

Intersections of Institutional Racism, Racial Microaggressions, and Minority Stress in the Lived Experiences of Black People

Steven Seiler

Abstract: *Macro-level institutional racism and micro-level racial microaggressions have an insidious effect on the social experience and, consequently, mental health of Black people. The purposes of this study were to compare the differential experiences of structural uncertainties, racial microaggressions, and minority stress between a nationwide sample of people who are Black and people who are White as well as to understand the impact of racial stressors on minority stress among people who are Black, specifically. It is argued that minority stress among people who are Black is a central process that inherently connects institutional elements and the lived experience and, ultimately, provides a context for a deeper understanding of the connection between racism and mental health among people who are Black. A secondary data analysis of survey data from the “2016 Racial Attitudes in America II” was conducted by the Pew Research Center in which perceptions and experiences of people who are Black and White (Weighted n=3,036) and, subsequently, patterns among a subsample of people who are Black (Weighted n=480) were examined. The study found that larger percentages of people who are Black in the U.S. experience structural uncertainties and racial microaggressions than people who are White. Among people who are Black, as the intensity of racial stressors increases, the level of minority stress increases. Ultimately, the study substantiates the structural uncertainties, racial microaggressions, and minority stress experienced among people who are Black and suggests that minority stress among people who are Black is a psychosocial response to everyday structural uncertainties and racial microaggressions. Based on the results, it is recommended that on a macro-level, healthcare policy acknowledges minority stress among people who are Black and, on a micro-level, that addressing minority stress be incorporated into therapeutic interventions by social workers and other helping professionals as an important component of cultural competency.*

Keywords: Racial microaggressions, racial stressors, minority stress

On May 25, 2020, George Floyd was murdered in broad daylight by four Minneapolis, Minnesota police officers who restrained and subsequently choked the life out of him while on-lookers pled for his life – all over a suspicion of using a counterfeit \$20 bill (Hill et al., 2020). On March 13, 2020, Breonna Taylor was killed in her own home in Kentucky by two undesignated police officers because the police believed the occupants of the home were selling drugs – which they were not (Burke, 2020). On February 23, 2020, while jogging in Georgia, Ahmaud Arbery was killed by two White men because they suspected him of robbery of local homes – which he did not do (BBC, 2020). These all-too-common events are tragic and unquestionably racist in nature, but they are only the mine canaries sounding alarms about the much broader, more subtle forms of racism experienced by people who are Black throughout their everyday lives.

Steven Seiler, PhD, Professor, Department of Sociology & Political Science, Tennessee Tech University, Cookeville, TN.

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One of the 12 Grand Challenges for Social Work (2018) is to “achieve equal opportunity and justice,” which involves social workers “addressing racial and social injustices, deconstructing stereotypes, dismantling inequality, and exposing unfair practices [that] will lead to the full social, civic, economic, and political integration of these marginalized groups” (p. 1). In order to achieve the objectives of this challenge, it is necessary to understand the lived experiences of marginalized groups. For racial injustice, it is critical to understand the impact and consequences of racial inequality on the everyday life experiences of Black people. Studies have addressed the impact of minority stress and racial microaggressions on mental and physical health and identity (Arbona & Jimenez, 2014; Meyer, 1995; O’Keefe et al., 2015). However, previous research has not necessarily substantiated the intersections between minority stress, racial microaggressions, and mental and physical health as unique experiences or feelings among Black people, specifically.

For any policy or program aimed at reducing racial inequality to maximize its effectiveness, it must account for the micro-level dynamics of racial injustice, the macro-level social patterns of racism in and across social institutions, and the connections between the two levels. In this study, we argue that minority stress among people who are Black is a central process that inherently connects institutional elements and individuals’ lived experience. Ultimately, the concept provides a framework for understanding the connection between racism and mental health among people who are Black. Accordingly, through a secondary data analysis of a nationally-representative survey conducted by the PEW Research Center, this study aimed to examine structural uncertainty, racial microaggressions, and minority stress by comparing the experiences and feelings of people who are Black and White. The study also examined the impact of structural uncertainties and racial microaggressions on minority stress among a subsample of people who are Black.

Literature Review

Institutional racism, microaggressions, and microassaults are well-documented in the literature, and the implications for health, including mental health, are very concerning. Current research in social work explores these issues for minorities. However, the field lacks a specific examination of the impact of institutional racism, microaggressions, and minority stress on the Black community in the U.S., and especially the relationships and correlations between these different levels and dynamics of racism. This research addresses these relationships and examines the correlation between racism and mental health outcomes. The following literature review provides background information about institutional racism, interpersonal racism, and the current awareness of how minority stress impacts the Black community.

The lives of people who are Black, a marginalized group in the U.S., are shaped by institutional and interpersonal forms of racism. In previous research, institutional racism is often referred to as a type of racism without racists (Bonilla-Silva, 2006; Harper, 2012; Carroll Massey et al., 1975; Müller-Uri & Opratko, 2016). Formally, institutional racism is a race-based inequality that is built into the cultural structures, over the course of time,

within all areas of social life and that is routinized in a manner that disconnects racism from conscious individual action. Whereas some define institutional racism in terms of organizations and social policies (See Brondolo et al., 2011; Jeanquart-Barone & Sekaran, 1996), others, more comprehensively, explain it as a system-wide cancer embedded within culture, the effects of which “are suffused throughout the culture via institutional structures, ideological beliefs, and personal everyday actions of people in the culture, and... are passed on from generations to generations” (Griffith et al., 2007, p. 384). Since such racism is built into culture, it becomes a foundational element in organizational processes and uncoordinated social interaction.

For people who are Black, such institutional racism is evident in macro-level patterns that are well-documented in previous research. Within our economic institutions, in 2020, nearly 20% of people who are Black and just over 8% of people who are White live in poverty; moreover, the median income was just under \$46,000 for people who are Black and just under \$75,000 for White people (Shrider et al., 2021). Unemployment among people who are Black is more than two times higher than among people who are White (U.S. Bureau of Labor Statistics, 2020). Within healthcare, Black people are at greater risk of “earlier onset of disease, greater severity and progression of disease and higher levels of comorbidity and impairment” (Williams & Mohammed, 2013, p. 1153) and have less access to health insurance. Just over 55% of people who are Black have private insurance compared to nearly 75% of people who are White (Berchick et al., 2019). Moreover, compared to White people, people who are Black are more likely to die at early ages “from all causes,” as 406 out of every 100,000 Black people between the ages of 18 and 64 die early compared to 347 out of every 100,000 White people within the same age range (Centers for Disease Control, 2017). Life expectancy is lower for people who are Black, as the average years of remaining life for Black people between the ages of 20 and 40 is just over 47 years compared to over 50 years among White people in the same age group (Arias & Xu, 2019). Additionally, about 47% of people who are Black between the ages of 35 and 64 have high blood pressure compared to just over 31% of people who are White in this same age group (CDC, 2017). Just over 16% of people who are Black within this age group have diabetes, compared to 10% of people who are White. Nearly 5% of people who are Black in this age group have had at least one stroke, compared to just under 3% of people who are White (CDC, 2017). Within politics, nearly 80% of voting members of the U.S. Congress are White (Bialik, 2019). While these statistics describe the context within which Black people live, they do not account for the lived experiences of people who are Black.

Within the lived experience, people who are Black are exposed to interpersonal racism, which consists of “directly perceived discriminatory interactions between individuals whether in their institutional roles or as public and private individuals” (Brondolo et al., 2011, p. 522). Interpersonal racism occurs as various forms of racial microaggressions, which are “brief, everyday exchanges that send denigrating messages to people of color because they belong to a racial minority group” (Sue, Bucceri et al., 2007, p. 72). Two forms of microaggressions are microassaults (i.e., overt forms of verbal, nonverbal and environmental attacks aimed at hurting people of color) and microinsults (i.e., are actions or comments that offend people’s racial identity; Sue, Capodilupo et al., 2007), “such as ascribing a certain degree of intelligence based on the person’s race, being treated as

inferior to others of a different race, and assuming that the person is a criminal or deviant in some way because of his/her race” (Wong et al., 2014, p. 183). Whereas microassaults are overt forms of racism, microinsults “tend to operate unconsciously, are unintentional, and generally outside the level of conscious awareness” (Sue, Bucceri et al., 2007, p. 73).

Although a large amount of research into racial microaggressions substantiates the concept and the uniqueness of racialized experiences, much of the research focuses on college students or small samples of people of color. Of the comparative research, Torres-Harding et al. (2012) and Forrest-Bank and Jensen (2015), for example, found people who are Black were far more likely to experience racial microaggressions than people who are White. However, in both studies, the participants were largely college students. Although the findings were very meaningful, the generalizability of the findings might be limited.

Numerous studies have found a relationship between institutional racism and health outcomes (Alang, 2019; Anderson, 2013; Brondolo et al., 2011; Paradies et al., 2015; Phelan & Link, 2015; Williams & Mohammed, 2013). Although correlations between racism and health are present in the research, the exact reason for the correlations remains unclear. Additionally, a large body of research has examined the consequences of microaggressions (Forrest-Bank & Jenson, 2015; O’Keefe et al., 2015; Smith et al., 2011; Sue, Capodilupo et al., 2007). This research establishes correlations between microaggressions and health in the lived experiences of people who are Black. However, the reason for the correlations is unclear, and the relationship between microaggressions, institutional racism, and mental health is less clear.

One possible reason for the correlation between microaggressions and mental health that has been under-explored is minority stress. Minority stress, or “excess stress to which individuals from stigmatized social categories are exposed as a result of their social, often a minority, position” (Meyer, 2003, p. 678), could be a missing conceptual link between institutional racism, microaggressions, and the mental health of people who are Black. The current study aimed to provide a deeper understanding of the nature of these correlations.

A number of studies have examined the effects of minority stress on mental and physical health among various minority groups such as Latino/a college students (Arbona & Jimenez, 2014), racial and ethnic minority college students (Wei et al., 2010), LGBTQ Asian Americans (Szymanski & Sung, 2010), LGBTQ people of color (Balsam et al., 2011), and Black lesbians (Bowleg et al., 2003). However, few studies have examined minority stress exclusively and generally among the Black community.

Minority stress is likely the byproduct of racial microaggressions. Such microaggressions are traumatic, yet the trauma can be as subtle as this type of racism itself. Such racial trauma is experienced both directly and indirectly; that is, not only do the victims of racial microaggressions experience direct trauma, but also those who hear about or see via media platforms people who are Black victimized through racial microaggressions can experience vicarious trauma (Bernstein et al., 2007; Heard-Garris et al., 2018).

From a constructivist perspective, social reality is constructed through knowledge in the lived experience (Marsiglia & Kulis, 2016). For people who are Black, oppression and

uncertainty become built into the social reality through navigating institutional racism and microaggressions in daily social interaction. Within this reality, they experience a very real level of stress related to their racial minority status – incomparable to the social realities of Whites. Meyer (2003) explains,

minority stress is (a) unique—that is, minority stress is additive to general stressors that are experienced by all people, and therefore, stigmatized people are required an adaptation effort above that required of similar others who are not stigmatized; (b) chronic—that is, minority stress is related to relatively stable underlying social and cultural structures; and (c) socially based—that is, it stems from social processes, institutions, and structures beyond the individual. (p. 678)

People who are Black experience minority stress as unique additive stress due to the consequences of institutional (i.e., chronic) racism and microaggressions within their social reality. This claim should be able to be empirically verified in the following ways.

First, since institutional racism is built into social structure, it is experienced indirectly in the micro-process of everyday social interactions through structural uncertainties such as unemployment, food insecurity, and the inability to pay bills. These uncertainties are not exclusive experiences of people who are Black, as many people living in poverty experience them. However, previous research provides substantial evidence that people who are Black are disproportionately affected by job insecurity (Freeman, 2012; Landsbergis et al., 2014), financial insecurity (Hill et al., 2017; Ortiz & Zimmerman, 2013; Western et al., 2012), and food insecurity (Allen et al., 2016; Balistreri, 2016; Myers & Painter, 2017). Therefore, in anticipation of verifying previous studies regarding disparities between people who are Black and people who are White in these three areas, this study tests the following confirmatory hypotheses:

H_{1a}: People who are Black are more likely to experience job insecurity than people who are White.

H_{1b}: People who are Black are more likely to experience financial insecurity than people who are White.

H_{1c}: People who are Black are more likely to experience food insecurity than people who are White.

Second, within daily life, people who are Black experience overt (microassaults) and subtle (microinsults) forms of interpersonal racism. Such racial microaggressions are one of the elements defining the unique experience of people who are Black and should be identifiable and disproportionately experienced by people who are Black when compared to people who are White, leading to the following hypotheses:

H_{2a} (microassault): People who are Black are more likely to experience discrimination, generally, because of their race than people who are White.

H_{2b} (microassault): People who are Black are more likely to be treated unfairly by an employer in hiring, pay, or promotion because of their race than people who are White.

H_{2c} (microassault): People who are Black are more likely to be unfairly stopped by police because of their race than people who are White.

H_{3a} (microinsult): People who are Black are more likely to be treated with suspicion because of their race than people who are White.

H_{3b} (microinsult): People who are Black are more likely to be treated as unintelligent because of their race than people who are White.

Since minority stress is a “psychosocial stress derived from minority status” (Meyer, 1995, p. 38), disparate feelings among people who are White and people who are Black about the state of race relations and racial equality should also be empirically verifiable. People who are Black have historically been and are currently subjected to inequities such as unfair lending practices and racism in the workplace and public spaces (Bartlett et al., 2022; Kau et al., 2012; Opie & Roberts, 2017). The previous hypotheses account for experiences leading to minority stress; however, feelings about race relations and equality are likely to represent the psychosocial nature of minority stress (Meyer, 1995). Accordingly, the following hypotheses are tested:

H_{4a}: People who are Black are less likely to feel the country has made the changes needed to give Blacks equal rights with people who are White.

H_{4b}: People who are Black are more likely to feel that Blacks are treated less fairly in the workplace than people who are White.

H_{4c}: People who are Black are more likely to feel that Blacks are treated less fairly in stores or restaurants than people who are White.

H_{4d}: People who are Black are more likely to feel that Blacks are treated less fairly when applying for loans or mortgages than people who are White.

H_{4e}: People who are Black are more likely to feel that Blacks are treated less fairly when dealing with the police than people who are White.

H_{4f}: People who are Black are more likely to feel that Blacks are treated less fairly in courts than people who are White.

Finally, a central argument here is that structural uncertainties and racial microaggressions are social experiences that likely impact minority stress, which, theoretically, is likely to influence mental health. For people who are Black, the presence of racial stressors – both structural uncertainties and microaggressions – is likely to contribute to minority stress. Formally, the following hypothesis is tested:

H₅: As the level of racial stressors increases, the level of perceived minority stress increases.

Methods

Survey Data

The data for this study came from the “2016 Racial Attitudes in America II” survey conducted via telephone in Spanish and English from February 29, 2016 to May 8, 2016 among 3,346 adults (18 years old or older) in the United States by the Princeton Survey Research Center for the PEW Research Center (Pew Research Center, 2016). As a nationally-representative sample, weights were used in order to account for demographic discrepancies between the sample and the population and nonresponse patterns. The

weighted data of the original dataset had a margin of sampling error of ± 2.2 percentage points (Pew Research Center, 2016). The actual sample used in this study was smaller. First, to test H1-H4, the sample was reduced to only people who are Black and people who are White (Weighted $n=3,036$). Additionally, to test H5, the weighted data were reduced to a subsample of people who are Black (Weighted $n=480$).

Variables

Dependent Variables

The study focused on 15 dependent variables in the three categories – (1) structural uncertainties, (2) racial microaggressions, and (3) minority stress – consisting of 14 dichotomous variables to test H₁-H₄ and one index to test H₅ (See Table 1). *Structural uncertainties* were measured using three survey questions addressing job insecurity, financial insecurity, and food insecurity. First, *job insecurity* was measured using the survey question, “In the past 12 months, have you been laid off or lost your job?” Second, financial insecurity was measured using the survey question, “In the past 12 months, have you had trouble paying bills?” Finally, food insecurity was measured using the survey question, “In the past 12 months, have you gotten food from a food bank or food pantry?” The response options for the three questions were (0) “No, has not happened” and (1) “Yes, has happened.”

Racial microaggressions were measured using five survey questions separated into two categories – microassaults and microinsults – that capture whether or not respondents have experienced racism (microassault), have been treated unfairly by law enforcement (microassault) or by an employer (microassault), and treated as suspicious (microinsult) and treated as unintelligent (microinsult). For the measures of microassaults, experienced racism was measured using the survey question, “Thinking about your own experience, have you ever personally experienced discrimination or been treated unfairly because of your race or ethnicity, or not;” unfair treatment by law enforcement was measured using the survey question, “In the past 12 months, have you been unfairly stopped by police;” and unfair treatment by an employer was measured using the survey question, “In the past 12 months, have you been treated unfairly by an employer in hiring, pay, or promotion?”

For microinsults, treated as suspicious was measured using the survey question, “In the past 12 months, have people acted as if they were suspicious of you,” and treated as unintelligent was measured using the survey question, “In the past 12 months, have people acted as if they thought you were not smart?” The response options for all questions were (0) “No” and (1) “Yes.”

Minority stress was measured using six survey questions in two categories: perception of equality (one question) and perceptions of fairness (five questions). First, perception of equality was measured using the survey question,

Which of these two statements comes closer to your own views -- even if neither is exactly right: Our country has made the changes needed to give Blacks equal

rights with Whites [OR] Our country needs to continue making changes to give Blacks equal rights with Whites.

Table 1. *Descriptive Statistics, Dependent Variables: Structural Uncertainties, Racial Microaggressions, & Minority Stress*

	<u>Weighted/ Unweighted</u>	<u>n (Valid %)</u>		
		<u>Total</u>	<u>No</u>	<u>Yes</u>
<i>Structural Uncertainties</i>				
Job Insecurities	U	3750	3308 (88.2%)	442 (11.8%)
	W	3585	3150 (87.9%)	434 (12.1%)
Financial Insecurities	U	3757	2591 (71.6%)	1066 (28.4%)
	W	3590	2574 (71.7%)	1016 (28.3%)
Food Insecurities	U	3756	3358 (89.4%)	398 (10.6%)
	W	3592	3201 (89.1%)	391 (10.9%)
<i>Racial Microaggressions</i>				
Experienced Racism	U	3739	1903 (50.9%)	1836 (49.1%)
	W	3589	2117 (59%)	1472 (41%)
Unfair Treatment by Law Enforcement	U	3749	3434 (91.6%)	315 (8.4%)
	W	3586	3352 (93.5%)	235 (6.5%)
Unfair Treatment by an Employer	U	3629	3221 (88.8%)	408 (11.2%)
	W	3490	3166 (90.7%)	323 (9.3%)
Treated as Suspicious	U	3746	2980 (76.9%)	866 (23.1%)
	W	3584	2956 (82.5%)	629 (17.5%)
Treated as Unintelligent	U	3769	2902 (77.7%)	833 (22.3%)
	W	3575	2960 (82.8%)	615 (17.2%)
<i>Minority Stress</i>				
Perceptions of Equality ^A	U	3700	1245 (72.4%)	475 (27.6%)
	W	3540	1082 (86.2%)	533 (33%)
Perceptions of Fairness ^B				
In the Workplace	U	1825	1277 (70%)	548 (30%)
	W	1746	1340 (76.8%)	406 (23.2%)
In Stores or Restaurants	U	1849	1419 (76.7%)	403 (23.3%)
	W	1836	1433 (81.1%)	334 (18.9%)
When Applying for a Loan or Mortgage	U	1561	952 (61%)	609 (39%)
	W	1444	1002 (69.4%)	442 (30.6%)
In Dealing with the Police	U	1810	863 (47.7%)	947 (52.3%)
	W	1740	949 (54.5%)	792 (45.5%)
In the Courts	U	1720	913 (53.1%)	807 (46.9%)
	W	1617	990 (61.2%)	628 (38.8%)
		Total	Mean/SD	Min/Max
Index of Minority Stress (Black Subsample)	W	450	3.56/2.40	0/10

^A Our country has made the changes needed to give blacks equal rights with whites

^B Blacks Treated Less Fairly than Whites in Community...

For efficiency in reporting, the response options for this study were treated as (0) “No” (i.e., “Our country has made the changes needed to give Blacks equal rights with Whites”) and (1) “Yes” (i.e., “Our country needs to continue making changes to give Blacks equal rights with Whites”). Second, perceptions of fairness were measured using five survey

questions: “Thinking about your community, overall, would you say that Blacks are treated less fairly than Whites, Whites are treated less fairly than Blacks, or both are treated about equally...” (1) “in the workplace,” (2) “in stores or restaurants,” (3) “when applying for a loan or mortgage,” (4) “in dealing with the police,” and (5) “in the courts.” For this study, the response options for these four questions were (0) “No” (i.e., “Whites treated less fairly” and “Treated about equally”) and (1) “Yes” (i.e., “Blacks treated less fairly”).

To test H₅ among a subsample of people who are Black, a mean index of perceived minority stress was created from the five questions asking if people who are Black are treated less fairly than people who are White within different areas of the community. A reliability analysis indicated that, when combined, the index had a 73% internal consistency (Chronbach’s $\alpha=.73$).

Independent Variables

For hypotheses H₁-H₄, race was the independent variable, coded as (0) “White” and (1) “Black.” To test H₅ among a subsample of people who are Black, a mean index for the intensity of racial stressors, consisting of the three survey questions for structural uncertainty and five survey questions for racial microaggressions, was created. A reliability analysis indicated an internal reliability of 68% (Chronbach’s $\alpha=.68$), which is not ideal but acceptable for exploratory measures such as this one.

Table 2. *Descriptive Statistics: Independent Variables*

	Weighted/ Unweighted	Total	n (Valid %)	
			White	Black
Race	U	3171	2094 (66)	1077 (34)
	W	3066	2586 (84.3)	480 (15.7)
		Total	Mean/SD	Min/Max
Index of Racial Stressors (Black Subsample)	W	450	3.56/2.40	0/10

Analytic Strategy

All data were analyzed using SPSS 26. First, demographic data were summarized using univariate analysis. Second, univariate analyses were conducted to provide descriptive statistics of variables in advance of testing hypotheses. Third, H_{1a}-H_{4f}, were tested using 2x2 crosstabulations and, for H_{1a}-H_{3b}, subsequent risk estimates determined odds ratios (OR). Finally, the dataset was reduced to a subsample of people who are Black in order to test H₅, which was tested using a bivariate OLS regression analysis.

Results

Demographics

In this study, over 84% of respondents were White, and nearly 16% were Black (See Table 2). Just under 45% were younger than 50 years old. Just over 7% had less than a

high school degree, 30% had a high school degree, 31% had some college, and 31% had at least a bachelor's degree. Additionally, about half (48%) were women (See Table 3).

Table 3. *Additional Demographics*

	<u>Weighted/ Unweighted</u>	Total	n (Valid %)			
			18-29 yrs.	30-49 yrs.	50-64 yrs.	65+ yrs.
Age	U	3127	489 (15.6%)	903 (28.9%)	963 (30.8%)	772 (24.7%)
	W	3027	570 (18.8%)	942 (31.1%)	853 (28.2%)	662 (21.9%)
Education			> High School	High School	Some College	Bachelor or Higher
	U	3160	228 (7.2%)	732 (23.2%)	857 (27.1%)	1343 (42.5%)
	W	3060	228 (7.4%)	922 (30.1%)	954 (31.2%)	956 (31.2%)
Sex			Female	Male		
	U	3171	1515 (47.8%)	1656 (52.2%)		
	W	3066	1478 (48.2%)	1588 (51.8%)		

Structural Uncertainties

H_{1a}-H_{1c} were supported (see Table 4). First, regarding job insecurity, almost 17% of people who are Black and about 11% of people who are White have been laid off or lost their job, suggesting people who are Black were almost 60% more likely to lose their job than people who are White (H_{1a} : $OR=1.59$; $\chi^2=11.29$; $df=1$; $p<.001$). Second, people who are Black were more likely to experience financial insecurity. They were nearly 91% more likely to have trouble paying bills than people who are White; that is, nearly 40% of people who are Black and about 26% of people who are White had trouble paying bills (H_{1b} : $OR=1.91$; $\chi^2=39.39$; $df=1$; $p<.001$). Finally, people who are Black were much more likely to experience food insecurity than people who are White. In fact, they were three times more likely to receive food from food banks or pantries; specifically, just under 9% of people who are White and about 23% of people who are Black received food from such sources (H_{1c} : $OR=3.28$; $\chi^2=91.68$; $df=1$; $p<.001$).

Table 4. *Crosstabulations of Experiences of Structural Uncertainty Among Blacks and Whites*

Structural Uncertainty	% (n)		Odds Ratio	χ^2
	White	Black		
Been laid off or lost job	11.1% (286)	16.6% (79)	1.586	11.29***
Had trouble paying bills	25.7% (663)	39.7% (190)	1.905	39.39***
Gotten food from food bank or food pantry	8.4% (217)	23.2% (111)	3.279	91.68***

Note: * $p<.05$; ** $p<.01$; *** $p<.001$

Racial Microaggressions

H_{2a}-H_{3b} were all supported (see Table 5). Considering racial microassaults, first, people who are Black were five times more likely than people who are White to be victims of racism ($OR=5.352$); that is, just over 72% of people who are Black experience racism, whereas about 33% of people who are White experience racism (H_{2a} : $\chi^2=264.83$; $p<.001$).

Second, nearly 24% of people who are Black and only around 5% of people who are White experience workplace racial discrimination, suggesting people who are Black were five times more likely to be subjected to racism in the workplace than people who are White (H_{2b} : $OR=5.714$; $\chi^2=180.10$; $df=1$; $p<.001$). Third, 18% of people who are Black and under 4% of people who are White were unfairly stopped by police because of their race, which means people who are Black were five times more likely to be victims of racial discrimination by law enforcement than people who are White (H_{2c} : $OR=5.581$; $\chi^2=180.10$; $df=1$; $p<.001$).

Considering racial microinsults, nearly half of people who are Black and about 11% of people who are White were treated as suspicious because of their race; that is, people who are Black were seven times more likely than people who are White to be treated as suspicious (H_{3a} : $OR=7.184$; $\chi^2=376.49$; $df=1$; $p<.001$). Additionally, people who are Black were seven times more likely than people who are White to be treated as unintelligent because of their race, which means nearly 45% of people who are Black and 10% of people who are White were treated as unintelligent because of their race (H_{3b} : $OR=7.309$; $\chi^2=375.15$; $df=1$; $p<.001$).

Table 5. Crosstabulations of Experiences of Racial Microaggressions Among Blacks and Whites

Racial Microaggressions	% (n)		Odds Ratio	χ^2
	White	Black		
Experienced discrimination/treated unfairly because of race/ethnicity	32.5% (838)	72.1% (343)	5.352	264.83***
Treated unfairly by an employer in hiring, pay, or promotion because of race/ethnicity	5.1% (127)	23.4% (109)	5.714	180.10***
Been unfairly stopped by police because of race/ethnicity	3.8% (97)	18% (86)	5.581	143.98***
People acted as if they were suspicious of R because of race/ethnicity	10.9% (280)	46.9% (224)	7.184	376.49***
People acted as if they thought R was not smart because of race/ethnicity	10.2% (261)	45.3% (216)	7.309	375.15***

Note: * $p<.05$; ** $p<.01$; *** $p<.001$

Minority Stress

H_{4a} - H_{4f} were also all supported (see Table 6). First, nearly 40% of Whites and less than 9% of people who are Black felt the U.S. has already made the necessary changes to give Blacks equal rights as Whites (H_{4a} : $\chi^2=81.77$, $df=1$; $p<.001$). Second, only about 17% of people who are White but nearly 54% of people who are Black felt Blacks are treated less fairly than Whites in the workplace (H_{4b} : $\chi^2=152.71$; $df=1$; $p<.001$). Similarly, about 14% of people who are Whites and over 40% of people who are Black felt that Blacks are treated less fairly than Whites in stores or restaurants (H_{4c} : $\chi^2=96.78$; $df=1$; $p<.001$). Just over 22% of people who are White and nearly 67% of people who are Black felt Blacks are treated less fairly than Whites when applying for loans or mortgages (H_{4d} : $\chi^2=166.31$;

$df=1; p<.001$). Just under 40% of people who are White but almost 75% of people who are Black felt Blacks are treated less fairly than Whites in dealing with police (H_{4e} : $\chi^2=97.14; df=1; p<.001$). Finally, 32% of people who are White but almost 73% of people who are Black felt Blacks are treated less fairly than Whites within the courts (H_{4f} : $\chi^2=132.59; df=1; p<.001$).

Table 6. *Crosstabulations of Perception of Treatment of Blacks.*

Feeling of the Treatment of Blacks	% (n)		Odds Ratio	χ^2
	White	Black		
Our country has made the changes needed to give Blacks equal rights with Whites	39.7% (457)	8.9% (21)		81.77***
Blacks treated less fairly than Whites in r's community...				
In the workplace	16.8% (210)	53.9% (124)		152.71***
In stores or restaurants	13.7% (173)	40.4% (95)		96.78***
Applying for a loan or mortgage	22.2% (221)	66.5% (145)		166.31***
In dealing with the police	39.1% (486)	74.1% (172)		97.14***
In the courts	32% (367)	72.9% (164)		132.59***

Note: * $p<.05$; ** $p<.01$; *** $p<.001$

Relationship Between Racial Stressors and Minority Stress

A bivariate OLS regression analysis of the index for racial stressors and the index for minority stress provides support for H5 (See Table 7). That is, about 8% of minority stress is explained by racial stressors ($r^2 = .077$; $F[1,236] = 19.65$; $p<.001$). Specifically, for every one-unit increase in the intensity of racial stressors, the level of minority stress increases by .38 (Unstandardized $B=0.38$; $t=4.43$; $p<.001$). This suggests that people who are Black with the highest intensity of racial stressors (i.e., 10 on a scale from 0 to 10) experience a very high level of minority stress (i.e., 8.75 on a scale from 0 to 10). The relatively low r^2 suggests that just under 94% of minority stress is not explained by racial stressors; however, it is the perspective of the author that this reflects both the limitation of the specific measures as well as the multifaceted complexity of racial stressors as well as minority stress.

Table 7. *OLS Regression of Level of Racial Stressors on the Level of Minority Stress Among a Subsample of Blacks (n=237)*

	<i>B (SE)</i>
Level of Racial Stressors	.379*** (.085)
Constant	4.758*** (.367)
F	19.65***
r^2	.077

Note: * $p<.05$, ** $p<.01$, *** $p<.001$

Discussion

The theory of minority stress among people who are Black proposed here and supported by the findings of this secondary data analysis is that minority stress is a psychosocial response to everyday structural uncertainties and racial microaggressions. The many macro-level patterns of chronic institutional racism are experienced in daily life as structural uncertainties, and these uncertainties contribute to a unique form of stress associated directly with the minority status of people who are Black. Moreover, minority stress is exacerbated by microaggressions – both microassaults and microinsults – and other stressors experienced by people who are Black within daily life.

First, the findings confirm that, although structural uncertainties pertaining to employment, ability to pay monthly bills, and food insecurity are experienced by people of all races, people who are Black are disproportionately more likely to experience these uncertainties than people who are White. In this sense, in addition to being undeniably social in nature, the experiences meet the unique criteria in Meyer's (2003) definition of minority stress. Specifically, considering that people who are Black are 60% more likely to lose their jobs, 91% more likely to have trouble paying bills, and three times more likely to receive food from food banks/pantries than people who are White, this level of uncertainty is clearly a basis for minority stress and undeniably distinct from the experiences of people who are White.

Second, similar to structural uncertainties, the findings provide evidence that people who are Black disproportionately experience both overt and subtle forms of interpersonal racism. That is, of the microassaults, People who are Black were five times more likely to be victims of racism, to face racial discrimination in the workplace, and to experience racial discrimination with law enforcement than people who are White. Experiences of microinsults were no less polarized, as people who are Black are seven times more likely than people who are White to be treated as suspicious and treated as unintelligent. These findings leave no gray area; only around 5% of people who are White face racial discrimination at work and by law enforcement, and less than 10% of people who are White have been treated as suspicious and treated as unintelligent. Juxtapose this with nearly a quarter of all people who are Black experiencing racial discrimination in the workplace and by law enforcement. Not only are these racial microaggressions, but they also meet Meyer's (2003) unique criteria for minority stress.

Third, the findings clearly suggest that people who are Black experience minority stress as it relates to unfair treatment in many areas of social life. The feelings about unequal treatment among people who are Black and White were separated by no less than 30 percentage points between people who are Black and White, suggesting not only very different views of race in the U.S. but also that people who are Black experience “psychosocial stress derived from” their minority status (Meyer, 1995, p. 38).

Finally, the analysis of the relationship between racial stressors – both structural uncertainties and racial microaggressions – and minority stress among the Black subsample validates that racial stressors, as structural experiences, increase minority stress, as a psychological characteristic, among people who are Black. That is, whereas earlier

analyses provide support for the concept of minority stress among people who are Black, the regression analysis provides evidence of the connection between racial stressors and minority stress. The concept of minority stress has received a substantial amount of attention in research among members of the LGBTQ+ community, and importantly so. This study provides evidence that it is an equally useful concept for understanding the intersection between environmental factors and indicators of mental health among people who are Black. Stated differently, racial microaggressions and structural uncertainties take a toll on the mental health of people who are Black.

Contribution to Social Work Policy, Practice, and Knowledge

The findings of this study reinforce the need for healthcare policy that acknowledges minority stress among people who are Black and call for services that include acknowledgment of and treatment for minority stress among people who are Black and other racial minorities. On a micro-level, although minority stress might not be a common presenting problem among Black clients, practitioners must be cognizant of the additional stress experienced as a result of minority status and have the training necessary to explore minority stress within the unique lived experiences of Black Americans. It is likely that such stress could exacerbate conditions leading to clients seeking clinicians (e.g., for anxiety, depression, or anger). Moreover, considering that nearly 70% of social workers are White (Salsberg et al., 2017), and many of their clients are from marginalized groups, licensing and requirements for continuing education courses must prioritize training in diversity, equity, and inclusion.

On a macro-level, organizations must continue to identify and seek to rectify institutional racism. This involves racial dialogue and education for organization members at all levels (Miller & Garran, 2017). That is, racial dialogue among racially mixed groups could initiate communication about diversity, equity, and inclusion, assist in increasing people's understanding and consciousness of institutional racism, and begin building bridges across races and allow for the inclusion of DEI in policy initiatives.

Strengths and Limitations

Strengths of this study include that it used data from a nationally-representative sample of people in the U.S. collected by an uninterested, non-partisan research center. However, the study had a number of limitations. First, as with all secondary data analyses, the questions were predetermined by the PEW Research Center and, thus, only marginally ideal for measuring the concepts outlined here. Testing the reliability of previous measures of racial microaggressions (e.g., Nadal, 2011; Torres-Harding et al., 2012) and minority stress (e.g., Balsam et al., 2013) among people who are Black and White would have been preferred. Testing current indices with a nation-wide sample would provide a much clearer picture of the context of both racial stressors and minority stress, as well as the relationship between the two. Second, although this study provides support for the concept of minority stress and the impact of racial microaggressions and structural uncertainties on minority stress, additional research is necessary to understand minority stress as a genuine mental health indicator for people who are Black. That is, future research should work to develop

and validate a minority stress index, and the index should be studied alongside other, more conventional measures for mental health disorders such as depression, anxiety, mood disorders, and post-traumatic stress disorders.

Third, the data were collected in 2016, and, by many measures, outcomes for people who are Black have worsened with the election of Donald J. Trump at the end of 2016, especially with the onset of the coronavirus pandemic (CDC, 2020; Horowitz et al., 2019); therefore, replicating this study with more recent data would produce a more current understanding of minority stress among people who are Black. Third, the study only accounted for bivariate relationships; replicating this study using multivariate analyses would provide a more robust analysis of minority stress. Finally, since this study only compared people who are Black and people who are White, future research should examine both within-group differences (i.e., intersectionality) among people who are Black and across-group differences with other racial minorities.

Despite the limitations, the findings provide empirical evidence that institutional racism, microaggressions, and macroaggressions exist, that they impact people who are Black more than people who are White, and that they contribute to minority stress. Ultimately, the findings here reinforce the importance of social workers' ethical responsibility to treat people "in a caring and respectful fashion, mindful of individual differences and cultural and ethnic diversity" (National Association of Social Workers, 2020, Ethical Principles, para. 7). In order to pursue the 12th Grand Challenge for Social Work that calls for equal opportunity and racial justice, social workers must work to understand the unique racial context of and consequences of racism for their clients. Minority stress is only one element within the complex web of institutional and interpersonal racism.

Conclusions

This study sought to understand the intersection between institutional racism, racial microaggressions, and minority stress. Minority stress is an indicator of mental health unique to minority groups. However, it has been an underutilized concept in social science and social work research, particularly related to the lived experiences of people who are Black. This study provided evidence, first, of macro-level (structural uncertainties) and micro-level (racial microaggressions) stressors through the different racialized experiences of people who are Black and people who are White. Second, the study provided evidence of minority stress among people who are Black. Finally, among a subsample of people who are Black, the study provided evidence of a strong, positive correlation between racial stressors and minority stress. This study calls for future research into minority stress as a unique mental health indicator among people who are Black, specifically, and people of color, generally, as it is potentially a critical element in cultural competency that has not received significant attention within a therapeutic context.

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- Author note:** Address correspondence to Steven Seiler, Department of Sociology & Political Science, Tennessee Technological University, Cookeville, TN 38505. Email: sseiler@tntech.edu