

Statement from Treniece Lewis Harris, PhD

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"Social justice and progress are the absolute guarantors of riot prevention."

Dr. Martin Luther King, Jr. at Stanford University, April 14, 1967

I was born in 1968, the year Dr. Martin Luther King, Jr. was assassinated. After many years of leading peaceful civil rights marches filled with nonviolent protesters faced by police officers many of whom reacted with violence toward them, they killed him. In cities across the United States, including Boston, many traumatized communities erupted in righteous rage against a country who for centuries had committed intergenerational trauma against them. I am now over 50 years old and today we are unbelievably faced with a similar situation in America. African Americans are still faced with the trauma of being targeted by other citizens and law enforcement officers. Some are lucky enough to make it out alive (Christian Cooper), others tragically are not (Trayvon Martin, Michael Brown, Sandra Bland, Eric Garner, Ahmaud Arbery, Breonna Taylor, George Floyd and too many more).

What compounds this overt racism is the subversive racism that occurs when some people suggest you are "playing the race card" when you point out systemic, institutional racism faced by the African American community. Colin Kaepernick peacefully "took a knee" against police brutality against African American citizens, lost his job and was accused of being unpatriotic by the President of the United States. As Malcolm X stated "That's not a chip on my shoulder, that's your foot on my neck." Now, people expressing their righteous rage are being called "thugs". Yet, as mental health professionals we know that years of abuse and inhumane acts against a human being can result in emotional dysregulation to say the least. I have spent almost 20 years at CHA leading efforts to increase the awareness of the ways racism and other forms of social injustice (homophobia, sexism, antisemitism etc.) negatively affect the mental health of the people we serve. I have been grateful to work with many people who have worked alongside me to reduce health disparities and who bravely have examined their own potential for implicit bias. However, we can do so much more... As we watch our nation erupt yet again in righteous rage, let's continue to be dedicated to identifying practical ways we as a professional community can help to heal the wounds of racism faced by our patients. Even more, let's be true action-oriented allies by doing things in our personal lives that reduce racism like lending your expertise to a community group trying to address racism or calling your local legislator and ask them to support bills that decrease health care disparities, act on the initiatives brought to your attention by CHA's own Social Justice Committee. In short, reflection is fine but action (therapeutic and/or political) is what we truly need.