



BROWN

# Diversity SPEAKS!

*A Newsletter brought to you by the Diversity, Equity, Inclusion and Belonging Committee*

**June 2022, Issue No. 14**

Welcome to the 13th issue of our Diversity SPEAKS newsletter. We hope it will inspire conversation and action to promote diversity of perspectives and experiences in the pursuit of academic excellence in training, research, teaching and service. The newsletter is sponsored by the Diversity, Equity, Inclusion and Belonging (DEIB) Committee of the Department of Psychiatry and Human Behavior and the Center for Alcohol and Addiction Studies.

## **Interview with Sierra Carter, PhD**

*Assistant Professor of Clinical and Community Psychology, Georgia State University  
Adjunct Faculty, Emory University School of Medicine*

Dr. Carter's primary area of research and consultation work is in the area of promoting racial health equity. Her research focuses on how psychosocial and contextual stressors can affect both mental and physical health outcomes for marginalized populations. She has had a long-standing interest in the ways that health disparities in Black populations arise and are maintained by psychological, physiological, and contextual processes. A theme throughout much of her work has been examining how, across a life course, racial discrimination as an acute and chronic stressor can effect development and further exacerbate chronic illnesses and stress-related disorders. Utilizing a risk and resilience framework, her work has also shown differences in Black individual's responses to racism-related stress and how culturally-relevant factors, such as racial identity, active coping responses, and Africentric Worldview, exacerbate or protect against the deleterious health effects of racism experiences. Her interdisciplinary research program integrates psychology, biology, public health, and developmental science to add to research evidence that: (1) multi-level forms of racism experienced across the life course undermines oppressed populations' health across multiple generations; and (2) translational research must include the development of culturally-relevant models for prevention-oriented interventions among marginalized populations.



## Interview with Dr. Sierra Carter

### **Tell us what initially drew you to your work?**

When I was an undergraduate in 2009, I took a course in African American Psychology by Dr. Enrique Neblett that changed my thoughts on what I could do with a degree in psychology. At the time, I did not feel like I had much coursework that discussed studies that focused on people that looked like me. So my love for the general field of psychology led me down a number of pathways (i.e., marriage/couples, schizophrenia, autism, developmental processes) until I took this course. In this course I learned about health disparities that African Americans

continuously faced as well as culturally-grounded factors (i.e. racial identity, racial socialization) that I discussed with my family members regularly. I realized then that this area of research drew me in and was invigorating to me. I've never looked back since then :).

### **What do we know about the impact of discrimination on physical health for folks with multiply marginalized identities?**

We actually know quite a bit! My area of research interest focuses on the ways that psychosocial and contextual stressors, often rooted in historical legacies of racism, affect both mental and physical health outcomes for Black Americans across the life course. There is a strong body of literature indicating that Black Americans live sicker and die younger than other racial/ethnic groups (Williams et al., 2019). For decades, researchers have examined mechanisms leading to these health inequities and the effects of

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## **Interview with Dr. Carter continued**

“weathering” continues to be an important framework for understanding the effects of racial discrimination. The concept of “weathering,” or the toll that repeated stressors experienced by marginalized people take on their health over time has led to conceptions of the insidious ways that racism can effect an individual’s ability to live long and thriving lives. Studies have demonstrated links between chronic stress on high blood pressure, increased maternal mortality rate among Black and Indigenous women, and the elevated prevalence of diabetes in Black, Latino and Indigenous populations. Although I believe research is still lacking in fully acknowledging racism as a chronic stressor that can influence all of these health disparities, the literature is continuously growing.

**Your work has looked at the impact of racial discrimination on accelerated aging. How do**

***you think increased reports of racial violence since the start of the pandemic has affected or will affect these processes?***

I think it’s a complex process and I actually think we have to be careful with thinking that only recently has there been an “increase” in racialized violence. For many people that I know and have worked with through research, experiences of racialized violence is not televised are constantly streamed, but the impact of racialized violence has been seen in marginalized communities across time and across generations. I think what we are seeing currently after the murder of individuals like George Floyd, Ahmaud Arbery,

*“We have begun to consider what the mental and physical health toll is for Black Americans as well as other marginalized groups, as a collective, to continuously bear witness to deaths of other Black Americans.”*

## Interview with Dr. Carter continued

Breonna Taylor, and recently Patrick Lyoya and many many others is somewhat of a recognition that this is something that our society has to reckon with, resolve, and remediate historical and contemporary harms.

I will also note, in further consideration of your question, that as we continue to watch accumulating news stories of Black women, men, and children being killed due to racial injustice, we can begin to see the research on racism as a chronic stressor having an evolving as well as a new area of emphasis. We have begun to consider what the mental and physical health toll is for Black Americans as well as other marginalized groups, as a collective, to continuously bear witness to deaths of other Black Americans that could provoke imagery of harm to oneself, family members, or close friends; the constant

reminder that our society does not fully value you or your community's life or well-being. Research has found that police shootings of unarmed Black Americans have a spillover effect on the mental health of Black Americans within the state in which the incident(s) occurred for at least 3 months post incident (s) (Bor et al., 2018). I think research on the impact of cultural and vicarious racism, whereby the impact to one's physical wellbeing is linked to witnessing injustice, will be a vital area of current and future research.

*"... it is important to consider the ways Black people have already coped in the face of racial injustice throughout our history in order to amplify strength-based processes in the face of oppression."*

## **Interview with Dr. Carter continued**

***In your work, what have you found about racial and cultural characteristics as protective factors for health?***

My work has examined culturally grounded factors, such as racial identity and Africentric worldview, as a buffer in the relationship between racism and blood pressure among Black people. I believe it is important to consider the ways Black people have already coped in the face of racial injustice throughout our history in order to amplify strength-based processes in the face of oppression. For example, in one of our recent studies (Mekawi, Carter et al., 2021) we found that the severity of post-traumatic stress disorder symptoms and depressive symptoms differed based on the ways in which Black people chose to cope with racism experiences. Black people who sought out social support and challenged racism experiences had fewer mental health

symptoms compared to those who engaged in passive coping or no coping at all.

So in our current research we are taking a mixed-methods approach to amplify the lived experiences of Black American communities that have disproportionate rates of trauma exposure, and further grasp identifiable strengths and resilience mechanisms that may offset the psychophysiological toll of racism-related stress. Some of our research is beginning to highlight the potential need for collective healing approaches to address the collective wounds experienced among Black Americans who have witnessed and experienced racial injustice. Our research challenges us to think outside of Eurocentric driven ideas of protective factors and these healing approaches could include

## Interview with Dr. Carter continued

communal spaces where Black communities can share their stories and discuss the impact of historical injustice on their collective lives as well as engage in community action to resist oppression (French et al., 2020; Grills, Aird, & Row, 2016).

**What is one piece of advice you have for trainees and early career researchers who are interested in health equity research and advocacy ?**

*“Our research challenges us to think outside of Eurocentric driven ideas of protective factors ...”*

Remember that cultural humility is a lifelong process. The area of health equity research and advocacy is rich and longstanding; with a number of minoritized scholars who have advocated for the importance of health equity research in the past..... often with little recognition. I believe that engaging in continuous cultural humility in this field is necessary to be a health equity scholar with: (1) historical consciousness; (2) an ability to acknowledge one’s own ignorance/bias and need to learn or pass the mic to others with lived experience; (3) an increased awareness of the importance of seeking out multiple voices and interdisciplinary expertise to solve complex issues surrounding health equity.



### **NIH Research Supplements to Promote Diversity**

NIH Research Supplements to Promote Diversity in Health-Related Research are a WIN for faculty who have NIH grants with > 2 years remaining because their research team can be extended via a supplement. Supplements are a WIN for students, postdocs, and early career faculty from underrepresented groups in the biomedical, clinical, behavioral, and social sciences who wish to broaden their skills and pursue a research career. Faculty investigators are encouraged to consider adding a diversity supplement to your existing NIH grants. Trainees and early career faculty members from underrepresented groups are encouraged to consider working with existing investigators to apply for a diversity supplement. [Click here for details!](#) Deadlines vary by institute, and timelines apply so do not delay, [Find your institute here!](#) The Diversity Committee can facilitate matching investigators and trainees (please contact Hayley Treloar Padovano [Hayley\\_treloar@brown.edu](mailto:Hayley_treloar@brown.edu)).

#### **Link to funding opportunities:**

<https://docs.google.com/spreadsheets/d/1NT-nttemx0UAPr7nUdW5G4GNS0SBhVliGc0NCTgr0ns/edit?usp=sharing>

(opportunities gathered by the Office of Research Development and the Office of Corporate and Foundation Relation, both of Brown University)

# Lifestyles

## Ingredients

- 1 cucumber
- 1 cup of tomatoes
- ½ of red onion
- ½ bunch of fresh parsley
- 1 mango
- 1 cup uncooked lentils
- 2 tbsp of olive oil
- 2 tbsp of water
- 3 tbsp of tahini
- 1 garlic clove
- 2 tbsp of lemon juice
- 2 tbsp of rice vinegar
- salt and pepper

## Super Easy Yummy Lentil Salad with Tahini

### Directions

1. Cook the lentil according to package instructions
2. Chop up cucumber, tomatoes, red onion, mango and parsley
3. Make the dressing by simply mixing all the ingredients in a small bowl
4. Assemble your salad and mix in the dressing

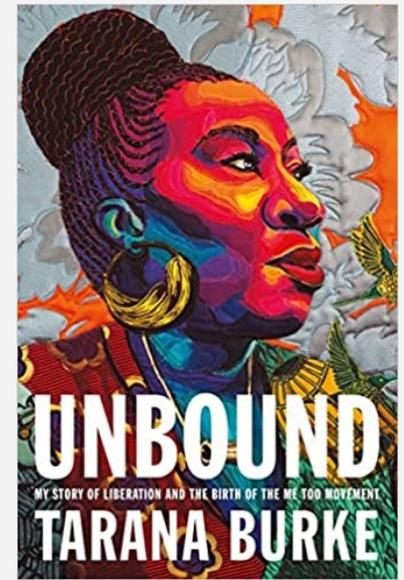


Recipe from:  
[www.eatmoreplants.no](http://www.eatmoreplants.no)

**BOOK REVIEW*****Unbound: My Story of Liberation and the Birth of the Me Too Movement*****by Tarana Burke**

Reviewed by:

Trisha Arnold, PhD



This memoir reflects how one of the largest cultural events in American history, the ‘Me Too’ movement unraveled. I want to express extreme gratitude towards Tarana for her willingness to be both vulnerable and fearless in writing this book and being a leader in her community. *Unbound* is well written, engaging, and provokes a rollercoaster of emotions as you journey through the experiences of Tarana and many of the young women she impacted over the years. *Unbound* defines the ‘Me Too’ movement and provides detail into Tarana’s life as an activist and leader for young Black and brown women. The book reflects the large influence being seen and heard can have on women and their lives. This book provides readers a glimpse of the trauma experienced by many women and provides details as to why women decide not to speak up. In the end, Tarana demonstrates through her own personal journey how speaking up leads to a new kind of freedom.

**Quote:** *“Maybe he (her abuser) just didn’t see me because he hasn’t seen me since I was a very little girl,” Tarana said. Her mother replied, “No, he didn’t recognize you because you turned out to be a smart, beautiful, accomplished woman despite him (her abuser) trying to take that from you.”*

## Volunteer Opportunities



### PFLAG Greater Providence

PFLAG supports LGBTQ people, their families and friends locally and nationally by providing PFLAG chapter helplines, support group meetings and resources. PFLAG also educates families and communities on sexual orientation, gender identity and LGBTQ issues. Volunteer opportunities include serving on the board and attending monthly meetings sharing your story at a speaking engagement, editing our bi-monthly newsletter, making our famous ribbon pins, helping out at Pride Fest, staffing our PFLAG table at other events, etc. Visit this website for more information about volunteering: <https://www.pflagprovidence.org/donatejoin.html>

### Black Lives Matter RI



Black Lives Matter RI (BLM RI), remains on the frontlines and at the forefront of the movement and fight to end anti-Black and systemic racism, police brutality against and killing of Blacks, and white supremacy in all its forms and facets and to bring about justice, equality and empowerment for Black people in Rhode Island and globally. Visit their website to get more involved!

### Habitat for Humanity of Greater Providence



Currently accepting individual volunteers on some weekend dates, to work on a home being built in the Olneyville neighborhood. Check out this website: <https://habitatpvd.org/volunteer/>

## Volunteer Opportunities continued

### Federal Hill House



FEDERAL HILL HOUSE

Many opportunities to get involved in this multi-service community-based organization that supports low-income, immigrant, and limited English speaking individuals and families located off of Atwells Avenue. Visit their website <https://www.federalhillhouse.org/connect-me/> or call Allori Fernandes at (401) 421-1095 for more information about volunteer options.

### Sojourner House



**Sojourner House**

Sojourner House is a provider of comprehensive services available to victims of abuse 24 hours a day, 7 days a week. There are opportunities for collaboration with individuals, local businesses, and community organizations for skills-based training for our staff or clients, and they ask for a 4-hour per week commitment from volunteers. Please visit this website for more information about volunteer opportunities and requirements: <https://sojournerri.org/volunteer/>

### Brown Human Rights Asylum Clinic (BHRAC)



BHRAC is a medical student-run human rights clinic dedicated to providing forensic medical evaluations to survivors of persecution who seek asylum in the United States. If you are interested in volunteering as an evaluator please visit their website for more details about training opportunities: <https://brownasylumclinic.wixsite.com/>

*The DEIB Committee periodically identifies articles to promote reflection on important topics within diversity.*

**Article:** Systemic challenges in health service psychology internship training: A call to action from trainee stakeholders

**Link:** <https://journals.sagepub.com/doi/abs/10.1177/21677026211072232?journalCode=cpxa>

The challenges observed in health-service-psychology (HSP) training during COVID-19 revealed systemic and philosophical issues that preexisted the pandemic but became more visible during the global health crisis. In a position article written by 23 trainees across different sites and training specializations, we use lessons learned from COVID-19 as a touchstone for a call to action in HSP training. Historically, trainee voices have been conspicuously absent from literature about clinical training. We describe long-standing dilemmas in HSP training that were exacerbated by the pandemic and will continue to require resolution after the pandemic has subsided. We make recommendations for systems-level changes that would advance equity and sustainability in HSP training. This article advances the conversation about HSP training by including the perspective of trainees as essential stakeholders.

### A special thanks to newsletter contributors:

Trisha Arnold, Jennifer Hellmuth, Sharon Lee, Cara Murphy, Hayley Treloar Padovano, Roman Palitsky, and Nick Tarantino

Interested in getting involved? Please contact Co-Chairs Hayley Treloar Padovano or Ernestine Jennings ([hayley\\_treloar@brown.edu](mailto:hayley_treloar@brown.edu) & [ernestine\\_jennings@brown.edu](mailto:ernestine_jennings@brown.edu)) for more information.



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