Understanding minority stress, resilience, and inclusion

In this self-learning course, you will learn about minority stress, its impacts, and how to support people who experience it

Minority identities refer to groups in Canada that deserve equal rights. Research shows that people in these groups face special stress that can affect their health and lives because of their identities.

The following groups are considered equity deserving in Canada:

- Sexual and gender minorities (SGM)
- Indigenous communities
- People with disabilities
- People of colour, also known as visible minorities

Some people may have more than one minority identity. For example, someone could be both a person of colour and a sexual minority.

The following lessons will help you to:

- Understand what minority stress is and how it affects people with minority identities.
- Learn about intersectional minority identities and how they can make minority stress worse.
- Get to know the unique challenges faced by different minority groups in Canada.
- Identify important skills needed to support people dealing with minority stress, especially during emergencies.

Navigating this self-learning course:

- This course is divided into 12 main lessons.
- Each lesson includes information and activities to help you understand its topic.
- There is a lesson about each group that is considered equity deserving.
- You can take these lessons in order — or focus on the one(s) that seem most relevant to your experience.
- You can listen to the information using our audio player and/or download a printable PDF for offline use.

Contents

1. What is minority stress?

Learning objectives	Why this matters
By the end of this lesson, you will be able to: ● Understand what minority stress is. ● Explain the important parts of the minority stress framework. ● Understand how minority stress is connected to mental health.	Minority stress affects mental health and well-being over time: ● It is linked to higher risks of anxiety, depression, and PTSD. ● Understanding minority stress helps explain health disparities and challenges among minority groups. ● Recognizing it can lead to better mental health care and policy changes.

What is minority stress?

Minority stress is the additional stress experienced by people with minority identities because of stigma, discrimination, and social exclusion.[1][2][3] It is:

- **Unique:** This stress is different from everyday stress because it comes from prejudice and unfair treatment.
- **Chronic:** It lasts a long time because society changes slowly.
- **Uncontrollable:** People cannot fully control this stress because it comes from how others treat them.

Components of minority stress

- **Identity stress:** Stress that comes from being part of a minority group that faces unfair treatment.
- **Extra stress:** Added stress on top of the everyday challenges people face.
- **Social stress:** Stress caused by unfair social rules, systems, and institutions.

- **Stress from unfair treatment:** Stress from prejudice, discrimination, and microaggressions, which can harm both mental and physical health.
- **Impact on mental health:** Minority stress can increase the risk of mental health struggles.

Mental health effects of minority stress

Studies show that minority stress can lead to mental health problems, such as:[3]

- Posttraumatic stress disorder (PTSD)
- Mood disorders (like depression and bipolar disorder)
- Anxiety disorders
- Substance use problems
- Body image issues
- Eating disorders
- Thoughts of suicide or suicide attempts

Minority identity, minority status, and stress

Minority status and **minority identity** are related but different ideas.

- **Status** refers to a social group a person is born into or chooses to be part of.
- **Identity** is how a person sees themselves as part of a minority group.

Stress can come from both external and internal sources.

- **External stressors** are things like being treated unfairly, facing discrimination, or experiencing violence due to minority status.
- **Internal stressors** are things like feeling anxious or expecting rejection because of minority identity.[4]

Test your understanding

1. Minority stress only comes from external factors like discrimination. (True, **false**)
2. Which of the following is NOT a characteristic of minority stress?

a. **It is short term and disappears as people adapt to their identity.**
b. It is chronic because social change is slow.
c. It is unique because it stems from prejudice and unfair treatment.
d. It is uncontrollable because it depends on how others treat minority groups.

2. Minority stress: Causes, effects, and responses

Learning objectives	Why this matters
By the end of this lesson, you will be able to: ● Explain the main causes of minority stress. ● Understand how different types of minority stress connect. ● Identify different kinds of minority stress.	Minority stress can affect mental and physical health: ● Experiencing discrimination and stigma increases stress and impacts well-being. ● Both external and internal stressors contribute to mental health challenges. ● Recognizing different types of minority stress helps improve support and coping strategies.

How minority stress affects people

Minority stress is the extra stress that people with minority identities experience because of stigma, discrimination, and social exclusion. This stress can affect mental and physical health.

There are three key ways minority stress affects people:

1. **External stressors:** These are stressful events like discrimination, violence, and exclusion.
2. **Expecting stress**: The fear of being mistreated, which can cause people to always be on guard.
3. **Internalized stress:** Taking in negative beliefs from society and applying them to oneself.

Types of minority stress

Minority stress can happen in different ways, from outside experiences to inner struggles. These fall into two main types:

1. **Distal stressors** come from the outside world and include discrimination, violence, microaggressions, and exclusion. Think of distal stressors like scratches on the skin — they happen because of external forces.[4]
2. **Proximal stressors** are personal thoughts and feelings, like fear of rejection, hiding one's identity, or believing negative stereotypes. Think of proximal stressors like a stomach ache — they come from within.[5] [6]

Both types of stress can build up over time, affecting mental and physical health.

Internalized homo/bi/transphobia

Internalized homo/bi/transphobia happens when people absorb negative societal attitudes about LGBTQ+ identities and turn them inward. This can start before a person even fully understands their own sexual orientation or gender identity.

Once they begin to identify as LGBTQ+, they may apply these negative ideas to themselves, leading to:

- **Low self-esteem:** Feeling unworthy or ashamed of their identity.
- **Inner conflict:** Struggling to accept themselves due to negative messages from society.
- **Mental health challenges:** Higher levels of anxiety, depression, and distress.

Believing harmful stereotypes about one's own community can increase stress and emotional suffering, reinforcing feelings of isolation and self-doubt.[1]

Expectations of rejection and discrimination

When people expect to be rejected or discriminated against because of their minority identity, they often become **hypervigilant** — always on guard, anticipating mistreatment.

At first, this may feel like a way to protect oneself from harm. However, over time, it can take a serious toll on mental and physical health.

The effects of long-term hypervigilance include:

- **Increased stress and exhaustion:** Constant alertness drains emotional and physical energy.
- **Distrust in social situations:** People may withdraw from interactions to avoid potential rejection.
- **Feelings of isolation:** The fear of mistreatment can lead to avoiding new relationships or opportunities.

Even when discrimination does not occur, just expecting it can cause distress. For LGBTQ+ individuals, this expectation may be reinforced by past experiences of rejection or negative social messages about their identity.[7]

Prejudiced events: discrimination and violence

Rejection, discrimination, and violence are some of the most direct sources of minority stress. These happen when someone faces unfair treatment because of their minority identity.

Prejudiced events have a strong impact because they bring up deep feelings, like fear of being rejected or expecting violence, which can be even more upsetting than the event itself.

One of the most direct sources of minority stress is experiencing discrimination, rejection, or violence based on one's identity.

These experiences can range from subtle (microaggressions, exclusion) to severe (harassment, hate crimes). In both cases, they can have lasting psychological effects, including:

- **Heightened fear and anxiety:** Worrying about future mistreatment.
- **Harm to self-esteem:** Internalizing negative messages from society.

- **Barriers to opportunity:** Discrimination can limit access to jobs, housing, and social acceptance.

Even a single instance of discrimination can have a deep impact. But when these experiences happen repeatedly, they build up over time, increasing stress and worsening mental health.[8]

Test your understanding

1. A hate crime is a proximal stressor. (True, **false**)
2. The expectation of rejection is a distal stressor. (True, **false**)

3. Levels of minority stress

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Identify the different levels where minority stress comes from. • Explain how these different sources of minority stress connect. • Understand the role of structural stigma in shaping minority stress.	It's important to know that minority stress does not happen in isolation: • Interpersonal stress comes from daily interactions, such as discrimination from co-workers or family members. • Structural stress is caused by unfair laws, policies, and societal norms that limit opportunities for minority groups. • Intrapersonal stress happens internally, when people absorb negative beliefs about their own identity.

Minority stress affects people at three main levels:

Level of minority stress	What it means	Examples
Interpersonal	Stress from personal relationships, such as family, friends, or co-workers.	Discrimination from co-workers, family rejection, or bullying.

Level of minority stress	What it means	Examples
Structural and institutional	Stress caused by unfair systems, policies, and societal norms.	Unequal access to jobs and health care, legal discrimination, or harmful media stereotypes.
Intrapersonal	Stress from within, including negative thoughts and feelings about one's identity.	Expecting rejection, hypervigilance, or feeling ashamed of one's identity.

These levels are connected — they do not work separately but overlap, making minority stress even more challenging.

Interpersonal level

Most daily experiences of minority stress happen at the interpersonal level.

This includes things like hate crimes and violence, microaggressions (subtle but harmful comments or actions), and unfair treatment in personal interactions.

When people experience repeated negative interactions, it can increase feelings of stress, fear, and exclusion.

Structural and institutional level

Minority stress can also come from laws, policies, and societal systems.

The dominant culture, social norms, and institutional policies often fail to reflect the needs of minority groups. This can lead to:

- Unequal access to jobs, education, and health care.
- Legal discrimination (e.g., lack of protections for LGBTQ+ people or racial minorities).

- Media and cultural stereotypes that reinforce negative messages.

Structural stigma and minority stress

Structural stigma happens when societal rules, cultural beliefs, and institutional policies create barriers for stigmatized groups. These barriers limit opportunities, resources, and well-being, adding to their stress and health challenges.[9]

This type of stigma puts people at a disadvantage by reinforcing social and structural inequalities. It leads to minority stress, which can harm mental health.[10 11 12]

Stigma is a social factor that affects mental health. When structural stigma is present, it can increase minority stress, making mental health problems worse.[13 14 15]

Researchers have found that stigma is not just about personal biases — it is also embedded in laws, systems, and institutions, making it harder for affected individuals to thrive.[16 17]

Intrapersonal level

At the intrapersonal level, minority stress comes from internalized stigma — negative beliefs about oneself that are absorbed from society.

Common intrapersonal stressors include:

- **Expecting rejection:** Always being on guard in social situations.
- **Hypervigilance:** Overwatching for signs of discrimination, which can lead to anxiety.
- **Negative self-perception:** Feeling ashamed of one's identity due to societal attitudes.

Because these stressors come from within, they can be especially difficult to overcome without support and self-awareness.

Why does understanding these levels matter?

Minority stress is not just about individual experiences — it is deeply tied to systems, relationships, and internalized beliefs. Recognizing how these levels interact can help:

- Reduce personal shame and self-blame.
- Advocate for systemic change.
- Build supportive communities.

By understanding these stressors, individuals and communities can work towards greater resilience and well-being.

Test your understanding

1. Which of the following is an example of interpersonal minority stress?
    a. A school policy that excludes LGBTQ+ students
    b. A co-worker making discriminatory remarks
    c. A government law that limits minority rights
    d. A person hiding their identity due to fear of rejection
2. Which of the following best describes structural and institutional minority stress?
    a. A policy that prevents same-sex couples from adopting
    b. Experiencing workplace discrimination from a boss
    c. Worrying about being rejected in social settings
    d. Feeling ashamed of your identity due to societal messages
3. Internalized stigma is an example of which level of minority stress?
    a. Interpersonal
    b. None of the above
    c. Intrapersonal
    d. Structural and institutional

4. Minority stress: Framework and models

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Understand how minority stress is linked to mental health problems. • Learn about rejection sensitivity and how it affects well-being. • Recognize why a transdiagnostic approach is useful in addressing minority stress.	Understanding the psychological processes behind minority stress helps explain its impact and improve support: • Stigma-related stress can lead to anxiety, depression, and emotional challenges. • Fear of rejection can shape self-esteem, relationships, and mental well-being. • Minority stress models guide the development of better coping strategies and support systems.

Psychological mediation framework

This framework explains how stress from stigma can lead to mental health problems. It suggests that:

- People with minority identities experience higher levels of stress due to stigma and discrimination.
- This stress can cause problems with emotions, relationships, and thinking, increasing the risk of mental health challenges.
- These difficulties act as a bridge between stigma-related stress and mental health problems.[18]

A key part of this process is rumination — overthinking negative experiences — which can worsen the link between stress and mental health struggles.[19]

Stigma-related stressors are known to trigger:

- Overthinking (or rumination)
- Feeling socially isolated
- Negative self-beliefs

This model helps explain why stigma-related stress affects emotional regulation, relationships, and self-image, all of which are important for mental health.

Rejection sensitivity model

A recent idea is the **rejection sensitivity model**, which helps explain how people react when they fear being rejected.

When someone expects rejection, they may:

- Feel anxious or angry.
- Change their behaviour to avoid situations where they might be excluded.

Studies show that rejection sensitivity is linked to:

- Depression
- Social anxiety
- Generalized anxiety disorder
- Posttraumatic stress disorder (PTSD)

This model helps connect discrimination and mental health struggles, showing how the fear of rejection can shape a person's emotional well-being.[3 20 21]

Transdiagnostic minority stress model

The **transdiagnostic minority stress** model explains how minority stress can affect mental health in different ways, especially for sexual minorities. It suggests that stress impacts three main areas:[22]

1. **Negative experiences:** Avoidance, anxiety, and feelings of loss.

2. **Positive motivation:** Challenges with finding rewards, forming habits, and/or staying motivated.
3. **Social functioning:** Difficulty with relationships, feeling disconnected, lacking self-confidence, or struggling to communicate.

By addressing these three areas, this model helps guide better mental health interventions for sexual and gender minorities (SGM).

Interventions to reduce minority stress

To help people cope with minority stress, interventions can focus on:

Intervention	How it helps
Improving emotional awareness	Recognizing, managing, and accepting emotions.
Reducing avoidance behaviours	Encourages people to face challenges instead of avoiding them.
Building assertive communication skills	Supports expressing needs and setting boundaries.
Challenging negative thoughts	Helps reshape harmful beliefs linked to minority stress.
Recognizing personal strengths	Encourages resilience and self-worth.
Strengthening social support	Builds positive, affirming relationships.

Test your understanding

1. Thinking too much about stressful experiences can make minority stress worse. (**True**, false)
2. Learning to understand and manage emotions does not help with stress. (True, **false**)

5. Minority stress and physical health

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Explain the difference between proximal stressors, distal stressors, and epigenetic changes in relation to minority stress. • Understand how chronic stress from minority stress affects the body. • Recognize physical health problems linked to minority stress in different groups facing inequality.	Understanding how minority stress affects physical health helps highlight the importance of: • Reducing discrimination and stigma to improve public health. • Recognizing the long-term health effects of stress on marginalized communities. • Developing better support systems for people experiencing chronic stress.

Understanding key terms

A person's physical health can be affected by both external and internal stressors related to their minority identities.[23]

Distal stressors (external)

These are stressors that come from outside a person, like prejudice, discrimination, and exclusion. They are often easy to measure.

Example: Brian faces microaggressions at work because he is openly gay. These experiences are a distal stressor in his life.

Proximal stressors (internal)

These are stressors that come from within — such as worrying about being judged or hiding one's true identity.

Example: Anandi is afraid to go to a Pride event at school because she hasn't told her friends she is bisexual. Her fear of judgment is a proximal stressor.

Epigenetic changes

These are changes in a person's genes caused by life experiences, not by what they inherit from their parents. Long-term stress, such as social isolation or discrimination, can trigger these changes.

Epigenetic changes can lead to higher levels of inflammation-related genes, which may increase the risk of chronic health problems.

Biological effects of minority stress

Minority stress and the HPA axis

The hypothalamic-pituitary-adrenal (HPA) axis helps the body manage stress by releasing cortisol, a key stress hormone.

When someone experiences long-term stress, such as minority stress, the body produces too much cortisol. Over time, this can disrupt the body's ability to handle new stress and increase the risk of anxiety, depression, and other health problems.[24]

Minority stress and ANS reactivity

The autonomic nervous system (ANS) controls automatic functions like heart rate and blood pressure. Chronic minority stress can disrupt the ANS, leading to irregular heart rate, high blood pressure (hypertension), and increased risk of heart disease.[24]

Minority stress and the immune system

Long-term social stress can weaken the immune system, making it harder for the body to fight infections. This happens because:[24 25 26]

- Stress increases inflammation, which is linked to conditions like heart disease.
- The immune system becomes less effective, which can reduce the body's ability to fight illness or respond to vaccines.

Examples of physical health problems

Health issue	How minority stress contributes[23 24]
Obesity	Discrimination can lead to higher stress eating and weight gain.
Cancer	Hiding one's sexual orientation has been linked to higher cancer risk. Gay men, for example, have higher rates of non-Hodgkin's lymphoma, Hodgkin's disease, and anal cancer.
Metabolic syndrome	Chronic stress increases the risk of diabetes and heart disease.
Hypertension (high blood pressure)	Awareness of negative social messages may raise blood pressure, harming the heart.
Heart disease	Lesbian and bisexual women have higher rates of heart disease than heterosexual women.
Physical disability	Older lesbian and bisexual women are more likely to develop disabilities compared to heterosexual women.

Test your understanding

1. Experiencing long-term minority stress can lead to more inflammation in the body, increasing the risk of chronic illnesses. (**True**, false)

2. The body's ability to handle stress is mainly disrupted by changes in the thyroid. (True, **false**)

6. Intersectional identities

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Explain intersectionality and its link to minority stress. • Understand the health challenges of people with multiple marginalized identities. • Identify ways to reduce discrimination against people with overlapping identities.	Understanding intersectionality helps us: • Recognize the challenges of holding multiple minority identities. • Improve support for people facing overlapping discrimination. • Advocate for systemic change to build a more inclusive society.

What is intersectionality?

Intersectionality explains how different parts of a person's identity combine and overlap to shape their experiences.

People's identities are multidimensional — they are shaped by more than one factor, such as race, gender, sexual orientation, class, and more. When someone belongs to multiple marginalized groups, they often face complex, compounded discrimination and stress.

For example:

- A Black LGBTQ2+ person may experience both racism and homophobia.
- A disabled woman of colour may face discrimination related to gender, race, and disability status.

People with multiple marginalized identities often experience higher levels of minority stress than those facing discrimination in only one area.

Microaggressions

Microaggressions are subtle, everyday actions or comments that reinforce discrimination against minority groups. Even though they may seem small, they accumulate over time and affect emotional and mental well-being.[27]

Types of microaggressions

Type	Definition	Example
Microassaults	A deliberate discriminatory action, such as refusing service, using slurs, or making explicit insults based on someone's identity.	Saying "That's so gay" in a negative way.
Microinsults	Subtle comments or behaviours that reinforce stereotypes or undermine someone's identity, often unintentional.	Telling a woman in a leadership role, "You're so bossy!" instead of recognizing her skills.
Microinvalidations	Statements or behaviours that dismiss or minimize a person's experiences with discrimination.	Telling a trans person, "You're just too sensitive. No one is being transphobic."

Health impacts of multiple minority identities

Recent research shows that people with multiple marginalized identities often experience higher stress and poorer health outcomes.

Here are some key findings:

- Plurisexual (bisexual, pansexual, queer) people of colour have higher rates of depression and anxiety than monosexual (gay or lesbian) people of colour.[28]
- LGBTQ2+ individuals from racial and ethnic minorities are more likely to report depression and self-harm than non-LGBTQ2+ individuals from the same minorities.[29]
- Heterosexism (discrimination against LGBTQ2+ people) and racism together negatively affect the mental health of LGBTQ2+ people of colour, especially in communities that are not accepting.[30]
- Experiencing microaggressions is directly linked to higher levels of depression among LGBTQ2+ people of colour.[31]

These findings highlight how multiple forms of discrimination — such as racism, homophobia, transphobia, and sexism — can combine to amplify stress and worsen health outcomes.

Reducing discrimination

To reduce discrimination against people with multiple marginalized identities, action is needed at both individual and systemic levels.

Strategy	Why it matters
Building empathy	Teaching people about intersectionality helps increase understanding and compassion.
Culturally sensitive health care	Health care professionals should recognize that different groups may have different needs and experiences.
Addressing vicarious trauma	Hearing about discrimination happening to others can cause psychological distress, especially for LGBTQ2+ people of colour. Support systems are needed to address this.
Community and societal change	Tackling structural discrimination requires education, policy reform, and advocacy.

By improving education, policies, and support systems, we can create more inclusive spaces for people with multiple marginalized identities.

Test your understanding

1. Which of the following is the clearest example of a microassault?
    a. A co-worker reacts to a colleague coming out as non-binary by saying, "You don't look non-binary to me."
    b. A clerk refuses to serve a customer because of their accent.
    c. A supervisor interrupts and dismisses ideas from female staff more often than male staff.
    d. A professor tells a student, "You speak surprisingly well for someone from your background."
2. Microaggressions can contribute to mental health issues such as anxiety and depression. (**True**, false)
3. What is the term for when someone feels distress from hearing about discrimination against people who share their identity?
    a. Vicarious trauma
    b. Intersectional bias
    c. Internalized discrimination
    d. Minority stress
4. Cultural sensitivity in health care can help ensure fair and equal treatment for people with multiple marginalized identities. (**True**, false)

7. Sexual and gender minority identities

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Explain the unique characteristics and challenges faced by sexual and gender minority (SGM) groups. • Understand the barriers SGM people face during disasters and emergencies.	Addressing these barriers can: • Improve mental and physical health outcomes for SGM individuals. • Ensure disaster response efforts are inclusive and equitable.

What are sexual and gender minorities?

Sexual and gender minority (SGM) groups are people whose sexual orientation, gender identity, gender expression, or biological traits do not fit traditional norms.[32]

SGM groups include, but are not limited to, people who identify as:

- Lesbian
- Gay
- Bisexual
- Asexual
- Non-binary
- Transgender
- Queer
- Intersex

Some people may not use these labels but still experience discrimination or exclusion based on their identities.

Common challenges faced by SGM individuals

SGM individuals experience higher levels of stress due to stigma and discrimination. This minority stress can increase their risk for mental and physical health problems.[33]

Mental health challenges

Studies show that SGM adults often experience:

- Lower life satisfaction and weaker sense of belonging compared to heterosexual and cisgender individuals.[34]
- Higher rates of mental health issues, including:
    - Depression and anxiety[34 35]
    - Post-traumatic stress disorder (PTSD)[34 36]
    - Suicide attempts[34 35]
    - Substance misuse[34 35 37]

Physical health risks

SGM adults are also at higher risk for physical health conditions, including:[38]

- Heart disease, obesity, and diabetes
- Asthma and other respiratory conditions
- Certain cancers and digestive issues
- Chronic pain conditions (such as headaches)

Social and financial barriers

SGM individuals often face additional social risks, such as:

- Social isolation and lack of emotional support.
- Financial instability and employment discrimination.

These social issues can negatively impact overall health and well-being.[39]

Barriers to accessing services in an emergency

Disasters and emergencies can make the stress that SGM people face even worse. Some of their challenges include:

Barrier	Why it's a problem
Lack of inclusive shelters and support centres	Many SGM individuals may not feel safe or welcome in emergency shelters, which can prevent them from seeking help. They may fear harassment or violence if they do seek support.[40]
Fear of discrimination or hostility	SGM people may be hesitant to ask for help or access resources, especially in emergency shelters, because they worry about being discriminated against or treated badly.[41]
Family rejection and homelessness	Some SGM individuals may face rejection or even abuse from family members, which can lead to homelessness. Disasters often cause higher unemployment rates, and without stable housing or resources, SGM individuals are more vulnerable to homelessness.[42] [43] [44]

Examples of past disasters affecting SGM individuals

Global research shows many past emergencies and disasters where the equal rights and protections of SGM individuals were not considered. Some examples include:

Disaster	Location	Year	Discrimination
Hurricane Katrina	USA	2005	Same-sex couples were often separated in shelters because their relationships were not legally recognized, preventing them from receiving aid.[43]
Earthquake	Haiti	2010	SGM evacuees faced violence in shelters and were denied help by some faith-based organizations.[43]

Disaster	Location	Year	Discrimination
Tsunami	India	2004	Aravanis (gender-diverse individuals) were excluded from food, shelter, and financial aid, forcing them to survive on discarded food.[44]

Test your understanding

1. 1. SGM individuals are less likely to face social isolation than heterosexual and cisgender individuals. (True, **false**)
2. Why might SGM individuals avoid seeking help in emergency shelters?
    a. **They worry about discrimination and harassment**
    b. They are automatically prioritized for emergency services
    c. They receive special treatment from disaster relief programs
    d. They are more financially secure and likely don't need help
3. Past disasters have shown that SGM individuals often face additional discrimination when trying to access emergency aid. (**True**, false)

8. Racial trauma

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Explain what racial trauma is and how it affects people. • Understand how racial trauma affects communities during emergencies. • Identify common signs of racial trauma.	Understanding racial trauma helps: • Recognize its long-term health effects. • Address systemic inequalities that worsen disasters for racialized communities. • Improve mental health and emergency response systems.

What is racial trauma?

Racial trauma, or race-based stress, happens when people experience or witness racial discrimination. This can include being hurt, treated unfairly, or humiliated because of race, feeling ashamed or unsafe due to discrimination, and witnessing racism against others — especially in People of Colour and Indigenous communities (POCI).[45 46 47]

Race vs. ethnicity

- Race is a social category based on physical traits like skin colour. It is influenced by social and historical factors.
- Ethnicity refers to shared cultural traits among people with similar backgrounds. It includes things like language, food, music, clothes, values, and beliefs.[48]

Challenges faced by racialized communities

Limited emergency preparation and evacuation

During an emergency, racialized communities are at a higher risk of facing problems, not only at the start but during and afterwards. These challenges include:[49]

- Language barriers that limit access to information.
- Mistrust in public safety services, leading to lower participation in preparedness programs.
- Cultural differences that affect evacuation behaviours.

For example, studies show that Spanish-speaking Hispanic communities in the U.S. are less likely to have an evacuation plan than white communities.[50]

Increased racism and stigma

Global health emergencies can lead to racial scapegoating — when racialized groups are unfairly blamed for disease outbreaks.

For example, during the COVID-19 pandemic, misinformation led to increased discrimination against Asian communities, contributing to:

- Higher levels of fear, stress, and anxiety
- Social exclusion and increased violence[51] [52]

Immigration status and systemic barriers

Some racialized individuals — especially immigrants — may be afraid to seek help during disasters because of:

- Fear of deportation
- Lack of legal documentation
- Concerns about discrimination from public safety or health workers[53]

Health care inequities

Racialized groups face barriers to health care, including:

- Mistrust in the system due to past discrimination.

- Limited access to culturally competent providers.
- Lack of transportation, money, or required documents.

These factors contribute to health disparities and lower-quality care.

Racial inequalities in emergencies

Systemic inequities increase the impact of disasters on racialized communities. Here are a few examples:

- During Hurricane Katrina (2005), low-income Black communities faced greater barriers to evacuation, including poor access to public transportation and delayed emergency responses.
- During the COVID-19 pandemic, in Toronto and Ottawa, Black Canadians and other racialized groups were infected at rates 1.5 to 5 times higher than non-racialized Canadians.[54]

These cases highlight how systemic racism worsens disaster outcomes for marginalized groups.

Signs of racial trauma

Racial trauma can show up in different ways for different people. It can affect mental, physical, and social well-being.

Types of harm	Effects of racial trauma
Physical health	• Increased risk of heart disease, high blood pressure, and metabolic syndrome • Headaches, body pain, and heart palpitations • Trouble sleeping and weakened immune system, leading to higher risks of type 2 diabetes and asthma[55 56 57 58 59 60]

Types of harm	Effects of racial trauma
Mental health	• Higher rates of depression, anxiety, PTSD, and low self-esteem • Increased risk of substance abuse and suicidal thoughts or actions[47]
Social and economic impact	• Relationship difficulties, including struggles in romantic and family relationships • Challenges in finding and keeping a job, leading to financial instability[47]

Test your understanding

1. Racialized individuals are less likely to seek health care or mental health support. (**True**, false)
2. Which of these is NOT a common symptom of racial trauma?
    a. Difficulties in romantic relationships
    b. Financial stability
    c. Depression
    d. Heart palpitations

9. Historical trauma and Indigenous communities

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Define historical trauma and understand its impact on Indigenous communities. • Identify key policies that contributed to historical trauma in Canada. • Explain how these policies continue to affect Indigenous mental, physical, and social well-being today.	Understanding this history helps us: • Recognize how colonial policies shaped Indigenous experiences. • Address the ongoing effects of historical trauma on Indigenous well-being. • Support healing, reconciliation, and culturally safe practices in health and social services.

What is historical trauma?

Historical trauma occurs when entire communities experience repeated and systemic harm, leading to long-term physical, emotional, and cultural distress.

Features of historical trauma

- **Collective impact:** Trauma is shared across generations, affecting individuals, families, and communities
- **Ongoing effects:** The harm does not end with those who experienced it directly but continues through intergenerational trauma.
- **Rooted in systemic oppression:** Policies like residential schools and the Indian Act disrupted Indigenous languages, cultures, and governance.

Historical trauma affects mental health, physical health, and community well-being — contributing to higher rates of chronic illness, addiction, and mental health struggles among Indigenous populations.

Key events contributing to historical trauma

Indigenous nations in Canada continue to experience the effects of historical trauma caused by colonial policies and systemic racism. The following events played a significant role in shaping this trauma.[61]

Early colonization and land dispossession

When European settlers arrived in Canada, they sought to profit from the land, despite Indigenous nations already sharing and respecting it under their own governance systems.

Forced displacement and relocation

Settlers viewed Indigenous peoples as "too savage" to follow European laws and forced them onto isolated, less fertile lands that made survival more difficult.

The Indian Act (1876)

This law gave the government control over nearly every aspect of life on Indigenous reserves, restricting Indigenous freedom, governance, and economic opportunities.

Residential schools (1840s–1984)

The Bagot Commission (1844) and Davin Report (1879) helped establish the residential school system, where Indigenous children were forcibly removed from their families.

- Schools were underfunded, overcrowded, and unsafe, leading to widespread illness, malnutrition, and abuse.
- Many children died due to neglect and harsh conditions.
- The last federally run residential school closed in 1996 (though some provincially run schools closed earlier).

The Sixties Scoop (1960s–1980s)

During this period, Indigenous children were forcibly removed from their families and placed in non-Indigenous homes.

- Authorities claimed this was due to "neglect." In reality, there was little understanding of Indigenous family structures and parenting.
- The Sixties Scoop continued the cycle of forced separation and erased cultural identity for many Indigenous children.

Ongoing systemic racism and government inaction

- Many Indigenous communities still face barriers in accessing resources, health care, and education.
- The government has not fully accepted responsibility for the harm caused, which slows progress towards Truth and Reconciliation.

Stress passed down through generations

Historical trauma affects not only those who experienced it firsthand but also their descendants. This is known as intergenerational trauma — the transmission of stress and harm across generations.

Indigenous communities in Canada have faced many hardships over time, such as losing family members to war and disease, being forced onto reserves, attending residential schools, having their culture suppressed, losing their resources, and having their traditional ways of life destroyed. These struggles have passed down through generations, causing ongoing health problems.[62]

Some of the health issues caused by this ongoing trauma include:

- Higher risk of mental illness
- Higher risk of physical illness
- Suicide
- Substance use problems

- Family violence
- Sexual violence
- Incarceration (being sent to jail)
- Child abuse

When someone in the family has experienced trauma, like attending residential schools or being part of the Sixties Scoop, their children and even grandchildren can be affected by the stress they carry. This is called "secondary trauma." It can cause problems in how families communicate and can affect the whole family.

In the third generation, the effects of trauma can also be passed down in a way that changes how genes work. This is called "epigenetics." These changes can make it harder for people to heal, even with therapy, because the stress from previous generations can still be felt in their bodies and minds.

How does intergenerational trauma happen?

Trauma is passed down in different ways, including:

- **Family and community dynamics:** Parents and caregivers who have experienced trauma may struggle with emotional regulation, parenting, or passing down cultural traditions.
- **Loss of identity and language:** Forced assimilation policies disrupted cultural teachings, making it harder for younger generations to connect with their heritage.
- **Socioeconomic disadvantage:** The impacts of colonial policies continue to limit access to education, health care, and economic opportunities for Indigenous communities.
- **Biological effects:** Research suggests that trauma can affect stress responses in the brain, increasing vulnerability to mental health challenges.

Long-term effects of intergenerational trauma

Over time, intergenerational trauma can lead to:

- Higher rates of anxiety, depression, PTSD, and substance use.

- Increased physical health issues, such as heart disease and diabetes.
- Difficulties in relationships and community well-being.

While the effects of historical trauma are significant, healing is possible through cultural reconnection, community support, and policy changes that honour Indigenous self-determination.

Ways to move towards Truth and Reconciliation and reduce stress

To help reduce the lasting effects of trauma, it is important to create security and safety for Indigenous communities, who have long advocated for Truth and Reconciliation, which acknowledges past injustices and seeks meaningful action for repair.

Research shows that Indigenous communities experience better well-being when they have greater control over their own decisions and land.[63] Self-governance — the ability to make independent decisions — helps restore autonomy and strengthen cultural identity.

One important way to support Indigenous mental health is through "enculturation," a three-step process that helps reconnect individuals with their heritage. This process includes:

1. Engaging in traditional spiritual practices
2. Participating in cultural activities
3. Strengthening connections to Indigenous identity

Studies show that these steps can reduce mental health challenges, such as suicidal thoughts and depression, especially among younger generations.

To promote better health and well-being for Indigenous communities, consider the following key approaches:

- Implementing decolonizing strategies, such as increasing opportunities for Indigenous self-governance.

- Supporting identity formation, including efforts to revitalize Indigenous languages and traditions.
- Using culturally adapted approaches to healing, such as hiring staff with cultural competency and incorporating education on colonization and historical trauma.

Test your understanding

1. Historical trauma only affects people who have their own lived experience of things like residential schooling. (True, **false**)
2. Which of the following is NOT a way to pass down intergenerational trauma?
    a. Biological effects that increase stress responses
    b. Changes in family and community dynamics
    c. Improved access to education and economic opportunities
    d. Loss of identity and cultural knowledge
3. What is one key way Indigenous communities are healing from intergenerational trauma?
    a. Creating distance from Indigenous identity to avoid past trauma
    b. Reconnecting with cultural traditions and practices
    c. Avoiding discussions about past trauma
    d. Relying solely on government-led initiatives

10. People with disabilities

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Understand the challenges of stigma and discrimination that contribute to minority stress. • Learn how stigma related to disability impacts mental health in people with physical impairments. • Recognize how self-stigmatization can lead to mental health concerns.	Addressing the barriers faced by people with disabilities helps create more inclusive communities: • Disability stigma increases stress, isolation, and limits access to education and jobs. • Internalized stigma leads to low self-esteem and reluctance to seek support. • Reducing stigma improves independence, dignity, and quality of life.

Stigma, discrimination, and mental health outcomes

People with both a psychiatric and a physical disability face higher levels of stigma and discrimination than those with only a psychiatric disability.[64]

- Higher rates of depression and anxiety: Adults with physical disabilities are more likely to experience mood disorders and emotional distress.[65]
- Social isolation: Limited mobility, stigma, and inaccessible environments contribute to reduced social engagement.[66]
- Lower quality of life: Feelings of exclusion and restricted opportunities impact overall psychological well-being.[67]

These factors combine to worsen mental health outcomes, leading to increased stress and reduced life satisfaction.[68]

Perceived stigma and stress responses

Stigma does not only come from explicit discrimination — it is also shaped by how people perceive and internalize social attitudes.

- People without disabilities often feel uncomfortable interacting with individuals who have visible disabilities.[69]
- Those with severe physical disabilities may be excluded from social groups, reinforcing feelings of marginalization.[70]
- Adults with both physical and intellectual disabilities report higher levels of public stigma and are more likely to feel stigmatized.[71]

These experiences increase stress responses, which contribute to negative health outcomes and emotional distress.[72]

Self-stigmatization and its impact

Self-stigmatization happens when people believe negative stereotypes about their disability. This can lead to low self-esteem, social withdrawal, and emotional distress.

When people internalize stigma, they may:

- **Hide their emotions** instead of expressing how they feel.
- **Avoid trusting others,** fearing judgment or rejection.
- **Seek constant approval,** feeling they must prove their worth.
- **Isolate themselves,** withdrawing from social activities.
- **Be overly self-critical,** believing they are not good enough.

Studies show that people with both psychiatric and physical disabilities who feel stigmatized are more likely to experience mental health challenges. They also report poorer physical health, lower emotional well-being, and reduced life satisfaction.[64]

Other research shows that older adults with physical disabilities and moderate intellectual disabilities are more likely to face public stigma or report feeling stigmatized.[71]

These findings highlight how stigma and discrimination worsen mental health for people with physical disabilities. Addressing these barriers can improve overall well-being and quality of life.[73]

Test your understanding

1. Stigma and discrimination do not significantly impact the mental health of people with disabilities. (True, **false**)
2. Which of the following is NOT an example of self-stigmatization?
    a. Avoiding social interactions due to fear of judgment
    b. Feeling unworthy or needing to prove one's abilities
    c. Seeking emotional support from family and friends
    d. Believing negative stereotypes about one's disability
3. Which one of the following is MOST helpful to reducing self-stigmatization?
    a. Encouraging open discussions about disability experiences
    b. Avoiding conversations about disability to prevent discomfort
    c. Promoting negative stereotypes to raise awareness
    d. Limiting accessibility options to reinforce independence

11. Resilience against minority stress

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Understand that resilience plays an important role in how people respond to minority stress. • Tell the difference between group and individual resources in resilience. • Identify the key factors that help people stay resilient in the face of minority stress.	Resilience helps people manage stress, protect mental health, and maintain well-being: • Stronger resilience reduces the impact of minority stress, improving mental health. • Both personal and group resilience support coping, with social connections making a key difference. • Understanding resilience helps create inclusive spaces that reduce stigma.

Strength-based approach to minority stress

Being part of a minority group can create both stress and strengths. Social support, shared identity, and community resources help protect people from the negative mental health effects of minority stress.

Communities and organizations provide important support systems that help people become more resilient when facing discrimination or exclusion. Feeling connected to others in similar situations reduces isolation and helps individuals cope in tough situations.

A strength-based approach focuses on building resilience rather than just managing stress. This perspective can improve coping strategies and increase mental well-being.[2]

Personal and group resilience

Resilience comes from both personal and group resources:

- **Personal resilience** comes from individual traits and coping skills, such as optimism, adaptability, or problem-solving abilities.
- **Group resilience** comes from shared experiences, cultural identity, and social networks within a minority community.

How group support strengthens resilience

Social connections within minority communities provide:

- Safe spaces where people are not judged for their identity.
- Opportunities to share experiences and reframe stressful situations.
- Validation that helps counteract discrimination from the larger society.

Being part of a supportive group allows people to see their identity in a positive light. The shared values, practices, and community support help individuals feel stronger and more accepted.

Without group resilience, even those with strong personal coping skills may struggle with stress. Social connection is key to staying resilient.

Key resilience factors

Resilience against minority stress depends on both social and personal factors. Some of the most important include:

Factor	How it supports resilience
Social support and acceptance[74]	Feeling connected to others who share similar experiences reduces stress and promotes well-being.

Factor	How it supports resilience
Access to psychosocial or medical support[75]	Professional and community resources provide tools to cope with stress and mental health challenges.
Self-acceptance[76]	Developing confidence in one's identity helps reduce self-stigmatization and improves emotional well-being.
Openness and agency[77]	Being active in self-advocacy and personal growth strengthens personal resilience.
Engagement in collective action[77]	Participating in activism or social justice work helps build empowerment and a sense of purpose.
Sense of community[78]	Feeling a sense of belonging and inclusion strengthens mental health and emotional resilience.
Pride in one's minority identity[78]	Embracing identity as a source of strength helps counteract the negative effects of discrimination.

For sexual and gender minorities, taking part in social justice work, advocacy, or group activities can help build resilience. Feeling pride in one's identity is another powerful way to counteract the negative effects of minority stress.[78]

Risk of individualizing resilience

Focusing too much on individual resilience can make it seem like coping with discrimination is a personal responsibility, rather than a systemic issue. The minority stress framework emphasizes that:

- Resilience is important, but it should not replace efforts to change oppressive systems.

- Improving policies, institutions, and public attitudes is necessary to reduce minority stress.[2]

Building resilient individuals should go hand in hand with creating supportive communities and changing discriminatory structures.

Test your understanding

1. Resilience is only based on personal traits like optimism and adaptability. (True, **false**)
2. Which of the following is NOT a key factor in resilience against minority stress?
    a. Feeling supported by a minority community
    b. Avoiding discussions about identity
    c. Developing self-acceptance
    d. Engaging in social justice or activism

12. Providing support

Learning objectives	Why this matters
By the end of this lesson, you will be able to: • Understand the importance of culturally competent support in reducing minority stress. • Identify ways to offer meaningful support to individuals facing discrimination. • Recognize how inclusive policies and practices improve well-being.	Minority groups often face increased stress and barriers during emergencies, making culturally competent support essential. • Cultural awareness and communication build trust and improve relief efforts. • Community partnerships help ensure support is relevant and accessible. • Inclusive policies and training reduce disparities and improve emergency response.

Strategies for culturally competent support

People in equity-denied groups often experience higher stress, especially during crises. Establishing trust and cooperation is essential for effective support.

Cultural competence means the ability to work effectively with people from diverse backgrounds.[79] It involves four key principles, and there are several actions that can be taken based on each of them:[80]

- **Awareness:** Recognizing personal biases and avoiding assumptions.
- **Knowledge:** Understanding cultural identities, values, and beliefs.
- **Skills:** Communicating with care, respect, and cultural awareness.
- **Application:** Consistently using these principles in support efforts.

By following these principles, supporters can build trust and create inclusive environments.

Strategies for effective communication

Culturally aware communication is essential, especially in emergencies. Consider these strategies:[81]

Strategy	Implementation
Ask, don't assume	Ask questions to understand cultural experiences rather than making assumptions.
Be careful with your words	Use respectful, inclusive language to avoid unintentionally harmful words.
Listen with empathy	Acknowledge and validate people's feelings and experiences.
Understand cultural differences in communication	Recognize that culture influences how people express emotions and interact.
Share personal and community stories	Storytelling builds trust and deepens understanding across cultures.
Pay attention to non-verbal cues	Observe body language and facial expressions while ensuring your own signals convey respect.

Effective communication fosters trust, inclusion, and meaningful support.

Building community partnerships

Strong community partnerships help ensure support reaches those in need. Strategies include:

Action	Implementation
Sharing information	Work with respected leaders or community organizations to reach the right people before, during, and after disasters. They can help communicate with individuals who may ignore or distrust public announcements — often including translation or interpretation of important messages.[81 82 83]
Planning	Involve community partners in emergency planning to meet diverse needs. This can be done through different channels, like minority media, special workshops, and even going door-to-door. Effective planning works better when people understand the risks and have had experience dealing with past disasters.[84 85]
Support	Consult community and spiritual leaders to ensure support aligns with cultural values.[81]
Training and education	Develop disaster preparedness programs that reflect specific community needs. For example, in California, groups like the Collaborating Agencies Responding to Disasters (CARD) have worked to tailor disaster materials for the differing groups of people who need them.[86]

These partnerships increase trust and accessibility, ensuring effective support for minority groups.

Policy recommendations

Structural barriers contribute to minority stress, and policy changes can help address these inequities.

Recommendation	Why it matters
Recognize barriers and inequities	Understanding discrimination and health disparities leads to better policies and research.[87]
Take an intersectional approach	Recognizing how race, gender, and income shape experiences improves emergency responses, including availability of inclusive shelters and financial support for those in need.[87]
Evaluate policies and resources	Continuously assess whether policies effectively serve marginalized communities.[86]
Improve accessibility of information	Use translations, visuals, and trusted sources to reach diverse audiences.[86]
Provide cultural competency training	Equip emergency workers and health care providers with skills to support diverse populations.[88]
Ensure inclusive policies	Recognize same-sex partnerships and chosen families in disaster response.[88]
Offer accessible services	Provide low-cost, community-based services after emergencies to increase access for minority groups.

By making policies more inclusive and responsive, communities can better support those affected by minority stress.

Test your understanding

1. You are supporting a minority community after a disaster. They distrust public services and feel overlooked in relief efforts. What action best demonstrates cultural competency?
    a. **Engaging local leaders to ensure culturally appropriate outreach**

b. Offering one-size-fits-all solutions
c. Relying solely on written materials without community input
d. Providing relief without consulting community members

2. Which principle is essential for culturally competent support?
    a. Adopting a one-size-fits-all approach
    b. Reflecting on personal biases and their impact
    c. Making assumptions to speed up decision-making
    d. Prioritizing efficiency over inclusivity

13. Appendix: References

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