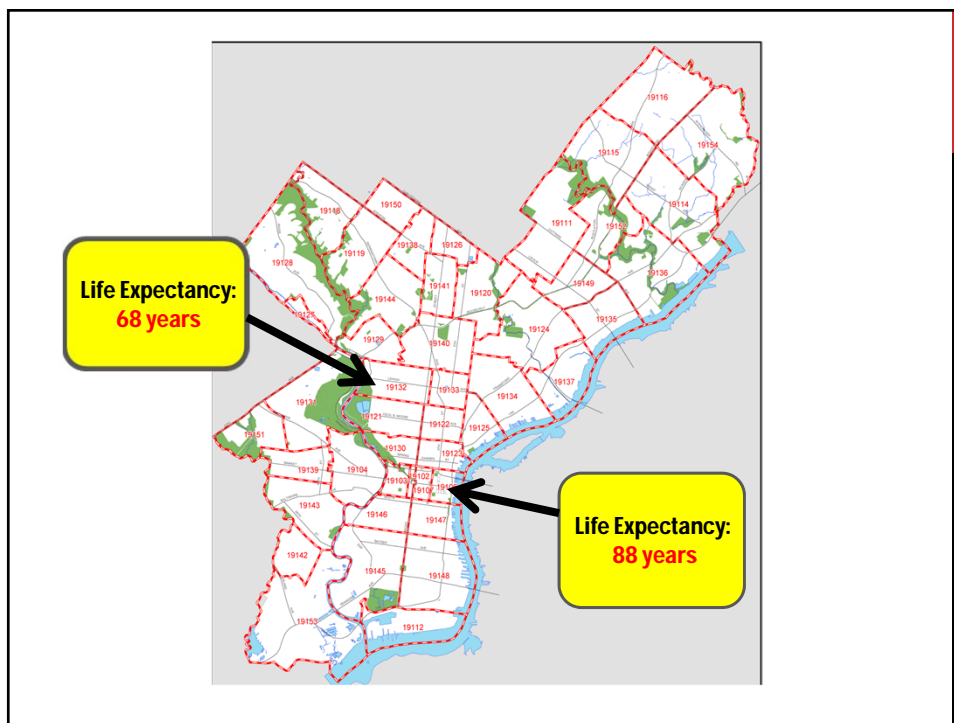
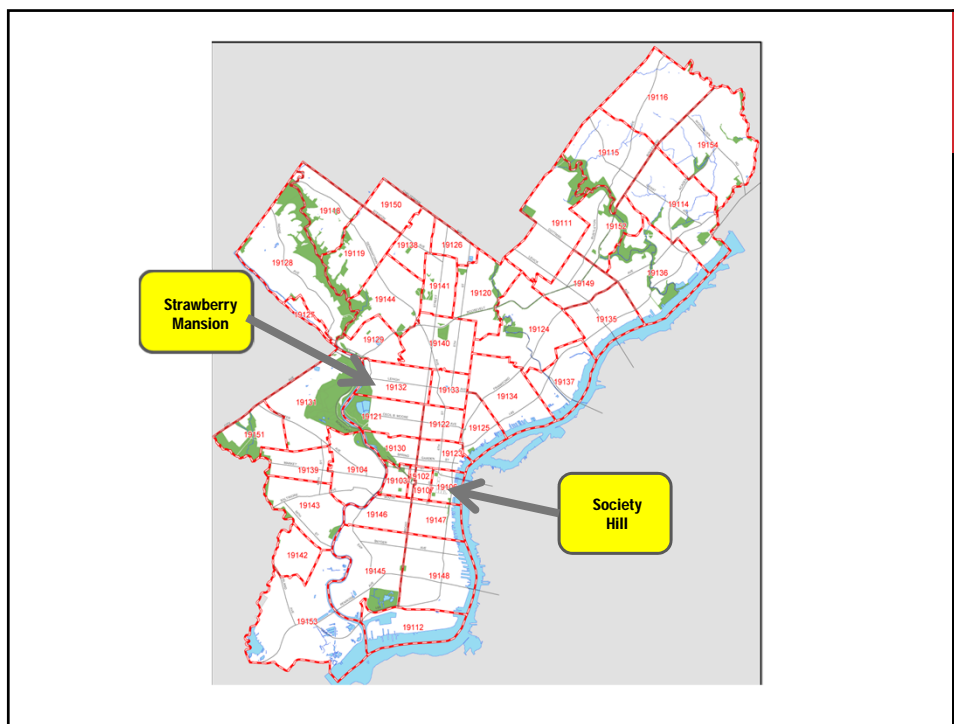


# RACISM, ADVERSITY, AND CHILD HEALTH

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## GOALS

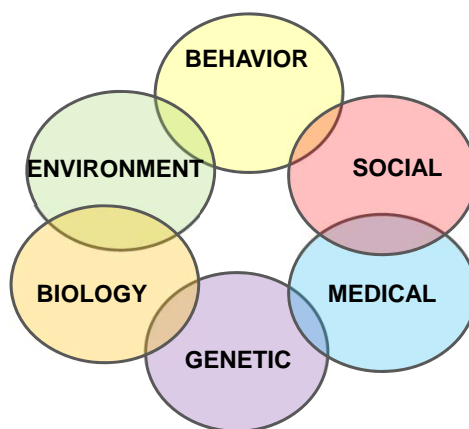
- **Discuss racism & discrimination as a psychosocial stressor that may contribute to poor health**
- **Review the data on the relationship between racism and child health**
- **Determine if racism is a common occurrence in the lives of children of color**
- **Discuss potential mechanisms through which racism may contribute to suboptimal health**
- **Propose racism as an Adverse Childhood Experience (ACE)**



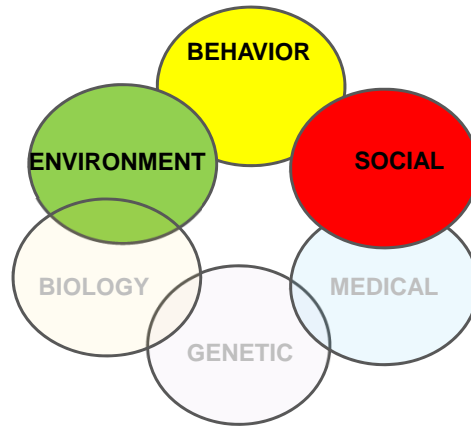
## 2.5 MILES...20 YEARS WHY???

- **Income and Education**
- **Housing**
- **Neighborhood safety**
- **Access to exercise**
- **Access to healthy food**
- **Toxic exposures (lead...)**
- **Access to transportation (to get to jobs)**
- **Access to quality preventive health care**

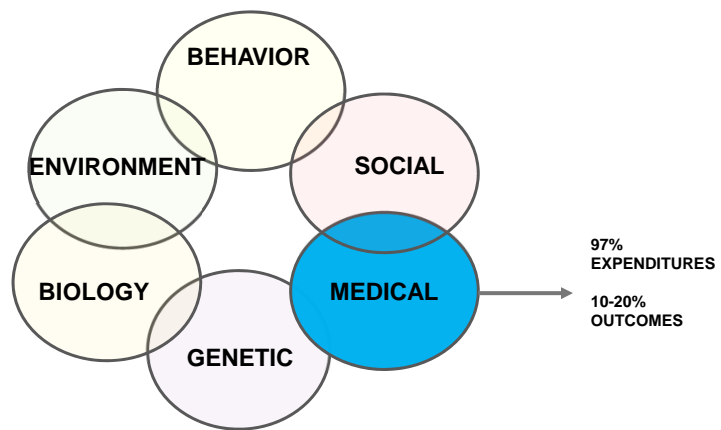
## DETERMINANTS OF HEALTH



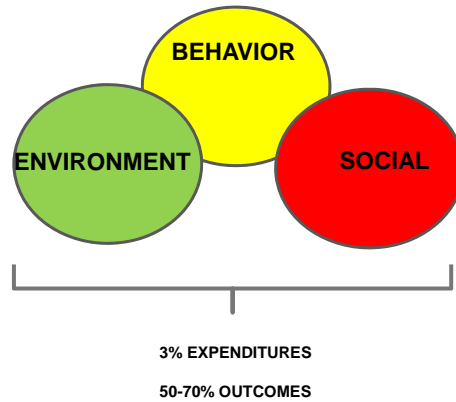
## DETERMINANTS OF HEALTH



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## DETERMINANTS OF HEALTH



## RACISM

- **Negative beliefs, attitudes, and actions resulting from categorizing individuals or groups based on phenotype, heritage, or culture.**
  - Prejudice: Beliefs, attitudes, assumptions
  - Discrimination: Actions and behaviors

## LEVELS OF RACISM

- **Interpersonal**
- **Structural**
- **Internalized**

## DOES RACISM AFFECT CHILDREN'S HEALTH?

**40 papers found in medical and social science literature**

- 8: Birth outcomes (prematurity, LBW)
- 4: Cardiovascular health
- 2: Metabolic disease
- 26: Behavioral /Mental health

Pachter LM, Garcia Coll CG. *J Develop Behav Pediatr* 2009

## ARE PERCEPTIONS OF RACISM COMMON IN CHILDREN?

### Study of 277 children in two northeast cities

- Between 7-18 yrs of age
  - 85 African American
  - 104 Latino (mostly Puerto Rican)
  - 20 West Indian/Caribbean
  - 53 Multiracial/Multicultural

Pachter, Bernstein, Szalacha, Garcia Coll. *Health & Social Work*, 2010

## ITEMS

“Watched closely or followed around by security guards or clerks at a store or the mall”

“People hold their bags tight when you pass them”

“Teachers assume you’re not smart or intelligent”

“Got poor or slow service at a restaurant”

“Someone made a bad or insulting remark about your race, ethnicity, or language”

“Watched more closely by security at school”

“Were treated unfairly by a police officer”

HOW MANY PERCEIVED RACIAL  
DISCRIMINATION IN AT LEAST  
1 OF 24 SITUATIONS?...

**8%**

**27%**

**52%**

**69%**

**88%**

HOW MANY PERCEIVED RACIAL  
DISCRIMINATION IN AT LEAST  
1 OF 24 SITUATIONS?...

**88% (245 of 277)**

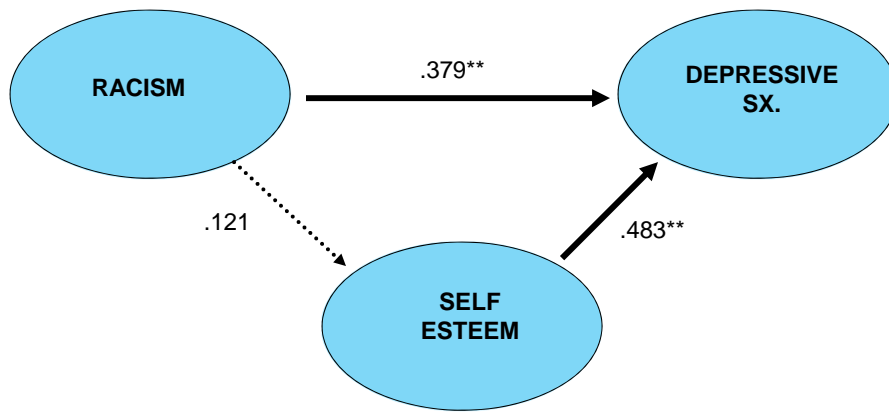


## ARE PERCEPTIONS OF RACISM COMMON IN CHILDREN?

- 88% had at least 1 experience
- Average number of experiences: 6/24
- 12% answered at least ½ of the questions positively

## DOES RACISM AFFECT HEALTH?

- Relationship between racism & depressive symptoms in children
- 52 minority youth (9-18 years)



## RACISM & MENTAL HEALTH IN TEENS

- 1170 African American & Afro Caribbean youth (13-17)
- 85% experienced discrimination
- Discrimination associated with
  - Major depression
  - Anxiety
  - Social phobia

Pachter, Caldwell, Jackson, Bernstein. *J Racial Eth Health Disparities*, 2017

## HOW DOES RACISM EFFECT HEALTH?

- **MACRO:**
  - Segregation → increased exposure
    - Environmental toxins
    - Inadequate transportation
    - Food deserts
    - Violence
    - Safe places to exercise

## HOW DOES RACISM EFFECT HEALTH?

- **MACRO:**
  - Structural Racism → resource inequity
    - Jobs
    - Education
    - Health care
    - Justice

## HOW DOES RACISM EFFECT HEALTH?

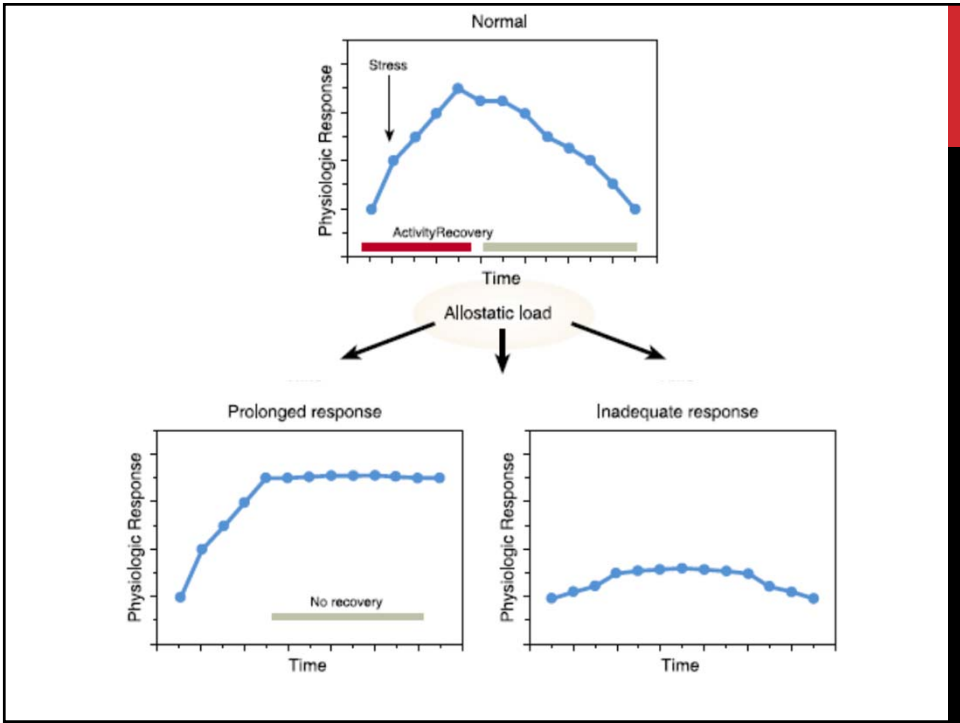
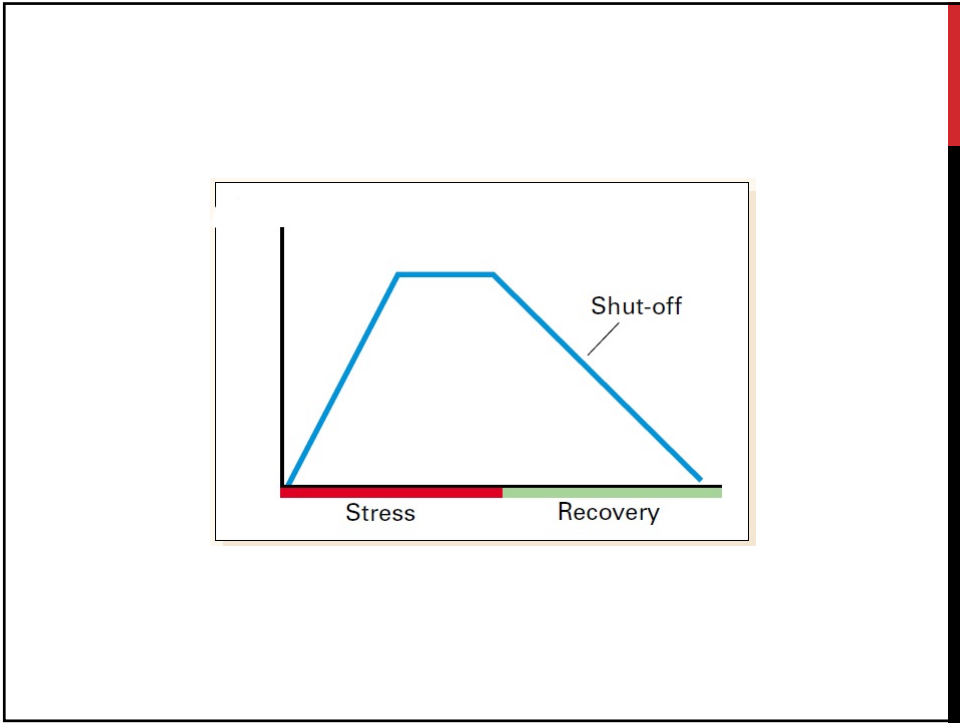
- **INTERMEDIATE LEVEL:**
  - Inter-personal Racism → psychological distress

## HOW DOES RACISM EFFECT HEALTH?

- **MICRO LEVEL:**
  - Psychosocial stress→ physiological dysfunction

**Racism is a chronic psychosocial toxic stressor that can  
cause dysregulation of normal physiology and biology**

**(Allostatic load)**



## EFFECTS OF TOXIC STRESS-ALLOSTATIC LOAD

### Stress hormones remain high, and may burnout (dysregulated)

- Shrinkage of nerve cell in the brain (amygdala, hippocampus, prefrontal cortex)
  - Emotional regulation
  - Executive function (attention, cognitive flexibility, problem solving, working memory...)
- Poor regulation of immunity, inflammation, metabolism, growth
- Epigenetic changes (methylation, telomere length)

### ALLOSTATIC SYSTEMS

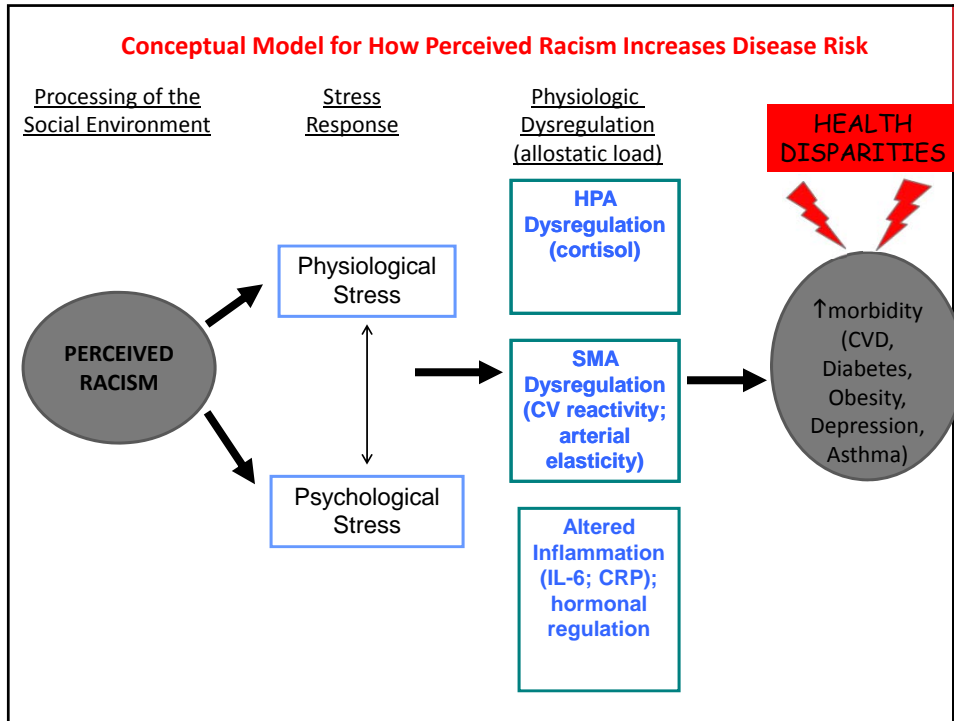
- CORTISOL
- INFLAMMATION
- IMMUNITY
- METABOLISM



- Diabetes
- Obesity
- Asthma
- CV Disease
- Depression

HEALTH  
DISPARITIES



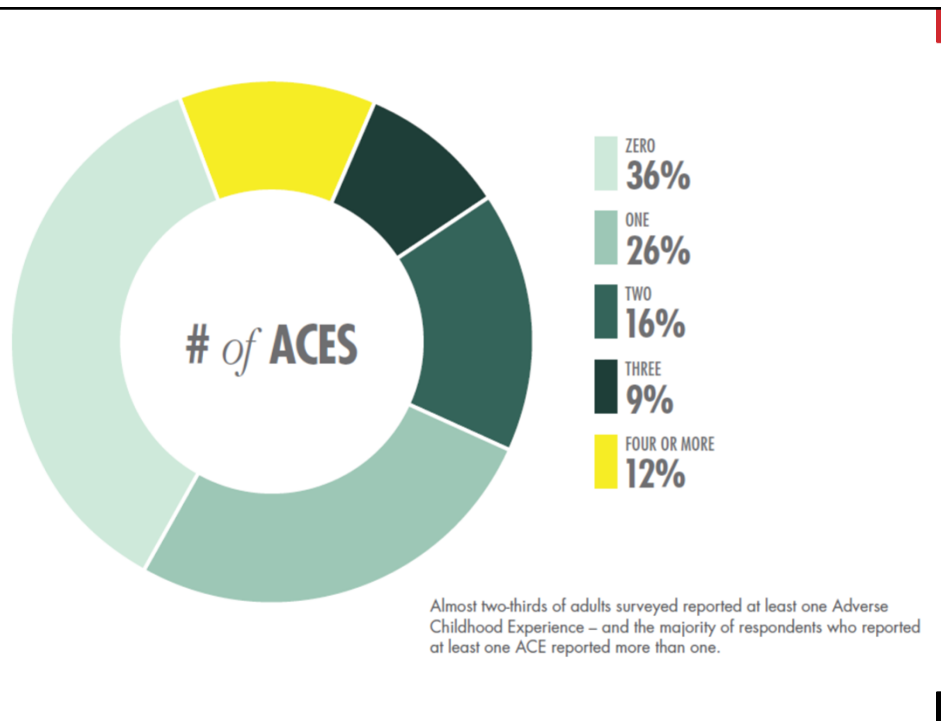


**The effects of racism can have health consequences both during childhood and throughout the lifecourse into adulthood**

**Racism as an Adverse Childhood Experience (ACE)**

## KAISER (SAN DIEGO) ACE STUDY

- **17,000 adults**
- **Childhood stressors**
  - Physical, emotional, sexual abuse
  - Physical, emotional neglect
  - Parental mental illness
  - Family interpersonal violence
  - Substance use
  - Divorce/separation
  - Incarcerated relative





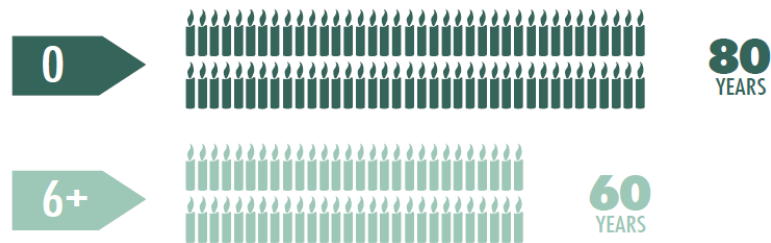
## KAISER ACE STUDY

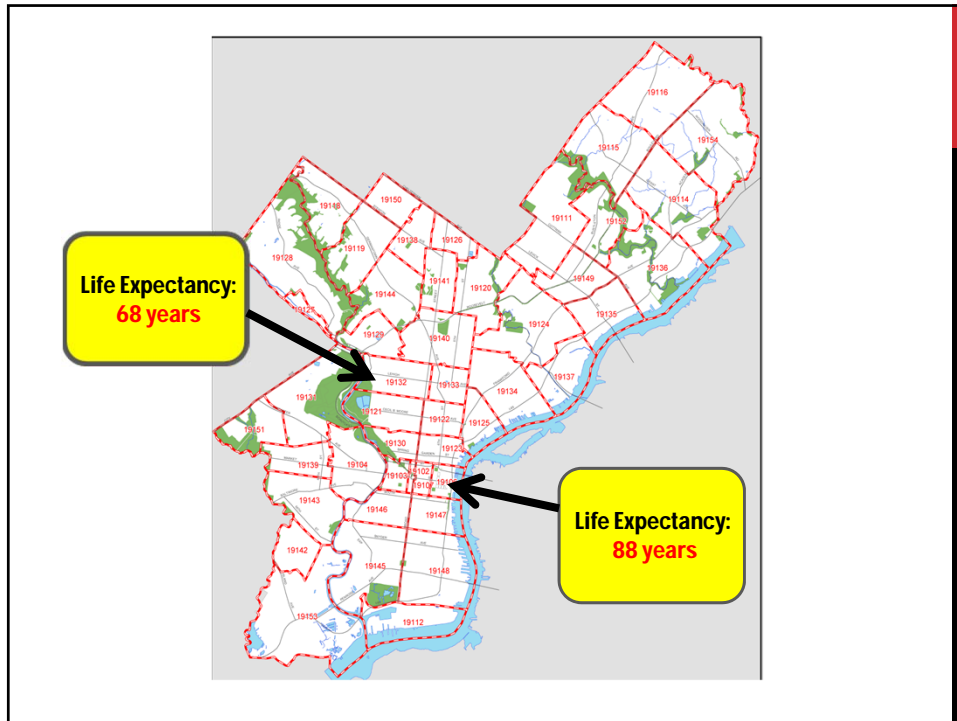
### More Adverse Childhood Experiences, more health problems *as adults*:

- Mental health
- Risk taking behaviors
- Reproductive health (early pregnancy, STI)
- Victimization
- Physical health/chronic illness
  - Heart disease
  - Cancer
  - Stroke
  - Emphysema
  - Autoimmune disease
  - Headaches

### LIFE EXPECTANCY

People with six or more ACEs died nearly **20 years earlier on average** than those without ACEs.





## PHILLY ACE SCORE

### "TRADITIONAL ACES"

#### Abuse

- Physical
- Emotional
- Sexual

#### Neglect

- Physical
- Emotional

#### Household Dysfunction

- Domestic Violence
- Parental mental health issue
- Substance Use
- Incarcerated family member



### "ADDITIONAL" ACES

#### Witness Violence

#### Unsafe Neighborhood

#### Racism/Discrimination

#### Bullied

#### Foster care

## PHILADELPHIA ACE PROJECT

- **Follow up telephone interview of adults in the Southeastern Pennsylvania Household Health Survey**
  - 1784 interviews
- **ACE questions and other information**

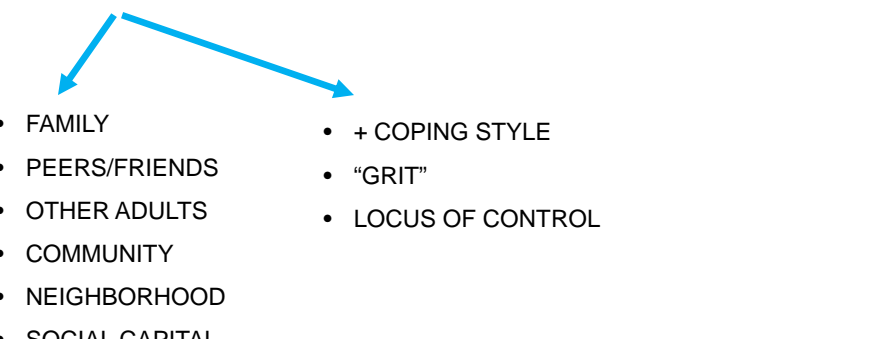
ACEs in Philly vs. Original Kaiser Sample		
	Kaiser Sample	Philly Sample
<b>TRADITIONAL ACEs</b>		
Emotional abuse <sup>†</sup>	10.6%	33.2%
Physical abuse <sup>**†</sup>	28.3%	35.0%
Sexual abuse <sup>**†</sup>	20.7%	16.2%
Physical neglect <sup>*</sup>	14.8%	19.1%
Emotional neglect <sup>*</sup>	9.9%	7.7%
Substance using household member <sup>*</sup>	26.9%	34.8%
Mentally ill household member <sup>*</sup>	19.4%	24.1%
Witnessed domestic violence <sup>**†</sup>	12.7%	17.9%
Incarcerated household member <sup>*</sup>	4.7%	12.9%
<b>ADDITIONAL ACEs</b>		
Witnessed violence	-	40.5%
<b>Experienced discrimination</b>	-	<b>34.5%</b>
Unsafe neighborhood	-	27.3%
Experienced Bullying	-	7.9%
Lived in foster care	-	2.5%

## SUMMARY

- Racism is a stressor that's commonly experienced by minority children and youth
- There's a small but growing literature on the association between perceived racism and child health outcomes
- Racism can be conceptualized as a toxic stressor that contributes to allostatic load (physiologic dysregulation) and subsequent illness
- The illnesses that are linked to this physiologic dysregulation are the same illnesses that show racial and ethnic disparities
- Racism experienced in childhood should be thought of as an Adverse Childhood Experience that can affect health and wellbeing throughout the lifecourse

## ADVERSITY → OUTCOMES

## ASSETS/ADVERSITY → OUTCOMES

- 
- FAMILY
  - PEERS/FRIENDS
  - OTHER ADULTS
  - COMMUNITY
  - NEIGHBORHOOD
  - SOCIAL CAPITAL
- + COPING STYLE
  - "GRIT"
  - LOCUS OF CONTROL