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Racial Anxiety

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ABSTRACT: Many have embraced evidence from the mind sciences that our behaviors are often influenced by our implicit biases rather than our conscious beliefs. This is one reason why implicit bias has become a staple in trainings for judges, lawyers, police officers, teachers, and health care providers. While understanding that implicit bias is important, social science research demonstrates that implicit bias alone does not fully account for the racial dynamics that undermine student achievement and trigger disproportionately harsh discipline, diminish the efficacy of health care and affect morbidity and mortality rates, trigger harsher prison sentences, result in child removal, and lead to unnecessary uses of force by police against civilians. Following the “behavioral realist” approach to provide the most empirically accurate understanding of human behavior, in this Essay, we introduce “racial anxiety” as an additional lens for understanding racial disparities of all types.

In the social psychological literature, racial anxiety refers to the concerns that often arise both before and during interracial interactions. People of color experience racial anxiety when they worry that they will be subject to discriminatory treatment. White people, on the other hand, experience it when they worry that they will be perceived as racist. Racial anxiety can influence behaviors and judgments in ways that contribute to significant and unwarranted racial disparities even in the absence of both conscious and implicit racial bias. Additionally, in concert with implicit racial bias, racial anxiety can aggravate interracial dynamics in ways that create significant harm. This Essay explores how racial anxiety operates, discusses its probable...
I. INTRODUCTION

The question of whether “racial anxiety and anguish” determined the outcome of the 2016 presidential election is now fodder for political scientists and armchair commentators trying to make sense of the unanticipated. Whether a majority of White voters were responding to a sense that an impending demographic shift was rendering them irrelevant, the fear triggered by vitriolic campaign rhetoric, or unresolved ambivalence about having elected a Black president, the term “racial anxiety” used by commenters in the context of the 2016 election cycle is a popularized version of effects on police-civilian and doctor-patient interactions, and highlights interventions for mitigating its effects.
of “racial threat.” According to the social science literature, Whites experience multiple forms of racial threat—economic, political, and symbolic—which often translate into repressive structural policies toward other racial and ethnic groups. The resurgence of explicit expressions of racial resentment and overt racism along with the policy decisions directly responsive to racial threat are of critical importance. But even with the large-scale harms portended at the national level by those with expressly hostile goals linked to race and ethnicity, day-to-day interactions matter.

How people of color experience schools, hospitals, courts, police departments, and other institutions that affect our daily lives remains critically important. Racial dynamics in these domains can undermine student achievement or trigger disproportionately harsh discipline, diminish the efficacy of health care and affect morbidity and mortality rates, trigger harsher prison sentences, result in child removal, and lead to unnecessary uses of force by police against civilians. In this Essay, we argue that addressing “racial anxiety” is a key component to ensuring fair treatment within these domains.

The possibility that egalitarian values can co-exist with behavior inconsistent with those values is now familiar. In the last decade, the social science establishing the powerful effect of our unconscious responses to identity characteristics such as race, ethnicity, gender, and age has entered the national discourse. Even when we genuinely hold egalitarian values, our implicit (i.e., unconscious) responses rather than our conscious values can predict our behavior.

The significance of implicit bias is recognized in a variety of contexts, both academic and applied. Indeed, in the 2015 term, the Supreme Court


3. Cindy Brooks Dollar, Racial Threat Theory: Assessing the Evidence, Requesting Redesign, J. CRIMINOLOGY 1, 1 (2014). As Dollar describes racial threat theory: “Economic threat develops when White workers view minorities as being threatening to job availability, job stability, and wages. Political threat emerges from White elites’ fear of losing political power and symbolic threat surfaces when Whites, regardless of social class, perceive non-Whites as being essentially linked to crime or other ‘deviant’ behavior.” Id. at 1–2.

4. See infra Part III.


referenced the risks of unconscious biases as one of the justifications for upholding the disparate impact standard under the Fair Housing Act in *Texas Department of Housing & Community Affairs v. Inclusive Communities Project, Inc.*

In addition to the adoption of implicit bias in scholarship and jurisprudence, a wide range of institutions have integrated implicit bias trainings as part of continuing legal education or professional development. The National State Judges Association, judicial colleges and institutes, the American Bar Association, scores of law firms, law schools, a growing number of district attorneys’ offices, legal services offices, and other institutions have sponsored implicit bias trainings, or offered videos and other content to familiarize judges and lawyers with the science showing that implicit bias can affect decision-making along with identified interventions to reduce bias. We applaud the continuing engagement with this important work and have been among those who share the science in applied contexts and in our scholarship. In addition to the copious literature focusing on implicit bias, legal academics have begun to explore how “stereotype threat,” the concern about confirming a negative stereotype about one’s group, can undermine performance on cognitively challenging tasks.

In the spirit of the behavioral realism methodology that animates many of those who have pioneered the introduction of implicit bias into the legal

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academic literature, we introduce racial anxiety as an additional lens for understanding racial disparities of all types. As articulated by Jerry Kang and Mahzarin Banaji, “behavioral realism forces the law to confront . . . increasingly accurate description[s] of human decision making and behavior, as provided by the social, biological, and physical sciences.” Behavioral realism, then, requires that we continue to mine the social sciences for research that explains how and why racial difference so often translates into harm to people of color even in the absence of explicit racial animus. The goal is to ensure that law and policy decisions are congruent with the most empirically accurate understandings of human behavior. Fully realizing this goal requires a careful evaluation of the sciences to ensure that our scope of inquiry is wide enough to be accurate. We argue in this Essay that anyone grappling with the dynamics of racialized harm must also confront and address racial anxiety.

In social psychological literature, “racial anxiety” refers to the concerns that often arise both before and during interracial interactions. People of color experience racial anxiety when they worry that they will be subject to discriminatory treatment. White people, on the other hand, experience it when they worry that they will be perceived as racist. Racial anxiety can influence behaviors and judgments in ways that contribute to significant and unwarranted racial disparities even in the absence of both conscious and implicit racial bias.

A careful evaluation of the social psychological research suggests that implicit bias, racial anxiety, and stereotype threat have cumulative and synergistic effects within many critical domains. As a result, interventions focused on implicit bias alone are likely to be insufficient and even worse, may aggravate interracial dynamics in ways that create significant harm.

This Essay highlights the operation and effects of racial anxiety and proceeds in three parts. Part II introduces the concept of racial anxiety. Part III briefly discusses the probable effects of racial anxiety on police–civilian and doctor–patient interactions. Finally, Part IV offers some suggestions for mitigating the effects of racial anxiety on behaviors and judgments.

15. GODSIL ET AL., supra note 10, at 18.
17. Id.
18. See infra Part II.
19. GODSIL ET AL., supra note 10, at 34–43.
II. **EMPirical Underpinnings of Racial Anxiety**

While the term “racial anxiety” is not well known within legal academic literature, the study of anxiety stemming from inter-group interactions is robust within social psychology.²⁰ This research reveals that racial anxiety is a situational threat that exists across racial groups. However, the source of the anxiety is different depending upon how people are situated.

For people of color, racial anxiety is experienced as the concern that they will be negatively stereotyped and subjected to hostile, distant and discriminatory treatment on the basis of their race or ethnicity.²¹ Examples of people of color experiencing discrimination in inter-group interactions are found in every life domain. The most documented can be found in health care,²² education,²³ and criminal justice.²⁴ In light of the ever-growing evidence that discriminatory treatment continues to be prevalent even among people who purport to hold egalitarian values, this anxiety is realistic and unsurprising.

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For Whites, racial anxiety is experienced as the concern that they will behave in ways that will be evaluated as racist by a person of color.²⁵ It may be surprising that the fear of being perceived as racist triggers anxiety. However, for Whites, accusations of racism are experienced as immoral.²⁶ While

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²² GODSIL ET AL., supra note 10, at 40–43 (surveying health research).

²³ Id. at 34–40 (surveying education research).


standards may have shifted to some degree in the 2016 election cycle, being labeled a racist often has significant negative consequences, including the loss of one’s livelihood. Even Donald Trump was quickly pressured to distance himself from an endorsement by David Duke, the quintessential White racist. The moral opprobrium often associated with being judged as a racist causes most Whites to deny holding bigoted attitudes and beliefs and to wish to appear unprejudiced. This observation is not meant to suggest that individuals are just pretending to be unprejudiced but rather, that people can experience racial anxiety regardless of their actual racial attitudes and beliefs.

Racial anxiety can occur among all racial and ethnic groups. A person who is Asian American may experience racial anxiety when interacting with someone Black, for example. However, much of the research has focused on

27. For example, when Congressman Steve King was interviewed on the “racial makeup of the Republican Party,” he stated:

This whole “old white people” business does get a little tired . . . . [G]o back through history and figure out where are these contributions that have been made by these other categories of people that you are talking about? Where did any other subgroup of people contribute more to civilization?


30. J. Nicole Shelton et al., *Concerns About Appearing Prejudiced: Implications for Anxiety During Daily Interracial Interactions*, 13 GROUP PROCESSES & INTERGROUP REL. 329, 330 (2010) (“Although Whites may unconsciously behave in a prejudiced manner, most Whites consciously deny any ill intent and are against unfair treatment toward minority groups.” (citation omitted)).

31. Id. (“The negative experiences that Whites who are concerned with appearing prejudiced have, may be a result of the pressure on Whites to monitor their thoughts, feelings, and behaviors during interracial interactions. For example, the desire to appear unbiased is so pervasive among Whites that they report not noticing that a person is Black, even when race is the most noticeable characteristic available.” (citation omitted)); see Bridget C. Dunton & Russell H. Fazio, *An Individual Difference Measure of Motivation to Control Prejudiced Reactions*, 23 PERSONALITY & SOC. PSYCHOL. BULL. 316, 325 (1997); Lisa Legault et al., *On the Self-Regulation of Implicit and Explicit Prejudice: A Self-Determination Theory Perspective*, 35 PERSONALITY & SOC. PSYCHOL. BULL. 732, 733 (2007) (“Evidence suggests that people are indeed motivated to suppress prejudice.” (citation omitted)). See generally E. Ashby Plant & Patricia G. Devine, *Internal and External Motivation to Respond Without Prejudice*, 75 J. PERSONALITY & SOC. PSYCHOL. 811 (1998).
interactions between White and Black people. Additionally, the term “racist”
is often associated largely with anti-Black racism, and the moral
condemnation is most acute when a White person is deemed racist against a
Black person.33 Hence, this Essay focuses primarily on the racial anxiety
experienced in Black–White interactions.

A. COGNITIVE AND PHYSIOLOGICAL EFFECTS OF RACIAL ANXIETY

Similar to responses to other forms of anxiety, the experience of racial
anxiety has predictable cognitive and physiological consequences.34 First, the
worry that an interracial interaction will go badly can cause people to view
these interactions as threatening.34 A common response to feelings of threat
is to pay more attention to the phenomena that give rise to them. For instance,
while hiking through the woods, people’s attention will automatically be
captured more easily by bears and other wildlife that might pose a threat to
their lives. This so-called attentional bias is adaptive35 and “honed by a long
evolutionary history.”36 Both biological and social threats can result in
attentional bias. For example, researchers in one study found that
heterosexual women who were insecure in their romantic relationships paid
more attention to attractive men because women posed a greater threat to their relationships.37 Angry faces capture attention
for similar attentional bias reasons.38

Multiple studies show that racial anxiety results in attentional bias. For
Whites, the motivation to appear unprejudiced causes them to view Blacks as
social threats.39 In response, White subjects in these studies paid more

33. See generally Trawalter et al., supra note 25 (discussing and examining studies that show interracial interactions to trigger stress and coping mechanisms).
34. Id. at 219. See also Meghan G. Bean et al., Prejudice Concerns and Race-Based Attentional Bias: New Evidence from Eyetracking, 3 SOC. PSYCHOL. & PERSONALITY SCI. 722, 722 (2012).
36. DANIEL KAHNEMAN, THINKING, FAST AND SLOW 35 (Farrar et al. eds., 2011).
39. Shelton et al., supra note 30, at 337. See generally Richeson & Trawalter, supra note 38.
attention to Black faces than to White faces. This selective attention occurred automatically and without conscious intention. Similar research by Emily Balcetis and her colleagues used eye tracking to show that both White and Black subjects were apt to pay attention to faces they viewed as threatening when shown police cam videos. While these studies focused on a different sort of threat, the mechanism that creates attentional bias is similar.

Second, people report feeling anxious and uncomfortable during cross-racial interactions and often exhibit behaviors associated with anxiety, such as sweating, increased heart rate, facial twitches, fidgeting and avoiding eye contact. White individuals can become so self-conscious during these interactions that behaviors that would normally occur naturally, automatically, and unconsciously are negatively affected. Ironically, this reaction particularly influences low-prejudice Whites because their “automatic positive responses to outgroup members [of other racial groups] are disrupted, resulting in behavior that is more rigid and less warm and friendly than it would be in a nonthreatening context.”

Third, racial anxiety causes cognitive depletion because people become particularly sensitive to the risk of negative evaluations and treatment. During the interracial interaction, individuals become attuned to threat-relevant cues and acutely aware and preoccupied with their own thoughts and behavior as well as the behavior of their interaction partner. This occurs

40.  Bean et al., supra note 34, at 722, 727; Richeson & Trawalter, supra note 38, at 100–02.
41.  See Bean et al., supra note 34, at 727.
42.  See generally supra note 13, at 542. See also Derek R. Avery et al., It Does Not Have to be Uncomfortable: The Role of Behavioral Scripts in Black–White Interracial Interactions, 94 J. APPLIED PSYCHOL. 1382, 1383 (2009); John F. Dovidio et al., Nonverbal Communication, Race, and Intergroup Interaction, in THE SAGE HANDBOOK OF NONVERBAL COMMUNICATION 481 (Valerie Manusov & Miles L. Patterson eds., 2006); Jennifer L. Eberhardt, Imaging Race, 60 AM. PSYCHOL. 181, 183 (2005); Shelton & Richeson, supra note 21, at 150; Shelton et al., supra note 30, at 340 (finding that the more Whites are concerned with appearing racist, the more anxiety they experience during an interaction); Walter G. Stephan & Cookie White Stephan, Intergroup Anxiety, 41 J. SOC. ISSUES 157 (1985); Sophie Trawalter et al., Concerns About Appearing Prejudiced Get Under the Skin: Stress Responses to Interracial Contact in the Moment and Across Time, 48 J. EXPERIMENTAL SOC. PSYCHOL. 282, 290–91 (2012); Trawalter et al., supra note 25, at 243–45.
44.  Id.
46.  Richeson & Shelton, supra note 25, at 233.
because both parties are attempting to discern whether they are confirming negative racial stereotypes or whether they are being judged based on those stereotypes. The constant monitoring and increased vigilance expends cognitive resources.

Finally, recent research into the physiological stress responses associated with racial anxiety has demonstrated that feeling threatened can trigger the release of norepinephrine from the locus coeruleus to the anterior cingulate cortex (“ACC”). A moderate degree of norepinephrine is associated with optimal control over automatic stereotyping. However, once norepinephrine exceeds this optimal level, the ACC’s response to perceived threat and its ability to engage in cognitive control is impaired. “It is through this neurochemical pathway that intergroup anxiety may reduce cognitive control over unwanted expressions of racial bias” and lead to automatic and unconscious stereotyping. While the research is still nascent, this
physiological response to stress might explain the lack of cognitive control seen in recent work on intergroup interactions.\textsuperscript{56}

\textbf{B. Behavioral Manifestations of Racial Anxiety}

When people experience anxiety while interacting with someone from a different racial group, they often manifest that anxiety behaviorally with common responses including physical distancing, less eye contact, and a “less friendly and engaging verbal tone.”\textsuperscript{57} These non-verbal signals have the sadly ironic effect of seeming to confirm the concerns underlying racial anxiety. The person of color experiences the White person as cold and distant and attributes the behavior to racism.\textsuperscript{58} The White person experiences the person of color as cold and distant and worries that they have been adjudged racist.\textsuperscript{59} As a result, racial anxiety can trigger a desire to avoid interracial contact altogether.\textsuperscript{60}

Yet, the assumptions of both individuals might be incorrect. J. Nicole Shelton and Jennifer Richeson note that this dynamic reflects “[p]luralistic ignorance,” which “occurs when people observe others behaving similarly to themselves but believe that the same behaviors reflect different feelings and beliefs.”\textsuperscript{61} As a result of racial anxiety, both White and Black people are apt to believe that members of the other group will not be interested in interacting with them.\textsuperscript{62} Shelton and Richeson’s studies confirm that both White and Black people attribute their own reluctance and failure to engage in interracial contact to fears of rejection, but assume that similar behaviors by someone of the other racial group reflects a lack of interest.\textsuperscript{63}

\begin{itemize}
  \item \textsuperscript{56} See generally Richeson & Shelton, supra note 49; Richeson et al., supra note 47. Researchers are also focusing on the effects of other hormones, such as anabolic and catabolic steroids and the interaction of these hormones with the immune system and the brain. See generally, e.g., Steven F. Maier & Linda R. Watkins, \textit{Cytokines for Psychologists: Implications of Bidirectional Immune-to-Brain Communication for Understanding Behavior, Mood, and Cognition}, 105 \textit{PSYCHOL. REV.} 83 (1998); Wendy Berry Mendes et al., \textit{Why Egalitarianism Might Be Good for Your Health: Physiological Thriving During Stressful Intergroup Encounters}, 18 \textit{PSYCHOL. SCI.} 991 (2007). A consideration of these complex psychophysiological systems promises to open new avenues for theorizing on the effects of stress on social behavior, which in turn will inform intergroup relations. For example, researchers measure cortisol and other salient hormones through saliva to determine the success of interventions promoting positive intergroup relations. See Elizabeth Page-Gould & Rodolfo Mendoza-Denton, \textit{Friendship and Social Interaction with Outgroup Members}, in \textit{MOVING BEYOND PREJUDICE REDUCTION: PATHWAYS TO POSITIVE INTERGROUP RELATIONS} 139, 141 (Linda R. Tropp & Robyn K. Mallett eds., 2011).
  \item \textsuperscript{57} Godsil et al., supra note 10, at 27.
  \item \textsuperscript{58} Trawalter et al., supra note 25, at 243, 244-254.
  \item \textsuperscript{59} Id.
  \item \textsuperscript{60} Eberhardt, supra note 44, at 182; Jennifer R. Schultz et al., \textit{Reframing Anxiety to Encourage Intergroup Interactions}, \textit{4 TRANSLATIONAL ISSUES IN PSYCHOL. SCI.} 392, 392 (2015); Shelton et al., supra note 39, at 339; Trawalter et al., supra note 43, at 282-83.
  \item \textsuperscript{61} J. Nicole Shelton & Jennifer A. Richeson, \textit{Intergroup Contact and Pluralistic Ignorance}, 88 \textit{J. PERSONALITY & SOC. PSYCHOL.} 91, 92 (2005) (citation omitted).
  \item \textsuperscript{62} Id.
  \item \textsuperscript{63} Id.
\end{itemize}
Racial anxiety can also lead to misunderstandings and incorrect assumptions as a result of competing goals—being liked versus being respected—that occur during an initial interaction. Ideally, most of us hope to be both respected and liked. However, our racial or ethnic identity affects which goal may be most significant in any particular interaction. Bergsieker, Shelton, and Richeson conducted a series of studies to test the premise that Whites and people of color—specifically, Black people and Latinos—may place differential emphasis on these goals. White people, aware of the stereotype that they are racist, may seek confirmation in an interaction with someone of another race or ethnicity that they are liked. However, someone Black or Latino, aware of the stereotype that they lack competence and intelligence, may seek signals that a White person respects them. The studies confirmed both the hypothesis that people from the different groups had different primary goals—Whites to seem moral and likable and Blacks and Latinos to seem competent—and that their behaviors differed between intergroup and same-group interactions as they pursued these goals. In an interaction with someone Black or Latino, a White person was more likely to engage in “flattery, friendliness, and seeking to be liked (ingratiation)” while in the same interaction, the Black or Latino person was more likely to “mention[] achievements, confidence, and seek[] to be respected (self-promotion).” Not surprisingly, their divergent goals led people in both groups to feel greater levels of negative affect toward the other following the interaction. Relatedly, Whites, seeking to promote harmony, often emphasize similarities and downplay racial dynamics while people of color, seeking to ensure respect, may take the opposite approach. As the authors conclude: “If Whites take an assimilating approach, ignore power, and downplay race, minorities may feel disrespected. Likewise, if minorities adopt an integrating approach, disregard similarities, and bring up racial issues, Whites may think minorities dislike them. These unmet goals may undermine their interactions.”

Although racial anxiety foregrounds situational factors, this does not mean that individual dispositions are irrelevant. For instance, whether someone is externally versus internally motivated to be unprejudiced can

64. See generally Hilary B. Bergsieker et al., To Be Liked Versus Respected: Divergent Goals in Interracial Interactions, 99 J. PERSONALITY & SOC. PSYCHOL. 248 (2010).
65. Id. at 249.
66. Id. The study included Asian-American participants, but found that because stereotypes of Asian Americans are linked to competence, the same dynamics between Whites and Asian Americans did not appear. Id. at 257.
67. Id. at 251.
68. Id. at 256.
69. Id. at 260–61.
70. Id. at 257.
71. Id. at 250–60.
72. Id. at 261.
influence racial anxiety.\textsuperscript{73} Those who are externally motivated to avoid appearing prejudiced have been found to experience heightened anxiety when interacting with Blacks because of the cognitive dissonance between their internal motivations and the external expectations.\textsuperscript{74}

However, negative behaviors during interracial interactions are not reliable indicators of racial bias. Whites who are high in racial bias can find interracial contact more threatening and can appear more anxious during interracial interactions, blinking and fidgeting more than Whites who are low in racial bias.\textsuperscript{75} Importantly, however, sometimes Whites who are high in racial bias are motivated to exhibit more positive behaviors in interracial interactions than individuals who are low in bias.\textsuperscript{76} Thus, even individuals who are consciously and unconsciously egalitarian may experience interracial interactions as threatening and exhibit avoidance or antagonizing behaviors.

While the significance of anxiety about or during intergroup interactions may not be obvious at first blush, its effects can be deeply consequential in every life domain. It can cause reluctance to engage socially across race\textsuperscript{77} and lead to significant misunderstandings when these interactions do occur. In Part III, we discuss the probable effects of racial anxiety in policing and health care. These examples are developed only to the extent necessary to illustrate that racial anxiety can inform our understanding of how significant racial disparities can occur even in the absence of both conscious and unconscious bias.

III. RACIAL ANXIETY IN POLICING AND HEALTH CARE

Racial anxiety can impede interactions in a variety of contexts in which the quality of the relationship matters. These situations include job interviews and interactions between managers and employees, teachers and students, teachers and parents, lawyers and clients, and judges and litigants. In each of these situations, the behaviors associated with racial anxiety can lead to significant harm to the person with less power. For instance, research shows the salience of racial anxiety in education and employment. In the education context, evidence demonstrates that White teachers hesitate to provide necessary critical feedback to Black students for fear of seeming racist,\textsuperscript{78} and in the employment context, interviews of candidates of color are shorter and more awkward.\textsuperscript{79} Moreover, a recent article raises the concern that public
defenders may spend less time with Black clients than White.\textsuperscript{80} While the assumption is that implicit racial bias is to blame, racial anxiety may well play an independent role in this dynamic. In this Part, we focus on the effects of racial anxiety in policing and health care.

\section*{A. POLICE–CIVILIAN INTERACTIONS}

In recent years, the study of implicit racial bias has contributed to our understanding of why unjustified racial disparities in policing exist and highlight the importance of considering institutional and structural interventions to remedy the problem. However, racial anxiety can also enable troubling racial disparities, even in the absence of consciously and unconsciously biased officers.

\subsection*{1. Effects on Officers}

Police officers likely experience racial anxiety because similar to Whites, they recognize the possibility of being perceived as racist.\textsuperscript{81} This anxiety can cause officers to focus their attention on those individuals most likely to trigger it, i.e. Black and Brown people. Thus, the fear of being evaluated as racist can result in racial profiling.

Once an officer’s attention is captured, racial anxiety can cause the officer to be more likely to interpret any ambiguous behaviors he or she observes as suspicious and threatening. There are at least two reasons for this.\textsuperscript{82} First, research demonstrates that anxiety increases the risk that people will interpret ambiguous stimuli as threatening.\textsuperscript{83} For instance, one study found that women who were concerned about being stigmatized by men were more likely to perceive negative facial expressions as lasting “longer on male faces than on female faces.”\textsuperscript{84} Second, officers may assume that their gut instincts of criminality drew their attention to the individual in question, thereby biasing their interpretations of that individual’s ambiguous actions.

If officers interpret ambiguous behaviors as indicative of criminality, they will approach the individual to investigate. When these interactions are with people of color, racial anxiety can cause cognitive depletion to occur more quickly. This is because officers already use significant executive resources to

\textsuperscript{80}. Maurice Chammah, Do Public Defenders Spend Less Time on Black Clients?, MARSHALL PROJECT (May 2, 2016, 10:00 PM), https://www.themarshallproject.org/2016/05/02/do-public-defenders-spend-less-time-on-black-clients.


\textsuperscript{82}. See generally Nader Amin et al., Negative Interpretation Bias in Social Phobia, 36 BEHAV. RES. \& THERAPY 915 (1998); Michael W. Eysenck et al., Bias in Interpretation of Ambiguous Sentences Related to Threat in Anxiety, 100 J. ABNORMAL PSYCHOL. 144 (1991).


monitor their environment for potential threats.\textsuperscript{85} Racial anxiety adds to this cognitive load as officers become hyper alert for clues that they are being evaluated as racist.

Furthermore, officers who worry that people of color will evaluate them as racist likely also suspect that these individuals do not respect them and do not view them as legitimate. These worries can translate into officers experiencing concern for their safety.\textsuperscript{86} As a result, any signs of resistance, no matter how small, are more likely to be viewed as dangerous. Importantly, resistance does not have to be physical. Verbal resistance can take the form of questioning officers about the reasons for a stop or showing disrespect by mouthing off, otherwise known as “contempt of cop.”\textsuperscript{87} Indeed, officers already interpret verbal resistance as a potential safety threat,\textsuperscript{88} and the experience of racial anxiety can exacerbate this concern.

Finally, officers are trained to enact command presence when a situation poses a potential safety threat.\textsuperscript{89} Command presence entails “taking charge of a situation” and “projecting an aura of confidence and decisiveness.”\textsuperscript{90} The theory is that by establishing dominance, a potentially dangerous individual will yield out of fear of what the consequences will be if he does not.\textsuperscript{91} However, as Tom Tyler has observed, this tactic can instead “encourage resistance and defiance, create hostility, and . . . begin a spiral of conflict that increases the risks of harm for both the police and for the public.”\textsuperscript{92}

\textsuperscript{85} Geoffrey P. Alpert et al., Interactive Police-Citizen Encounters that Result in Force, 7 POLICE Q. 475–476 (2004).

\textsuperscript{86} See, e.g., Nathanael J. Fast & Serena Chen, When the Boss Feels Inadequate, 20 PSYCHOL. SCI. 1406, 1409 (2009) (providing empirical evidence that suggests that individuals in power who perceive themselves as incompetent tend to act out aggressively toward their inferiors); Phillip Atiba Goff et al., Illegitimacy Is Dangerous: How Authorities Experience and React to Illegitimacy, 4 PSYCHOL. SCI. 340, 341–42 (2013) (explaining that police officers often experience increased anxiety around Latinos as they are the group most strongly associated with undocumented immigrants).


\textsuperscript{88} See Alpert et al., supra note 85, at 476 (explaining the correlation between an officer and suspect’s behavior and the “actions, comments, and demeanor of the other person”); Arnold Binder & Peter Scharf, The Violent Police-Citizen Encounter, 452 ANNALS AM. ACAD. POL. & SOC. SCI. 111, 115 (1980) (“Another conspicuous triggering mechanism for police violence is the factor of citizen disrespect . . . .”).

\textsuperscript{89} Frank Rudy Cooper, “Who’s the Man?” Masculinities Studies, Terry Stops, and Police Training, 18 COLUM. J. GENDER & L. 671, 674 (2009); see also Alpert et al., supra note 85, at 476 (explaining the difference between “[d]ominating force” and “accommodating force” as a way for officers to take control over a situation).

\textsuperscript{90} Cooper, supra note 89, at 674; see also Alpert et al., supra note 85, at 476 (explaining the difference between “[d]ominating force” and “accommodating force”).


\textsuperscript{92} Tom R. Tyler, Trust and Law Abidiness: A Proactive Model of Social Regulation, 81 B.U. L. REV. 351, 356 (2001); see also Sunshine & Tyler, supra note 91, at 520 (“[W]hen power-based tactics are used by one party, they are imitated by the opposing party.”).
Empirical evidence suggests that racial anxiety can influence police uses of force against Black individuals. In one study, officers completed a measure of how concerned they were with appearing racist. This measure included questions such as “I worry that others may stereotype me as prejudiced because I am a police officer” and “I worry that, because I know the racial stereotype about police officers and prejudice, my anxiety about confirming that stereotype will negatively influence my interactions.” The researchers found that the more anxious officers were about being evaluated as racist, the more likely they were to have used force against Black suspects relative to suspects of other races during the previous two years. Neither conscious nor unconscious racial biases similarly predicted these uses of force, providing evidence that racial anxiety is consequential to police uses of force even in the absence of conscious and unconscious racial bias.

In sum, there are a number of reasons why officers experiencing racial anxiety may be more likely to engage in racial profiling and to stop, frisk, and use force more often against people of color than White people. First, racial anxiety likely will not be present during interactions with White individuals. Second, this anxiety increases the likelihood that officers will evaluate the individual’s ambiguous behaviors and verbal resistance as indicative of danger. Third, the officers’ heightened vigilance during the interaction will leave them with fewer cognitive resources to facilitate a positive interaction and increase the chances that they will be influenced by unconscious racial stereotypes when evaluating whether the individual poses a threat. Thus, even without considering the influence of conscious and implicit bias on behaviors and judgments, racial anxiety can result in significant and unwarranted racial disparities in the way police treat people of color versus White individuals under identical circumstances.

So far, this Part has examined racial anxiety from the officer’s perspective. However, racial anxiety is transactional, accounting for how racial anxieties can influence both parties to an interaction. The effects of racial anxiety on Black people are discussed next. We focus on Black individuals because they are more likely than White individuals to worry about...
experiencing police racism and there is more empirical evidence concerning the experience of racial anxiety by Black individuals.\textsuperscript{99}

2. Effects on Individuals

From the civilian’s perspective, racial anxiety refers to the fear of being the victim of police racism, leading to worries that one will be subjected to police brutality on the one hand and rude, disrespectful and harassing treatment on the other. This anxiety can influence a person’s behaviors and judgments as well as the attributions he or she makes about an officer’s conduct during an interaction. Although individuals of any race may experience anxiety in the presence of the police, Black and Brown civilians must also contend with the fear of police racism.\textsuperscript{100}

In light of the recent, high-profile deaths of Black individuals at the hands of the police, it is unsurprising that Black people fear being the victims of police racism. Studies confirm that high-profile cases of racial violence by the police influence Black individuals’ negative attitudes toward the police.\textsuperscript{101} Thus, Black individuals will be more suspicious of the police and be more likely to expect harsh or discriminatory treatment.\textsuperscript{102} These concerns can cause Black people to be highly attuned to threat-relevant cues from the officer, such as the officer’s tone of voice or ambiguous body movements\textsuperscript{103} and to be more likely to interpret the officer’s ambiguous movements and behaviors as hostile and threatening.\textsuperscript{104} In fact, as a consequence of their negative expectations, Black individuals may place more emphasis on

\textsuperscript{99} While both Whites and Blacks stereotype the police in this manner, Blacks are appreciably more likely to believe the stereotype that officers are racist. \textit{See generally} Tom R. Tyler & Yuen J. Huo, Trust in the Law: Encouraging Public Cooperation with the Police and the Courts (2002); Samuel Walker et al., The Color of Justice: Race, Ethnicity, and Crime in America (3d ed. 2004). Public opinion surveys consistently show that Blacks have more negative views of the police than do Whites. Ronald Weitzer & Steven A. Tuch, Perceptions of Racial Profiling: Race, Class and Personal Experience, 40 CRIMINOLOGY 435, 445 (2002). It is not surprising that Blacks in particular tend to trust law enforcement less than Whites do and trust law enforcement less the more contact they have with them. \textit{See} Jennifer L. Woolard et al., Anticipatory Injustice Among Adolescents: Age and Racial/Ethnic Differences in Perceived Unfairness of the Justice System, 26 BEHAV. SCI. & L. 207, 210 (2008) (finding that “direct personal experience with the justice system also has an impact on expectations of injustice”). In fact, many parents of Black children feel it is their duty to warn them to be careful when interacting with the police. \textit{See} Eric J. Miller, Police Encounters with Race and Gender, 5 U.C. IRVINE L. REV. 735, 751–52 (2013).

\textsuperscript{100} \textit{See} Trawalter et al., \textit{supra} note 25, at 254 (“Interracial interactions often trigger anxiety, fear, and sometimes even anger for Whites and racial minorities.”); \textit{see also generally} Shelton & Richeson, \textit{supra} note 21; Woolard et al., \textit{supra} note 99.

\textsuperscript{101} Ronald Weitzer, Incidents of Police Misconduct and Public Opinion, 30 J. CRIM. JUST. 397, 398, 406 (2002) (noting that while all races were influenced by police misconduct, the “magnitude of attitudinal change” after a high-profile case of police misconduct was highest for Blacks, followed by Latinos, then Whites).

\textsuperscript{102} \textit{See generally} Tyler & Huo, \textit{supra} note 99.

\textsuperscript{103} Mary C. Murphy et al., Signaling Threat: How Situational Cues Affect Women in Math, Science, and Engineering Settings, 18 PSYCHOL. SCI. 879, 879 (2007).

information that is consistent with racism than on information that is inconsistent with it.  

Ironically, the nonverbal behaviors associated with anxiety, such as lack of eye contact and fidgeting, will make the Black person appear nervous and increase the officer’s suspicions that the individual is engaged in criminal activity. In fact, police are trained to view these behaviors as suspicious and potentially threatening. Thus, an officer is more likely to conduct a stop and frisk.

However, this stop and frisk not only is likely to result in the Black individual feeling profiled, but also is likely to confirm his or her belief that the officer is a racist and therefore, that the officer’s actions are illegitimate. This might lead the individual to question the officer’s actions. In fact, empirical evidence suggests that individuals are most “likely to challenge police authority when they have not committed a serious offense.” Officers may view this questioning as a challenge to their authority and respond aggressively. This is how racial anxiety can influence the behaviors of both officers and civilians, leading to racially disparate uses of force.

One might respond to this series of events by arguing that Black individuals should simply yield to police authority and not verbally resist. However, Black individuals should have no fewer rights to contest government conduct than others. In a free society, verbal opposition should be tolerated by the police. As Judge Kozinski wrote in Duran v. City of Douglas:

[C]riticism of the police is not a crime. . . . The freedom of individuals to oppose or challenge police action verbally without thereby risking arrest is one important characteristic by which we distinguish ourselves from a police state. Thus, while police . . . may resent having obscene words and gestures directed at them, they may not exercise the awesome power at their disposal to punish

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108. Geoffrey P. Alpert & Roger G. Dunham, Understanding Police Use of Force: Officers, Suspects, and Reciprocity 184 (2004); Alpert, supra note 85, at 485.

109. See Cooper, supra note 89, at 692.

110. See Miller, supra note 99, at 737–38.
individuals for conduct that is not merely lawful, but protected by the First Amendment.111

In sum, prior to any interaction, racial anxieties can cause officers and people of color to view each other with suspicion. During an interaction, these anxieties can cause each to interpret the other’s ambiguous behaviors through a biased lens. Furthermore, their mutual anxieties may influence their behaviors in a manner that fulfills their negative expectations. After the interaction, each party will likely remember the interaction in a way that confirms their pre-existing expectations.112 Thus, racial anxiety can explain why interactions between officers and individuals can result in the production and reproduction of mutual suspicion. Additionally, the racial disparities in police uses of force that might stem from racial anxiety not only reinforces the perception that the police are racist, but also police concerns that they will be negatively stereotyped.

Further, racial anxiety predicts racial disparities even if only one member of the dyad is experiencing it. If only the individual is concerned, he or she will read an officer’s ambiguous behaviors as indicative of racism, which may result in him or her exhibiting nonverbal behaviors that the officer will interpret as suspicious or as resisting police authority. If only the officer is concerned, he or she will be more likely to view the actions of people of color with suspicion and to exhibit more aggressive behaviors in response to his or her own anxieties. This can generate a negative response from the individual, which the officer then treats as a safety threat, creating a series of events that can lead to a negative interaction and perhaps the use of force. In sum, racial anxiety influences both officers and civilians and reveals how racial disparities in judgments of suspicion and uses of force can occur even in the absence of bad actors on either side of the interaction.

B. Health Care

Racial anxiety may also be a source of disparate treatment of people of color—indeed, independent of bias—in the health care context. Patients may have worse health outcomes if racial differences affect any personal interactions with their health care provider, even when health care providers make correct diagnoses and appropriate treatment recommendations. In a literature review addressing racial and ethnic disparities in health care services, Shavers and colleagues explained that further study of patient–physician interactions is crucial to understanding the current levels of perceived discrimination among patients of color, “particularly as they relate to communication styles and nonverbal behaviors that have the potential to elicit the perception of


discrimination among diverse patients.”\textsuperscript{113} The racial-anxiety literature thus provides an important lens.

1. Effects on Health Care Providers

Past studies of medical interactions have used observational and retrospective methodologies to isolate the effects of race on the interactions between physicians and patients.\textsuperscript{114} Reviewing that literature, Ferguson and Candib noted that physicians working with patients of color can display less empathy, provide insufficient information, and may be less likely to involve patients in medical decision-making.\textsuperscript{115}

Researchers evaluating recordings of cross-racial health care interactions found that White health care providers tend to have shorter visits and less positive affect toward patients of color.\textsuperscript{116} As Siminoff and colleagues found in their study of cross-racial doctor–patient interactions involving breast cancer patients, income and insurance availability cannot explain why White health care providers spend less time with patients of color in relationship building activities.\textsuperscript{117}

While this research does not address the specific causal mechanism for the behavior, related research strongly supports the hypothesis that racial anxiety plays a significant role.\textsuperscript{118} The manifestations of racial anxiety—being “less apt to share eye contact, and use a less friendly and engaging verbal tone”\textsuperscript{119}—are precisely the behaviors engaged in by White doctors.

Health care providers may not suffer the same level of stereotyping as police officers, but the health field suffers from a troubling history of racism.\textsuperscript{120} For those health care providers who are White, the general anxiety held by many Whites that they will be stereotyped as racist is likely to be at play. As in other instances of racial anxiety, the fear of being evaluated as racist can result in racially disparate behavior—in the case of health care provider–patient dynamics, patients of color will experience less information


\textsuperscript{116} Cooper et al., supra note 114, at 911.

\textsuperscript{117} Siminoff et al., supra note 114, at 360.

\textsuperscript{118} See Tropp & Page-Gould, supra note 13, at 550.

\textsuperscript{119} GODISI ET AL., supra note 10, at 27.

gathering, lower levels of empathy, shorter visits, and a less active role in
decision-making than a similarly situated White patient.121

While increased research is necessary to understand precisely the role
racial anxiety plays that is distinct from either explicit or implicit bias, the
depressed level of care may be a result of the cognitive depletion caused by
the health care provider’s concern about appearing racist. This concern, as
with police officers, leaves health care providers with less mental energy to
facilitate positive interactions.

2. Effects on Patients

A significant body of literature links patients’ experience of
discrimination to worse health outcomes.122 Growing evidence shows that
women of color are aware of and worry that doctors and other medical
professionals hold negative stereotypes about them and, as a result, feel they
are being treated differently.123 While patients’ perceptions may in some
instances be accurate, in others, the patient’s own racial anxiety may be at
play. Basáñez and colleagues explain the vigilance toward social cues,124 “and
expectations of rejection [triggered by racial anxiety] produce cognitive
burden, so patients incorporate many elements from the interaction with
their doctors, including non-verbal behaviors, up until the moment they
receive recommendations.”125 The patients’ lens, when combined with the
risks that the health care provider is also working under the cognitive burden
of racial anxiety, creates a greater likelihood of reducing the quality of the
interaction, which has been found to “affect [the patients’] understanding of
instructions, agreement with diagnoses, and perceptions of the doctor as
caring or indifferent.”126 This phenomena was described by a Black woman
currently seeking treatment for breast cancer as a constant sense that her
health care providers were not sharing as much information with her about
treatment options because of her race—despite her status as a professional

121. See Cooper et al., supra note 114, at 911; Ferguson & Candib, supra note 115, at 359.
122. See, e.g., Diana J. Burgess et al., Stereotype Threat and Health Disparities: What Medical
Educators and Future Physicians Need to Know, 25 J. GEN. INTERNAL MED. 169, 170 (2010); Elizabeth
N. Chapman et al., Physicians and Implicit Bias: How Doctors May Unwittingly Perpetuate Health Care
123. See generally Cleopatra M. Abdou & Adam W. Fingerhut, Stereotype Threat Among Black and
White Women in Health Care Settings, 20 CULTURAL DIVERSITY & ETHNIC MINORITY PSYCHOL. 316
(2014); Cheryl L. Giscombe & Marci Lobel, Explaining Disproportionately High Rates of Adverse Birth
Outcomes Among African Americans: The Impact of Stress, Racism, and Related Factors in Pregnancy, 131
PSYCHOL. BULL. 662 (2005); Marsha Lillie-Blanton et al., Race, Ethnicity, and the Health Care System:
Public Perceptions and Experiences, 57 MED. CARE RES. & REV. 218 (2000).
124. See generally Tatiana Basáñez et al., Ethnic Groups’ Perception of Physicians’ Attentiveness:
Implications for Health and Obesity, 18 PSYCHOL. HEALTH & MED. 37 (2013).
125. Id. at 39 (citation omitted).
126. Id.
with high-quality health care insurance. A sense that the health care provider is biased may reasonably cause the patient to conclude that the advice received is unworthy of consideration. The lower levels of trust Black patients have toward counselors raises significant concerns for mental and physical health care outcomes. Indeed, researchers have found that Black patients with White doctors are less likely to schedule and more likely to delay or postpone appointments.

Racial dynamics matter because patient health care outcomes depend on the quality and quantity of care patients receive as well as the level of trust and satisfaction they have in their doctors. Addressing and ameliorating the racial dynamics that undermine treatment has the potential to reduce health outcome disparities.

IV. OVERCOMING RACIAL ANXIETY

Because racial anxiety can trigger a negative feedback loop, it is crucial to identify what behavior or response can interrupt the cycle. The research is abundant that intergroup contact itself reduces racial anxiety. The challenge is how best to encourage positive intergroup interactions, especially in contexts where issues of race are directly salient. In Subpart A, we examine the literature establishing how interacting across groups effectively diminishes anxiety. In Subpart B, we highlight a set of strategies for addressing the more acute instances in which anxiety is triggered. Finally, Subpart C discusses how institutions can monitor the environment to determine how to protect against cues that trigger racial anxiety or negative stereotypes.

A. PRIMING FOR POSITIVE INTERGROUP CONTACT

Not surprisingly, once people feel connected, both racial anxiety and bias tend to decrease. Robust intergroup interactions and friendships translate

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128. Id.
131. See generally Thomas A. LaVeist et al., Race Differences in Care for Heart Disease: Implications for Patient Attitudes and Future Health Behavior, 50 PHYLOGN 115 (2002).
132. See generally John F. Dovidio et al., Cooperation, Common Identity, and Intergroup Contact, in COOPERATION: THE POLITICAL PSYCHOLOGY OF EFFECTIVE HUMAN INTERACTION 143 (Brandon A. Sullivan, Mark Snyder & John L. Sullivan eds., 2007).
133. Dovidio et al., supra note 122, at 482.
into more positive attitudes and enhanced likelihood of positive cross-group interactions.  

Indeed, priming people to envision positive cross-group interactions in anticipation of new cross-group interactions has been shown to translate into more positive intergroup experiences. Mallett and colleagues found that watching other people’s positive cross-group interactions and writing about their own similar experiences can promote positive shifts in expectations. 

This body of work shows a positive feedback loop that counters the effects of pluralistic ignorance.

For intergroup contact to reduce racial anxiety and lead to positive outcomes among both Whites and people of color, it is obviously helpful if the conditions of the contact facilitate rather than undermine the sense that everyone is welcome.

In the 1950s, Gordon Allport identified the conditions most conducive to positive intergroup contact: the establishment of “equal status between the groups in the situation; common goals; intergroup cooperation; and the support of authorities, law, or custom.”

These conditions are often present in successful cooperative learning environments and integrated sports teams.

Researchers have found that the sequencing of inter-group dynamics is important, concluding that it is essential to first create a shared sense of identity, while also acknowledging group differences.

Of course, emphasizing group difference prior to the development of a certain degree of trust and rapport can create tension.

However, if group differences are ignored, the full benefits of intergroup contact are undermined.

136. See generally id.
138. Id. at 274–75.
139. See generally J. Nicole Shelton et al., Expecting to be the Target of Prejudice: Implications for Interracial Interactions, 31 PERSONALITY & SOC. PSYCHOL. BULL. 1189 (2005).
143. Pettigrew & Tropp, supra note 141, at 755.
144. See generally Marilyn B. Brewer & Norman Miller, Beyond the Contact Hypothesis: Theoretical Perspectives on Desegregation, in GROUPS IN CONTACT: THE PSYCHOLOGY OF DESSEGREGATION 281 (Norman Miller & Marilyn B. Brewer eds., 1984); Norman Miller, Personalization and the Promise of Contact Theory, 58 J. SOC. ISSUES 387 (2002).
145. Miles Hewstone & Rupert Brown, Contact Is Not Enough: An Intergroup Perspective on the “Contact Hypothesis,” in CONTACT AND CONFLICT IN INTERGROUP ENCOUNTERS (Miles Hewstone &
people of different races and ethnicities interact with one another, those interactions will yield more general changes in intergroup attitudes only if they recognize group membership. Stated differently, in order for intergroup interaction to lead to general reductions in bias or racial anxiety, individuals must identify each other as “Black” or “White” rather than attempting to distance the other from their racial identity group. If people fall into the “I don’t see you as Black” or “I don’t see you as White/you are not like most White people” default, then the positive regard for the particular person won’t extend to a wider recognition that others within that racial group may also differ from stereotypes. Researchers have also found that emphasizing group differences once relationships have been developed can help build cross-group intimacy and understanding. It can also ensure that meaningful differences in experience and perspective are fully recognized.

However, conditions will not always be ideal for inter-group contact. In many crucially important contexts, teacher–student, doctor–patient, employer–employee, lawyer–client, judge–litigant, police officer–civilian, few if any of the Allport conditions will be present. In the next Subpart, we describe how racial anxiety can be minimized in these more challenging interactions.

B. STRATEGIES TO MINIMIZE RACIAL ANXIETY

Researchers have identified various methods individuals and organizations can employ to address racial anxiety even in less than ideal contexts. We will discuss four mechanisms that have proven to be particularly effective, namely highlighting that inter-group contact can reduce future anxiety, scripts, understanding the malleability of prejudice, and learning goals. We will also offer some brief thoughts on how these tools might be useful in the context of policing and health care. However, a word of caution: Trawalter and colleagues warn that attempts to ameliorate racial anxiety may go awry. Well-intentioned individuals “may overcompensate for their intergroup anxiety and behave so positively that they come off as inauthentic...”
and/or even patronizing to their interaction partner.” Additionally, their attempts to engage in friendly behavior will be undermined by manifestations of stress like excessive blinking and fidgeting, which will have the effect of sending mixed messages. The likelihood of overcompensation and whether or not the strategies described below are useful in reducing its effects have not been thoroughly studied.

1. Acknowledging Anxiety

Social psychologists have long recognized that people regularly engage in “situation selection,” meaning that they approach or avoid a situation depending upon whether they think that the situation will lead to a desired emotional outcome. Racial anxiety often leads to the choice to avoid an interracial interaction in order to reduce anxiety. This decision decreases the likelihood of an interaction that may decrease future anxiety. Schultz and colleagues found that they were able to counter the tendency to avoid interracial contact by providing information that acknowledged the potential for interracial interactions to be anxiety provoking, while also alerting the subjects to the fact that choosing to approach an interracial interaction helps reduce future feelings of anxiety. Those who received the instruction cited “bias reduction” as the reason for the choice of partner and were less likely to mention “concern about appearing prejudiced . . . or their comfort level” than those in the control group. Additionally, the interactions were also more likely to be positive, prompting warmer nonverbal behaviors. Importantly, the instruction was most significant when the topic at issue involved race—which generally is a context many Whites avoid. This particular strategy of acknowledging anxiety may be most effective when people have some choice in whether to engage or not.

Schultz and her colleagues specifically identified the possibility of this strategy to begin to address the harms to health outcomes stemming from anxiety between White doctors and Black patients. This approach might also enable more positive police–civilian interactions in situations where officers are engaging with individuals in order to build community trust. Although building police–civilian trust is an important endeavor, officers may

149. Trawalter et al., supra note 25, at 252.
150. Id.
152. Schultz et al., supra note 60, at 394. The instruction they provided stated: “Sometimes people feel anxious about interacting with a person from another race. To reduce this anxiety, they might choose to avoid situations in which a cross-race interaction is likely because avoiding that situation reduces your anxiety. However, research suggests that choosing to put yourself in situations in which you interact with a person from another race actually helps to reduce future feelings of anxiety.” Id. at 394.
153. Id. at 396.
154. Id.; see also id. fig.1 (illustrating the findings of Shultz and her colleagues).
155. Id. at 397.
be reluctant to interact with members of the community when they anticipate a negative and uncomfortable interaction. However, if officers understand that feeling anxious in this situation is normal and that choosing to engage with one individual will help to decrease anxiety in future interactions, they might be more open and willing to interact.

2. Scripts

Lessons from the study of interracial interactions demonstrate that providing White people with social scripts can reduce the racial anxieties they may otherwise experience. Social scripts are specific and structured guidelines about what behaviors are appropriate, acceptable and expected during interracial interactions.\(^{156}\) By providing this explicit guidance about what constitutes unprejudiced behavior, the scripts can largely allay the anxiety elicited by the concern that they will be perceived as racist. For instance, in one study, researchers found that when interracial interactions were unstructured and unscripted, individuals experienced greater anxiety both before and during the interaction. However, providing individuals with detailed scripts about what to say and do reduced these anxieties significantly.\(^{157}\)

In the context of policing, providing officers with scripts and having them practice how to approach interactions with Black individuals may reduce their racial anxiety and its attendant effects. Officers can be trained using role-playing on how to interact with individuals in a variety of different circumstances, including traffic stops. Furthermore, these scripts can include tactics for responding to verbal resistance without resorting to dominating force as a first response. Providing these scripts can give officers the resources to cope with their racial anxiety during interactions with Black individuals.

3. Malleability of Prejudice

Police departments and hospitals also can reduce racial anxieties by teaching officers and health care providers that racial prejudice is malleable versus fixed.\(^{158}\) Recent research demonstrates that when individuals view racism as immutable, they are “less interested in engaging in interracial interactions,” including activities related to race and diversity, are more “anxious before and during interracial interactions,” and behave with more

\(^{156}\) Trawalter et al., supra note 25, at 249–50.

\(^{157}\) Id. at 250.

unfriendliness when interacting with Black as compared to White individuals.\textsuperscript{159}

Additionally, individuals with fixed beliefs exhibited more behavioral and physiological anxiety than those with malleable beliefs, including “mak[ing] less eye contact, smil[ing] less . . . [displaying a] rigid and tense body posture . . . speak[ing] less fluidly, and [experiencing] increased heart rate . . . [while] interacting with a Black (but not White) individual.”\textsuperscript{160} The belief that racism was fixed produced these reactions even in low-prejudiced individuals because it increased concerns about being evaluated as racist.\textsuperscript{161} However, when people’s beliefs about the malleability of racial prejudice were changed by presenting scientific evidence about the malleability of prejudice, individuals became equally comfortable and friendly during interactions with Black and White individuals.\textsuperscript{162}

This research presents the intriguing possibility that teaching officers and health care providers about the malleability of racial prejudice may reduce their racial anxiety when interacting with Black individuals. This can be achieved by presenting them with studies highlighting the malleability of racism, providing “impressive” examples of people who altered their racial beliefs, and asking them to teach others about the malleability of prejudice.\textsuperscript{163}

4. Learning Goals

Related research demonstrates that people approach tasks with either performance goals or learning goals. Individuals concerned about performance goals are motivated to ensure that their inadequacies are not revealed while individuals with learning goals are focused on obtaining new skills and increasing their competence.

One study suggests that approaching interracial interactions with “learning goals” can reduce anxiety in interracial interactions.\textsuperscript{164} In this study, when people were focused on judging their performance during interracial interactions, this increased racial anxiety because it centered their attention on whether or not they were being evaluated negatively. However, when individuals approached interracial interactions as opportunities to learn new skills and gain valuable knowledge, this reduced the fear of being judged. Thus, this research suggests that for the police and health care providers, racial anxieties can be reduced if they view interracial interactions as opportunities to improve their skills. With the police, for instance, approaching these interactions with a desire to gain competence in procedural justice skills might reduce the evaluative implications of the

\textsuperscript{160} Id. at 25.
\textsuperscript{161} Id. at 22.
\textsuperscript{162} Id. at 25.
\textsuperscript{163} Id. at 25.
\textsuperscript{164} Phillip Atiba Goff et al., The Space Between Us: Stereotype Threat and Distance in Interracial Contexts, 94 J. PERSONALITY AND SOC. PSYCHOL. 91, 99–100 (2008).
interactions. Additionally, departments can facilitate learning goals by giving officers encouragement and praise for proven efforts to improve their interactions with Black individuals, even if their efforts are not always successful.

C. AVOIDING RACIAL ANXIETY TRIGGERS

Institutional environments can affect the degree of racial anxiety in interracial interactions through images, patterns of communications, and other potential cues of negative stereotypes. In a path-breaking study in the context of health care, Abdou and Fingerhut studied whether “images [that related] common stereotypes of Black females” would increase anxiety for Black women anticipating a “virtual” visit to a White doctor. They found that for Black women who strongly associate with their identity, the exposure to the stereotype-laden images triggered heightened anxiety. This study is important because it shows that images in an environment can trigger heightened anxiety if these images highlight negative stereotypes—but it is also salient that such images are consistent with the kind of imagery often used in public health campaigns. Other studies have shown that the presence of positive imagery can decrease stereotype salience and the anxiety associated with it. It has also been argued that creating “identity safe” environments can have a positive effect on patients and health care providers. Davies, Spencer, and Steele suggest that such settings include those that directly communicate that they celebrate diversity and those that have diverse medical staff.

V. CONCLUSION

The country is undergoing an examination and engagement on issues of race that is unprecedented since the Civil Rights Movement. While laws, policies, and institutional systems are appropriately being evaluated, so too is the behavior of the people who comprise the institutions. Social psychology and neuroscience have much to offer legal academics and lawyers who are seeking interventions that address the lived experience of people of color. In this Essay, we argue that racial anxiety, a phenomenon that prevents authentic engagement across identity difference and undermines interaction among groups, is crucial to this endeavor. We hope that other scholars looking to the

165. Abdou & Fingerhut, supra note 123, at 319.
166. Id.
167. Id. at 317.
168. See generally Jessica J. Good et al., The Effects of Gender Stereotypic and Counter-Stereotypic Textbook Images on Science Performance, J. SOC. PSYCHOL. 132 (2010).
170. Id.
social sciences on issues of race and difference will also broaden their lens to account for racial anxiety as a factor in the continued challenges we face in realizing the goals of equity and fairness.