 2012). During this time of great social uprising, literature suggests a diminishing relationship between police and minority communities and an attempt by politicians to subdue any resistance that was stirring up among Blacks and Latinos alike. Covert actions, movement building and organizing among Blacks and Latinos were met by efforts to criminalize them and develop a negative image of them to society. Not only did both groups continue to be targeted by police, but efforts were made to bring them down with violence, surveillance, and assassination of racial identity which may continue to have lasting effects on individuals and communities.

**The War on Drugs and Hyper-vigilant Policing of Blacks and Latinos**

The War on Drugs served as the tipping point of what has now proved to be a new wave of hyper policing of Black and Latino communities and the era of mass incarceration. Literature points to the drug war as less of a war on drugs and more of a race war on black people with specific intended effects (Nunn, 2002, Alexander, 2012). Before crack cocaine officially hit the streets, the Reagan administration focused their attention on a media campaign to sensationalize the emergence of crack cocaine in inner city neighborhoods, communities devastated by deindustrialization and skyrocketing unemployment (Alexander, 2012). As crack cocaine hit the streets in 1985, violence spiked as drug markets struggled to stabilize and the anger and frustration associated with joblessness boiled (Alexander, 2012). The media focused substantiality on the war on drugs campaign and the sensationalized attention of crack cocaine increasing the fears of the public and correlating to more public support for anti-drug funding and mandatory minimum sentencing (Alexander, 2012). In turn, this led to increased targeting and supervision of a majority of black and brown communities by law enforcement.
This new era of mass incarceration greatly affected inner city communities and communities of color. More than 2 million people found themselves behind bars at the turn of the twenty-first century (Alexander, 2012). Ninety percent of those admitted into prison for drug related offense in many states were Black or Latino (Alexander, 2012). This high rate of disproportionally demonstrates not only an increase in police contact but also the probability of use of force and aggressive policing to subdue and arrest. By the end of 2007, more than seven million Americans or one in every thirty one adults were behind bars, on probation, or on parole, translating to a massively dramatic increase compared to the roughly 300,000 that were in prisons or jails prior to the war on drugs (Alexander, 2012). While it is known that Blacks and Latinos were most impacted by the War on Drugs, little research has looked into the mental health impact of hyper vigilant policing as well as the impact of prison inmates who may have experienced abusive treatment from prison guards during their imprisonment. These are areas that need more attention for research.

With the increase of funding for drug enforcement to local law enforcement agencies, there soon was a mobilization of police officers engaging in street-level enforcement focused in inner city communities of color. Alexander (2012) notes that virtually all constitutionally protected civil liberties have been undermined by the drug war, making it easy for police to seize people virtually anywhere and place them behind bars. This has led to an increase of the use of stop-and-frisk tactics, which makes it constitutionally permissible to stop, question, and frisk a person even in the absence of probable cause (Alexander, 2012). People of color now experience a surge of abusive searches and stops without a deemed cause. Police frisks not only present themselves as a risk factor for Blacks and Latinos to experience unwanted contact but also excessive use of force without actually committing a crime.
Funding for the War on Drugs has also led an increased militarization of law enforcement including the addition of helicopters, M-16 rifles, grenade launchers and the formation of Special Weapons and Tactics (SWAT) teams in every major city (Alexander, 2012). This meant an increase in forced, unannounced, and highly militarized raids of people's homes and property. While a study by Williams and Westall (2003) determined no statistical significance in one department, they noted that SWAT officers are often called upon to engage in arrests where the use of force is a high probability. Alexander (2012) notes that SWAT raids are not polite encounters and usually involve police blasting into people's homes throwing grenades, shouting and pointing guns and rifles at anyone inside, often including young children. It appears to this researcher that those who survive these events can often become traumatized by the militarized style threat of violence and death that are sometimes associated with these tactics. This can overwhelmingly become a traumatic event to families and neighborhoods alike especially if they are employed frequently in the same neighborhoods and if people witness or experience near death experiences.

**Blacks and Latinos Perceptions of Police**

It has been noted that policing primarily impacts low-income and communities of color. How people of color, primarily African American and Latino people, view police and their interactions is an important area of scope to understand their relationship with police. Historically, most studies have found that African Americans viewed the police less favorably than whites (Lai and Zhao, 2010; Brunson and Miller, 2006; Levine and Small, 2008; Alexander, 2012; Brunson and Weitzer, 2008). Geller and Toch (1996) report that studies found attitudes toward police to be most favorable among Caucasians and least favorable among African Americans, even when controlling for community context and demographic differences. Simply
stated, attitudes toward the police were least favorable among African Americans even when identifying differences around income, living situation, and location. These perceptions can be partly explained by the historically negative experiences such as slavery and war on drugs policies that have targeted African Americans by law enforcement systems.

Data has suggested that blacks continue to make complaints at higher rates than whites related to police brutality (Chaney and Robertson, 2013; Geller and Toch, 1996). In fact, three separate studies located in New York City, Atlanta, and Los Angeles, results determined overall that urban poor and minorities to have the least favorable attitudes toward the police (Geller and Toch, 1996). These finding transcend social status as a separate study found persons of higher socioeconomic status among Black citizens to hold more negative attitudes toward the police than whites of similar status (Geller and Toch, 1996). In a study of black and white youth experiences in urban neighborhoods, black respondents expressed hopelessness regarding police stops and physically intrusive searches because they felt that officers would never see them as anything other than symbolic assailants even when engaged in entirely lawful activity (Brunson and Weitzer, 2008). This caricaturization of Black people as symbolic assailants is nothing new and has been widely utilized as a way to explain police brutality and use of deadly force (Brunson and Miller, 2006; Brunson and Weitzer, 2008; Chaney and Robertson, 2013)

While Latino perceptions of police have been less studied than that of African Americans, literature shows that Latinos also have unfavorable perceptions of police compared to whites (Hagan, Payne & Shedd, 2005; Solis, Portillos & Brunson, 2009). However, while Latinos tend to have more negative perceptions of police than whites, they are often more favorable than the perceptions that African Americans have of police. This difference can be partly understood by the amount of contact and extensive repression that African Americans
have historically experienced by police and systems of control. For example, some studies have shown that Latino’s have favorable perceptions of police until they actually have contact with them, in which as their contact with police increases, their expectations of them decrease (Hagan, Payne & Shedd, 2005).

Latinos face similar stereotypical caricaturizations as ‘gang members’ and illegal immigrants and are targeted in similar ways as African Americans (Hagan, Payne & Shedd, 2005). Literature shows that laws have been passed allowing police to specifically target Latinos such as being able to arrest anyone suspected of being a gang member, allowing legally unjustified stop and frisk practices in Mexican American neighborhoods, and unlawful questioning and detainment of Latino immigrants (Hagan, Shedd, and Payne 2005, Holmes, 1998). In a study of in-depth interviews with thirty Puerto-Rican and Dominican teenagers, participants reported unfavorable views about local police, concerns about the amount of time it takes officers to respond to calls, and routine disrespect from law enforcement during involuntary encounters (Solis, Portillos, Brunson 2009). Latino youth are hesitant to provide information to police and are fearful of becoming victims of crime due to negative treatment from officers.

Like African Americans, Latinos view negative police contacts as occurring based on racial and ethnic biased. Latinos are also targeted based on language, minority status, immigration status, skin color, and stereotypical perceptions of criminality. In a study of Latinos living close to the Mexico border, those living in predominantly Latino neighborhoods were more likely than whites living outside of those neighborhoods to report abusive police practices and were also reluctant to discuss those encounters, showing a development of conflictual relationships with police (Holmes, 1998). Latino perceptions like African American perceptions
of police point to critical information suggesting abusive and repressive practices towards both groups. A majority of negative perceptions of police between both groups provides an idea of the mental health impact that negative interactions have had on communities and individuals alike.

**Mental Health of Black and Latino Males**

Literature demonstrates that Latino and African American populations suffer from mental health issues at highly disproportionate rates compared to the overall population. Studies utilizing nationally representative samples of youth residing in the United States suggest that most Hispanic youth experience at least one potentially traumatic event (Crouch, Hanson, Saunders, Kilpatrick, & Resnick, 2000). The National Survey of Adolescents completed telephone surveys with youth ages 12–17 with a purposeful oversampling of racial and ethnic adolescents and found that 50% of Hispanic adolescents had witnessed violence; over 20% had experienced physical assault; and close to 10% had experienced sexual assault, all at rates higher than white youth who completed the survey (Crouch, Hanson, Saunders, Kilpatrick, & Resnick, 2000). Compared to whites, Hispanic youth have a significantly higher chance of developing mental health issues based on these experiences. While these rates do not speak directly to police encounters, the prevalence of previous traumatic experiences, whether involving police or not, places them at higher risk of developing mental health issues.

Oftentimes, immigrant youth are at further risk for poor mental health because of having experienced or witnessed traumatic events in their country of origin or during immigration (Fortuna, Porche & Alegria, 2008). Therefore, immigrant youth who experience traumatic experiences in the US are at higher risk of contracting mental health issues such as PTSD, depression and substance abuse dependency due to likelihood of previous encounters. A national survey of over 4,000 adolescents representative of the U.S. population ages 12–17
found that rates of PTSD in Hispanic youth were almost 40% higher for Hispanic youth than white youth with similar prevalence rate estimates for depression (Crouch et al., 2000). For example, a random digit dial telephone survey of 3,000 California youth ages 12–17 revealed that more than 10% of Hispanic youth had symptoms of depression that were in the moderately depressed range, almost doubling that of white youth (Mikolajczyk, Bredehorst, Khelaifat, Maier & Maxwell, 2007). Overall, mental health rates for Latino populations, whether undocumented or born in the US, are dramatically high (Vega and Alegria, 2001). For those of Mexican origin, the Mexican American Prevalence and Services Survey determined that of respondents between ages 18-54, more than 48% of US born and 32% of undocumented adults with more than 13 years of stay in the US suffered from some type of mental health disorder (Vega and Alegria, 2001). This data and other literature also point to a correlation between the amount of years spent in the US and the increased risk of mental health issues. While high rates of PTSD, depression, and other mental health disorders may be due to witnessing violence in their country of origin or community along with other issues, these rates may also be due to or exacerbated by high rates of police contact, abuse, and discrimination. However, the connection between PTSD, depression, and police abuse among Latinos is an area that has been minimally studied. Mental health rate disparities among Latino men can drastically increase the risk of traumatic experiences and mental health issues in adult life, leading to a need to explore the impact of their contact with law enforcement officials.

Mental health risks are also especially high for African American men in particular related to homicide, suicide, substance abuse disorders, and depression. Historically, African American men face adverse socioeconomic issues that place them at higher risks of developing mental health issues. These transgressions become serious when middle-age Black men are
dying at nearly twice the rate of White men of similar age and when more than one in four adult Black men experience some form of mental health or substance abuse disorder during their lifetime (Calloway, 2006). For African American men and their families, the social divide in health, which is tied to social factors such as socioeconomic status, discrimination, and injurious work and home environments, leads to unevenness in mental and physical health service delivery (Calloway, 2006). According to the literature, 7% of all African American men will develop depression during their lifetime (Calloway, 2006). Compared to other ethnic groups, African Americans are impacted the most by mental health issues related to depression which can develop from a variety of socioeconomic factors including personal or witnessed traumatic experiences. In fact, in a survey conducted of 617 mostly African American patients waiting in waiting rooms, around 65% of them reported at least 1 traumatic event (Alim, Graves, Mellman, Aigbogun, Gray, Lawson, & Charney, 2006). While not all people who experience a traumatic event develop PTSD, this same study determined that 33% of African American patients did, largely exceeding the rate for the general population (Alim et al. 2006)

Mental health rates are also related to the high rates of death and substance abuse among African American men. African American men have death rates that are at least twice as high as those for women for suicide, cirrhosis of the liver, and homicide (Calloway, 2006). From 1980 to 1995, the suicide rate for African American male youth (ages 15-19) increased by 146%. For African American men, especially in urban areas, the abuse of alcohol and its consequences also appear graver when compared to statistics for White men, White women or African American women (Calloway, 2006). Weighed against other racial/ethnic groups, Black men experience higher mortality rates in every single leading cause of death, die approximately 7 years sooner, and have higher rates of poverty and unemployment (Calloway, 2006). The
exposure of blacks to greater inequalities within social and economic environments includes an increased exposure to racism and discrimination, violence, and poverty, factors that adversely impact mental health, and may potentially lead to psychological distress (i.e. depression, anxiety). While experiences of racism, discrimination, and police abuse towards African American men are well documented, little is known about its direct impact on mental health issues. Blacks are disproportionately exposed to the psychosocial stressors that are important antecedents of depression, economic deprivation, unemployment, and violence, which places them at greater risk for depression. Knowing the disproportionate rates of poor mental health among African American men along with the high rates of police contact, the scarcity of literature on the mental health impact of police abuse points to an area of needed research to understand how to effectively treat those issues for African Americans.

**Psychological Impact of Racism and Discrimination**

The disproportionate mental health rates of African American and Latino males along with significant experiences of discrimination and racism have been well documented. However, an area that can help us better understand the mental health impact of police abuse is developing connections around the psychological impact of racism and discrimination. As previously discussed, both African Americans and Latinos have a history of experiencing both overt and covert forms of discrimination and racism in the US. In a survey of psychiatrists who had treated Black men, Jones & Gray (1985) found the most frequently reported initial problem and diagnosis was depression and the major issues associated with being depressed included racism. In a separate study, a racism index was applied to expose racism as a contributing factor to increased hostility and increased substance abuse in Black men. Results from this study suggested that racial discrimination had a negative effect on the psychological health of Black
These studies have suggested that Black men who experience racism have higher depression and anxiety scores (Utsey and Payne, 2000). Moreover, it was noted that the chronic and subtle nature of racism can be fatal for Black men living in the US and this has raised concerns regarding excessive mortality rates among this population (Utsey et al. 2000).

In further support of the connection between racism and depression, a separate study from Brown, Williams, Jackson, Neighbors, Torres, Sellers and Brown (2000) used national data collected from a sample of Blacks across two waves to investigate the relationship between racial discrimination and the onset of psychological distress and depression. This study also determined that discrimination was found to be related to high levels of psychological distress and slightly related to an increased likelihood of current depression (Brown et al. 2000). More recently, an experimental study by Bennett, Merritt, Edwards and Sollers (2004) investigated effective responses to controlled stimuli depicting overt and subtly racist harassment. Half of the study participants were subjected to blatant racism while the other half was exposed to no racism (Bennett et al. 2004). Their responses were monitored and results suggested that participants exposed to ambiguous scenarios and who perceived high levels of racism were more affected than participants who did not (Bennett et al. 2004). Studies have also proved that those exposed to racism can experience cardiovascular and psychological reactivity, including higher levels of blood pressure (Williams and Williams-Morris, 2000). Not only does this suggest that people can experience detrimental mental health effects but also physical health consequences. As literature demonstrates that racism and discrimination can have adverse mental health effects on Black men, a link can be made around the psychological impact experienced by Black men and Latino men alike when experiencing discrimination and racism by law enforcement officials.
These studies raise important issues concerning racism as a public health issue and support the notion that although racism is an experience familiar to most Blacks, Black men are particularly vulnerable to its deleterious effects. While much literature does not exist around this experience for Latino men, one can assume that others who experience perceived racism can have similar effects. More important to this study is the correlation between racism and mental health and how it impacts Latino and Black men when it's coming directly from police officers as it has over the last century.

**Emotional and Physical Abuse**

As we explore the question around the impact of police brutality in its entirety as physical and emotional abuse towards Black and Latino males, it is important to explore the literature surrounding the impact of emotional and physical abuse at a larger scale in order to develop ties to how its effects can be compared to police abuse. As little to no literature addresses the direct adverse mental health effects of police brutality, connections will be made from more general research in order to build a basis for the research question. With less literature in the area of adult physical and emotional abuse, we focus on child abuse in these areas. In a Meta-Analysis, 124 studies were identified that investigated the relationship between child physical abuse, emotional abuse, or neglect and various health outcomes. The meta-analysis suggested evidence that child physical abuse, emotional abuse, and neglect are causally linked to mental and physical health outcomes (Norman, Byambaa, Butchart, Scott & Vos, 2012). For example, emotionally abused individuals had a three-fold higher risk of developing a depressive disorder than non-abused individuals and physically abused and neglected individuals also had a higher risk of developing a depressive disorder than non-abused individuals (Norman et al. 2012). Other mental health
disorders associated with child physical abuse, emotional abuse, or neglect included anxiety disorders, drug abuse, and suicidal behavior (Norman et al. 2012).

While literature does not directly address this point around police brutality, connections can be made around this data and what can be experienced by black and Latino men when constantly harassed, discriminated against, racialized, verbally threatened, physically assaulted with use of force, and threatened with death with raids and guns pointed as literature has shown. An assumption can be made that Black and Latino men can have similar mental health outcomes as children do when experiencing physical and emotional abuse from those who are expected to serve and protect them.

**Mental Health Impact of Police Brutality**

As recent years of police killings and brutality towards unarmed people have color have inspired uproar from communities standing up against police brutality, the media has increased its attention towards these issues. As statistics continue to show an increase in police contacts as well as incidents of police use of physical and deadly force towards males of color, literature has failed to focus on the long term adverse effects of police abuse towards Black and Latino males as those who are most impacted by police violence. Few studies have generally touched on this topic with minimal scope. Geller, Fagan, Tyler, and Bruce (2014) write that qualitative research suggests that the physically invasive and often rough manner in which officers approach citizens raises the risk of injury. Men are often thrown to the ground or slammed to the wall during street stops in which individuals may face emotional trauma in the face of unwarranted accusations of wrongdoing (Geller et al., 2014). Proactive police stops, usually predicated on low levels of suspicion and wrongdoing, may trigger stigma and stress responses and depressive symptoms
(Geller et al., 2014). Stresses can be compounded when police use harsh language such as racial
invective or taunts about sexuality (Geller et al. 2014).

Limited data is available to assess the health implications of police encounters,
particularly for the urban populations at greatest risk for contact (Geller et al. 2014). However, in
a telephone survey conducted of 1261 mostly non-white young men (80%) in New York City
exploring trauma and anxiety symptoms based on police encounters, correlations were found
between police contact and symptoms of trauma and anxiety (Geller et al. 2014). Participants
who reported more police contact also reported more trauma and anxiety symptoms. Anxiety
symptoms were related to the number of times the young men were stopped and how they
perceived the critical encounter was conducted and higher anxiety was also related to more
police intrusion (Geller et al. 2014). Trauma symptoms were also higher among those who
experience numerous police stops and who lived in public housing along with the fact that stop
intrusion was a significant predictor of PTSD among these youth, with more invasive stops
predicting higher levels of trauma (Geller et al. 2014). This study indicates some correlation with
trauma symptoms and anxiety associated with police contact especially with intrusive
encounters. This study paints a rich picture into the mental health impacts of police contacts and
abuse but more is needed to add to the limited research in the area. With the increasing rates of
police contacts, police killings, and the history of incarceration among Black and Latinos, this is
proving to be an era where research is needed to understand how we can support those who are
impacted by police abuse. The less we know about the symptoms that arise from ongoing police
contact and abuse, the less we know about how we can support Black and Latino men who are
victimized by these experiences.
Avenues of Healing for Survivors of Police Brutality

One of the main purposes of this study is to examine ways of healing from police brutality. While traditional westernized forms of individual therapy are common and highly studied, less examined have been alternative forms of healing that can have the potential to be healing for survivors of police brutality. This section addresses alternative forms of healing that have been either written about in literature or have been utilized in communities and have the potential to address the impact faced by those who experience police brutality.

Resistance Identities

While it has been thoroughly discussed that Police Brutality can have a detrimental impact on Black and Latino males, individuals who are impacted by police brutality can also develop identities that seek to challenge these systems of punishment and oppression, and can in turn transform their experiences into forms of self-empowerment. In his book, *Punished: Policing the Lives of Black and Latino Boys*, ethnographer and professor Victor Rios describes a possible response to oppression by marginalized populations as the development of *Resistance Identities* (2011). *Resistance Identities* operate by “excluding the excluder” and transforming their exclusion into a revolt against the very system and agents of control that punish them (p. 102, 2011). Rios references sociologist John Hagedorn who describes that resistance identities can serve as an avenue to transform the lives of black and Latino boys by stating, “Encouraging cultural resistance identities and linking them to social movements like those in the United States opposing gentrification, police brutality, or deportations may present the best opportunity to reach out to our alienated youth” (p. 103, 2011) In essence, Rios concludes that Black and Latino boys who are impacted by punitive systems of social control, including experiences of police
brutality, can transform their despair into a political consciousness and self-empowerment whereby it can serve as a form of healing.

Several of the Black and Latino boys who Rios studied in Oakland, CA and who had experienced ongoing police brutality ended up “developing a deeper sense of dissent in which they participated in marches, protests, and meetings aimed at ending police brutality” (p. 123, 2011). Rios finds that when a young man becomes self-empowered and believes he can change his marginal conditions and his environment, his ability to engage in his education and civic participation increases, leading to a personal and social transformation (2011). In his study, the “Deviant Politics” that Black and Latino boys engaged in led to the development of an oppositional consciousness and political activism which empowered some of the boys to fight back against punitive social control (2011). Experiences of police brutality may serve as a catalyst for the development of resistance identities in Black and Latino males and in turn may encourage their participation in formal dissent and the development of consciousness that can serve as a healing process.

Social Justice Activism

During times when individuals and communities experience ongoing traumatic experiences and racial injustices, we often look for ways to heal and experience a cathartic release. For those who have experienced systemic and racial violence at the hands of law enforcement, the outlet to heal is not often through formal complaints to police departments nor is it commonly found seeking services from a therapist. In fact, Black and Brown communities are underrepresented in mental health care access and use overall (Suite, La Bril, Primm, & Harrison-Ross, 2007). Due to the historic relevance and experience of racial trauma and violence among Black and Brown communities, many internalize the experiences and lose a sense of hope
(Ginwright, 2015). But the issue of police and state violence against communities of color, in particular black communities, has since received much needed recognition and attention through movements such as Black Lives Matter, which after its inception in 2012 now has 28 active chapters across the country including one in Canada (“Black Lives Matter”, Locate a Chapter). The Black Lives Matter movement has helped validate the experiences of many of those who have experienced or witnessed police violence and has provided a platform for those the express and transform their pain, anguish, frustration, and anger into activism towards the systems that continue to oppress them. This movement, participation in uprisings, organizing, and other forms of social activism against police abuse have served as forms of healing for many.

For example, after the police killing of Oscar Grant, an unarmed black young man who was shot by police in 2009 while handcuffed at a Bart station in Oakland, the community gathered and protested the killing. While the protesting served as a catalyst for media attention on the issue, those who felt most impacted and who could relate most to the issue sought to transform their pain into activism by forming the Oscar Grant Foundation with a mission to “help bridge the gap of distrust between individuals in at-risk communities and law enforcement” (“Oscar Grant Foundation”, About Us). Also formed was the Oscar Grant Committee Against Police Brutality and State Repression (OGC). As detailed on their website, the OGC “is a grassroots democratic organization that was formed as a conscious united front for justice against police brutality. The OGC is involved in the struggle for police accountability and is committed to stopping police brutality” (“Oscar Grant Committee Against Police Brutality and State Repression”, About Section). The Oscar Grant Committee provides attention and support to other families and communities who were impacted by a police killing and hold ongoing events to provide a platform for communities to protest police brutality.
Activism around police violence has also included forms of creative art-based expression such as the Aztlan Beautification Movement by Communities United for Restorative Youth Justice (CURYJ) in Oakland. The Aztlan Beautification movement has not only provided cultural healing images but has also helped communities express the experiences that are too common and too difficult to express in words. Since 2011, CURYJ has focused on developing murals across Oakland that “bring youth together to learn Chicano and Indigenous histories and to tell stories about current struggles” (“Communities United for Restorative Youth Justice”, Aztlan Beautification Movement). Their most recent mural in the Fruitvale district tells a story of anti-gentrification and police oppression, an expression of the vivid realities of current community issues. Art like oral expression can serve as another form of healing for individuals and communities who often feel voiceless, unheard, and misunderstood.

The joining of healing and activism is what Shawn Ginwright focuses on when he discusses the term “Radical Healing” in his book Black Youth Rising (2015). Ginwright addresses the importance of bridging individual healing with social activism and how adults can support youth in their own healing process when they offer opportunities for youth to engage in political action (Ginwright, 2015). Through participation in activism, individuals and communities can engage in a healing process that incorporates exercising their voices to the issues at heart, becoming a part of a supportive and validating community, and being active actors towards changing circumstances and systems that impact them.

**Cultural Healing Circles**

The prevalence of trauma and issues of oppression among Black and Latinos populations has led to the inclusion of cultural practices within various organizations to support healing and overall well being. The National Compadres Network, a national effort focused on the
reinforcement of the positive involvement of Latinos, Chicanos and Native Americans in the lives of their families and community, has been integral in the foundation of cultural healing practices that have been blended into the struggles of the populations discussed (The National Latino Fatherhood and Family Institute, 2012). The National Latino Fatherhood and Family Institute (NLFFI), a division of Los Compadres Network, focuses on a healing model termed La Cultura Cura, which involves “restoring one's true cultural identity…and) employs a multigenerational process of learning and/or remembering one's true and positive cultural values, principles, customs, and traditions” (2012, pg. 5). As a healing practice, cultural healing circles or Circulos, have developed as support groups to provide positive indigenous male support to young men in all communities (National Latino Fatherhood and Family Institute, 2012). This Circulo de Hombres or Men’s Circle engages elders, men, and boys to “connect, heal, teach, and learn and recommit to their true values” (pg. 23) while addressing issues of racial justice and oppression (The National Latino Fatherhood and Family Institute, 2012).

An example of this men’s circle and the La Cultura Cura model is seen in an Oakland based organization, Communities United for Restorative Youth Justice, that works to empower young people who have been impacted by the criminal justice system (“Communities United by Restorative Youth Justice”, Mission). Their program “is composed of a curriculum for Oakland youth that teaches the historical and contemporary manifestations of oppression through an ancestral and indigenous framework. These teachings facilitate the healing and personal transformation of Latino and Native American youth that are impacted by the criminal justice system” (“Communities United for Restorative Youth Justice”, Community Healing). Here participants in the healing circles are able to build relationships and trust with each other while processing their experiences, stress, and trauma (Ginwright, 2015). These circles are facilitated
by people who are also impacted in similar ways to oppressive factors and provide opportunities for youth to lead their own groups. While self-awareness, growth, and healing have not been central foci of social justice strategies, Ginwright states that there is a growing recognition among social activists of color that culture can serve as an important remedy from the harm of racial justice (2015).

Other social justice organizations have carried on with similar healing circles that have served beneficial to address issues of racial injustice and oppression. When discussing oppression and healing, Nicole Lee, Executive Director of Urban Peace Movement in Oakland states, “If Trauma and Harm are the manifestations of our oppression, then healing is part of our liberation” (Chavez-Diaz & Lee, 2015, pg. 7). Many social justice organizations, including Urban Peace Movement, have focused on addressing mental health and healing through the development of culturally centered healing circles and practices. For example, Urban Peace Movement along with United Roots in Oakland developed DetermiNation, a program that uses West African rituals, symbols, and practices to reach young African American and promote healing and achievement (Ginwright, 2015). As a way to address mental health, DetermiNation holds a support group for young black men to process struggles, stories, and successes around issues that are relevant to them. Here youth also receive lessons composed of African philosophies and spiritual teachings that are connected to the realities shared by youth and provide opportunities for healing (Ginwright, 2015). The healing circle has served as a space for black youth to feel heard, supported, and receive guidance from others. While healing circles have not been directly researched to explore their efficacy in providing healing to those impacted by police abuse, the cultural and traditional history of these practices across different ethnic
groups may shed some light to an area that can serve as a healing process for communities of color.
CHAPTER III

METHODOLOGY

This study is primarily an investigation into police brutality and the possible effects on Black and Latino males, their communities, and their mental health. It also incorporates an investigation into healing for those affected. Generally, this study focuses on this question: What is the potential mental health effect of police brutality on Black and Latino males and what are avenues for healing for those affected? A qualitative, exploratory method was used with intensive interviewing of participants. Participants interviewed were community activists/advocates/organizers who had worked in service to Black or Latino males who experience police brutality. This criteria for participant selection was engaged in order to better understand the possible effect of police brutality on individuals and communities and also understand pathways for healing from people working around these issues in the community.

Semi-structured, open-ended questions were utilized to allow for flexibility in responses and promote a dialogue where participants could feel more comfortable sharing their unique experiences (Please refer to Appendix A). The review of the literature suggested that the area of focus on mental health and healing from police brutality was a minimally researched area. A qualitative, exploratory method was chosen due to the study focus being one in which there was very little research as well as the intention to explore specific and in depth experiences and outlooks. With the exploratory nature of this study, it was of critical importance to be mindful of the individual experiences and perceptions of participants and to gather information in the least restrictive manner.
Sample

Participants in this study identified as community organizers, activists, or advocates who engaged in work around issues of police brutality. Originally, the researcher had intended to interview two separate pools: community organizers, activists, and advocates and Black or Latino males directly affected by police brutality. Upon suggestion by the Smith College School for Social Work (SCSSW) Human Subjects Review Committee, the investigator decided to focus specifically on community organizers, activists, and advocates after suggestions that it would lend itself to a more qualitative design with a small sample. This also allowed for more supportive findings based on the larger sample pool. These individuals were selected based on matching the following criteria:

1. Participants must have identified themselves with engaging in community activism, organizing, or advocacy surrounding issues of police brutality faced by Black or Latino Males. Participants needed to be 18 years or older. Participants needed to be currently engaged in either work with Black/African-American or Latino/Hispanic/Chicano Males who were impacted by police brutality or worked in service to Black or Latino Males who were impacted by police abuse. Participants needed to reside in the San Francisco Bay Area.

This study involved intensive interviews of 12 individual participants. Upon contact, individuals were asked if they fit these criteria. Participants were allowed to self-identify under this criteria and no further verification was made.

Sample Recruitment

Prior to recruitment of participants for this research, approval for the study and all safeguards to ensure ethical standards were obtained from the Smith College School for Social
Work Human Subjects Review (HSR) Committee (Appendix D). This study utilized non-probability sampling techniques with a mixture of convenience sampling, purposive sampling, and snowball sampling. Convenience sampling was used to select participants who were known to this researcher and easy to access through personal networking as community organizers, activists, or advocates. Snowball sampling was identified as a useful method due to anticipated challenges with identifying participants who were engaged in issues around police brutality in the community. Engels and Schutt (2013) acknowledge the purpose of this method by stating, “snowball sampling is useful for hard-to-reach or hard-to-identify populations for which there is no sampling frame…” (p.126). Purposive sampling was also selected as a method due to specific criteria in the researchers’ study where the search involved participants with certain experiences and who fit certain identifying factors. Engels and Schutt (2013) note that a purposive sampling strategy is useful when, “each sample element is selected for a purpose usually because of the unique position of the sample elements...[and where the researcher] targets individuals who are particularly knowledgeable about the issues under investigation” (p.126).

First, convenience sampling was utilized in reaching out to personal mentors and peers who matched the criteria for the study and who were interested in participating. Snowball sampling was then utilized from this convenience sample to help connect the researcher to possible participants to interview. Second, the researcher requested permission to reach possible participants either by phone or email and asked permission to utilize mentors name as the referral source. Third, participants were contacted by email or phone by the researcher, were provided information around the reason they were specifically contacted for this study, inclusion criteria for the study, provided information about the nature of the study and its purpose, and the nature of their participation (Please refer to Appendix C). Some participants were identified through
online research and were contacted by email without the mentor’s name as the referral source. Emails and phone calls were followed up with two or three times to those that did not respond to ensure that individuals would have enough follow-up opportunities to respond or consider participation. Individuals who expressed interest in participating in the study were provided information about the potential risks and benefits of their participation including the estimated time the interview could take.

Once I validated that participants fit criteria from simple self-identification either through phone or email, I sent out the consent form through email and allowed participants to either sign and fax the form back before the interview or review the consent and sign a copy upon meeting for the interview (Please refer to Appendix B). For those participants that choose to participate in the individual interview, a time and place was set at an office identified by the participant or in a quiet public place that allowed some privacy and was convenient to the participant. Participants were allowed to view the semi-structured interview questions at least three days before the interview. The purpose for this was to relieve any anxiety or distress the participant may have about the interview process and to transparently prepare the participant for the types of questions that they would be asked.

All 12 participants signed the consent form upon meeting for the interview. The first few minutes of the interview consisted of basic introductions and casual conversation. The researcher spent a brief amount of time assuring consent form signatures, reminding the participant of the estimated length of time of the interview, and asking if the participant had any questions before getting started. All participants consented to having the interview audio recorded and were informed that the researcher would take notes during the interview to assure proper information
gathering. The researcher informed the participants that they could refuse to answer any questions at any time and could withdraw from the study any time before April 10, 2016.

**Ethics and Safeguards**

*Confidentiality*

While participants did not remain anonymous due to the nature of the interview, confidentiality of participants was assured through the protection of identifying information. Participants were assigned a code that was placed on all materials without description of names that would identify the participant. Descriptive quotes were carefully disguised and any possible identifying information was removed, in order for material from the study to be used for future presentation and publication. Some specific comments related to community organizations, community work and healing practices arose concerns around possible identifying information of participants. Upon concluding data analysis, participants were contacted by email and asked about these specific comments and asked about their comfort in using these comments as stated. Those participants generously agreed to include that information as stated in the study.

Consent letters were kept separate from notes and transcripts. Audio recordings used in interviews were password protected to assure that only the researcher could access them. Participants were informed of possible use of interview transcribers and those transcribers utilized for the study were required to sign a confidentiality agreement. All notes, consents, and recordings were placed in a locked container or password protected computer to ensure security of information. The researcher conducted analysis of interviews and other study information in a private space where no other person had access or visibility to the information. All interviews were held in the participant’s office or in a quiet public café with some privacy. While
snowballing was used to contact other participants for the study, participants who would refer others were not made aware of whether those other contacts resulted in interviews or not.

**Risks**

Upon initial email and phone contact, participants were informed of potential risk of participation. Possible risks of participation were also outlined for participants to read in the consent form that was sent out and signed before commencement of the interview. Possible risks included that participants would be asked personal questions about experiences in their lives that might make them feel uncomfortable. Participants were informed that some questions could also cover subject matter that may cause emotional reactions or distress. Participants could also feel overwhelmed by the amount of questions asked and may feel overwhelmed at the end of the interview. Effort was made by the researcher to reduce feelings of distress and anxiety by emailing a preview of the interview questions to the participants so that they would get a sense of the content. The researcher was also mindful of these risks and reactions and focused on verbal and non-verbal cues to relieve these reactions if and when they arose. If any of these came up for the participant, there was an opportunity to discuss them during and after the interview and the researcher would provide further resources to support the participant if necessary (Please refer to Appendix E).

**Benefits**

Benefits of participation were also addressed upon initial phone or email contact with participants. Benefits were also outlined for participants to read in the consent form before the interview commenced. The benefits of participation included the ability to share and process stories and experiences with someone who was willing and interested in listening to them.
Participants also had the opportunity to share about their work in the community and promote it through this study. Others could also have an empowering experience by shedding light on an issue that has been lightly addressed in society and in literature.

This study offers the possibility of validating other’s stories and experiences of police brutality and may identify possible avenues of healing for those people that are affected. Considering how imminent this issue is at the moment, this study may also add to a gap in literature surrounding the mental health impact on Black and Latino men who are impacted by police brutality. The findings from this study may contribute to how social workers approach their work with Black and Latino males who may be affected by police brutality.

**Data Collection**

Data collection for this study was undertaken through a semi-structured interview process. The researcher received Human Subjects Review approval to use the set interview guide with open-ended questions as a measurement tool (Please refer to Appendix D). The use of a semi-structured interview allowed the researcher to ask open-ended questions but also provided space for the participant to delve into personal experiences, in depth perceptions, and tell their stories openly. While the researcher did have a guide of questions, the process was more relaxed and facilitated more of a conversation while questions were answered and others arose.

All participants consented and were reminded that the interviews would be voice recorded. The author used a personal digital voice recorder for all interviews, including those over the phone. While recording, the researcher took informal notes of participant’s responses that helped in collecting and noting key information. All notes were marked with a face sheet
with assigned codes and some descriptive information about the participant. Date, time, location, and start and end of interview were noted.

The qualitative interviews averaged about 50 minutes and each followed a relaxed but consistent format. First, the researcher greeted the participants and engaged in some small talk to build rapport while also assuring that the participant signed the consent form if they had not already done so. Participants were all asked if they had any questions or concerns about the interview and were allowed to bring any of those up with the researcher before the start of the interview. Participants were informed that they could refrain from answering a question at any time and could decide to end the interview at any time. They were also reminded that they could withdraw from the study at any time up until April 10, 2016 at which point they would notify me by phone or email and their information would be left out of the study. The researcher generally allowed 10-15 minutes for this part of the interview before asking any specific questions.

Next the author followed up with interview questions. Upon beginning, the researcher informed participants he would follow the interview guide and might ask more specific follow up questions if he wanted to know more about something they had shared. The researcher also informed participants that due to time restrictions, the researcher might redirect responses and eventually ask more direct questions to cover areas that were missed in the scheduled time. Interview questions averaged about 30-35 minutes.

The interview questions were focused on a participants work in the community around issues of police brutality, experiences of police brutality, thoughts about how police brutality could affect people and communities, healing and barriers to healing, mental health, and outlook for those affected. For example, in the first part of the interview, participants were asked a
question around their work in the community, “How long have you worked with issues of police brutality? In what capacity?” Examples of questions focused around possible effects to individuals and communities were “What long term effects do you think it can have on people who experience it? On communities of color that experience it?. Questions around healing focused on both what they thought was working or could work and what were some obstacles to healing. For example, “What would you say are some avenues of healing for survivors of police abuse? And, “What do you think are the main barriers to healing for men of color who experience police abuse? Throughout the interview process, participants were given opportunity to delve into specific experiences and outlooks related to questions they were answering.

About five minutes were left at the end of the interview to check-in with the participant and explore their interview experience. Participants were informed about support resources in the community and provided a list if participants requested (Please refer to Appendix E).

**Data Analysis**

Data from interviews was gathered through audio recording and informal notes taken by the researcher. Once all interviews were completed, this researcher utilized an inductive approach to content and thematic analysis of data. According to Thomas (2006), “Inductive analysis refers to approaches that primarily use detailed readings of raw data to derive concepts, themes, or a model through interpretations made from the raw data by an evaluator or researcher” (p. 238). An inductive approach involves analysis of data that is guided by evaluation objectives and where themes are developed through interpretations of raw data as opposed to a set of prior expectations (Thomas, 2006). The researcher chose this method due to its commonality and practicality in qualitative data analysis.
The process of analysis that the researcher used is described as follows. First, the researcher transcribed individual recordings into a word document and prepared raw data into common format including uniform font and highlighting of questions and participant codes. Second, the raw data was read numerous times until the researcher was familiar with the content and emerging themes in the text. Next, the researcher identified specific categories and themes in two separate processes; first, the more general and larger categories that the researcher aimed for in the interview questions and second, the more specific themes derived from multiple readings of raw data, also known as in vivo coding. Following that, the researcher engaged in refining the text that was categorized and condensing the themes that emerged. This included coding text that fit into more than one category and coding text that did not fit into an outlier section. Finally, the researcher meticulously revised the categories by searching for subtopics, including contradictory views and new insights, and carefully considered emerging patterns and trends. In this process, specific quotations were selected to convey the core theme of each category. The researcher assured that identifying information, including quotations, were anonymous unless specific consents were gathered from participants that allowed the researcher to use quotations with possibly identifying information. Prior to submitting his thesis, the researcher provided an opportunity for participants to review the themes, findings, and conclusions to ensure validity and comfort around the information that would be used.

The result of this study exposed general themes around the possible effects of police brutality on individuals and communities, possible mental health effects, and the outlook of healing for those affected. Due to the limited sample size and specific geographical location, the findings of this study are not generalizable. However, the themes exposed can provide some
insight into the effects of police brutality and possible ways to facilitate healing for individuals and communities. The findings will be discussed in detail in the following chapter.
CHAPTER IV

FINDINGS

The main purpose of this exploratory research study is to investigate the impact police brutality may have on Black and Latino males’ lives, mental health and communities, along with what avenues of healing may be helpful for those impacted. In particular, this study seeks to answer the following basic question, “What are the possible mental health effects of police brutality on Black and Latino males and what are avenues of healing for those impacted?” This chapter documents the findings from 12 semi-structured individual interviews with participants who identified as community activists, advocates, or organizers and who worked with or in service of Black or Latino males who experience police brutality. The purpose of this sample was to engage participants directly involved in issues of police brutality and explore their thoughts and perceptions about potential long-term impacts of police brutality based on their work, consider the impact on communities, and explore avenues of healing that they have found to be or consider may be helpful in their community work. All participants were informed of the researchers’ chosen definition of police brutality. Its was defined as “unmerited excessive and aggressive physical, mental, and/or emotional abuse, above and beyond the law, including repetitive and unmerited contact, enacted upon by an individual or groups of individuals in law enforcement” (Mitchell, 2000, p. 2). All participants were interviewed in person and in the Bay Area of Northern California.

The interview consisted of 11 questions broken down into four sections; demographic and identifying information, exploring the effects of police brutality on individuals and communities, police brutality trends, and healing from experiences of police brutality (Please refer to Appendix A). The first section consisted mostly of closed ended questions while the last
three sections were all made up of open-ended qualitative questions. Most of the patterns emerged from the second and fourth section of questions. Specifically, participant responses solidified themes that included complex trauma, powerlessness, internalized pain, and the failed recognition of harm under questions focused on the effects of police brutality. In regards to healing, major themes focused on the utilization of healing circles, Activism/Advocacy/Justice as healing, and the need for cultural responsiveness. Data from the interviews will be presented in the following sequence: Demographic and Identifying Information, Exploring Effects the effects of Police Brutality on Individuals and Communities, Police Brutality Trends, and Healing from experiences of Police Brutality.

**Demographics and Identifying Information**

*How do you identify in terms of race or ethnicity?*

The study involved interviews from 12 individual participants. Participants were first asked, “How do you identify in terms of race or ethnicity? Eighty-three percent of participants identified themselves as people of color. Five participants identified themselves as either Black or African American. Two identified themselves as Chicano and one as Xicana. The participant who identified themselves as ‘Xicana’ specifically asked for Chicana to be spelled out as Xicana. Two participants identified themselves as White or European American. The last two participants identified themselves as Afro-Boriqua and Brown respectively. The participant who identified themselves as Afro-Boriqua was mixed-race of African and Puerto Rican descent.

*Where do you live and how long have you lived there?*

All participants were residents of the Bay Area, located in Northern California. Almost half of participants (n=5) were residents of Oakland, with a range of two to 29 years of residency and an average length of residency of just over 16 years. Three participants specifically spoke to
having been raised in Oakland. One participant was a former resident of Oakland and was now a residing in the San Jose, located in the South Bay. The other half of participants (n=6) were residents of other parts of the East Bay Area including Berkeley, El Cerrito, Alameda, Hercules, and Concord, with a range of residency between seven months and 35 years and an average residency of just over 10 years. For many participants, location of residency was not representative of the geographical location where they conducted their work. While participants located themselves in various cities across the Bay Area, 75% shared that their work revolved around Oakland. 15% of participants (n=2), located their work in Richmond and 8% (n=1) located their work in Berkeley.

*How long have you worked with issues of Police Brutality? In what capacity?*

The purpose of this section was to gather information about the range of work that participants were engaged in around this issue and to get a general sense of what had sparked their involvement. All participants worked with issues of police brutality in some form or another. Some had begun working with issues of police brutality since their childhood while others had been engaged in the work for just a few years. Length of work around issues of police brutality ranged from two years to 26 years, with a participant average of nine years engaged in this work. Capacity of work had a wide range and included community organizing around issues of police violence, providing personal or familial testimony in public spaces about experiences of police brutality, facilitating ‘know your rights’ courses, sponsoring policies specifically aimed at police violence (“felony to reduce digital evidence”), copwatching, writing/news reporting incidents of police violence, providing legal aid and direct service to survivors, working on policy changes focused on alternatives to incarceration and diversion programs, “changing the narrative when police murders happen” through social media, “first responders” that interview
and gather information after encounters happen, criminal justice and prison advocacy, providing
political education to young people impacted, holding healing circles with men and women
impacted by police violence, and working with people who lost people in custody. Participant 12
described their work with police brutality in this way:

I would say about 15 years now. I’ve been doing community organizing since 8th grade.
So for the first 10 years I did educational justice work, doing political education with
young people. A lot of the work we were doing was changing dynamics in our schools to
work to liberate our communities. Pushing military out of the schools, prevent police
departments from getting more funding to become a part of Oakland Unified School
District. Even back then I remember doing work around tryna support families and do
accountability for cops and even when a school police officer killed a young man at a
school function, which by the way that police officer is still in the force and never had
any form of police accountability.

While direct experiences of police brutality were addressed in the following question,
75% of participants shared that their work around issues of police violence was sparked by a
personal experience with police. Participant 10 noted being impacted by a loved ones experience
with police and in the criminal justice system and spoke to a specific campaign that was sparked
through the Black Lives Matter movement:

Five years (engaged in work around police brutality). Involved in criminal justice and
prison advocacy since 2011 after husband was facing criminal charges and was assaulted
by a police officer. In 2014, I did some work with the Coalition for Jail Reform to
advocate for improvements to jail conditions. Also for the California State Assembly,
worked on legislation that would have increased the time that people locked up in
California state prisons could earn off of their sentence by completing certain educational and rehabilitative programs. Now involved (with) Ella Baker Center implementing the Truth and Reinvestment Campaign. It involves four teams: Rapid response network for police brutality, investigating incidents in the community. Two: Organizers who are fighting for a local truth and reinvestment campaign, so a local divestment of funds from law enforcement, prisons, and jails and an investment in low income communities that have been hardest hit by police brutality and mass criminalization. Three: Legal support and aid, attorneys who are able to provide advice and legal support to community members. Four: Healing justice: So we want to have the teams healthy and ready to manage the trauma that they are going to encounter when they are in the field. We want to partner with traditional healers, social workers, supporting peoples healing through experiences of police brutality. This work is really traumatic, and state violence is really traumatic. This is the ‘brain-child’ of Patrice Cullors.

Two participants identified the Truth and Reinvestment Campaign as a part of their work. This was an important finding because it was the only campaign described by participants as happening on a national level aside from the Black Lives Matter movement.

Most participants reported engaging in some form of direct service with survivors of police violence. Many encompassed working with families impacted by police killings, supporting survivors of police violence, and direct work with youth in youth-based programs. Only two participants did not specifically relate their work experience to direct service and described their work as being more policy-focused. Participant six described their work involving direct service with young black men and women:
Six years (engaged in work around police brutality)…(providing) Legal aid for people caught up in the system, housing and eviction defense. Working on youth justice at RYSE community program and youth impacted by Juvenile Justice system…Alternatives to incarceration, diversion program with RPD (eight week program at RYSE)…Know your rights workshops….policy changes around youth justice…Providing direct service to youth…(currently) Youth Justice Director at youth program in Richmond. Running young women’s circle at juvenile hall.

In summary, most participants reported their work being sparked by personal experiences of police violence and most indicated they were engaged in direct service with survivors of police violence.

Effects of Police Brutality

*Please tell me a bit about your experience with police brutality? Can you share an example or two?*

The purpose of this question was to get a sense of the various forms of police brutality; the verbal, physical, mental, psychological, systemic, and institutional. The researcher made sure not to overstimulate participants when they shared experiences of police violence and allowed participants to share their experiences and its impact in ways they felt comfortable sharing. The researcher also wanted to consider the impact that these experiences may have had on participants directly as a way to build insight and transition into how they believed it could impact others.

Out of 12 participants, 10 recalled experiences of police violence that they had either experienced personally or that had been experienced by a close loved one. The other two participants referred to police violence encounters experienced by other members of the
community. Some participants recalled incidents of police violence dating from decades back while others noted experiences in the recent years. All respondents recalled some form of physical abuse incident with a police officer. This ranged from a police killing, an incident of someone being shot by police, being beat up by police, and having a gun pointed at them by an officer. Two respondents described their physical experience being so intense that it felt like a sexual assault. Participant four, who identified himself as black, put it this way:

Since a child. Ages nine to ten, the way that we were policed was excessive. Seeing police as violent figures. I remember being 23-24, I was brutalized, thrown against the car, put in handcuffs, felt like a rape experience, very violent and abusive situation. I was a calm, straight, narrow shooter, educated person, middle-class discourse. My thought was that if they are doing this to me, what are they doing to my brothers who are darker. I felt non-threatening but was still attacked.

Participant 11 shared a similar perspective on their experience of being pulled over as a teenager and having their “genitals slam chopped upward” while adding “this was a white woman, she took pleasure in it…I wanna tell you that this is some shocking, once in a lifetime thing but you talk to all the kids at the time and they all got stories like it”.

Out of 12 respondents, 11 shared about experiences of police violence that they either experienced at a young age or of experiences faced by young men or women. A few respondents reported incidents close to them that resulted in the death of a loved one who pleaded for their lives at the hands of a police officer. Participant five discussed his experience of the loss of his nephew:

My nephew was murdered by a police officer. From that experience and that pain, I was propelled to respond to it. No child or person should have to suffer that kind of pain. I
work with families that have suffered the loss of a loved one. My nephew was detained, called a “bitch ass nigga” twice, thrown to the platform floor, shot by a police officer who said he meant to pull his taser and not his gun. My nephew was unarmed and not on drugs. Officer accosted the young men, hair-pull take down on friend. The officer threw my nephew on the ground, he was being choked by officers knee. He was saying “I cant breathe, I cant breathe”. Officer “thought he had a gun”, and he shot him.

Aside from physical violence, respondents provided a wide range of other types of police violence including taunting, verbal and physical threats, falsifying police reports, harassment, wrongful arrest or detainment, “psychological hit(s)” in forms of acts of intimidation, over-policing in high schools and elementary schools, racial remarks, the victimization and criminalization of the war on drugs, no accountability for police violence, and routine pat downs and handcuffing of young men. Participant two shared being subjected to many of these experiences:

Verbal to physical to threats to harassed, physically hit by an officer. When I was 15 years old, lost my brother to the streets, officer took my bike, threw my bike on the floor, started pushing me and socked me closed fist, tried to slam me, threatened me “your little bitch ass keep on being out here ima smoke yo ass”, lied about me pulling a knife, lied in his report. Police would harass us on the street, target us. Went to the hospital three different times in one year for being beat by officer.

All respondents reported feeling that their own experiences or experiences around them were excessive. However, as stated earlier, two participants out of 12 reported not having experienced personal experiences of police brutality. One participant identified as white and the other as Black/African American. Both participants, at different parts of the interview, noted that
some officers were good while others were not. Participant eight, who identified as Black/African American, indicated that they had not experienced police violence like others due to relationships they had with officers in the department:

Police brutality shows up in a lot of different ways, it can be subtle or blatant, physical or a mental thing. I haven’t experienced it like other folks that I know. Its different with me because I have relationships with officers in RPD. There’s been physical police force against people out here in Richmond. Two young men that have been shot by police and they didn’t need to be. The school district is paying for SRO’s in schools, even in elementary schools, over policing kids is a form of brutality. Some of the SRO’s are awesome, some of them come from Richmond and others there’s a total disrespect for young people.

*What long-term effects do you think it can have on people who experience it? On communities of color that experience it?*

The purpose of this question was to explore participant’s perceptions of the mental health impact that police violence could potentially have on individuals. Additionally, the researcher was interested in exploring the specific impact that police violence could have on communities of color and how different that might be from communities that are not impacted heavily by police violence. This question provided the most information pertaining to the mental health impact on Black and Latino males. All 12 participants referenced the long-lasting effect of trauma as a possible outcome of police violence for Black and Latino males. Ninety-one percent of respondents (n=11) directly referenced “trauma”, post-traumatic stress disorder, or PTSD in their answers. Participant six described the impact of trauma as an injury that is not acknowledged:
One is the impact of the trauma: kicking in doors, guns to the head. As if kicking in a door and putting a gun to the head is not an injury. School officials are working hand in hand with the police. That trauma is not validated. The damage to the self-esteem, the trauma of wondering if you are gonna get shot by a cop.

Of the participants that addressed post-traumatic stress disorder (PTSD) as a possible reaction to police violence, some also noted that police brutality had not been recognized in society as having a post-traumatic effect. Participant seven described it in this way:

We are just beginning to focus on post-traumatic stress disorder and how it has affected our people. Police brutality is trauma. If I am traumatized, then I am constantly seeing or reliving that experience through the media or in my community. There is nothing post about it. Just like any other trauma, police brutality does leave psychological scars. It comes out as anger, a lot of the anger we see is projected. People are being abused by police in the system and they know that if I act aggressively towards the system it can crush me. So I project it towards my community and people close to me.

Aside from there being a traumatic impact, half of respondents (n=6) specifically reported that the incidents of police brutality were ongoing and that there was “nothing post about it”. Many agreed that it was difficult to even define police violence as having a posttraumatic effect because the violence and harm of police violence was ongoing. Participant 11 summarized the ongoing experience of police violence as having a “war” like effect:

Once you start talking about the big issues that stay with you longer than a day, like my cousin got killed or my house got raided last night, heavy heavy that you should feel shitty and cry about but you don’t have the room to do that and you do have the comfort with anger to let it out that way. I think it builds up that way in a community where you
have all these males that have all this anger and all these unprocessed feelings and no room to process them. And its constant right, we know this shit, yeah there’s a war in Iraq but there’s a war at home, so yeah people talk about veterans coming back with Post traumatic stress disorder as least its post man, you’re out of that, but you come back to it every day here man. You see a new RIP shirt or sweater and tagged up telephone poles with a shrine next to it on a daily basis. The police harassment is daily, the migra threats are daily, so the stress is there daily, its continuous. I think the way it impacts the community is that the boys unleash crazy anger on each other it comes lateral right and so we fight we shoot we stab we do all these things because we haven’t dealt with a lot of shit. That violence that is initiated by the state trickles down.

Trauma and persistent violence represented the most common responses for participants. Trauma was defined in various ways by participants with many acknowledging similar symptomatic reactions. Close to 60% of respondents (n=7) noted that fear was a common symptom from those that experienced police violence. Just over 40% of participants (n=5) reported anger as a reaction. Twenty-five percent of respondents (n=3) also stated that anxiety and stress were symptoms reflected in survivors of police violence. One third of respondents mentioned a general feeling of pain, anguish, and despair as a response to police brutality. An overwhelming 75% of participants (n=9) noted the power dynamic with police officers as problematic and reported feelings of powerlessness/hopelessness as common responses.

Participant one summarized the personal impact that police violence had on him and reflected many of these symptoms including the “power dynamic” as one of the most “frightening” things: Sense of fear automatically due to past experiences. My heart rate goes up when I see cops. It was because of that trauma that never got healed. Fight or flight mode when
seeing a cop. I can see people having panic attacks and anxiety attacks when seeing cops.

It's kinda like knowing they can do anything to you and there won't be any consequences, that is the scariest thing. Knowing that they can shoot you dead, choke you, beat your ass, and there won't be any consequences to it. That power dynamic is the most frightening.

In regards to the impact to the community, over 90% of respondents reported that communities of color develop a sense of mistrust in police and don't trust police to keep them safe. Some even reported that this led people to find their own ways to keep safe which often included violence. Participant seven acknowledged police mistrust and the correlation with community violence:

When you have communities that constantly witness police brutality, we have a sense that we wanna believe the police should protect us but when you witness police brutality it makes it hard for you as a community to trust law enforcement and bring them into your affairs. People are most subjected to police brutality when we call them for services. It creates a sense of total hopelessness. With Ferguson and Baltimore, already a lack of trust with law enforcement, at the end of the day people want justice. The people that are wearing the badge and doing the harm are not being held accountable for the things they have done. It creates a vacuum to where people lose trust within the system. It also creates a situation where people seek justice in their own hands. Contributes to other types of violence that we see.

However, some respondents did note more positive effects that could lead individuals and communities to engage in constructive action. Over 40% of respondents (n=5) reported possible reactions of constructively fighting back against the system or becoming more aware and
knowing more about the history of police brutality. Participant three described a possible reaction of engaging in constructive action in community instead of despair:

As with individuals, it will strengthen a community. It will make it an us vs them thing. Leaves us in an “we are our brothers keeper”, it strengthens community, people form positive bonds in supporting each other… Certainly is creates a sense of mistrust, and fear, and anger. Increases the sense of alienation. Some may react constructively and foster a positive response in organizing instead of despair.

**How do you think Police Brutality can impact an individuals sense of safety? Do you think it can have an impact on their self-esteem?**

The purpose of these questions were to focus on two specific areas of impact that the researcher felt could speak more directly to mental health. Sense of safety would speak directly to the purpose and role of police officers and how their interactions with Black and Latino males would define the safety that Black and Latino males feel. Exploring self-esteem could speak to individual changes of the self that Black and Latino males could experience based on their interactions with police.

Out of 12 participants, 11 described that survivors of police violence lose their sense of safety and begin to feel less safe around people who are supposed to protect and serve them. The single participant (six) that did not directly mention changes in an individual’s safety spoke about differences in how police officers patrol and protect more affluent parts of the community, stating “police prioritize suburbs. The gentrification in Berkeley means that neighbors of color are concerns about profiling while white neighbors are calling about people next door. Folks of color more concerned about automatic gunfire while white suburban people
are concerned about people taking cans out of their garbage.” One participant described the loss of individual safety as a result of police brutality as having a lasting impact, even sight of a police uniform providing reminders of danger. Participant eight described the impact in this way:

One example of youth not feeling safe is through a workshop we did with some of the SRO’s (School Resource Officers, police officers at schools), it was to create a space for youth to build relationships with some of the SRO’s. What was interesting was that we did like 6 different sessions with team building things, they felt more comfortable talking to each other. We asked police officers not to come in uniform. This one particular time this one SRO, he didn’t have time to change or I don’t know, he came into the room and he just completely changed. The atmosphere changed because of the uniform. The power in the room changed. In plainclothes they started to see them, you are just like me. But in uniform they saw them as not like me and that you are here to hurt me.

Out of 11 participants who acknowledged a loss of safety for individuals impacted by police brutality, one participant (three) did report that it is not a complete loss of safety and mistrust in all officers and that “they realize that its not all of the police, its some, but the system protects them anyways.”

Two participants went on to add that the loss of safety led to a mistrust in police officers and that the mistrust in police could lead to Black and Latino males not trusting other people in their community. Participant four stated, “Options are more limited, once you’ve had really bad interactions with the police you have a hard time trusting other people…they feel alone, they cant access the community.” Several respondents noted that a common reaction to feeling a loss of safety by those who are supposed to protect and serve you is to find extra-legal ways to stay
safe, including violence. Close to 60% of respondents (n=7) reported violence or potential criminal behaviors as reactions to not feeling safe. Participant nine reported racial lines between feeling safe and unsafe, and that those feelings and experiences may “induce criminality”:

I mean the pigs are supposed to protect you and they cant do that. I mean white people get it, I think people with money get it. I think that feeling safe is essential to progress. I mean if you don’t feel safe, how are you moving forward how are you writing a thesis you know what im saying…It begins to make you feel like you don’t matter. And that type of mentally might induce the behaviors that cause criminality. If I don’t give a fuck and you got that banana and I want that shit you know what Im saying, When no one protects you or no one can protect you, knowing that my father cant protect you from that beast, my brother cant protect me from that beast, its like it produces an I don’t give a fuck’ness.

When asked about possible impact to self-esteem, 100% of participants (n=12) reported that police violence had a negative impact on how Black and Latino males began to view themselves. All 12 participants generally responded with possible reactions of devaluing themselves, feeling like their lives don’t matter, dehumanizing themselves, and internalizing negative identities. Participant 12 reported that the feeling of worthlessness leads to a “self-fulfilling prophecy”:

I think that there’s a sense of worthlessness that comes about when you feel that your life doesn’t matter. And you see that a system that’s supposed to protect you is actually ready and willing to take your life away. There’s a sense of worthlessness. I feel like we see it everyday. I work at a high school for seven years, I think when our young people know
that their options are limited that they have either a conscious or subconscious understanding of the fact that systematically they are not given any work, our young people begin to make choices based on that. The idea of going to college is not something that they often strive for because of their sense of hopelessness. Selling drugs is something that becomes easy because “that’s what were supposed to do anyways” this self fulfilling prophecy that starts happening for our young folks when they start to internalize the ways that the system values us or devalues us. I feel like a lot of people criminalize folks that engage in gangs or carry guns but that does become your avenue of protection and it also gives you a sense of im gonna die so its ok. Shooting someone, killing someone, I feel like it numbs someone to that impact.

Out of 12 participants, eight participants shared the same notion that Black and Latino males begin to internalize and begin to take on negative identities placed on them and experience a transformation of the self. All eight participants described that survivors move to perceive themselves as criminals, bad people, or of deserving of the police violence that they experience. Participant 10 described these identity developments in their response:

I think in terms of self-esteem, a lot of victims of police violence kind of believe that they deserve it. Maybe not consciously but subconsciously believe the messages that somebody like them is criminal, that somebody like them is illegal or a gang member or any of the other coded words that we used to criminalize people of color and when you hear those messages enough you believe them. So if you get arrested or if you get harassed by the police you kind of believe that you are deserving of it.
Two respondents, participant four and 11 included in their response that the negative identities are further engrained in Black or Latino males’ perceptions of themselves when police find a way to justify their actions and are not held accountably. Participant 12 noted, “…the police justifies itself by that, so they paint a picture of them reacting to us on a sorta savage ways right when in reality our savage ways are us reacting to them to this to this constant state of this.”

However, not all participants felt survivors of police violence enter into extra-legal ways of assuring safety or fall into negative perceptions of themselves. Twenty-five percent of participants (n=3) felt that survivors of police violence who experience a loss of safety and loss of self can also be catapulted into ways to build community with others and foster independent forms of safety. Participant five described, “The safety now becomes gravitating towards a body of folks that think like them. It becomes obvious when we see black folks, Asians, and Latinos chaining themselves together to shut down the bay bridge. Doing it together creates a safer environment. There’s a goodness coming out of this and that’s understanding how good unity is.”

**Trends of Police Violence**

*Since you began working with police brutality, have things gotten better, worse, or stayed about the same?*

This question was posed for the purpose of identifying the trends in police violence and comparing current issues of police violence with the past. The researcher also utilized this question to ponder how important this issue felt to other people at the moment and what changes, if any, had occurred to challenge this issue.

Participants shared mixed feelings about whether things were better, worse, or had stayed the same. Out of 12 respondents, just over 40% (n=5) felt that police brutality continued to be the
same, 25% (n=3) felt that it had gotten worse, 25% (n=3) felt that it had gotten both better and worse and 8% (n=1) felt that things had gotten better. Overall, just over 65% (n=8) of respondents felt that things had not gotten significantly better. All eight of those respondents either felt that police brutality continued to happen at the same rate, mentioned a long-standing continuous police culture, highlighted mass incarceration and militarization, and a sensationalizing of black and brown people in the media that justifies police violence. Participant seven spoke to police culture and connected police violence to issues of gentrification in communities of color:

Things are becoming worse. I see us as being colonized here in America. The US cavalry, their job was to protect the settlers. What you are seeing now is people resettling, the job is to continue to protect the settlers. Anything seen as a threat to settlers comes with forceful policing. So I think that rates of police brutality and police killings have a direct correlation with gentrification.

Of those who reported that things had gotten better in some way (n=4), they reported that incidents of police violence had changed with them personally, policing had changed in certain communities, or that issues of police violence had become more visible to people across the country. Overall, all 12 participant did not report national changes to incidents police violence.

While some had mixed feelings about current trends of police violence, most (n=9) participants directly reported that there had been more awareness and visibility of issues of police violence across the country. Respondents addressed this awareness as people feeling more “righteous in their anger”, people now making links to police brutality through being able to record on incidents on video, police being required to wear body cameras in some departments, black people becoming more aware of the prevalence of racism, more “riots” in the streets, and
the development of the Black Lives Matter movement. Some participants felt that this was leading people to “fight back” and resist, become more critical of the system, and was finding more supporters of the movement for police accountability. Participant 10 spoke to many of these changes in their response:

I think there’s a lot more visibility now then there was before with the birth of smartphones and everybody recording the police all the time. With the birth of the Black Lives Matter hashtag, making things a lot more visible. More people are aware of things that low-income folks of color have been aware of our whole entire lives. There are reforms being recommended such as having body cameras for the police and more police transparency and accountability but I think were going to hit a wall if we continue to focus on how we make the police better versus how do we create safe communities outside of relying so heavily on the police.

However, of those nine participants, almost half (n=4) felt that as a result of more awareness there would be an opposite effect of more state repression and divisive tactics. All four who shared this sentiment felt that it had led to “institutional forces that pit us against each other”, more state repression, changes in legislation allowing officers more freedom, and “more defensive white people”. Participant three generally highlighted the increase in awareness with the counter effect of state repression in their response:

The big thing that has changed is that police brutality has been going on for a long time but our awareness has changed because of changes in recording. People are recording more. Things are more and more militarized. The collective denial is being dispelled. Police brutality incidents are roughly the same but people are giving up their denial. The hidden power structure is gonna fight back, awareness leads to more state repression.
Healing

What do you think are the main barriers to healing for men of color who experience police brutality?

Considering the possible mental health effects that Black and Latino males can incur as a result of incidents of police violence, the researcher posed this question to explore what were some possible things that were getting in the way of healing. Specifically, the researcher was interested in exploring what made it so difficult for males of color to heal from police violence in order to provide insight into how to better engage with Black and Latino males around healing.

Half of participants recognized the socialization that men experience in this country and feeling that they cannot and should not talk about their feelings as a main barrier for healing. All six respondents articulated this in various ways including: men not being taught how to heal and being told to “suck it up”, feeling like it will bring more issues to you as a male and not finding seeing a network of other males talking about these issues, “the nature of being male makes you feel like you cant reach out and get that community”, society not being supportive of men being vulnerable with their feelings, and “patriarchy” not allowing men to talk about their feelings “ever”. Participant four articulated that ‘maleness’ can mean that men may not be aware that they have experienced a trauma or multiple traumas because they internalize their pain:

Dealing with maleness is very stereotypical, what it means to be a man. Whether or not you are aware that you have a trauma is inhibited. My comrads don’t want to call themselves victims, that off the top is a barrier. Pride, machismo, internalized oppression. Men don’t have those problems, men have to bear it alone. Its not supposed to come out, not supposed to cry about it. The nature of being a male makes you feel like you cant reach out and get that community.
Participants also felt that men of color did not have the proper support and community to address the harms they have experienced. In fact, 75% of participants felt that Black and Latino males did not have the adequate support or tools to address these issues. Of those nine participants, over 65% (n=6) felt that Black and Latino males were faced with culturally incompetent healing. Participant responses included having lost the tools to heal due to colonialism, feeling “intimidated by law enforcement” and not having a lot of people talking about these issues, not finding support from others around their experiences and feeling that no one else will understand, not having culturally competent healers and facilitators, getting help by mostly “white” people who don’t understand the pain that is felt, stigma around mental health and poor access to mental health treatment, having someone who is “culturally competent” or “at least understands” what people might feel, the disruption in the family unit through incarceration, police violence, and deportation, and western forms of healing that promote individualism instead of community. Participant one shared about the effect of colonialism and not having the cultural tools to heal: “Just having the tools to heal are hard because we’ve lost them through colonialism. Our way of healing is causing damage, our coping mechanisms are self-destructive. We don’t know how to heal, we haven’t been taught how to heal.” Participant 12 added to this notion of lost tools through colonialism and the incompetency of western forms of traditional healing that focused on individualism:

I think another barrier is there’s a lot more general exposure to forms of healing and a lot of those forms of healing are very western, very anglo, and don’t fit with our folks and even those forms of healing are definitely not accessible to our folks. And I think that the western forms of healing often promote a sense of individualism and a sense of putting things behind you but not necessarily being able to become empowered through your
ability to survive a situation, there’s not a form of resistance that comes out of your experience and I think that without resisting your current condition, you’re constantly victimized. I think that because of colonization, our young men of color don’t allow themselves to feel, don’t feel that it’s acceptable for them. We see a lot of numbness, we see a lot of anger, we see a lot of our young folks kinda shutting down or turning to ways of coping that are self-harming but feelings are taboo in many of our cultures post colonization so you can’t heal without actually feeling.

One third of participants (n=4) recognized that justice and accountability was one of the main barriers to healing for Black and Latino males. Many felt that without justice, the harm was not recognized and continued to be justified, making it more difficult for men of color to heal.

Participant six shared, “The fact that they are denied any form of judicial satisfaction is a problem. Without closure you walk out like an open wound.” Adding to the lack of police accountability, participant seven agreed that healing could not happen until the power differential shifted and police were found accountable for their actions:

If that person who is wearing that badge, if he/she is not being held accountable, there is no healing. Healing begins with justice. Oscar Grant spent more time in prison for a minor drug offence than the officer did who killed him. Real police community dialogue is a need. If there’s no dialogue on how these issues are being handled, on changing the way police police communities of color, there will be no healing.

One respondent (12) emphasized a previously mentioned theme of repetitive harm. In their response, this participant recognized that “in order to heal the hurt has to stop happening”.

Participant two and ten also recognized something that had not been shared by most respondents but that presented as an important idea. Both participants recognized an “anti-snitching” code
and fear of speaking out against police that created challenges for Black and Latino males who may be seeking to address incidents of police violence. Participant two recognized this fear in their personal experience with police: “As my case against police came up, I started seeing more harassment. Being called spick, racist terms…paranoia that if you talk about it, they could put a target on you. Difficulty reporting it because it’s very stressful. Feeling intimidated by law enforcement.”

**What are some of the most important things to keep in mind when thinking about the healing process?**

With healing in mind, the researcher was interested in exploring specific needs for Black and Latino males in order to help them heal. This question was posed to build on and explore the other side of barriers and help social workers and other service providers understand what people saw as needs for healing in order to support a positive healing process.

Over 80% of participants (n=10) shared that finding some form of community to hear you and support you was one of the most important things for the healing process. All of those participants shared that healing could not happen alone. Participants felt that developing relationships and finding support from people who could understand and who could help you tell your story was essential to the healing process. Responses about the need for community included “holding circle” and have the support of your family and community, having others who have been through similar things, finding as much solidarity as you can, people who have faced the same challenges and group healing circles, telling your story to others that in turn “help you stay more alive”, finding people that they can talk to about it and that create a “safe environment”, having “different supports and different folks” and tell our stories more, the use of community support groups and traditional healing practices, healing in community through
cultural healing circles and drumming circles, and not seeing your situation as just and individual situation. Participant 11 highlighted this theme of the need to heal in community in their response:

We take it for granted the amount of stability family and community that the human being requires especially in times of crisis. We often have these approaches to healing that assume that people have all those things in place and then you can just worry about the counseling piece. So what about when none of those things in place, can you isolate the counseling piece and you’ll walk through this and do these activities and you’ll be all better. No. No. A huge part of how we thrive is in community in connection. Its more about being disconnected than it is about being connected to a chemical drug. So we take it for granted that environment piece, we heal from being in a healthy community. The family, the community, the outings, the social network, the whatever they need that gives them the room to have all those things in place and worry about the thing they gotta work on. If you aint got those then that’s a huge part of the healing and you almost cant isolate.

Of those who shared about the need for community to heal (n=9), almost half (n=4) recognized cultural practices or cultural competency as one of the most important things for healing. Responses included holding cultural healing circles, having culturally competent healers, traditional practices like “Mayan and Aztec spiritual practices” and “pratices that come from west Africa”, and “drumming circles…spiritual medicine…healing circles…chanting…” (Black and Brown folks) had cultural relevant practices that are a huge part of expressing pain”. Participant 10 shared their views on the need for cultural practices in order for Black and Latino males to reconnect with their roots:
I think there are community support groups that are available...traditional healing practices, like Mayan and Aztec spiritual practices...traditional practices that come from West Africa...I think it really helps people be able to connect with their roots.

Similarly, as a theme highlighted earlier, Participant four recognized that cultural competent healers who were aware of Black and Brown culture were important for positive healing:

Being culturally competent, culturally competent facilitators and healers. Culturally competent...that means people who have similar shared life experience and who are aware of our young men’s youth culture, of their black culture, of their brown culture. People who have faced the same challenges.

Of those who did not share the same thoughts about the need for community (n=2), participant six reiterated that it was important for the harm of police violence to stop in order for the healing process to begin and specifically shared, “If you are constantly revictimized, you are not getting in the process of healing. Not when I can tell the same story that my father told me, or that my grandfather told me or that his father told him. When there is no different story there is not a window for the healing process.” Participant nine also uniquely shared about the importance of self-love and creating a culture of self-love among Black and Latino men as part of the healing process:

I almost love what’s happening in culture right not, having this shift of I fuckin’ love me that’s whats up...So I think that keeping this whole like self-love, keeping that shit rollin would be awesome....if you can just keep that pushin’ and push that fuck yeah im brown and im proud and what. I think it has to be a cultural shift. How someone feels about themselves shows in how they carry themselves and when they feel good about
themselves they buck up against repression in a different angle, they buck up against it with some of that powerlessness because they come from a place of I love me and this is why I resist. And im not resisting cuz I hate you, Im resisting for self-preservation.

While no other respondent directly reflected the need for self-love, participant one also recognized the importance of building oneself up by learning about oneself and ones history, including “learning about colonialism”, as a way to “get the strength to look into the future”.

**What would you say are some avenues of healing for survivors of police abuse?**

The purpose of this question was to directly explore ways that Black and Latino males could heal from police violence. The researcher was interested in exploring that various ways that Black and Latino males could access healing, including healing avenues that had been helpful for participants who had been impacted as well as by avenues that they had seen as helpful for survivors.

Two main themes emerged out of this question: healing circles/groups and activism as a mechanism for healing. Seventy-five percent of respondents (n=9) described the engagement in advocacy, organizing, activism, or seeking justice in some form as having healing properties. Seventy-five percent of all respondents (n=9) also felt that healing circles or support groups were helpful avenues of healing for survivors of police violence. Out of the 12 participants, half (n=6) shared about the need for both in their responses to avenues for healing.

Of those (n=9) who discussed engagement in advocacy, organizing, activism or seeking justice as an avenue for healing, some described their own experience as healing while others described the experience of men they had worked with who found activism as healing. Out of nine, four shared personal experiences where they found activism as healing. Participant two described how advocacy provided a “boost” and was important to their healing:
Little acts of advocacy boost me up. Learning about the panthers and the brown berets fighting the system. There’s excitement with going against the police, seeing that it wasn’t just me felt amazed. Hearing positive feedback from people and getting encouragement about your advocacy. Since I started organizing, folks are coming around. Feels good to get all this good feedback from community. Organizing, getting laced up about our culture and our rights can be healing.

The other five participants described recognizing how activism was helpful to Black and Latino survivors that they had worked with. Participant 12 shared their realization of how powerful the work could be when people are able to seek justice and keep their loved ones alive:

For me the most memorable kind of cases has been when I see families start to organize and feel the power in the ability to bring others into understanding of the conditions and understanding of the need for change. You know I’ve gotten the opportunity to work with Oscar Grant’s family, with Alex Nieto’s family, with Sean Owen’s family and one of the things that they’ve said is their ability to keep their loves ones alive through their work is what keeps them going and gives them strength. And the healing process is long and is hard to happen when yours still experiencing the conditions and are living them daily but I feel like it walks you closer when you’re able to feel like a death is not in vain and you’re able to allow someone to live on through the changes and carry on their legacy.

While most recognized the healing properties of engaging in activism, several participants acknowledged that one could become traumatized by the work and that it could not happen without taking care of oneself. One third of participants felt that engaging in activism could cause someone to experience or re-experience trauma and that it was important to engage
in other ways to care for oneself. Participant six described their own experience, reactions, and the importance of holding two different identities in their life:

For some people its very healing to be in the work, do outreach, talk to the media. The good news is I am a school teacher, If I was only doing this, I would feel burnout.

There’s the feeling of “theres nothing I can do for you” my temperature rises, we just get mad. Sometimes I wonder if I have some vicarious trauma from some of it. Hearing new horrible situations. The other thing is seeing young people taking it up and demonstrations, makes me feel like I am not crazy.

Related to this notion of finding various ways to heal, half of all participants felt that self-care or engagement in healing circles had to happen in conjunction with advocacy. Some identified the joining of a community and supportive network happening before or during the engagement in activism. Others described the need to heal with others on a more personal level before activism could happen. Participant 11 shared the “power” that comes from first holding and sitting in the pain collectively that then transforms into action:

We start with the healing, when they start to see their collective pain, and they hold it together, now they feel like taking collective action, now they feel like since I aint just by myself staring at this system, what can we do together. But we gotta cry together first, we gotta feel that pain and love of connection before taking collective action. Once theyre on that common ground, now we can go tear some shit up and feel powerful doing that. Cuz we went from isolated, to connected, to fighting together. When I talk about healing, I like to say we are in the business of trying to transform pain into power. You gotta sit with the pain first, you gotta name it, feel it, do a little healing together, then you start to realize theres some power in this.
As stated earlier, nine out of 12 participants distinguished healing circles as a way to access healing for Black and Latino males impacted by police violence. While participants had different ways of describing healing circles including “healing circle”, having “other people that want to help them tell their story”, circle, support group, community circle, men’s group, young men’s group, sharing collective pain, healing in community and sweat lodges, all shared a similar description of healing together. Participant seven described the use of a young men’s group in this way:

There’s a young men’s group focusing on violence and also what they experience with police. The group creates an opportunity for young men that don’t necessary get a chance to talk about what’s going on in a safe space to talk about it. I think a lot of times with young men of color, there’s what a man is supposed to be like and a man doesn’t talk about their feelings and they have to man up and they have to be hard. So I think that it’s a good safe space where they can talk about what they want without having to be hard.

Participant one shared what a cultural healing circle could look like and what the outcome was like:

Actually identifying that trauma that happened to you. Sitting in circle. Circle process is folks sitting in circle with altar, talking piece, you express yourself, how you are feeling, you have to be vulnerable, you have to talk about what scares you. Have to have people you trust in circle. At the end of the circle you come with a resolve, maybe exploring healthier outlets, circles were a part of life through pre-colonial era, this was not taught to us.

Participant five discussed what the use of a healing circle could look like with a large community of people impacted by police violence:
We create our own healing circles…community circles where families become embraced by the community. One time I had a big event where I had Eric Garner’s mother, Tamir Rices’ mother, Sean Bells’ mother, Sandra Blands’ mother, Oscar Grants’ mother, to help Gwendolyn Woods, Mario Woods’ mother, feel empowerment. She saw some fire in these mothers that helped her understand that though its painful, you have that fire in you.

While healing circles and activism were solidified themes from participants, several participants also articulated other avenues that included individual therapy, using media to express oneself, having a spiritual practice, learning about ancestral history and culture, finding ways to engage in self-care, and simply finding ways to express oneself.

*Can mental health services for those who experience police abuse be part of the healing process? (If so, what factors can help those providing mental health services be more effective)*

*If not, what are some barriers that you believe make them less effective)*

This question was posed in order to explore what was effective or not effective with mental health services when they are provided to Black and Latino males. Considering that the mental health system in the U.S. is largely focused on short-term individual treatment, the researcher sought to explore if it could be an avenue for healing and if there were things that could be changed to make service delivery and practice more effective.

Out of 12 participants, seven felt that mental health services had not been helpful, four felt that mental health services could be helpful, and one had mixed feelings about whether they were helpful or not. While there were mixed reactions to mental health services being helpful, all participants noticed barriers that needed to be addressed. The three most common barriers from respondents were that they were not personal enough and tended to individualize situations, that they did not recognize the trauma of police violence, and that practitioners and service providers
were not culturally competent. Overall, 100% of responses recognized cultural responsiveness and awareness of issues affecting people of color as needs to be addressed, and over half of participants felt mental health services had not been helpful. Participant four shared their insight about young black men not trusting mental health professionals due in part to them not being culturally competent and did not reflect their background:

Real sense that mental health therapy doesn’t work. Young black men think that it doesn’t work. People who don’t look and act like them. Don’t have the background and experiences that they have. Mostly white and upper class. Young men feel that mental health care professionals are not there to help you, they’re there to get paid, numbers, funding. We want people coming out from reentry to provide therapy because they are culturally competent. When the police means trauma to you, why in the fuck would you turn and get help from those oppressors. The police and the therapist look more alike than me and my comrad, me and my homies. The mental health care professional speaks in this middle class discourse.

Other participants also spoke of the misattunement of trauma and not being aware of issues faced by people of color. Participant six shared that “the counselors don’t validate the trauma of watching someone get killed by police”. Participant seven added by sharing that the psychological impact of police violence is not validated:

You have to understand and believe that negative encounters with police have a negative impact. It adds to the daily trauma, trauma upon trauma, never ending cycle. Mental health tends to focus on the most severe, but PTSD is not recognized as having this great impact on peoples ability to function. One does not have to be physical abused to go through that cycle of trauma, it’s the psychological damage too.
However, one third (n=4) of respondents felt that people needed mental health services and that they could be helpful for survivors of police violence. Respondents’ feedback about the usefulness of mental health services included: many survivors of police violence are suffering from mental health issues and they need to be responded to by mental health providers instead of police officers, that mental health providers can help individuals cope with trauma and can help individuals challenge police brutality, mental health services provide people with “another outlet to talk through things with somebody”, and “definitely an advocate for therapists…felt privileged to be able to fuck with a sister you know what I mean because I didn’t have to explain certain things to her.” Participant three described their views of how mental health services could be helpful and what could be helpful about them:

I certainly think they can. The type of mental health service offered is important. If it is just helping the individual cope with trauma, it is a small good. The best mental health services would be the ones that foster and support the sense of community and the sense of working together with others to prevent future police brutality. The ones that work to challenge police brutality.

Participant 12, who expressed mixed feelings about mental health services, also agreed with participant three in that mental health services had to find a way to “empower” individuals and support them in “(having) an avenue to change current conditions.

Nonetheless, 75% of those respondents also added that what had been or could be helpful was to have mental health providers who were culturally competent or who were of color. Participants acknowledged that there was more understanding when therapists were of color or when they were more culturally responsive. Participant nine described their experience with
mental health providers from different racial and gendered backgrounds and how important a black female therapist was for their healing:

I’ve seen a black male therapist, ive seen a female therapist and ive seen a white male therapist and it was just a different type of identification I got with a black female therapist. And they rarely exist, I felt privileged to be able to fuck with a sister you know what I mean because I didn’t have to explain certain things to her. Whereas if I had to talk to white therapist then I have to explain walking down the street and feeling like people are afraid of me. There are just certain true that are just there. Something I don’t have to explain to someone who I look like or who has a shared experience.

While most people recommended cultural competency, being aware of issues pertaining to people of color, building ways to empower, and having more practitioners of color, one participant did describe a way that mental health providers could better “adapt” to working with populations of color. Participant eight discussed that knowing how to “code switch” is something that could be helpful: “I think it helps when we know how to code switch with young people. Code switch, its not about selling out, but I know how to adapt my message for whatever audience I am around. It’s adapting to that certain atmosphere.”

Summary

This chapter presented the findings from 11 questions posed to 12 individual participants who identified themselves as organizers, activists, or advocates and who worked with or in service for Black and Latino Males. Significant findings were mostly derived from questions in the second section of the interview focused on the Effects of Police Brutality and the fourth section of the interview focused on Healing. Under the section of the Effects of Police Brutality, respondents solidified themes of repetitive trauma, powerlessness/hopelessness, the development
of negative self-identities, and loss of safety and distrust in police. Under Healing, respondents’ major themes were the problems associated with males being socialized to not talk about their feelings, the misattunement of trauma, the need for culturally responsive practitioners and providers of color, the need for healing circles, and activism as a form of healing. The following chapter will explore the interpretations of these themes and offer more in depth reflection of these findings. Additionally, the implications and limitations of the study will also be addressed. Finally, suggestions for future research will be offered.
CHAPTER V

DISCUSSION

The main objective of this qualitative research study was to explore the mental health impact of police brutality on Black and Latino males and their communities while also exploring avenues for healing. The overarching question posed in this study was, “What is the potential mental health effect of police brutality on Black and Latino males and what are avenues for healing for those affected? The findings from participants’ responses to this question were organized into six major themes within two main sections. Under the effects of police brutality on Black and Latino males, they include that police brutality had the effect of Relentless and Invisibilized Trauma, a sense of Powerlessness felt by Black and Latino males who experience it, and the effect of Internalized Pain and Masculinity. Within Healing from Police Violence, themes include the utilization of Healing Circles as supportive for Black and Latino males, Resistance as an avenue for healing, and the need for Culturally Syntonic Healing for Black and Latino men who survive police violence. Overall, the findings demonstrated that there are significant potential mental health effects that may be experienced by Black and Latino males who are impacted by police violence along with healing avenues and needs specific to Black and Latino males. While some findings were reflective of the literature that was explored, additional potential impacts, experiences, and needs produced through the interview process will be discussed in this chapter.

The researcher will focus on discussing in depth the major findings that were articulated in the previous chapter. The researcher will present this chapter in the following order: 1) Key findings will be presented and connections will be made to where they apply with literature, 2) The researcher will discuss implications for social work practice and how social workers can use
these findings to inform their work with survivors of police violence, 3) Limitations of this study will be attended to, 4) Recommendations for future research in the area of Police Brutality and how it impacts Black and Latino males and communities of color will be addressed. The researcher will first present the key findings under the effects of police brutality by first discussing the effect of Relentless and Invisibilized Trauma, followed by Powerlessness, and then Internalized Pain of Masculinity. The researcher will then discuss key findings under healing by first presenting Healing Circles, followed by Resistance, and by last discussing Culturally Syntonic Healing before moving into implications, limitations and recommendations.

Relentless and Invisibilized Trauma

A major finding of this study was that most participants saw the effect of police brutality as not only traumatic but as constantly traumatizing for many Black and Latino males. All 12 participants referenced the long-lasting effect of trauma as a possible outcome of police violence for Black and Latino males. Trauma experienced by survivors of police brutality was defined by participants as resulting in anger, fear, pain, despair, anguish, stress, anxiety and also connected with unhealthy coping mechanisms such as substance abuse, violence, and internalization of anger. These symptoms were described as resulting from various forms of police violence including physical assaults, police killings, verbal threats, ‘psychological hits’ of intimidation, hypervigilant policing in communities, and the power difference noticed in interactions between police and citizens.

The findings are in line with literature explored that suggests that Blacks and Latinos were disproportionately impacted by different forms of police violence. Studies suggested that Blacks and Latinos were more likely to experience use of force based on total population with
more than 70% Blacks and Latinos surveyed feeling that the threat or use of force was excessive (Eith and Durose, 2011). Another significant factor is that both African American and Latino men are victims of police killings at higher rates than that of any other race. African Americans, accounting for 13 percent of the population, are victims in 26 percent of police shootings and are killed by law enforcement at 2.8 times the rate of white non-Latinos (Males, 2014). Latinos are victimized by police killings at a level 30 percent above average and 1.9 times the rate of White non-Latinos (Males, 2014). Police killings of Black and Latino males and the escalating trends in the US can also have a reverberating traumatic effect on communities who witness the violence. The post-traumatic effects suggested by participants is linked with studies that have shown that people who witness killings or murders in public may display symptoms of Post-Traumatic Stress Disorder (PTSD) (Elklit and Kurdahl, 2013).

Latinos and Blacks are also hyper-policed and incarcerated at higher rates than any other racial and ethnic group in the US. In the age range with the highest imprisonment rates for males, ages 25 to 39, literature explored suggests that black males were imprisoned at rates at least 2.5 times greater than Hispanic males and 6 times greater than white males (Carson, 2015). Also, ninety percent of those admitted into prison for drug related offense in many states were black or Latino (Alexander, 2012). This high rate of disproportionality is reflective of the different forms of police brutality that Black and Latino men encounter and that participants described in their responses.

The overwhelming predictability of trauma from respondents was also reflective of a study conducted by Geller, Fagan, Tyler, and Bruce (2014) that determined in a study of mostly non-white men that participants who reported more police contact also reported more trauma and anxiety symptoms. Anxiety symptoms were related to the number of times the young men were
stopped and how they perceived the encounter (Geller et al. 2014). The study also concluded that stop intrusion was a significant predictor of PTSD among these youth, finding that more invasive stops predicted higher levels of trauma and anxiety (Geller et al. 2014). Almost all participants of this study (11) directly referenced either trauma, post-traumatic stress disorder, or PTSD in their responses. Findings and literature correlate to indicate that Black and Latino males who have ongoing contact with police have a high likelihood of PTSD and anxiety symptoms.

One differing factor was that half of participants related that the traumas experienced by Black and Latino men were not “post” but ongoing in nature. Men of color are experiencing traumatic stress at a higher dose due to the compounding of trauma that they experience by various forms of police violence. One can argue that these traumas can be passed on intergenerationally when individuals, families, and communities of color are able to tell the same stories and share similar experiences of police violence. The literature is rich with information that demonstrates police violence has been present since the emersion of slave patrols in the 1700s (Archbold, 2012). One can easily look at the literature and point to slavery, the jim crow era, the zoot suit era, the anti-Chicano movement in the 1940’s, anti-immigration and deportation policies, the war on drugs, and current trends of police killings as indications of violent trends towards Blacks and Latinos. Several authors suggest that it is likely that violent acts from police towards Blacks, (and likely Latinos as well), developed and intensified feelings of fear, stress, low morale, and low self-esteem and may have translated into intergenerational effects (Anderson, 2013; Sawyer, Major, Casad, Townsend & Mendes, 2012, BraveHeart and Debruyn, 1998). Nelson (2001) complements the mental health impacts articulated by participants in this study by stating, “Fear, indifference, paranoia, passivity, alienation, and violence are a few of the byproducts of living in a society in which we are the victims of, or silent partners in, abusive,
brutal, and racists behavior by the police” (p. 15). This study and the literature combined largely suggest that Black and Latino males who experience police brutality are very likely to suffer lasting traumatic effects especially for those who have relentless life experiences of police violence.

One area that surfaced in this study but was not reflected in the literature review was the misrecognition of or invisibilization of trauma that is suffered by survivors of police brutality. Several respondents declared that police brutality had not been recognized by the larger society as having a traumatic or post-traumatic effect. This happens in part when the experiences of Black and Latino men are largely discredited by police officers, police departments, and the criminal justice system who fail to recognize and hold accountable the actions of police officers. Statistics show that only eight percent of the total complaints against police were sustained, meaning there was sufficient evidence to justify disciplinary action against the officers (Hickman, 2006). Furthermore, most officers who perpetrate police killings are not held accountable for their actions and justice is overwhelmingly denied. Literature demonstrates that when an officer and victim have conflicting reports of use of force and no witnesses were present, the officer’s version usually becomes the official one (Alpert, 2015). In several cases across the country including that of Michael Brown, Eric Garner, and Alex Nieto, the officer’s version also holds true even when witnesses are present who suggest otherwise. This sends several damaging messages; that the victim is deserving of the harm, that Black and Latino lives don’t matter, and that police officers and the justice system have the overpowering control of defining the narrative and discrediting the harm that is caused. The relentless and invisibilized trauma is then normalized when individuals, communities, and society becomes numb to ongoing incidents of police violence where officers, police departments, and the system as a
Powerlessness

Closely related to the impact of trauma was the significant loss of power or feeling of powerlessness by survivors of police brutality. Seventy-five percent of participants (n=9) noted the power dynamic with police officers as problematic and reported feelings of powerlessness/hopelessness as common responses. While ‘powerlessness’ was not directly explored in the literature review, related literature did fall in line with the notion that police brutality works in ways in which people do not have control over the narrative surrounding their encounters with police or the perceptions placed on them, where historically we have seen police powers expanded and constitutional civil liberties have been undermined, and where citizens drastically see their self-determination impacted by police violence and find little recourse in a system that accepts and justifies the acts of social control enacted by police officers.

Studies exploring perceptions of police noted that black respondents expressed hopelessness regarding police stops and physically intrusive searches because they felt that officers would never see them as anything other than symbolic assailants even when engaged in entirely lawful activity (Brunson and Weitzer, 2008). This caricaturization of Black people as symbolic assailants is nothing new and has been widely utilized as a way to explain police brutality and use of deadly force (Brunson and Miller, 2006; Brunson and Weitzer, 2008; Chaney and Robertson, 2013). Latinos face similar stereotypical caricaturizations as ‘gang members’ and illegal immigrants and are targeted in similar ways as African Americans (Hagan, Payne & Shedd, 2005). Literature shows that laws have been passed allowing police to specifically target Latinos such as being able to arrest anyone suspected of being a gang member, allowing legally unjustified stop and frisk practices in Mexican American neighborhoods, and unlawful
questioning and detainment of Latino immigrants (Hagan, Shedd, and Payne 2005, Holmes, 1998). Literature has also demonstrated unfavorable views toward police held by Latinos along with concerns about the amount of time it takes officers to respond to calls, and routine disrespect from law enforcement during involuntary encounters (Solis, Portillos, Brunson 2009). Literature backed up this notion of powerlessness by suggesting that Latino youth are hesitant to provide information to police and are fearful of becoming victims of crime due to negative treatment from officers. Black and Latino perceptions of police widely suggest this notion that it is not people themselves who have the power to control their own lives but instead police officers.

Most participants highlighted the reality that the power dynamic inherent in police and citizen interactions was frightening. There was a symbolic belief of “I don’t matter” noticed by the researcher when it came to participant responses around interactions between police and Black and Latino males. Participants recorded this sense of ‘powerlessness’ as happening in different ways. One participant put it as “At the risk of sounding cliché, that like I don’t matter…This person has some kind of ultimate authority and I have to obey no matter what…Because there could be consequences, violence, death, and worse than that, incarceration.” Another participant shared, “If rape is a crime of power, the treatment of men of color is meant to have the same impact. Meant to disempower and degrade and meant to take your spirit away… If you suck it up, it does some damage to your spirit. Feels like a defeat.” The police’s ability to take a life away without consequences was addressed by several respondents, one stating, “We have multiple young people at our school whose family members have been killed by police officers, and you don’t function the same way and when you know that a system that is more powerful is completely able to take away the life of somebody unjustly and have no
recourse or repercussion it creates a sense of powerlessness.” Studies focused on the impact of power on humanity have indicated that powerful individuals show a greater number of human traits, such as agency and cognitive flexibility, while those who are powerless or negatively impacted by people in power experience the consequence of self-dehumanization (Yang, Jin, He, Fan, Zhu, 2015). In fact one participant recognized dehumanization as a consequence stating, “It can be dehumanizing… I would think it would have long lasting effects on their identity.” This sense of powerlessness and dehumanization as an effect of police violence largely adds to a body of literature that has not drawn a lot of attention on the individual impact of police brutality.

Disempowering tactics and the expansion of police power was reflected in the literature review. Alexander (2012) notes that virtually all constitutionally protected civil liberties have been undermined by the drug war, making it easy for police to seize people virtually anywhere and place them behind bars. This led to an increase of the use of stop-and-frisk tactics, which made it constitutionally permissible to stop, question, and frisk a person even in the absence of probable cause (Alexander, 2012). People of color now experience a surge of abusive searches and stops without a deemed cause. Across the country, fatal encounters of police killing unarmed African American and Latino males are echoed by justifications where police believe their lives to be in danger, perceived the victim to have a weapon, or are simply instructed to shoot to kill when they feel they are in danger. Participants felt that this sense of ‘powerlessness’ gave Black and Latino’s no sense of recourse, even when their experiences were certainly valid. Nelson (2001) concludes in her book that historically black people have been seen as expendable and are at great risk of harassment, injury, and death by those who are meant to protect citizens. She argues that if citizens had a complaint regarding the actions of police officers, they had very little recourse, as police supervisors and local courts would usually side with police officers
(Archbold, 2012). Literature indicates that this dynamic of officer accounts over citizens is still in effect when complaints are made against police officers (Alpert, 2015), leaving people with little or no recourse to deal with the abuse that they have faced. The connections between historical and current trends of police violence and no accountability can lead to the assumption that powerlessness is an intergenerational effect experiences by Black and Latino males when facing interactions with police.

Also related to the sense of powerlessness experienced by survivors of police violence were secondary effects that were outline by participants. An overwhelming 11 out of 12 participants recognized that survivors experience a loss of safety due to the abuse experienced by people who are supposed to protect and serve. Additionally, over 60% of participants described that as a result of losing trust in police officers and their sense of safety, a common response was to find extra-legal ways to feel safe, including violence. This loss of trust and safety is reflected in literature that suggests that both African Americans and Latinos have less favorable and more negative perceptions of police compared to whites (Lai and Zhao, 2010; Brunson and Miller, 2006; Levine and Small, 2008; Alexander, 2012; Brunson and Weitzer, 2008; Hagan, Payne & Shedd, 2005; Solis, Portillos & Brunson, 2009). The researcher argues that more negative perceptions of police can speak to feelings of mistrust and feeling that police are not there to keep them safe. When Black and Latino males feel unsafe and are unable to trust in those who are meant to protect and serve, this may lead them to cope in unhealthy ways to seek some sense of power in their lives including engaging in substance abuse, violence, and other behaviors that end up being criminalized, leading them to a pipeline of incarceration. One participant described this as “They deal with the conflict in their own way and a lot of times that can show up as violence and then they’ll be criminalized by that. When you don’t trust the police to resolve the
problems for you, then you resolve the problems a lot of times in the same way the police would…”. As one participant put it, the violence from the state “trickles down” and violence is then projected from survivors onto other members of the community, leading to engage in acts that will be criminalized and further disempower them.

At the same time, participants also described that the power imbalance and constant experience of having power exerted over you by police can lead to a lasting and detrimental feeling of hopelessness. This was described by participants as feeling like “I don’t matter”, feeling disposable, or worthless. This in turn can lead to a self-fulfilling prophecy whereby survivors of police violence react by acting out behaviors that display their total sense of hopelessness and put their lives at risk. One participant described it as a sense of “I don’t give a fuck-ness” stating, “It begins to make you feel like you don’t matter. And that type of mentally might induce the behaviors that cause criminality…When no one protects you or no one can protect you, knowing that my father cant protect you from that beast, my brother cant protect me from that beast, its like it produces an I don’t give a fuck’ness.” Brunson and Weitzer (2008) reflect in their study of black males’ perceptions of police that many feel a sense of hopelessness as a result of police stops and physically intrusive searches. The “I don’t give a fuck-ness” or loss of hope addressed by participants is an important self-perception that is directly related to the sense of powerlessness that is experienced by Black and Latino males who are impacted by police brutality.

**Internalized Pain and Masculinity**

Many participants viewed masculinity and the socialization of males to not talk about their feelings as one of the main barriers to healing. Participants felt that Black and Latino males were harder hit by incidents of police violence due to being socialized to not express pain and
“suck it up”. In a recent editorial post, writer Kali Halloway (2015) provides a connection to this finding by suggesting that masculinity leads to shorter life spans for men and stated, “…it causes a sort of spiritual death, leaving many men traumatized, dissociated and unknowingly depressed.” Halloway (2015) quotes psychologist and author Terry Real who suggests, “Men’s willingness to downplay weakness and pain is so great that it has been named as a factor in their shorter lifespan. The 10 years of difference in longevity between men and women turns out to have little to do with genes. Men die early because they do not take care of themselves.”

Findings fell in line with literature that suggested that Black and Latino males who are survivors of police violence tend not to address feelings associated with experiences of police brutality and often deal with these issues alone. This notion of increased mental health risk experience by males due to masculinity is supported by research that shows that mental health rates for Latino and Black males are dramatically high (Vega and Alegria, 2001; Calloway, 2006).

Participants described the impact of masculinity in various ways including men not being taught how to heal and being told to “suck it up”, feeling like it will bring more issues to you as a male and not seeing a network of other males talking about these issues, “the nature of being male makes you feel like you cant reach out and get that community”, society not being supportive of men being vulnerable with their feelings, and “patriarchy” not allowing men to talk about their feelings “ever”. One could assume that the issue of police violence has not largely been addressed or recognized as having long-term effects on males because males are less likely to talk about their emotions and address how it has impacted them. The reality that men suppress their emotions may cause a numbing effect where Black and Latino males may not be aware that they experience trauma, depression, or may begin to believe that they are deserving of the harm caused by police. Halloway (2015) quotes historian Stephen Coontz who highlights this notion.
stating, “It leaves little boys, and later, men, emotionally disembodied, afraid to show weakness and often unable to fully access, recognize or cope with their feelings.”

As a result of how masculinity inhibits men’s ability to express themselves, all participants believed that police violence had a negative impact on how black and Latino males began to view themselves. Many agreed that Black and Latino males began to internalize negative identities due to the way they were treated by police. One participant shared this sentiment stating, “a lot of victims of police violence kind of believe that they deserve it. Maybe not consciously but subconsciously believe the messages that somebody like them is criminal, that somebody like them is illegal or a gang member or any of the other coded words that we used to criminalize people of color and when you hear those messages enough you believe them.” Participants described that survivors move to perceive themselves as criminals, bad people, or of deserving of the police violence that they experience.

Maleness compounded with a crushing and powerful system of oppression can lead males to internalize a bad self, knowing that the system continues to justify that it is the victim’s fault and that there is no recourse with challenging the ongoing acts of violence by police. Author and ethnographer Victor Rios writes about how manhood coupled with the alienation that Black and Latino boys begin to feel as a result of punitive measures by officers causes them to normalize the treatment and begin to feel that it is treatment that they deserve (2011). Object Relations Theory and the internalization of the bad self, as written by W.R.D. Fairbairn, supports this idea by recognizing that the victim takes on the burden of badness that appears to reside in his objects, thus “outer security is purchased at the price of inner security”, making it easier to live in a world where he recognizes himself as bad instead of facing the constant fear of living in a bad and dangerous system of violence (Fairbairn & FairBairn, 2013, pg. 65). Participants felt that
these internalized identities are further justified in society when police are not held accountable for their actions and when media supports the narratives of police officers and systems of injustice, leaving survivors to believe that the violence against them is their fault.

**Healing Circles**

When avenues of healing for survivors of police violence were explored, a majority of participants indicated that mental health services had not been helpful to Black and Latino males who needed mental health treatment. This was supported by literature that demonstrated Black and Brown communities are underrepresented in mental health care access and use overall (Suite, La Bril, Primm, & Harrison-Ross, 2007). Instead, 80% of participants expressed that finding community was important to access healing. Responses around the need for community most often reflected utilizing healing circles and support groups, as participants discussed the importance of healing collectively and finding others who have faced similar challenges. Most participants agreed that healing could not happen alone and several advocates for healing circles discussed having facilitated or participated in healing circles themselves. While this does not fall under the traditional umbrella of Eurocentric forms of therapy, it was supported by research that has explored the use of healing circles for black and Latino males. Ginwright supports the idea of healing circles, stating, “participants in the healing circles are able to build relationships and trust with each other while processing their experiences, stress, and trauma (Ginwright, 2015). Healing circles are facilitated by people who are also impacted by oppressive factors and provide opportunities for youth to lead their own groups.

Ginwright states that there is a growing recognition among social activists of color that culture can serve as an important remedy from the harm of racial justice (2015). This fell in line with several respondents who acknowledged the importance of embracing culture, including
traditional forms of African, Mayan, and Aztec healing. Many of these forms of healing are not reflected in literature due to the sacredness of these practices and the history of colonialism that has sought to erase these traditional forms of healing. Yet, some participants recognized that traditional healing practices like healing circles were rooted in African, Mayan, and Aztec history and were forms of healing that had worked before the impact of colonialism.

Several programs in the Bay Area of Northern California have utilized healing circles as a way to support the healing of Black and Latino males. An example of this men’s circle and the La Cultura Cura model, or culture heals, is seen in an Oakland based organization, Communities United for Restorative Youth Justice, that works to empower young people who have been impacted by the criminal justice system (“Communities United by Restorative Youth Justice”, Mission). Their program “is composed of a curriculum for Oakland youth that teaches the historical and contemporary manifestations of oppression through an ancestral and indigenous framework. Here participants in the healing circles are able to build relationships and trust with each other while processing their experiences, stress, and trauma (Ginwright, 2015). Many participants recognized the importance of trust, addressing pain collectively, and healing collectively as key factors to healing.

Other social justice organizations have carried on with similar healing circles that have served beneficial to address issues of racial injustice and oppression. Organizations like Urban Peace Movement and United Roots in Oakland have focused on addressing mental health and healing through the development of culturally centered healing circles and practices. Urban Peace Movement along with United Roots in Oakland developed DetermiNation, a program that uses West African rituals, symbols, and practices to reach young African American and promote healing and achievement (Ginwright, 2015). As a way to address mental health, DetermiNation
holds a support group for young black men to process struggles, stories, and successes around issues that are relevant to them. Here youth also receive lessons composed of African philosophies and spiritual teachings that are connected to the realities shared by youth and provide opportunities for healing (Ginwright, 2015). For some, when police violence has the potential effect of breaking down one’s sense of self, connecting oneself to culture and others with shared experiences may lead to the development of a positive and collective sense of identity. Healing circles also have the potential of breaking down the barriers associated with masculinity, as individuals are able to recognize that they are not dealing with issues alone and can witness the vulnerability of others, which in turn can allow them to address their own feelings.

However, when addressing the need for healing circles, several participants felt that healing had to happen in conjunction with advocacy. Many felt that healing happened alongside with advocacy but shared a similar sentiment that engaging in acts of healing and care were of utmost importance. One participant shared this sentiment stating, “We start with the healing, when they start to see their collective pain, and they hold it together, now they feel like taking collective action, now they feel like since I aint just by myself staring at this system, what can we do together. But we gotta cry together first, we gotta feel that pain and love of connection before taking collective action. Once theyre on that common ground, now we can go tear some shit up and feel powerful doing that. Cuz we went from isolated, to connected, to fighting together.” The importance of resistance as healing will be discussed further in the following section.

**Resistance as Healing**

The majority of participants described the engagement in activism, advocacy, or organizing as heaving a healing capacity. Participants recognized that survivors’ ability to resist
systems of oppression and police violence in efforts to seek justice had the potential to be healing. Again, several spoke of their own experiences being impacted by police violence and how resisting system’s of oppression had launched them into an avenue where they felt they could do something about their pain. Forms of resistance such as advocacy, activism, and organizing are supported by literature. Author and Ethnographer Victor Rios describes a possible response to oppression by marginalized populations as the development of *Resistance Identities* (2011). *Resistance Identities* operate by “excluding the excluder” and transforming their exclusion into a revolt against the very system and agents of control that punish them (p. 102, 2011). This supports a few participants’ claims of the ability to resist as a form of “self-preservation” and as a way to denounce the negative identities formed through acts of police violence. Rios continues by stating, “Encouraging cultural resistance identities and linking them to social movements like those in the United States opposing gentrification, police brutality, or deportations may present the best opportunity to reach out to our alienated youth” (2011, p. 103).

Participants recognized that activism provided the potential to give themselves a “boost” and keep their loved ones alive who had been lost at the hands of police. This “boost” suggests a sense of empowerment that people feel when before they had felt a sense of powerlessness at the hands of police. Participants recognized this “empowerment” as channeling pain into resistance and noticing the uplifting change in themselves and others when they are fighting collectively for change in their communities. This is supported by literature from author Victor Rios (2011) who finds that when a young man becomes self-empowered and believes he can change his marginal conditions and his environment, his ability to engage in his education and civic participation increases, leading to a personal and social transformation. Engaging in forms of resistance were acknowledged by participants as ways for survivors of police brutality to find recourse in
challenging a system that fails to hold police accountable and serve proper justice for those impacted.

Whereas several participants shared that the trauma of police violence had been ‘invisibilized’, and systems and mass media had engaged a narrative where Black and Brown communities were blamed for the violent and militarized reactions of police departments, current social justice movements have sought to resist and counter those messages, ultimately serving to validate the many experiences of Black and Brown communities across the country. This is supported by movements such as Black Lives Matter, which after its inception in 2012 now has 28 active chapters across the country including one in Canada (“Black Lives Matter”, Locate a Chapter). The Black Lives Matter movement has helped validate the experiences of many of those who have experienced or witnessed police violence and has provided a platform for those to express and transform their pain, anguish, frustration, and anger into activism towards the systems that continue to oppress them. Many participants recognized the birth of the Black Lives Matter movement, joining others in the movement, and being able to utilize other similar platforms to speak out for themselves and others as healing.

As stated earlier, many participants shared the sentiment that healing was necessary in conjunction with activism. This is supported in literature by Ginwright when he discusses the term “Radical Healing” in his book Black Youth Rising (2015). Ginwright addresses the importance of bridging individual healing with social activism and how adults can support youth in their own healing process when they offer opportunities for youth to engage in political action (Ginwright, 2015). Some shared that this could look like holding healing circles while working collectively in advocacy. Others felt that it could also mean engaging in self care and being able to separate activism from other parts of their lives. Several participants based the need for
healing and self-care on the real challenge of bringing one’s own “trauma” into the work as well as the possibility of vicarious traumatization through engaging in resistance with systems of oppression. It is important to note that participants highlighted a counter-effect of repression from systems of power as happening at the same time that growing number of community members react with resistance, further justifying a need for community and ongoing collective healing.

**Culturally Syntonic Healing**

All participants shared the same sentiment of the need for cultural responsiveness and awareness of issues affecting people of color. Participants acknowledged this need in several ways; feeling that people of color needed healing provided by other people of color, healers who are aware of issues pertaining to people of color and who validate the impact of police violence, healers who can relate to or understand the culture of the group, and healers who can “code switch” and adapt to ways of communicating with said group. While the term “culturally competent” is often thrown in a fashionable manner and suggests that people can achieve and be taught to have a certain level of competence that meets all cultural standards, the researcher prefers the term Culturally Syntonic. Culturally syntonic refers to the approach being in-line with the cultures values, behaviors, expectations, and so forth (Illovsky, 2013).

Many participants felt that culturally syntonic healing was necessary not only for survivors to feel understood but also because it was important to be able to relate to healers, through skin tone, ethnic background, experiences, and language. Participants shared that too often healers were white, could not relate to or understand the impact of police violence on communities of color, were part of a system of care that shared relationships with police, did not challenge police violence, sought to individualize the problem, had no experience with the
problems the survivors were dealing with, and could not adapt to the language and environment that they should have met the individuals at. Findings fell in line with literature from Wei-Chin Hwang (2011) that suggests, “Improving the effectiveness of mental health treatments for people of non-European backgrounds is especially important given that three-fourths of the world is collectivistic and possesses belief systems that are distinctly different from the Western world. It is known that ethnic minorities are less likely to receive quality health and mental health services and that overall they evidence worse treatment outcomes than European Americans” (p. 1).

Furthermore, Hwang (2011) recognizes these findings that detail the need for cultural syntonic healing by indicating the need for two forms of adaptations that partly mimic participant responses, superficial adaptations and deep structure adaptations. Hwang (2011) states, “superficial adaptations, such as conducting therapy in a client’s native language, providing ethnically matched therapists, designing the clinics to be culturally aesthetic, and locating clinics in neighborhoods that are easily accessible. In contrast, deep structure involves incorporating the ideas, beliefs, and values into the treatment” (p.1). Several participants agreed that survivors of police violence would be more responsive to healers who could reflect their background, understand their experiences, adapt to their cultural circumstances, and support their resistance of oppressive structures.

Implications for Social Work Practice

There is a lot at stake for social workers seeking to work with individuals and communities of color in urban America. Black and Latino males are experiencing an increase in police contact, police use of force, and police killings across the country. Many participants recognized the overwhelming compounding of trauma that communities of color face when they experience or witness acts of police violence. There was a profound realization that the
experiences of survivors of police violence were not post-traumatic, but relentlessly traumatic and invisibilized by service providers and society at large. It is imperative that social workers who work with individuals that have experienced police brutality, or at the minimum ongoing police contact, affirm that these experiences can be traumatic and understand that they happen in a repetitive pattern. That means working from a framework that recognizes that the trauma is not post-traumatic, that the trauma continues to be present, and that social workers must join clients in resisting those structures that cause the harm. Part of reversing the internalized impacts of police violence and empowering clients is to name those experiences as unjust, to engage with clients as survivors and not victims, and to help them find spaces or communities where they can access support and solidarity from others impacted in similar ways.

One of the challenges social workers must be aware of is the reluctance for black and Latino males, and males in general, to share their survival experiences of police violence because of how it challenges their masculinity. Participants largely recognized that Black and Latino males do not talk about their feelings and experiences, and in many ways internalize the acts of police violence perpetrated on them. Social workers must constantly be mindful of how different situations and circumstances may involve police contact that can be traumatic, and how to invite those conversations into the room in a way that allows the individual to retain their sense of power and dignity. These situations in the simplest forms include arrests, police stops, police frisks and searches, witnessing police encounters, family narratives and historical encounters of police violence. However, social workers must also be aware that these conversations may not be shared so blatantly, and that there are circumstances that can constitute a higher likelihood of police contact and violence including homelessness, poverty, concentrated communities of color, LGBTQ people of color, communities experiencing the forces of gentrification, individuals of
color in schools with hyper-aggressive police presence, and individuals with a history of incarceration.

Social workers, especially male social workers working with other males, should be aware of how manhood interferes with emotional expression, and should model vulnerability by sharing their own experiences. Social workers have largely been taught that relationships with people that they work with is a one-way relationship, where the social worker focuses on the clients story and engages in very little self-disclosure, yet many participants felt that relationships with mental health providers were not personal enough. Social workers of color need to incorporate their own stories into their work with individuals and communities as a way to demonstrate vulnerability and support our client’s in sharing their own stories. Furthermore, social workers must understand how certain male reactions serve as ‘masks’ for emotions that are unacceptable to express. Many participants recognized that Black and Latino men who felt unsafe and who experienced harm could end up projecting those feelings onto others through violence and could engage in behaviors that end up being criminalized. It is important for social workers who work with individuals impacted by police violence to recognize those subsidiary effects, name how they may be caused by police violence, and find ways to empower individuals and communities through those critical connections.

Clinicians should also take a stand on the violence that is perpetrated by police officers and join the individuals and communities that they work with, recognizing that neutrality can be just as harmful. The National Association of Social Workers (NASW) has issued statements urging reforms that would help end the excessive use of police force and has encouraged its members and the wider social work community to become involved in bringing about police reforms (National Association of Social Workers: Social Work Blog, 2014). It is imperative that
social workers engage in ways to challenge police violence both in the clinical setting and in the broader community. Participants found that it was important for social workers to name the impact of police violence but also to move further to support individuals and communities by engaging in advocacy and seeking justice for issues in the community. Social workers must step out of the typical frame of clinical social work and engage in social justice efforts in the community by joining advocacy groups, collectives, organizations, activist movements and social networks. It is equally as important for social workers to support survivors of police violence in identifying and engaging in acts of activism, advocacy, or organizing that have the potential to feel healing for them. As social workers, it is one of our responsibilities to fight to end police violence and advocate for policy changes that create a balance in power between police and the citizens of this country.

Participants often referenced healing circles as an avenue of healing for survivors of police violence. Participants also recognized the need for healing to happen through individuals who identify as of color and who can understand the cultures relevant to the individuals and communities that they work with. Social workers of color facilitating healing circles among males of color who have experienced forms of oppression, including police violence, can be one of the most supportive ways of facilitating healing. There is huge sense of power that individuals can feel when they can see others displaying vulnerability, sharing similar experiences, and recognizing that they are not alone in their experience. However, in regard to healing circles that engage cultural traditions and values, that may not be the place for social workers who are not familiar with Latino or African culture. It may be up to the social worker to find ways to refer or support individuals in finding healing circles that are supportive for them and that meet their individual needs. Social workers must be aware that they impact the healing of others and that
males of color may feel more supported when they feel that the social worker reflects their skin tone, their ethnic background, language, their experiences, their understanding of issues that they face, and can be responsive to their various cultures with a sense of cultural humility.

**Limitations**

There are several limitations to this data and the interpretations offered. First, the sample size of 12 participants is not a generalizable sample. The sample was selected by the researcher with a bias towards certain types of participants that would meet the criteria. No general flyer was used and all participants were contacted directly by the researcher without prior knowledge of interest in the study. It can be assumed that those participants selected are significantly different from the larger population of activists, organizers, and advocates. The researcher also utilized bias sampling by selecting participants from a network of people whom the researcher knew. Participants also resided or did work in the Bay Area of Northern California, and thus findings cannot be broadened to reflect the wider nation.

Additional limitations include the identifications of the participants. The researcher did not usually ask questions to explore participant gender, age, or sexuality among other identities. This could have led the researcher to further hypothesize about the different responses based on gender, age, and sexual orientation. Almost all participants identified themselves as of color, suggesting that this study can offer some insight to individuals who are interested in hearing from the perspectives of individuals of color. Additionally, the frame of this study only focused on Black and Latino males, with no attention on the impact of police violence on females or gender non-conforming individuals of color. One participant addressed this issue in the study and noted that women were also impacted as heavily by police violence as men. While inferences
were made to people of color in the findings and discussion, the study frame cannot be
generalizable to all people of color.

Another limitation of the study was the use of the term “police brutality” and the various
ways that people define it or make meaning of it. While the researcher made an effort to outline
and explain the definition that the researcher was working with, people may have had different
ways of identifying police brutality. One participant found that using the term “police brutality”
was a polite way of naming the issue, and preferred to use the term “police terror” as they felt
that it did more justice to the issue. This is to suggest that some may identify more with the
physical aspects of police brutality while others may identify more with the psychological aspect.

The literature review is also an area that was done with partiality. For example, the
researcher noted in the literature review that there had only been one study directly focusing on
the mental health impact of police violence. Yet, the researcher did not break down mental health
into various parts or different meanings that could have brought out more literature surrounding
the topic. The literature review is certainly not conclusive and could use more depth of
exploration. Additionally, there was implicit bias in how the interview questions were developed
and how they were framed. Some questions had leading assumptions that could have impacted
the types of responses participants provided.

**Recommendations for Future Research**

This study only begins to touch the surface of the issues faced by communities of color
who experience police brutality. Future research should look deeply into how women, especially
black women, are impacted by police violence. In a report titled, “Say Her Name: Resisting
Police Brutality Against Black Women”, Columbia Law School professor Kimberle Crenshaw,
provides some insight into the importance of this research and the inclusion of women and gender non-conforming individuals by stating, “Although Black women are routinely killed, raped, and beaten by the police, their experiences are rarely foregrounded in popular understandings of police brutality. Yet, inclusion of Black women’s experiences in social movements, media narratives, and policy demands around policing and police brutality is critical to effectively combatting racialized state violence for Black communities and other communities of color” (Crenshaw & Ritchie, 2015, p.1) A gender inclusive frame in how these issues are explored, defined, and advocated for would provide for a more powerful force behind the argument.

Generally, the issue of police violence and its impact on communities of color should be explored in more detail. There are several subtopics that could be researched further to highlight this issue and bring attention to forms of healing for survivors. Many participants recognized the use of healing circles as important for individuals of color who experience various forms of oppression including police brutality. As important is the participation of survivors in advocacy, activism, and organizing as a healing mechanism and how healing circles and resistance can serve as powerful experiences for survivors when they are done jointly. Both of these deserve more attention and can provide additional insight into non-traditional forms of healing that transcend the individual relationship and can impact real change. Going beyond this study, many participants suggested that individuals who survive police violence began to internalize negative self-identities and fell into self-fulfilling prophecies whereby their life outcomes may be impacted. It would be interesting to explore further how police violence impacts the long-term life outcomes of individuals and how individuals see their life trajectory influenced or not influenced by experiences of police violence.
Conclusion

This research explored the mental health impact of police brutality on Black and Latino males as well as avenues for healing through interviews with individuals who identified as advocates, organizers, or activists in the Bay Area of Northern California. Among the sample of participants, the findings of this study suggested that Black and Latino males who survive police violence experience high levels of repetitive trauma, experience a sense of powerlessness through their experiences, internalize negative identities through those experiences, and struggle to express their emotions and battles due to challenges to their masculinity. Additionally, findings suggested that Black and Latino males could benefit from specific healing avenues including healing circles, engaging in advocacy and activism, and receive support from culturally syntonic healers.

This research indicates a need for additional exploration of how women of color and gender non-conforming individuals are also impacted by police violence. This research also suggests further examination of how healing circles and activism can serve as powerful healing collaborations, along with an analysis of how police violence affects the long-term life outcomes of individuals.
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APPENDIX A: PARTICIPANT INTERVIEW QUESTIONS

Interview Questions

Demographic Questions
1. How do you identify in terms of race and ethnicity?
2. Where do you live and how long have you lived there?

Interview Guide
1. How long have you worked with issues of police brutality? In what capacity?
2. Please tell me a bit about your experience with police brutality. Can you share an example or two?
3. What long term effects do you think it can have on people who experience it? On communities of color that experience it?
4. How do you think police brutality can impact an individual’s sense of safety? Do you think it can have an impact on their self-esteem?
5. Since you began working with police brutality, have things gotten better, worse, or stayed about the same?
6. What do you think are the main barriers to healing for men of color who experience police brutality?
7. What are some of the most important things to keep in mind when thinking about the healing process?
8. What would you say are some avenues of healing for survivors of police abuse?
9. Can mental health services for those who experience police abuse be part of the healing process? (If so, what factors can help those providing mental health services be more effective) (If not, what are some barriers that you believe make them less effective)
APPENDIX B: CONSENT FORM

Title of Study: “Stop Resisting”: An Exploratory Study of Police Brutality and its Impacts on Black and Latino Males, their Communities, and Mental Health and Healing.

Investigator(s):
Manuel Ortiz, Graduate Student at Smith College School for Social Work, (xxx) xxx-xxxx

Introduction
- You are being asked to be in a research study that explores the impact that Black and Latino men and their communities face when experiencing police brutality. Police brutality is defined as any act of unmerited excessive and aggressive physical, mental, and/or emotional abuse, above and beyond the law, enacted upon by an individual or groups of individuals in law enforcement,
- You were selected as a possible participant because you have been engaged in work as a community organizer/advocate/activist surrounding issues of police brutality faced by Black or Latino males.
- You must be at least 18 years old to participate in this study.
- We ask that you read this form and ask any questions that you may have before agreeing to be in the study.

Purpose of Study
- The purpose of the study is to understand the mental health risks and how people are affected by police brutality and how we can find ways support them in healing from those experiences.
- This study is being conducted as a research requirement for my masters in social work degree.
- Ultimately, this research may be published or presented at professional conferences.

Description of the Study Procedures
- If you agree to be in this study, you will be asked to do the following things: Participate in a single interview lasting no more than 1 hour where you will be asked a set of questions. The interview will be audio recorded with your permission.
Risks/Discomforts of Being in this Study

- The study has the following risks. First, it is possible that you may be asked personal questions about experiences in your life that may make you feel uncomfortable. Second, some questions may cover subject matter that may cause emotional reactions or distress. Third, you may feel overwhelmed by the amount of questions asked and may feel overwhelmed at the end of the interview. A mental health support list will be provided at the end of the interview.

Benefits of Being in the Study

- The benefits of participation are the ability to share and process stories and experiences with someone who is willing to listen to them. These stories and experiences may also be promoted in a positive way and used for the benefit of others who may experience similar situations. This is an opportunity for participants to bring the importance of this issue to light and bring attention to the reality of these experiences for Black and Latino males.

- The benefits to social work/society are the possibility of validating other’s stories and experiences of police abuse and identifying possible avenues of healing for those people that are impacted. Considering how imminent this issue is at the moment, this may also add to a gap in literature surrounding the mental health impact of Black and Latino men who are impacted by police abuse. This may assist social workers by providing insight into the experiences of Black and Latino males and identifying ways to approach work with Black and Latino males impacted by police abuse.

Confidentiality

- Your participation will be kept confidential. Privacy will be maintained through avoidance of any identifying information including using initials instead of full names in notes, analysis, and write up and providing only basic information in analysis such as gender, age, and ethnic background. Interviews will also only be conducted in a private office setting, private room, or a quiet public café with some privacy to insure protection of information shared. Data from the study will not be shared with any other participants and will only be utilized for the purpose of the study and stored in a locked file cabinet and password protected computer database. The researcher will make sure to analyze, organize, and write up the study in a private space where no other person has access or visibility to information. Audio recordings of interviews will only be accessed by the researcher, with the exception of a potential transcriber who will also sign a confidentiality agreement, and will only be used for educational purposes for the study. I will not include any information in any report I may publish that would make it possible to identify you. Recordings will be destroyed after the mandated 3 years. They will be permanently deleted form the recording device.

- All research materials including recordings, transcriptions, analyses and consent/assent documents will be stored in a secure location for three years according to federal regulations. In the event that materials are needed beyond this period, they will be kept secured until no longer needed, and then destroyed. All electronically stored data will
be password protected during the storage period. We will not include any information in any report we may publish that would make it possible to identify you.

**Payments/gift**
- You will not receive any financial payment for your participation.

**Right to Refuse or Withdraw**
- The decision to participate in this study is entirely up to you. You may refuse to take part in the study at any time up to April 10, 2016 without affecting your relationship with the researchers of this study or Smith College. Your decision to refuse will not result in any loss of benefits (including access to services) to which you are otherwise entitled. You have the right not to answer any single question, as well as to withdraw completely up to the point noted below. If you choose to withdraw, I will not use any of your information collected for this study. You must notify me of your decision to withdraw by email or phone by April 10, 2016. After that date, your information will be part of the thesis, dissertation or final report.

**Right to Ask Questions and Report Concerns**
- You have the right to ask questions about this research study and to have those questions answered by me before, during or after the research. If you have any further questions about the study, at any time feel free to contact me, Manuel Ortiz at mortiz@smith.edu or by telephone at xxx-xxx-xxxx. If you would like a summary of the study results, one will be sent to you once the study is completed. If you have any other concerns about your rights as a research participant, or if you have any problems as a result of your participation, you may contact the Chair of the Smith College School for Social Work Human Subjects Committee at (413) 585-7974.

**Consent**
- Your signature below indicates that you have decided to volunteer as a research participant for this study, and that you have read and understood the information provided above. You will be given a signed and dated copy of this form to keep. You will also be given a list of referrals and access information if you experience emotional issues related to your participation in this study.

........................................................................................................................................

Name of Participant (print): ______________________________________________

Signature of Participant: ________________________________ Date: _____________

Signature of Researcher(s): _______________________________Date: _____________
........................................................................................................................................

[if using audio or video recording, use next section for signatures:]

1. I agree to be [audio or video] taped for this interview:
Name of Participant (print): ________________________________________________

Signature of Participant: _________________________________ Date: _____________

Signature of Researcher(s): _______________________________ Date: _____________

2. I agree to be interviewed, but I do not want the interview to be taped:

Name of Participant (print): ________________________________________________

Signature of Participant: _________________________________ Date: _____________

Signature of Researcher(s): _______________________________ Date: _____________
APPENDIX C: RECRUITMENT EMAIL

Dear __________________,

Hello! My name is Manuel Ortiz and I am a Graduate Social Work student attending Smith College School for Social Work. I am living in the Bay Area and am conducting a thesis study to meet requirements for my masters degree. I was referred to you by a personal mentor of mine, George Galvis, at Communities United for Restorative Youth Justice (CURYJ) as someone who may be a good resource for this study and potentially be interested in participating in this study. OR (I came upon your organization/contact through online research and noticed that you or your organization may be involved in work around issues of police brutality. I am emailing you to see if you may be interested in participating in my study.

Here is a brief summary of my study:

My study will focus on exploring the possible mental health effects of police brutality on Black and Latino males as well as avenues of healing for those impacted. The mental health impact of police brutality is an issue that needs to be studied and is of utmost importance especially in the context of the extensive history of police brutality in this country and the national movement and attention that this issue has gained. While this issue has impacted various individuals and communities of color, my focus will tend to Black and Latino males, two populations that have been largely impacted by incarceration and increased contact with police officers. It is important to better understand the experiences of Black and Latino males who are directly impacted by police brutality and ways we can support these groups, along with others, in healing from these experiences. This is an opportunity for community activists/organizers/advocates to share their stories and perspectives.

I am planning to conduct interviews with 15 individual adult participants.

Participants must be:

- 1. Community Activists/Organizers/Advocates working with or in service of Black or Latino males who have been impacted by police brutality.

AND

- Be at least 18 years of age
- Live in the Bay Area
If you fit one of these categories and may be interested in participating, I would love to talk with you further about my study and answer any questions that you may have. The interview would take no longer than 1 hour and would happen at a place and time of your convenience. This study is confidential and will take place in a location that offers privacy including my office, an office or private location of your choice, a library room, or a quiet café. Also, if you have anyone in mind who may be a good fit for this study, please let me know!

Thank you for taking the time to read this and thank you for your help!

Peace,

Manuel Ortiz
Smith College School for Social Work
Graduate Student
xxx-xxx-xxxx

*This study protocol has been reviewed and approved by the Smith College School for Social Work Human Subjects Review Committee (HSRC)
February 3, 2016

Manuel Ortiz

Dear Manuel,

You did a very nice job on your revisions. Your project is now approved by the Human Subjects Review Committee.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain all data and other documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Congratulations and our best wishes on your interesting study.

Sincerely,

Elaine Kersten, Ed.D.
Co-Chair, Human Subjects Review Committee
CC: John Erlich, Research Advisor
APPENDIX E: MENTAL HEALTH SERVICES LIST

Free/Low Cost Mental Health Services in the East Bay

Alameda County Mental Health Care Services Access Mental Health
800-491-9099  M-F 8:30am-5pm  Telephone screening and referrals for people needing psychotherapists and psychiatrists accepting sliding scale or Medi-Cal; also for people with chronic mental illness needing admittance to an Alameda County community mental health center.

La Clinica de la Raza: Casa del Sol
1501 Fruitvale Ave. Oakland 94601  510-535-6200 Casa del Sol  Drop-in or telephone intakes: M-F 1pm-2pm  http://www.laclinica.org  Individual, family, and group therapy for Spanish speaking uninsured residents of Northern Alameda County.

Berkeley Free Clinic/Community Health Project  Peer Counseling Collective
2339 Durant Ave. Berkeley 94704  510-548-2570 Ext. 2250  http://www.berkeleyfreeclinic.org  Free peer counseling to individuals in the community; both drop-in and long-term peer counseling.

Asian Community Mental Health Services
310 8th St. Oakland 94607  510-451-6729  http://www.acmhs.org  M-F 9am-noon,1pm-5pm  Human services to Asian Pacific special-needs populations: mental health clients, developmentally disabled clients, and at-risk children, youth, and families.

Crisis Support Services of Alameda County
PO Box 3120 Oakland 94609  800-309-2131  7 days 24-hours Crisis Line (also TTY line)  800-260-0094 Grief counseling, stress counseling, and senior outreach  http://www.crisissupport.org  Telephone crisis, counseling and referral services; community education program, disaster counseling.

Psychological Services Center
Broadway Suite 610 Oakland CA 94612  510-628-9065  M-Th 9am-8:30pm  F 9am-4:30pm  No drop-in services  Individual, couples, and family therapy for children, teenagers, and adults.  Also assessments.  Training clinic for the California School of Professional
Psychology. We offer a sliding fee scale and accept Medi-Cal.

**Coalition for Alternatives in Mental Health  Berkeley Drop-in Center**
3234 Adeline St. Berkeley 94703  510-653-3808  M-Th 9am-4pm  F 9am-2pm  Client-run, multi-purpose community center for past and present mental health clients and persons undergoing significant emotional stress. Free.

**Free/Low-Cost Mental Health Services in San Francisco**

**San Francisco County Behavioral Health ACCESS**
(415) 255-3737  (888) 246-3333  Monday-Friday 8:00am-5:00pm
ACCESS is the first point of contact for individuals enrolled in Medicaid, Medi-Cal, Healthy San Francisco, and other state healthcare programs. ACCESS can also assist individuals in enrolling for healthcare and finding mental health services.

**Westside Crisis Clinic**
(415) 355-0311 ext. 5  Monday-Friday 8:00am-7:00pm  Saturday 9:00am-5:00pm  245 11th Street San Francisco, CA. Offers immediate help for those suffering from an emotional crisis.

**Tom Waddell Clinic**
www.dph.sf.ca.us/chn/healthcenters.htm  415.554.2950  50 Ivy Street, San Francisco, CA 94102.
TWC provides primary medical care and mental health, social, and substance abuse services to homeless, transgenders, low-income, and uninsured individuals in San Francisco

**Richmond Area Multi-Services**
(415) 668-5955  3626 Balboa, Monday 9-7 & Tuesday-Thursday 9-9 & Friday 9-5
www.ramsinc.org/ramshome.html
Counseling services: Multi-lingual (Russian, Chinese, Tagalog, Vietnamese, and others)
Accept MediCal and Medicare. Must be a San Francisco resident

**Bayview Hunter’s Point Foundation Behavioral Health Program**
(415) 822-7500  5815 3rd Street, Monday-Friday 9-5  www.bayviewci.org
Referrals. Diagnosis and treatment for mental illness
Sliding scale based on ability to pay, no one is denied service
Accepts MediCal

**Instituto Familiar de La Raza, Inc**
(415) 229-0500 / fax: 647-3662  2919 Mission, Monday-Friday 8-5
Outpatient clinic for monolingual, Spanish speaking, clients
Family, marriage, women, individual, AIDS counseling
Sliding scale based on income, Medi-Cal
MOST Team & South of Market Street Mental Health Services
(415) 836-1700 760 Harrison Street
Individual therapy and counseling
Medication provided
Cannot deny service to anyone
Do not accept private insurance, accept Medicare and MediCal
Sliding scale based on income