

The Mechanics of a COVID-19 Micro-Aggression: A Self Assessment for Your Family



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I've had several parents contact me regarding how to support young/tween children as they navigate racism and hatred related to the recent pandemic of COVID-19, in addition to their daily realities of living as a trans-racial adoptee.

Before launching into "practical tips" it's important to get a grasp on the context of your child's situation, internally and externally. When you can recognize the layers your child is facing (and this catalog of "layers" is far from exhaustive), you'll be in a better position to support them though and beyond it.

This "mechanics" of micro-aggressions is a simple and short assessment to help you consider what's going on in our minds, bodies and souls during a hypothetical situation. From here, you get to decide where your family is located in the dialogue, and then choose to apply it in ways that are living and active in your personal experience.

Step 1: The Stressor

What is considered a stressor? This is a broad term and it's been used in many different ways. Here, in this discussion, a stressor might be something that inflicts worry, pain, fear, confusion, fatigue, etc. A threat of some kind that causes the mind, body, and soul to assemble its resources in a protective stance. Environmental cues and stimuli that pull us away from feeling secure, regulated, safe, valued, and loved.

Xenophobia and racism toward Asian individuals and groups have been [cited worldwide](#).

Being accused or assumed to have COVID-19 based on outward appearance is a stressor.

Being bullied, harassed, dehumanized and isolated because of COVID-19 is a stressor.

It's often the case these kinds of stressors exceed a child's capacity to meet them.

The stressor can be intermittent, happening at a particular place and time, perpetrated by a specific individual(s) for a duration, and at a certain degree of intensity and violence. A comment, a brutal beating, and all the experiences in between. Examples:

["You dropped your coronavirus," a man says to a woman in a video shared on Instagram."](#)

[An Asian woman is violently attacked in a public space.](#)

["Right now, we've seen particularly troubling instances of discrimination directed at Asian communities, particularly in Chinese community," de Blasio said."](#)

The stressor can be chronic, a daily weight of shame and fear, the constant dread of having to face the global conversation that seems to live and breathe no matter where we turn. Pictures of Asian individuals with masks, referring to the sickness, the virus, the problem with your face as the poster symbol for all of those things. This is historically true, it also happens here and now. Examples:

The Chinese Exclusion Act of 1882 restricted immigration to the U.S. and was designed to ["placate worker demands and assuage prevalent concerns about maintaining white 'racial purity.'"](#) How does it feel to be the impurity of the United States?
Probably stressful. Daily.

[The New Yellow Peril](#)

"I am shocked and dismayed that the [GOP Leader in the House of Representatives has referred to the coronavirus as the 'Chinese coronavirus,'](#)" Meng said in a statement. "This labeling of the illness is embarrassing, disrespectful, offensive, and downright disgusting. It is shameful." -Rep. Grace Meng

***Does your child currently experience any of the stressors from above?** **Yes** **No**

***From who?**

Name: _____

Name: _____

Name: _____

***Where?**

Location # 1: _____

Location # 2: _____

Location # 3: _____

Additional: _____

***How often?** Once / 2-3 events total / 5-10 events total / Daily / Multiple times per day

***How did/do you typically find out?** Child reports / I observe / Other

***Please describe an example that feels significant/important to you:**

Step 2: The Normative Response to Stress

COVID-19 micro-aggressions, those daily and seemingly benign slights from one individual to another, are truly happening around the globe.

How does the body respond to stress? A thousand different ways. And, basically, in two ways. We turn inward. Or, we move outward. Part of this comes from [neuro-circuitry](#).

Did you know the word “*emotion*” is derived from the latin word “*émouvoir*,” which means something like “*to move out*.” Other meanings include to excite, stir up, or irritate.

So, it would make sense that when a person experiences a COVID-19 micro-aggression, they move from relaxed to on-edge. From safety to threat. From accepted to rejected. From calm to irritated. From confidence to fear.

This is not a disorder.

This is designed.

To keep us alive.

An overarching message pervasive throughout our communities is, “*non-white bodies are less valuable*.” I wonder, what would be the impact of that perpetual messaging on an individual of color? On a child?

Regarding COVID-19, if I saw someone (or many people), who looked like me, receive violent and hurtful treatment simply for looking like me, I’d feel threatened, too.

For many people of color in general, this is our reality.

With nuances and layers that impact various groups in very different and specific ways.

For example, [Asian individuals](#) may experience this world differently compared to [Black individuals](#). For this dialogue, though, I want to highlight the idea there is a very normative response to racism and perpetual hatred.

émouvoir

Inward: We use the term “*internalizing*” for behaviors/responses that are generally inward, inside, internal (e.g., avoidance, social distance/withdrawal, excessive fears or worries, need for perfection, rigidity, somatic complaints like headaches, sore muscles, stomach aches, etc.).

If applicable, what do those “internal” responses to COVID-19 micro-aggressions look like for your child? And how intense would you rate them (1=non-significant; 10=significant)? Please describe:

Outward: We use the term “*externalizing*” for behaviors that come *out* from us, actions we take with our body when we feel threatened (e.g., rudeness, “not listening,” “disobedience,” hitting, kicking, screaming, lying, stealing, bullying, vandalism, breaking or throwing things, pushing people, getting into fights, arguing with parents/teachers, sneaking out of the house, excessive substance use, etc.). *Note: these descriptions are not punitive; only to help parents get a sense for “outward” responses to real or perceived threat.*

If applicable, what do those “external” responses to COVID-19 micro-aggressions look like for your child? And how intense would you rate them (1=non-significant; 10=significant)? Please describe:

Step 3: The Biological Response to Stress

How does our brain respond to stress? Jill Bolte Taylor vividly explains our how our [neuro-circuitry](#) is heavily involved in the way we react to stressful life experiences. Especially for parents of teens, this is a poignant dialogue that will add incredible value to your perspective as a parent.

In his book [The Body Keeps the Score](#), Bessel Van Der Kolk refers to our biological response to threat as the Anatomy of Survival.

During intense moments of threat, the front part of the brain shuts down (pre-frontal cortex), leaving the brain stem (aka “reptilian” brain) and limbic system (aka the “mammalian” brain) essentially in charge.

Together they’re sending messages of defense and protection to facial muscles, the thyroid, heart, lungs (and larynx for increased oxygen), to the GI tract and adrenal glands.

Our body is designed to stay alive. Racism related to COVID-19 threatens that design.

When the amygdala senses threat (real or perceived), it triggers stress hormones (e.g., cortisol, adrenaline, etc.). Those hormones increase heart rate, breathing, blood pressure, all designed to help us fight or flight.

“But, COVID-19 isn’t a real threat... right?”

For who?

“[A 16-year-old boy in California’s San Fernando Valley](#) was physically attacked this week by bullies in his high school who accused him of having the coronavirus — simply because he is Asian American.”

Part of trauma recovery is teaching the brain and body to feel safe when the environment actually is safe. There’s a sort of top-down and bottom-up relearning that happens.

Top-down in which the front of the brain can send a message to the lower part of the brain, “We’re safe here.”

Bottom-up to where, through movement, breathing and touch, the lower part of the brain can affirm to the top, “We’re safe here.”

But, when *are* people of color safe in an environment that perpetually hurts them?

Our response to racism is legitimate, chronic, and exhausting.

Please indicate if you've noticed any of the following responses in your child as stressors related to COVID-19 continue to unfold:

Normative Response to COVID-19 Microaggressions	Not at all	Several days	More than half the days	Nearly every day
1. Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen	0	1	2	3

Adapted from GAD-7; originally developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues

To help personalize this assessment to your specific family context, please indicate any additional information related to the above responses as you've observed them in your child:

Please indicate if you've noticed any of the following responses in your child as stressors related to COVID-19 continue to unfold:

Normative Response to COVID-19 Microaggressions	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed or hopeless	0	1	2	3
3. Trouble falling asleep, staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself - or that you're a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or, the opposite - being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

Adapted from PHQ; original inventory from Pfizer

Again, to apply this assessment to your particular needs, please indicate any additional insights related to the above responses as you've observed them in your child:

Step 4: The Social Impact of Stress

What would it be like for a child to feel worried, constantly, about their safety? How many times per day would their brain receive the message, *"You're not safe here. You're not wanted here. You're not welcomed here. You're not valued here. You don't belong here."*

And when trouble comes looking for them, as was the case for [several people who've reported incidents recently](#), it's no longer a matter of "just steer clear of bullies."

It's more like *"Why do people think I need to be hit and attacked?"*

In *The Fire Next Time*, author James Baldwin writes in a letter to his nephew, *"The details and symbols of your life have been deliberately constructed to make you believe what white people say about you."*

He goes on to say, *"Please try to remember that what they believe, as well as what they do and cause you to endure, does not testify to your inferiority but to their inhumanity and fear."*

I share that passage in this COVID-19 assessment not to de-center Baldwin's message or his intended recipient(s), but to affirm the impact of white supremacy on people of color, and perhaps ask white parents to imagine how it could feel to be a person of color in today's polarized socio-political climate. As mentioned earlier, Asian experiences are different from Black experiences and ought to be recognized and served as such.

And I wonder, is Baldwin's message flexible enough to teach us something about our response to COVID-19 microaggressions?

What have been some of the social implications for your child as a result of the general vibe related to COVID-19? What have they been asked to endure? How would you describe it?

Step 5: Practical Interventions

This assessment is not designed to replace professional medical or psychological care. It is a tool to help you make decisions about your family's needs. If you feel additional attention is needed, please contact your primary care physician, local crisis/counseling resources, or call 911.

There are handfults of helpful resources and articles available regarding COVID-19 "tips."

[A Helpful Discussion from the National Association of School Psychologists](#)

[Center for Disease Control and Prevention](#)

[Just for kids: A comic exploring the new coronavirus](#)

[Taking Care of Your Mental Health in the Face of Uncertainty](#)

"A significant number of children in American society are exposed to traumatic life events. A traumatic event is one that threatens injury, death, or the physical integrity of self or others and also causes horror, terror, or helplessness at the time it occurs." -[American Psychological Association](#)

Potentially traumatic events could include:

Abuse (physical, sexual, or emotional)	Bullying
Neglect (asking for help, not receiving it)	Witnessing harm to a loved one or pet (e.g., domestic or community violence)
Effects of poverty (such as homelessness or not having enough to eat)	Natural disasters or accidents
Being separated from loved ones	Unpredictable parental behavior due to addiction or mental illness

For children navigating potentially traumatic experiences related to COVID-19, there are additional resources to assist parents with responding in ways that support safety, attachment, and healing:

[Helping Children and Adolescents Cope with Disasters and Other Traumatic Events: What Parents, Rescue Workers, and the Community Can Do](#)

[Helping Children and Youth Cope in the Aftermath of Disasters](#)

[Parenting a Child Who Has Experienced Trauma](#)

I've taken the time to review the sources and put together some main take-away thoughts that have left an impression on me as I support families in my clinical practice.

Main Idea #1: Help your family feel safe; and remove barriers to that feeling.

1. Recognize and check in on emotional needs (reference the two tables above as a launchpad)
2. Listen, without intent to correct; validate and affirm with empathy and respect
3. Provide language and conversation for your child as a form of protection; don't force it
4. Advocate for your child when they express/report incidents from school
5. Discuss current events in age-appropriate ways (e.g., the NPR comic, etc.)
6. See behavior as communication, be patient; in general, shepherd at their pace/comfort level
7. Draw, write, sing, shout, crafts, play, etc. to express emotions
8. Narrate aloud about your own emotional process
9. Model what it looks like to respond to stressors in adaptive ways
10. Pursue routine and reliable schedules/responses
11. Avoid punishing normative responses to stress
12. Understand that the more personal their behavior feels, the less personal it probably is
13. Demonstrate the regulation you hope to see in your children
14. Discover ways to grant autonomy and choice (ambiguous loss can sometimes feel heightened, loss of control is a key area of struggle in adoption)
15. Nurture connection in ways that feel appropriate and effective for your relationship

Main Idea #2: Help your family actually be safe; and remove barriers to that reality.

1. Allow a broad range of emotional expression (e.g., yelling, tears, silence, etc.)
2. Normalize the idea of therapy and professional/formal counseling
3. Remain attuned to daily functioning; alert when unable to perform usual routines
4. Exercise your discretion to reduce emotional/cognitive/physical demands on the child
5. Avoid forcing your child to discuss COVID-19
6. Reduce stressors if possible (e.g., parents arguing, unrealistic rules/values, re-location, etc.)
7. Research community, regional, national, and global issues related to COVID-19.
8. Find small, doable ways to be involved with dismantling racism and bigotry
9. Interrupt racist jokes and comments
10. Support racial justice dialogue and related causes
11. Acknowledge how power and privilege plays a role in the public discourse on COVID-19
12. Find ways to be present and take ownership regarding the safety of your child and family
13. Notice and be willing to enter dialogue on any oppressive systems in which your child lives
14. Separate what is in and outside of your control; find ways to hold and honor both
15. Stay connected to and serve your community in some way, shape or form

We all want to feel safe. That's tough to do in the U.S. right now. For some, it always has been.

I pray this assessment supports your decision-making process toward healing, safety, and hope.

May our awesome God grant to us everything we need to love kindness, do justice and walk humbly together with Him (Micah 6:8).

Cam is an internationally recognized thought leader on adoption and mental health. Trans-racially adopted from Korea and founder of Therapy Redeemed, he holds a Master's in Counseling Psychology from University of Wisconsin-Madison and is a licensed professional clinical counselor. He has received training for adoption competency through [Center for Adoption Support and Education](#) and is a vetted clinician with [MN ADOPT](#).

In addition, he is trained in biblical counseling, certified in non-violent crisis intervention and is a member of the American Psychological Association's Minority Fellowship Program. Cam's mental health and education services are accessible 100% online and uniquely tailored for individuals and families on the adoption and permanency spectrum. He has presented trainings and workshops in a variety of professional and clinical settings.

For counseling and consultation,
visit <https://therapyredeemed.com/wordpress>

**Registration is currently open for Cam's 12-week
[Online Adoptive Parent Workshop | Summer 2020](#)**

**[Visit Cam's Book Tour Page](#) for his recently published book,
[This is Why I Was Adopted: Navigating Loss on a Journey Toward Hope](#)**

****If you're using this discussion guide for a group and want to hear from***
Cam directly, you can email him at therapyredeemed@gmail.com
and schedule a live Skype/Zoom Q&A*



For questions, contact Cam
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