Towards a Multidimensional Model of Adaptation for African American Adolescents Exposed to Racial Discrimination

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LOYOLA UNIVERSITY CHICAGO

TOWARDS A MULTIDIMENSIONAL MODEL OF ADAPTATION FOR AFRICAN AMERICAN ADOLESCENTS EXPOSED TO RACIAL DISCRIMINATION

A DISSERTATION SUBMITTED TO THE FACULTY OF THE GRADUATE SCHOOL IN CANDIDACY FOR THE DEGREE OF DOCTOR OF PHILOSOPHY PROGRAM IN CLINICAL PSYCHOLOGY

BY

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CHICAGO, ILLINOIS

DECEMBER 2012
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ABSTRACT

The purposes of the current study were to 1) examine the associations of racial discrimination to internalizing symptoms, externalizing symptoms and perceived life satisfaction in African American adolescents, and 2) determine Africultural cluster profiles based on indicators of racial socialization, racial identity and culturally relevant coping strategies 3) examine whether cluster profile buffers stress exposed African American adolescents from increased internalizing symptoms, anger and decreased life satisfaction. One hundred-fifty-one African American adolescents (grades 9th – 12th) from four high schools and a community group from a major Midwest city and a major city from the Southeast reported on exposure to racial discrimination experiences, presence of depressive symptoms, presence of anxiety symptoms, anger, general life satisfaction, racial socialization, racial identity, and utilization of coping strategies. Regression analyses revealed that racial discrimination experiences were related to symptoms of depression, anxiety, and anger. Racial discrimination was not related to perceived life satisfaction. Cluster analytic procedures identified three profiles of Africultural assets based on indicators of racial socialization, racial identity, and use of culturally specific coping strategies. Level of Africultural assets was examined as a moderator of the association of racial discrimination to internalizing symptoms, anger and life satisfaction. Results indicated that level of Africultural assets did not buffer the relationships amongst racial discrimination, depressive and anxiety symptoms, anger, and decreased life satisfaction.
CHAPTER ONE
INTRODUCTION

Race has historically been an essential aspect of American society, and racial discrimination towards minority group members remains an omnipresent concern (Hacker, 1992). African Americans have a unique history in America with regards to racism and racial discrimination (e.g. slavery, Jim Crow, the Civil Rights movements, etc.) (Sellers, Smith, Shelton, Rowley, & Chavous, 1998). The reality of racial discrimination against African American adults is irrefutable, and recent research reveals discrimination exposure among African American children and adolescents is undeniable as well. While the damaging effects of racial discrimination on the psychological well-being of African American adults are well documented, less is known about its role for African American youth and adolescents (Banks, Kohn-Wood, & Spencer, 2006; Gibbons, Gerrard, Cleveland, Wills, & Brody, 2004; Kessler, 1999).

Racial discrimination experiences among urban African American adolescents can be especially harmful because these youth also experience a separate range of negative life events (e.g. poverty, victimization and violence, decreased social support, etc.). Thus, above and beyond their disproportionate experiences of social and economic disadvantages, as African American adolescents from urban communities journey through childhood and progress beyond their immediate familial environments, they encounter societal institutions and individuals that discriminate against them because of their race (Fisher,
Wallace, & Fenton, 2000; Sellers et al., 2006). The burgeoning research in this area reveals that the impact of racial discrimination is injurious to the psychological well-being of African American youth and adolescents, serving as a significant source of stress leading to elevated rates of internalizing symptoms and decreased satisfaction with life (Brody, Chen, Murry, Ge, Simons, Gibbons, Gerrard, & Cutrona, 2006; Dubois, Burke-Braxton, Swenson, Tevendale, & Hardesty, 2002; Gibbons et al., 2004; Seaton, Caldwell, Sellers, & Jackson, 2008).

As a result of the ubiquitous quality of racial discrimination and its potential for promoting disruptions in mental health among African American youth and adolescents, it is important to identify factors that buffer the effects of racial discrimination. Several factors have been identified as potential buffers for African American youth exposed to racial discrimination. First, racial socialization, the degree to which African American parents prepare their children for racial discrimination experiences, has recently been identified as a buffer against the negative effects of racial discrimination for African American youth (McHale, Crouter, Kim, Burton, Davis, Dotterer, & Swanson, 2006). A second potential factor, racial identity, appears to be influential in the psychological adjustment of African American youth (Whaley, 1993). Specific aspects of racial identity (e.g. private and public regard) have been found to protect youth from instances of racial discrimination (Sellers et al., 2006). Finally, considerable evidence supports the influence of coping strategies in counteracting the effects of stress in adolescence; yet research has been limited with regard to ethnicity and socioeconomic status, with the majority of studies focusing on White adolescents of middle-class socioeconomic status (Compas, Connor-Smith, Saltzman,
Although limited, existing research on coping amongst African American adolescents demonstrates some usefulness for coping strategies in protecting youth from deleterious outcomes. However, a burgeoning literature on the effectiveness of culturally relevant coping highlights the need for a greater understanding of the unique coping strategies of African American youth (Barbarin, 1993; Gonzales & Kim, 1997; Steward, Jo, Murray, Fitzgerald, Neil, Fear, & Hill, 1998). Thus, the current study extends previous literature by employing a culturally relevant coping measure to comprehensively assess coping strategies in African American adolescents.

The purpose of the current study was to examine the relationship among experiences of racial discrimination and internalizing symptoms of depression and anxiety, as well as anger and life satisfaction among African American adolescents. In accordance with previous research, it was expected that increased reports of racial discrimination would be related to increased depressive and anxiety symptoms, increased anger and decreased life satisfaction amongst adolescents. Additionally, consistent with the multidimensional model of race-related stress (Harrell, 2000), the current study examined racial socialization, racial identity, and culturally relevant coping as protective factors. Specifically, the current study used a typological approach to identify profiles of Africultural assets based on racial socialization, racial identity and culturally-relevant coping, and Africultural assets was examined as a moderator of the relations between racial discrimination and internalizing symptoms, anger, and life satisfaction. Specifically, profiles of adolescents’ level of racial socialization, racial identity, and use of culturally relevant coping were determined and examined as buffers to outcomes. It was hypothesized that profiles characterized as high
frequencies of racial socialization, racial identity, and use of cultural coping strategies would weaken the relationship between racial discrimination and increased symptoms of depression, anxiety, and anger and decreased life satisfaction.

The next sections of the current study will review the relevant literature. First, an overview of racial discrimination and race-related stressors among African American adolescents is presented. Next, the impact of racial discrimination on psychological well-being is discussed. Then, the importance of examining protective factors is discussed. Finally, the importance of a multidimensional model of adaptiveness is addressed and an overview of the current study is presented.
CHAPTER TWO
REVIEW OF RELATED LITERATURE

Defining Race-Related Stressors and Racial Discrimination

The experience of life stress is universal, but for racial minorities life stress also includes negative racial interactions (Harrell, 2000). Maltreatment against all racial minority groups is undeniable; however the African American experience in America is unique (Sellers, Smith, Shelton, Rowley, & Chavous, 1998). Specifically, African Americans are the only group whose humanity was legally denied by the United States government for nearly a century when they were identified as property to be bought and sold. Thus, race has been a central feature of American society throughout history, and it is not surprising that racism and racial discrimination remain ubiquitous concerns (Hacker, 1992).

Racism is understood as a deeply rooted historical system of dominance, power, and privilege based on racial group membership; it is rooted in the oppression of a minority racial group that has been identified as inferior by the dominant group (Harrell, 2000). Thus, racism is embedded in the historical continuity of injustice and creates a contextual stage for racism-related stress. Racism-related stress is defined as, “the race-related transactions between individuals or groups and their environment that emerge from the dynamics of racism, and that are perceived to tax or exceed existing individual and collective resources or threaten well-being,” (Harrell, 2000, pp. 44). Harrell (2000) describes six types of racism-related stress: (1) racism-related life events; (2) vicarious racism experiences; (3) daily racism
microstressors; (4) chronic-contextual stress; (5) collective experiences; and (6) transgenerational transmission.

Racism-related life events are significant experiences of racism that can occur across a range of life domains, and have long-lasting effects (e.g., police harassment). Vicarious racism experiences are distressing racist incidents directed towards others that are witnessed directly by an individual or that are reported to an individual (e.g., hearing about an incident of racial profiling). Daily racism microstressors or microaggressions are thought to best characterize contemporary racism in the United States. Microaggressions are subtle, preconscious, or unconscious slights, insults, offenses, or exclusions, which serve as ongoing reminders that one’s race is salient (e.g., being mistaken as service personnel). An individual may encounter thousands of racial microaggressions in their lifetime, and the accumulation of these insults can be taxing for an individual (Pierce, 1995; Solorzano, Ceja, & Yosso, 2000). To date, research on the prevalence and impact of racial microaggressions has been examined primarily among young adults in higher education and within the counseling dynamic (i.e., amongst therapist and patient; amongst supervisor and supervisee) (Constantine, 2007; Solorzano, Ceja, & Yosso, 2000; Sue, Capodilupo, & Holder, 2008).

Chronic-contextual stress reflects the impact of sociopolitical structures and institutional racism in the larger environmental arena, with which minority individuals must adapt. Disparate opportunities and resources (e.g., out-of-date texts in urban, low-income schools) can negatively affect the quality of life for African Americans. Stress emanating from collective experiences reflects the idea that incidents of racism towards one's collective racial group can have indirect effects on the personal level. Collective experiences differ
from vicarious experiences in that they do not involve witnessing racist events towards specific individuals. An example of collective racism experiences is the negative stereotype portrayal of African Americans in the media. Collective experiences illuminate how racism can affect individuals who may not encounter high frequencies of personal negative racial interactions. Transgenerational transmission of racism-related stress considers the historical relationship between a racial minority group and American society as a whole. In terms of the history of African Americans in America, stories of slavery and Jim Crow are communicated and passed down across generations. Thus, race-related stress can take several forms, all of which are devaluing and distressful to the individual encountering them.

The majority of the research on racism-related stress has focused on racism at the interpersonal level, which is manifested through experiences of prejudice and racial discrimination (Harrell, 2000). Racial discrimination can be defined as negative acts and behaviors committed by individuals and societal institutions that target a racial group and can harmfully impact that racial group (Gee, Spencer, Chen, Yip, & Takeuchi, 2007). Racial discrimination involves unfair behaviors, often justified by prejudice or negative attitudes, towards members of a particular racial group (Dovidio & Gaertner, 1986; Farley, 2005). Racism-related life events, vicarious racism experiences, and daily microaggressions can include experiences of prejudice and racial discrimination. Despite progress made in race relations and increased racial tolerance, racial discrimination towards African Americans is commonplace, pervading a variety of life arenas (e.g., housing, employment, education) (Landrine & Klonoff, 1996; Scott, 2003; Sellers et al., 2006; Utsey, 1998). For instance, in a nationally representative sample of American adults ages 25-74, approximately 49% of
African American participants reported experiencing at least one major racism-related life event (e.g., not hired for a job, denied/received inferior medical care, discouraged by teacher from seeking higher education) in their lifetime (Kessler, Mickelson, & Williams, 1999). Even research with African American adults that is concerned with everyday discrimination experiences (e.g., being ignored by service personnel, being assumed as service providers), regardless of attribution (i.e., discrimination due to race, age, sexual orientation, or religious affiliation) revealed that racial discrimination was the most reported form of discrimination experienced by the participants (Banks et al., 2006).

In terms of day-to-day racially discriminatory events (e.g., being treated with less courtesy than others, receiving poor service in restaurants, being treated as unintelligent, etc.), approximately 91% of African American respondents reported at least one day-to-day microaggression. Microaggressions, also referred to as aversive racism, have been identified as the modern form of racism. Microaggressions represent the shift in racist acts from more overt acts and messages to more subtle and at times unconscious offenses (DeVos & Banaji, 2005). African American undergraduate students have reported microaggressive activities of being ignored, feeling invisible, and having professors fail to address their comments and concerns within the classroom setting (Solorzano et al., 2000). Aversive racism is characterized as racial attitudes held by Whites who overtly endorse egalitarian beliefs, however discriminate in subtle instances (Dovidio & Gaertner, 2000). These individuals experience ambivalence between egalitarian beliefs and negative feelings towards minority groups; they recognize that racism is negative and would not acknowledge themselves as racist or prejudice.
Less attention has been paid to racial discrimination and microaggressions in the youth development literature (Sellers et al., 2006); however, a growing area of research is examining the prevalence of race-related stress with younger samples. As African American adolescents journey through childhood and move beyond their immediate familial environments, they are likely to encounter societal institutions that discriminate against them because of their race (Fisher et al., 2000; Sellers et al., 2006). For example, African American adolescents may spend more of their leisure time outside of their household and in public arenas, such as malls, movie theaters, and restaurants. Many African American youth are aware of manifestations of racism, as a result of firsthand experience, intuitive knowledge, and/or priming by parents and significant others (Scott, 2003). African American youth as young as ten years of age have reported significant levels of racial discrimination experiences (Gibbons et al., 2004). In a sample of pre-adolescent youth, very few reported having never experienced any form of racial discrimination in their short lifetimes. In fact, a large proportion of Hispanic and African American high school students report having been victim to racial discrimination (Fisher et al., 2000). Specifically, their reports of being harassed by store personnel, receiving unfair treatment by police and school officials, and being perceived as dangerous and unintelligent because of their race significantly outnumbered those reported by their non-African American and non-Hispanic peers. In one study that examined microaggressions amongst African American youth, researchers revealed that subtle discriminatory remarks are perceived as a commonplace and ongoing experience within the educational setting (Thomas, Caldwell, Faison, & Jackson, 2009).
Among adult samples in counseling settings, African American clients have reported disrupts within their therapeutic alliance with White clinicians as a result of racial microaggressions (Constantine, 2007). Additionally, training African American therapists have reported racial microaggressions negatively affecting their professional relationship with White supervisors (Constantine & Sue, 2007). These experiences can lead to a range of psychological distresses such as anxiety, depression, and anger.

**Racial Discrimination and Psychological Well-Being**

The adverse effects of racial discrimination on the physical and psychological health of African American adults are well reported (Banks, Kohn-Wood, & Spencer, 2006; Gibbons, Gerrard, Cleveland, Wills, & Brody, 2004; Kessler, 1999). In a nationally represented sample of Americans, increased levels of depression and generalized anxiety were significantly related to increased experiences of racial discrimination amongst African Americans (Kessler, 1999). In a more recent study, everyday racial discrimination experiences significantly contributed to increased depressive and anxiety symptoms among 570 African American adults (Banks et al., 2006). In summary, research has consistently shown that racial discrimination is a common and distressing experience for African American adults. Although currently there is a paucity of research examining the effects of racial discrimination in the youth development literature (Sellers et al., 2006), a burgeoning area of research is examining the prevalence and effects of racial discrimination with younger samples.

Demeaning messages and additional discriminatory acts displayed towards members of their racial group and their forming identities may be injurious to the psychological well-
being of African American youth (Gaylord-Harden & Cunningham, 2009; Harrell, 2000). Additionally, witnessing other members of their ethnic group being discriminated against because of their racial makeup can be upsetting to youth (Gibbons et al., 2004). In an economically diverse sample of 7th and 8th grade African American youth, perceived racial discrimination by their peers and teachers in an academic setting was significantly related to depressive symptoms (Wong, Eccles, & Sameroff, 2003). In a sample of 5th through 8th grade African American and Caucasian students, perceived racial discrimination was a significant source of stress for African American participants; additionally, racial discrimination was related to increased levels of internalizing symptoms (Dubois et al., 2002). In a sample of 714 African American pre-adolescents, increased experiences of racial discrimination was linked with increased development of depressive symptoms over a five-year period (Brody, Chen, Murry, Ge, Simons, Gibbons, Gerrard, & Cutrona, 2006).

Similarly, in a sample of 684 African American families (consisting of African American parents and their 10 to 12 year old children), parents and children who reported experiencing relatively high levels of racial discrimination reported more depressive and anxiety symptoms over time (Gibbons & colleagues, 2004). Notably, this predictive relationship was not reciprocal, in that depressive and anxiety symptomatology over time did not significantly predict later reports of discrimination experience.

Further, racial discrimination seems to be associated with negative outcomes, even for youth with relatively infrequent exposure to White communities. For example, one study examined the effects of discrimination stress amongst middle school age African American youth residing in communities and attending schools that were almost exclusively African
American (Gaylord-Harden & Cunningham, 2009). For these youth, discrimination stress was a significant predictor of depressive and anxiety symptoms above and beyond the effects of stressors in the family, peer, school, and community contexts, suggesting that even infrequent experiences of racial discrimination are harmful. Interestingly, being concerned about the prospect of future racial discrimination places adolescents at risk for psychological disrupt (Mickelson, 1991; Taylor, Wright, & Porter, 1993).

Anger has been identified as a reaction to the experience of injustice, and racial-discrimination induced anger has been recognized as a concern for American Americans (Cleveland, 2003; Nesler, 1993; Swim, Hyers, Cohen, Fitzgerald, & Byisma, 2003; Terrell, Miller, Foster, & Watckins, 2006). Anger is conceptualized as an emotional state consisting of feelings that range in intensity from annoyance or irritation to fury and rage (Speilberger, 1988). Among a college-aged sample of African Americans, the most prevalent reaction to perceived daily microaggressions was anger (Swim et al., 2003). Additionally, racial-discrimination induced anger has been identified among a sample of adolescent African Americans (Terrell et al., 2006). Although adolescents are cognizant of injustices associated with racial discrimination and experience subsequent anger, they have few acceptable outlets to express frustration and anger related to ongoing racial discrimination (White, 1984). Suppressed anger is thought to have detrimental consequences for African Americans, such as hypertension (Thomas, Nelesen, & Dimsdale, 2004) and heart disease (Diamond, 1982).

In addition to racial discrimination increasing the experience of negative outcomes, such as internalizing symptoms among African Americans, racial discrimination has been found to decrease the experience of positive outcomes such as one’s overall satisfaction with
life (Broman, 1997; Prelow, Mosher, & Bowman, 2006; Seaton & Yip, 2009). Life satisfaction is defined as “a global assessment of a person’s quality of life according to his chosen criteria” (Shin & Johnson, 1978, p. 478). Life satisfaction is a cognitive process that involves subjective judgments of satisfaction based on comparisons of one’s life circumstances in comparison to what are thought to be appropriate circumstances (Diener, Emmons, Larsen, & Griffin, 1985). Thus, judgments of satisfaction are determined by the individual and not imposed externally by researchers (Diener, 1984). Relatively few studies have examined life satisfaction among ethnic minority groups in the context of racial discrimination (Verkuyten, 2008).

Among Dutch and Turkish-Dutch immigrants in the Netherlands, Turkish-Dutch immigrants reported lower levels of life satisfaction compared to native Dutch participants (Verkuyten, 2008). Additionally, decreased life satisfaction was a function of Turkish-Dutch participants’ perceptions of structural discrimination by the majority group. Among an African American adult sample, life satisfaction was negatively influenced by experiences of racial discrimination (Broman, 1997). Interestingly, among this sample, those individuals who attended predominantly White schools indicated increased life satisfaction in the context of racial discrimination relative to their counterparts who attended predominantly minority schools. Thus, African Americans who attended predominantly White schools were more familiar with Whites and as a result possessed feelings of acceptance by Whites (Broman, 1997). In a sample of African American college students attending a predominantly White university, those who perceived increased levels of racial discrimination were less satisfied with life (Prelow et al., 2006). In contrast to Broman’s
(1997) findings, African American college students’ life satisfaction was negatively affected by perceived racial discrimination regardless of familiarity with White peers via attending racially diverse elementary and high schools and/or having interracial friendships with White peers. In a national sample, African American and Caribbean Black adolescents’ perceptions of racial discrimination were negatively linked to self-esteem and life satisfaction (Seaton et al., 2008). In a separate study investigating life satisfaction between impoverished African American and White adults, researchers revealed that African Americans reported higher frequencies of racial discrimination experiences and the lower levels of life satisfaction than Whites regardless of poverty status (Shulz, Williams, Israel, Becker, Parker, James, & Jackson et al., 2000).

Not all researchers have revealed a direct relationship between racial discrimination and life satisfaction among African Americans (e.g., Barnes & Lightsey, 2005; Utsey, Ponterotto, Reynolds, & Cancelli, 2000). For example, in one study, African American college students’ reports of perceived discrimination were unrelated to reports of life satisfaction (Barnes & Lightsey, 2005). These inconsistent findings may be explained by methodological differences in the measurement of racial discrimination and life satisfaction (Barnes & Lightsey, 2005). Specifically, earlier studies that reveal significant relationships among perceived racial discrimination and life satisfaction utilized a single item measure of life satisfaction (e.g., Broman, 1997). Additionally, disparities in findings may be attributable to the characteristics of the samples studied; urban, low-income community samples of African American participants reported decreased levels of life satisfaction as it related to racial discrimination (e.g., Broman, 1997; Shultz et al., 2000), this finding was not
consistently supported among African American college students (e.g., Barnes & Lightsey, 2005; Utsey et al., 2000). However, the majority of research in this realm indicates that in addition to racial discrimination’s role in increasing negative outcomes (i.e., internalizing and externalizing symptoms), it may have deleterious effects on positive outcomes such as life satisfaction.

The reality of racial discrimination against African Americans is irrefutable, and recent research reveals racial discrimination exposure among African American children and adolescents is undeniable as well. Unfortunately, exposure to race-related stress may prove to be taxing for youth, leading to higher levels of anxiety, depression, and anger as well as lower levels of life satisfaction. Therefore, it is imperative to identify and understand what factors protect African American youth from the deleterious effects of the omnipresent experiences of racial discrimination.

Racial Socialization as a Protective Factor for African American Youth

African Americans are faced with the complicated task of residing in two worlds (one Black, one White); and they must develop competencies that allow them to overcome negative conditions (stressors) while adapting to their worlds (Miller & MacIntosh, 1999). In their world(s), African American adolescents experience racial discrimination, which proposes a significant risk to their healthy development (Cunningham, Swanson, Spencer, & Dupree, 2003). Fortunately, African American adolescents are not devoid of racial and cultural resources that serve as protective factors combating the disparaging influences of racial discrimination (Spencer, 1997). Understanding the role and impact of the culturally-
specific parenting behaviors of African Americans is crucial in recognizing protective factors for African American adolescents (Garcia-Coll et al., 1996).

One specific set of potential protective factors are the attitudes and beliefs about the meaning of being African American that African American adolescents often receive from their parents. The task for African American parents is to transmit values, beliefs, and ideas to their children that are based on cultural knowledge of competencies needed for appropriate functioning in society (Harrison, Wilson, Pine, Chan, & Buriel, 1990). The process by which race-related messages are communicated intergenerationally is coined racial socialization. Racial socialization is defined as “the transmittance of parents’ world views about race and ethnicity to children by way of subtle, overt, deliberate, and unintended mechanisms” (Hughes, 2003, p. 15). Racial socialization is a common parenting practice for African American parents (Hughes, Rodriguez, Smith, Johnson, Stevenson, & Spicer, 2006; Neblett et al., 2009), with parents utilizing heterogeneous strategies to convey socialization messages (Coard & Sellers, 2005; Neblett et al., 2008; Neblett et al., 2009). Parent variables such as education level, socioeconomic status, and racial identity have been identified as influencing the types of racial socialization messages parents provide to their children and adolescents (Hughes et al., 2006; Neblett et al., 2009; Thomas & Speight, 1999). Parents with higher levels of formal education and socioeconomic status have been found to provide a wider range of socialization messages for their children (Hughes et al., 2003; Neblett et al., 2008). Additionally, African American parents who have internalized their African American culture (racial identity internalization attitudes) feel that it is important to racially socialize their children (Thomas & Speight, 1999).
Research on the racial socialization process focuses on the content of racial socialization messages (Coard & Sellers, 2005). In their review of parents’ racial socialization practices, Hughes and colleagues (2003) identified four themes of racial socialization messages that are most often endorsed by African American parents: (1) racial pride messages, (2) racial barriers messages, (3) egalitarian messages, and (4) self-worth messages. Racial pride messages for African Americans focus on instilling positive feelings toward the racial group by emphasizing group unity and teaching about the African American heritage (e.g., buying African American literature). Racial barrier messages highlight racial inequalities to promote awareness and coping strategies to cope with these inequalities. Egalitarian messages promote harmony, equality, and coexistence interracially. Some term egalitarian socialization “mainstream socialization” (Boykin & Toms, 1985), as egalitarian practices also include avoiding discussions of race, and stressing the value of individualism rather than group accomplishments. Self-worth messages emphasize feelings of individual worth within the larger context of the African American racial group. In addition to the four main themes of socialization messages, more recently researchers have included categories of Negative messages, which reinforce negative social stereotypes about African American individuals, and Socialization behaviors or race-related activities and behaviors.

The notion that racial socialization is an important protective factor for African American adolescents has received increased consideration (Coard & Sellers, 2005; Hughes et al., 2006). It is thought that African American children and adolescents exposed to others’ negative stereotypes and perspectives towards African Americans but who receive racial socialization messages from their parents are less likely to have harmful outcomes and more
likely to be resilient to undesirable contexts. There are relatively few empirical investigations of the protective role of racial socialization for African American adolescents in the context of racial discrimination (Neblett et al., 2008).

African American adolescents report receiving a wide range of racially-related messages from their parents, as well as engaging in socialization activities with their parents (Coard & Sellers, 2005; Phinney & Chavira, 1995; Neblett et al., 2008; Neblett et al., 2009). Adolescence marks a developmental period in which parents may be more inclined to convey socialization messages and engage in socialization activities with their children (Hughes & Chen, 1997). It is during adolescence that youth are more likely to experience increased levels of racial discrimination, and adolescents are more likely to possess the cognitive and emotional skills necessary to cope with the multifaceted nature of race and its implications. Additionally, it is during adolescence that youth attempt to incorporate components of the self, including their race and ethnicity, into an integrated whole (Hughes, 2003). Cluster profiles of patterns of racial socialization messages received and psychological adjustment among an African American sample of adolescents have been identified (Neblett et al., 2008). Their investigation yielded four profiles characterized by the frequency of racial socialization messages adolescents received: (1) low frequency (low frequencies of all socialization messages), (2) moderate positive (moderate frequencies of positive socialization messages, low frequencies of negative socialization messages), (3) high positive (high relative frequencies of positive messages, and low levels of negative socialization), and (4) moderate negative (moderate levels of negative socialization and low frequencies of positive messages). Adolescents who comprised the two largest clusters/groups, moderate positive and high
positive, reported a parental emphasis on racial pride and self-worth messages. Racial barrier and egalitarian messages, as well as socialization behaviors were also identified as significant components of socialization displayed in these clusters. In an examination of Puerto Rican, Dominican, and African American mothers, African American mothers reported conveying the highest levels of racial socialization messages including teaching cultural heritage and emphasizing racial pride (Hughes, 2003). All mothers reported some socialization around the preparation for bias, however to a lesser degree than socialization based on racial pride. Researchers concluded that African American parents’ heavy focus on racial pride messages might be in effort to combat the ever-present and persistent negative group images that African American adolescents encounter regarding their race. Additionally, in general, parents most commonly reported provision of racial pride and egalitarian messages, suggesting that messages of pride and diversity appreciation are most salient to parents’ child-rearing schemas.

Racial socialization and psychological outcomes. Much of the existing research on racial socialization and youth development reports positive relationships between receiving various socialization messages and psychological adjustment (e.g., Caughy, O’Campo, Randolph, & Nickerson, 2002; Fisher & Shaw, 1999; Neblett, Phillips, Cogburn, & Sellers, 2006). For example, Caughy and colleagues (2000) revealed that among preschool age African American children, receiving messages of racial pride was associated with fewer behavior problems. Among African American middle and high-school students, youth who reported receiving self-worth and egalitarian messages, as well as experiencing socialization behaviors, were more likely to exhibit academic curiosity and have higher GPA’s (Neblett et al., 2006). For
African American adolescent females, racial socialization was related to lower levels of sadness and feelings of helplessness and higher self-esteem (Stevenson, Reed, Bodison, and Bishops, 1997). In a separate study, high doses of racial pride reinforcement among African American male youth promoted higher self-esteem and less lethargy (David & Stevenson, 1997).

Although the positive effects of racial socialization have been noted, few studies have investigated the roles of racial socialization as a potential protective factor for stress exposed African American adolescents (Neblett et al., 2009). One of the earliest studies to investigate racial socialization processes as resilient factors in the context of racial discrimination and psychological adjustment was conducted with African American emerging adults (Fisher & Shaw, 1999). In their sample, researchers concluded that receiving racial barrier messages weakened the relationship between racist events and overall psychological functioning. More recently, Neblett and colleagues (2008) examined patterns of racial socialization as compensatory factors for African American adolescents exposed to racial discrimination. Researchers found that on average, adolescents who reported elevated patterns of positive racial socialization messages (i.e., high relative frequencies of racial pride, egalitarian, self-worth, and behavioral socialization, and low frequencies of negative stereotype reinforcing messages) endorsed the most desirable psychological adjustment. In contrast, adolescents who received low frequencies of positive racial socialization messages or moderate levels of negative messages endorsed the least favorable psychological adjustment. Thus, the damage associated with the combination of receiving negative messages about African Americans in the absence of receiving positive messages of racial
pride and self-worth may be commensurate with that of racial discrimination on psychological adjustment. High positive racial socialization messages appear to protect African American adolescents by buffering the negative influence of racial discrimination (Neblett et al., 2008).

The role of racial socialization as a protective factor in the context of racial discrimination on self-esteem was examined for rural African American eighth graders (Harris-Britt et al., 2007). Adolescents’ reports of racial pride messages served as a protective factor for their self-esteem. Specifically, for adolescents who reported minimal exposure to positive messages about their race and heritage, racial discrimination was directly linked to lower levels of self-esteem. However, for adolescents who reported more frequent exposure to racial pride messages, self-esteem was not affected by racial discrimination experiences (Harris-Britt et al., 2007). In this same study, racial barrier messages were also explored as a protective factor, though it was not found to operate in the same manner as racial pride messages. Specifically, preparation for bias messages had a curvilinear influence on the relationship between racial discrimination experience and self-esteem. At low levels of preparation for bias, increased racial discrimination was related to lower levels of self-esteem. For adolescents who reported moderate levels of bias preparation, a relationship between racial discrimination and self-esteem was no longer present. Interestingly, at high levels of preparation for bias, a significant negative relationship between racial discrimination and self-esteem emerges. Thus, preparation for bias messages received at moderate levels appears to buffer African American adolescents from decreased self-esteem associated with racial discrimination. However, receiving low or high levels of bias messages was not
adaptive for these adolescents. Thus, an underemphasis on bias messages may not prepare youth for discrimination, while an overemphasis on racial bias communicates to adolescents that they will inevitably face barriers because of their race regardless of their personal attributes or efforts, leading them to feel vulnerable and helpless and consequently resulting in low self-esteem (Harris-Britt et al., 2007).

It is of note that above and beyond the maladaptive role of high levels of preparation for bias messages, researchers have been unable to consistently replicate findings of multiple racial socialization practices serving as protective factors for African American adolescents. Specifically, for a sample of African American adolescents, racial socialization behaviors and messages failed to buffer the detrimental effects of racial discrimination on academic achievement (Neblett, Phillip, Cogburn, & Sellers, 2006). African American adolescents who received a range of racial socialization messages reported feeling more stigmatized than their counterparts who received socialization messages that focused on a single orientation (i.e., receiving only racial pride messages) (Brega & Coleman, 1999). Multiple types of socialization messages may contradict one another resulting in African American adolescents being unable to integrate them and develop any clear racial knowledge from their socialization experiences.

Age differences in racial socialization. As previously mentioned, with increased age, youth acquire more cognitive and emotional skills (Hughes & Chen, 1997). Parents increase racial socialization as their children age, which is reflective of their sensitivity to their children’s developmental competencies and experiences (Hughes et al., 2006). Additionally, African American parents appear to emphasize different and more complex racial socialization
practices as a function of their child’s developmental stage (Neblett et al., 2009). Thus, the current study examined the role of racial socialization in the experience of racial discrimination among an adolescent sample of African Americans.

*Gender differences in racial socialization.* Findings of gender disparities regarding parents’ racial socialization practices have been inconsistent (Sanders-Thompson, 1994; Thomas & Speight, 1999). Several studies have revealed that among African American youth, boys are more likely to receive messages regarding societal barriers as a function of their race (i.e., racial barrier messages), whereas girls are more likely to receive messages of racial pride and cultural teaching. Specifically, African American parents reported communicating socialization themes for their sons that emphasized negative stereotypes and coping strategies for dealing with racism, whereas to their daughters parents communicated racial pride, achievement, and self-worth (Speight and Thomas, 1999). In Neblett and colleagues’ (2009) investigation of racial socialization profiles, African American adolescent females were more likely to report receiving moderate and high frequencies of positive racial socialization messages, while their male counterparts were more likely to report receiving low frequencies of positive racial socialization messages and moderate levels of negative messages. Researchers concluded that at the very least, it appears African American parents (particularly mothers in their study) are providing messages to their daughters in an attempt to prepare them to navigate in their dichotomous (Black and White) world, in ways that they are not doing for their sons. In a separate study, comparable findings were revealed, whereby females retrospectively reported receiving more extensive racial socialization messages from their immediate family than males (Sanders-Thompson, 1994). In contrast to
these studies, Neblett and colleagues (2008) found no gender differences in the types of and frequencies of racial socialization messages among African American adolescents. Other studies have also failed to find gender differences in racial socialization messages (e.g., Hughes & Chen, 1997; Phinney & Chivara, 1995; Scott, 2003). Regardless of gender, African American adolescents are exposed to a combination of race-related messages and activities, which are likely internalized, contributing to their identity development (Phinney & Chavira, 1995).

The current study examined the roles of racial socialization messages, specifically, messages of racial pride messages, racial barriers, and self-worth messages as they impact the relationship between racial discrimination and outcomes for African American adolescents.

**Racial Identity as a Protective Factor**

Identity for African Americans is not an autonomous sense of functioning as is often reflected in European American culture, but includes the incorporation of multiple identity factors such as race and gender (Cross, 1991). African American youth are charged with the task of developing a positive sense of self in a society where others often devalue them through negative stereotypes and racial discrimination experiences (Cross, 1995). During adolescence, youth begin to explore their race and culture as it relates to their identity (Phinney & Tarver, 1988). The experiences of African Americans are heterogeneous, contributing to individually developed meanings of racial identity (Sellers et al., 1998). Some individuals place little emphasis on race as defining their self-concept, while for others race is a central feature of their identity. Racial identity is defined by Carter and Helms (1988) as the extent to which an individual holds positive, negative, and mixed beliefs about their racial
group and their role in that group. Many models of racial identity are based on definitions similar to Carter and Helms’. One of the most popular models based on this definition is Cross’ Nigrescence Model which depicts a progressive move from an immature stage of identity to a mature stage of identity achievement (Cross, 1978). Specifically, individuals are thought to progress from having done little if any exploration of their race, holding a worldview congruent with that of the majority group, to achievement and internalization, wherein individuals gain an understanding of the African American worldview (Phinney, 1989). Once this final stage is achieved, the individual accepts and internalizes an African American worldview, and gains a sense of belonging to their racial group. Research supporting the progression through these developmental stages is sparse, and the research that has been conducted does not prove a clear progression from immature to mature stages (Seaton, Sellers, & Maywalt-Scottham, 2006; Sellers et al., 1998).

Most models of identity emphasize a universal process associated with individual identity development, ignoring the unique history and experiences associated with specific racial groups and individuals within the group (Sellers et al., 1998). The Multidimensional Model of Racial Identity (MMRI) proposed by Sellers and colleagues (1998) represents a combination of several existing theories of identity development that is sensitive to the historical and cultural experiences specific for African Americans. The current study examined racial identity as defined by the MMRI, which differs from other models in that racial identity is defined as, “the significant and qualitative meaning that individuals attribute to their membership within the Black racial group within their self-concepts” (Sellers et al., 1998, p. 23). Unlike its predecessors, the MMRI does not judge what constitutes a healthy
versus an unhealthy level of identity development. Lastly, unlike other racial identity models, the MMRI focuses on the significance and nature of an individual’s racial identity at any given time as opposed to placing the individual along a progressive sequence of identity development.

The MMRI has four assumptions. First, racial identities are conceptualized as being both stable and situationally-influenced aspects of the individual. In other words, one’s racial identity is susceptible to contextual factors, while the stable properties of identity influence behaviors in regards to specific events. Second, several identities (e.g., race, gender, occupational) comprise one’s self-concept. These identities are hierarchically ordered, and it is the relative significance of one’s racial identity in relation to other identities that has important implications for the qualitative meaning one attributes to being African American. Third, the MMRI assumes that an individual’s perception of their racial identity is the most valid indicator of their identity. This allows the individual to construct his or her own identity, definition of self, and perception of what it means to be an African American. Lastly, as aforementioned, the MMRI does not assume an individual’s progression through stages of racial identity development. The MMRI focuses on the significance and nature of an individual’s identity at a given time-point.

In addition to its assumptions, the MMRI has four dimensions of assessing one’s status of racial identity: the salience of racial identity, the centrality of racial identity, the regard with which the individual holds the group associated with their racial group, and the ideology associated with identity (Sellers et al., 1998; Sellers, Caldwell, Schmeelk-Cone, & Zimmerman, 2003). One dimension of interest for the current study, centrality, is relatively
stable across situations and refers to “the extent to which a person normatively defines himself or herself with regard to race” (Sellers et al., 1998, p. 25). While researchers may differ on their criteria for determining what constitutes an ideal identity, achievement, or at least a progression towards achievement of racial internalization has been proposed to promote healthy functioning among African Americans (Arroyo & Zigler, 1995; Fordham, 1988). The second racial identity dimension of interest in the current study is that of regard. Regard refers to, “a person’s affective and evaluative judgment of her or his race in terms of positive and negative valence” (Sellers et al., 1998, p. 26). The regard dimension has two components: private and public. Private regard is conceptualized as how positively or negatively an individual feels about African Americans, as well as how positively or negatively an individual feels about being African American themselves. Public regard refers to the extent to which an individual believes others, or the public, view African Americans positively or negatively. In essence, public regard is the individual’s assessment of how the broader society views their group.

**Racial identity and psychological outcomes.** Researchers contend that racial centrality serves as a protective factor for African Americans faced with racial discrimination and prejudice (Ashburn-Nardo, Monteith, Arthur, & Bain, 2007; Sellers et al., 1998; Sellers et al., 2003). This hypothesis is based on the idea that being connected to one’s race is associated with positive ideals about the race thus compensating for the negative effects of discrimination (Sellers & Shelton, 2003). For example, Sellers and colleagues (2003) examined direct and indirect effects of racial identity and mental health outcomes among over 500 African American young adults. A significant relationship between centrality and psychological
symptoms was revealed, such that individuals for whom race was more central to their identity reported lower levels of subsequent depressive and anxiety symptoms. Additionally, racial centrality proved to have a buffering affect on the negative consequences of racial discrimination in that more experiences of racial discrimination were associated with higher levels of psychological symptoms only for individuals for whom race was less central. Among a sample of African American college students, those who endorsed the highest level of racial centrality attitudes were immune from the damaging effects of racial discrimination on subsequent levels of stress, anxiety, and depressive symptoms (Neblett, Shelton, & Sellers, 2004). In a separate study, ingroup identity was examined as a resilient factor among 316 African American undergraduates. Researchers defined ingroup identity by the centrality of race for their student cohort (Ashburn-Nado & colleagues, 2007). Results revealed that ingroup identity/racial centrality indeed moderated the relationship between perceived prejudices to protect individuals’ psychological well-being. Private regard has been found to predict increased self-esteem, psychological health, and fewer depressive symptoms among African American adults (Garcia & Sanchez, 2009). Lower public regard contributes to anxiety symptoms and psychological distress among African Americans (Garcia & Sanchez, 2009).

Racial identity is the most heavily researched area of psychological functioning among African Americans, and while strongly identifying with one’s race appears beneficial to adult and college-aged African American populations, its role in adolescence, when identity formation is most crucial, is largely neglected (Caldwell, Zimmerman, Hilkene-Bernat, Sellers, & Notaro, 2002). Racial identity appears to be influential in the
psychological adjustment of Black youth, however due to inconsistencies in research findings its influence is somewhat unclear (Whaley, 1993). For example, among a group of low-income African American youth, strong racial identity was linked to symptoms of depression and anxiety, in that those youth who were more strongly identified with their race experienced fewer internalizing symptoms (Arroyo & Zigler, 1995). In a study examining racial identity among a diverse group of adolescents, researchers concluded that across the entire sample, racial identity was significantly related to decreased feelings of loneliness and depressive symptoms (Roberts, Phinney, Masse, Chen, Roberts, & Romero, 1999). In contrast, strong racial identity was unrelated to symptoms of depression and anxiety in a sample of African American twelfth graders (Caldwell, Zimmerman, Bernat, Sellers, & Notaro, 2002). Inconsistencies among racial identity’s relationship with psychological functioning may be due to variations in measures used and conceptualizations of racial identity.

The unclear link between racial identity and healthy psychological functioning may be indicative of its more complex role as a protective factor for African American youth. Sellers and colleagues (2006) were among the first researchers to utilize a protective framework to address the role of racial identity attitudes on the association between African American young adolescents’ experiences with racial discrimination and their psychological well-being. While their longitudinal investigation did not reveal a protective affect for racial centrality, researchers found evidence that regard attitudes served as buffers against the negative impact of racial discrimination. Specifically, holding positive attitudes toward African Americans (private regard) resulted in positive psychological outcomes regardless of
the level of racial discrimination experienced by adolescents. At the same time, believing that other groups hold negative attitudes toward African Americans (public regard attitudes) served a protective function, buffering the relationship between racial discrimination and psychological adjustment outcomes. Interestingly, racial identity attitudes of centrality (how important race is to an individual) did not attenuate the relationship between racial discrimination and psychological adjustment. The current study examined the role of racial identity, specifically centrality, public and private regard, as buffers to the relationship between racial discrimination and negative psychological outcomes among African American adolescents.

*Culturally-Relevant Coping as a Protective Factor*

Culturally-relevant coping for African American youth and adolescents is based on an African-Centered Worldview, grounded in African cultural traditions and philosophy (Chambers, Kambon, Birdsong, Brown, Dixon, & Robbins-Brinson, 1998). African American youth are said to possess an Africultural assets to the degree that fundamental themes relevant to the culture resonate highly with them (Jagers & Mock, 1993). Vital to the African-Centered position are deep spirituality, a deep sense of kinship and identification with the African American community (i.e., collectivism/communalism), maintaining harmony, and emotional debriefing. Spirituality, as understood by Jagers and Mock, is the belief that a nonobservable immaterial life force pervades all elements of reality. Individuals believe this life force governs every aspect of their lives, taking priority and being regarded as vital to one’s well-being. Secondly, communalism, which “denotes awareness of the fundamental interdependence of people,” is imperative to the Africultural Worldview (Jagers
& Mock, 1993, p. 394). There is great importance on social interactions, relationships, and connectedness. Thus, one’s identity is heavily associated with the identity of their group.

Thirdly, maintaining harmony conveys attempts to manage stressful situations by restoring peace or tranquility during stressful situations through either acceptance and/or agency. The final component to be mentioned, emotional debriefing, “implies the importance of emotional expressiveness, the affective value of information, and a particular sensitivity to the emotional cues given off by others” (Jagers & Mock, 1993, p. 394). Thus, there is high priority placed on expressing one’s emotions as they relate to feelings in the moment, and a low priority placed on stifling emotions.

An investigation of the African-centered worldview included 50 African American sixth graders residing in public housing communities. Youth were assessed to determine whether they endorsed more of an Afrocultural assets, Anglo-American orientation, or Marginalized Minority orientation (Jagers & Mock, 1993). The Anglocultural perspective is grounded in mainstream middle-class Anglo American values, such as possessive individualism (i.e., individual achievement is important, and an individual’s level of achievement is apparent in the materials they possess), and competition (a focus on comparisons). The Marginalized orientation is characterized by the rejection of Anglo-American values, (e.g., the Anglo-American school experience) and participation in marginal or illicit economic endeavors (e.g., selling drugs), and endorsement of gang membership and activities. Researchers found that youth more often endorsed Afrocultural values versus both Anglo-American and Marginalized Minority values.
The protective roles of communalism and spirituality coping on negative emotionality were examined among low-income, urban African American children exposed to elevated levels of community violence (Jones, 2007). Kinships and seeking support from formal kinship sources and informal kinship sources were assessed. Formal kinships connections “are maintained through patterns of contact that are proximal, frequent, and consistent” (p. 130). Informal kin, on the other hand, are defined as people who are not related to an individual biologically or by marriage, however they share the individual’s economic and social status. These individuals often take on familial roles and familial titles. For these children, formal kinship was a significant source of social support that moderated the effects of chronic community violence exposure on PTSD symptoms (Jones, 2007). Additionally, spirituality was a significant form of coping for these youth. Specifically, community violence was unrelated to increased PTSD symptoms for children with high spirituality (Jones, 2007). These findings validate the influence of Africultural principles for African American youth exposed to chronic community violence.

Although the two studies above demonstrate the importance of Africultural constructs for African American youth, they did not assess the coping function of these constructs. Very little research exists that has examined culturally-relevant coping in African American youth. Adopting the culturally relevant coping strategies of spirituality and collectivism was related to increased public collective self-esteem among a sample of African Americans adolescents (Constantine, 2002). Support for the importance of religion/spirituality coping for African American youth experiencing discrimination stress has also been revealed (Scott, 2003). A recent examination of the role of culturally relevant
coping suggests that African American youth may prefer cultural coping strategies over mainstream strategies when dealing with racial discrimination (Gaylord-Harden & Cunningham, 2009). The current study attempted to extend the research examining culturally relevant coping, and its role as a protective agent.

**Gender differences in coping.** Findings of gender disparity in regards to coping are difficult to examine due to the variability in the coping strategies examined. Generally speaking, female adolescents are more likely to use a range of coping strategies compared to their male counterparts (Patterson & McCubbin, 1987). More specifically, female youth tend to seek social support more than males when dealing with stressors that emerge in early and late adolescence. In regards to African American youth specifically, researchers found that males reported higher endorsement of active and distraction forms of coping when exposed to uncontrollable stress as compared to their female peers (Landis, Gaylord-Harden, Malinowski, Grant, Carleton, & Ford, 2007). In a more recent study, gender differences in the utilization of specific coping strategies were examined among 1,200 urban low-income African American early adolescents, and results showed that young adolescent females were more likely to engage in expressing feelings coping than their male peers (Carlson & Grant, 2008). These findings are consistent with other work with African American low-income youth, showing boys reporting more frequent use of avoidant and distraction coping and/or girls utilizing more support-seeking strategies (Chandra & Batada, 2006; Clark et al., 2002; Gaylord-Harden et al., 2008; Grant et al., 2000; Tolan et al., 2002). To our knowledge, gender differences in the endorsement of Africultural coping strategies (i.e., communalism, spirituality, maintaining harmony, and emotional debriefing) have not been examined.
Socialization, Identity, and Culturally Relevant Coping among African American Adolescents: Towards a Multidimensional Model of Adaptation

Historically, research on developmental psychopathology in youth and adolescence often focused on risk factors, omitting the exploration of protective factors that buffer youth from detrimental outcomes associated with risk (Zimmerman, Ramirez-Valles, & Maton, 1999). In actuality, not all youth and adolescents exposed to racial discrimination will experience negative outcomes; essentially, those youth have learned to effectively adapt to racial discrimination. Applying a multidimensional model to the process by which race-related stressors affect psychological well-being for African Americans is essential (Harrell, 2000). In the multidimensional model of race-related stress (Harrell, 2000), relevant antecedent (e.g., racial socialization) and mechanistic variables (e.g., racial identity and cultural coping) are identified as influencing the relationship among race-related stress and psychological well-being. Antecedent variables, such as racial socialization, consist of person and socioenvironmental factors that set the foundation for personal development (Harrell, 2000). Thus, socialization influences are essential to the multidimensional model because they are thought to contribute to the development of personality characteristics, values, and coping for African American adolescents who experience race-related stress. The multidimensional model of race-related stress also includes internal mediators, or sociocultural factors such as racial identity and cultural coping, that are person-centered characteristics related to cultural contexts (Harrell, 2000). Cultural values, spirituality, and identification with one’s race are deeply ingrained internal aspects of an individual that connect them to a larger cultural, spiritual, and racial community (Harrell, 2000). These
internal aspects provide a foundation for the appraisal of and responses to race-related stressors, impacting the association between race-related stress and outcomes.

The assertions of the multidimensional model of race-related stress are consistent with primary socialization theory. Primary socialization occurs when a child learns the attitudes, values, and actions appropriate to individuals as members of a particular culture (Oetting & Donnermeyer, 1998). Primary socialization theory illustrates that the transmission of these norms during childhood and adolescence occur through several main avenues, with the most fundamental being that of the family (Oetting & Donnermeyer, 1998). Personality traits, such as identity and coping, that are sculpted by the transmission of information or socialization in the familial context influence one another and influence outcomes. As aforementioned, racial socialization, racial identity, and culturally relevant coping are cultural factors that have been found to buffer the negative outcomes associated with race-related stress among African American adolescents. Thus, it is reasonable to postulate that these cultural factors are interrelated in their promotion of adequately adapting to racial discrimination for African American adolescents. Racial socialization may be a primary mechanism through which African American youth both gain a positive racial identity and the tools necessary to successfully cope with racial discrimination (Hughes, 2003; Phinney & Chavira, 1995). Thus, the examination of multidimensional factors related to racial discrimination and psychological well-being may be imperative (Harrell, 2000; Oetting & Donnermeyer, 1998). The following information provides empirical evidence for associations between racial socialization, racial identity, and the use of culturally relevant coping strategies.
First, regarding the link among racial socialization and racial identity, the ways in which African American parents socialize their children regarding race has been found to shape children’s racial identity and self-concept (Alejandro-Wright, 1999; Demo & Hughes, 1990; Neblett et al., 2009). Specifically, among African American adolescents, socialization experiences have been associated with identity exploration, more positive attitudes towards African Americans, and more group oriented behaviors (Stevenson, 1995). Additionally, adolescents who believe more strongly in the importance of being racially socialized are more likely to evidence more advanced stages of racial identity development as compared to their counterparts. Specifically, adolescents who reported receiving relatively high frequencies of racial pride and self-worth racial socialization messages felt that race was more central to their self-concept and were more likely to highlight the uniqueness of being African American, while acknowledging the heterogeneity amongst African Americans (Neblett et al., 2009). Additionally, adolescents who reported receiving relatively low frequencies of racial socialization messages tended to feel that race was less central to their core identity and interpreted being African American as commensurate and indistinct from being American (Neblett et al., 2009).

Consistent with primary socialization theory (Oetting & Donnermeyer, 1998), this pattern of findings suggests that African American parents’ racial socialization messages and practices may provide a framework for how African American adolescents develop thoughts about personal significance and meaning of race, having heavy implications for the development of racial identity among African American adolescents. In general, it is thought that racial socialization highlights the importance of the African American experience for
adolescents (e.g., racial pride and racial barrier messages, socialization behaviors, etc.) which conveys that race is significant, resulting the integration of being African American as a core part of their identity (racial centrality). In addition, the way in which parents socialize their children to race may play a formative role in shaping various dimensions of racial identity that protect youth against the injurious influence of race-related stress, such as racial discrimination or racism (Neblett et al., 2009). For instance, adolescents’ racial identity attitudes of private and public regard, which have protective implications for African American adolescents exposed to racial discrimination are often a by-product of a racial socialization process (Demo & Hughes, 1990; Neblett et al., 2008; Stevenson, 1995).

Next, racial socialization messages from parents may be important for promoting effective coping with racial discrimination (Scott, 2003). Socialization practices provide a range of skills for coping with and navigating racism, and inter-and intraracial interactions and relationships by transmitting beliefs about the way the world works (Coard & Sellers, 2005). African American adolescents who lack knowledge of racism and their unique heritage may be hindered in terms of their ability to cope successfully with racism (Stevenson et al., 1997). Coping styles that emerge from racial socialization reflect an individual’s worldview and racial identity (Harrell, 2000). These coping strategies serve as stable mechanism for individuals to manage themselves and their environments in response to a range of race-related stressors.

It was expected that the socialization dimension of alertness to racial discrimination or preparation for bias would be especially influential in preparing adolescents for coping with racial discrimination because by definition it includes recommendations for coping with
discrimination (Hughes et al., 2006). Research has shown that adolescents whose parents informed them of racial barriers and prepared them for racial bias have been found to demonstrate more effective coping strategies in response to racial discrimination (Hughes et al., 2006). Specifically, adolescents who received preparation for bias messages from their parents reported they would utilize proactive strategies of seeking social support and using problem-solving strategies in response to hypothetical situations of discrimination (Phinney & Chavira, 1995). Among a sample of highly religious affluent African American adolescents, receiving racial socialization messages was associated with using approach coping strategies in response to perceived discriminatory experiences but not to the use of avoidant coping strategies (Scott, 2003). Racial socialization was assessed using items that specifically related to messages about how to deal with specific experiences of racism. Participants who endorsed a high frequency of such messages were more likely to cope with perceived discriminatory experiences by sharing the experience with friends or family members (i.e., seeking social support) and/or relying on their own personal resources and knowledge (i.e., self-reliance/problem solving). Additionally, researchers were unable to identify a relationship between the racial identity dimension of centrality and coping strategies used in response to racial discrimination; lack of relation between racial identity and coping strategies is likely explained by the aspect of identity studied (Scott, 2003). Moreover, the coping strategies investigated were mainstream and not unique to the African American culture, which may have masked the true relationship between coping with discrimination, and participants’ racial identities and socialization. Cultures are thought to both prescribe and proscribe the use of certain coping responses when dealing with stressful
experiences (Slavin, Rainer, McCreary, & Gowda, 1991), and identification with one’s culture plays a key role in an individual’s coping process (Outten, Schmitt, García, & Branscombe, 2009). Vital to the African American culture is the use of spirituality, communalism, emotional debriefing, and maintaining harmony when coping with stress. Thus, it is expected that stronger identification with the African American culture promotes the employment of those coping strategies most endorsed by the African American culture.

The aforementioned research suggests that cultural factors are inter-related and may work in tandem to promote a model of adapting to racial discrimination in African American adolescents. Specifically, examining the multidimensional effects of racial socialization, racial identity, and cultural coping may prove beneficial in protecting African American adolescents from the negative outcomes associated with racial discrimination exposure. To date there have been no studies that have examined these cultural factors in tandem in promoting adaptation among African American adolescents. Consistent with the multidimensional model of race-related stress (Harrell, 2000) and the primary socialization theory (Oetting & Donnermeyer, 1998), the current study moved beyond existing research by investigating the inter-related and collective nature of these protective factors and their ability to potentially promote effective adaptation to racial discrimination amongst African American adolescents.

The current study utilized a typological or case centered approach to examine interrelated dimensions of culturally related factors amongst African American adolescents (Bergman, Cairns, Nilsson, & Nystedt, 2000). The foundation of the typological approach is the idea that more information can be gleaned from examining “types” as opposed to purely
examining the variables used to create them (Bergman et al., 2000). The empirical typological approach creates a classification of types of individuals based on several dimensions, and then examines the multidimensional relationships amongst dimensions, while examining the differences between the groups/classifications of individuals that arise. Thus, the typological approach allows for the emergence of both quantitative and qualitative information regarding individuals (Bergman et al., 2000). The current study used the typological approach by utilizing cluster analysis to create classifications or profiles of individuals based on their endorsement of culturally relevant protective factors of racial socialization, racial identity, and cultural coping. The cluster analytic approach mathematically sorts variables according to similarities on one or more identified dimension(s) (Henry, Tolan, Gordon-Smith, 2005). This approach maximized within group similarities while minimizing between group similarities. The Africultural assets profile was then examined in regards to its relationship to racial discrimination and well-being among African American adolescents.

Consistent with the multidimensional model of race-related stress (Harrell, 2000) and primary socialization theory (Oetting & Donnermeyer, 1998), it was expected that high levels of one aspect of Africultural assets (e.g. racial socialization) influence high levels in the remaining aspects, and vice versa. The current study proposed the emergence of three specific profiles based on Africultural assets. The first profile, Pro-Africultural, is characterized by relatively high endorsement of Africultural racial socialization (pride reinforcement, appreciation of history, and alertness to racial discrimination), high endorsement of racial identity aspects of racial centrality, ethnic identity, and private regard
for being African American (private regard), and low endorsement of society’s view of African Americans (public regard); as well, high endorsement of all Africultural coping strategies (spirituality, communalism, emotional debriefing, and maintaining harmony).

Individuals who comprise the Pro-Africultural assets were expected to be moderately well adapted to racial discrimination (e.g. moderate internalizing symptoms, moderate anger, and moderate life satisfaction). These individuals were thought to have internalized a positive sense of themselves as African Americans; however, these individuals may be considered hypersensitive to the existence of racial discrimination, attributing negative intentions to race-neutral situations. The second profile, Integrated, is characterized by relatively high endorsement of Africultural racial socialization (pride reinforcement, appreciation of history), moderate endorsement of alertness to racial discrimination; high endorsement of racial identity aspects of racial centrality, ethnic identity, and private regard for being African American (private regard), and moderate endorsement of society’s view of African Americans (public regard); as well, high endorsement of all Africultural coping strategies (spirituality, communalism, emotional debriefing, and maintaining harmony). Individuals who comprise the Integrated profile were expected to be well adapted to racial discrimination and experience desirable outcomes (e.g. decreased internalizing symptoms, decreased anger, and increased life satisfaction). These individuals were thought to have internalized a positive sense of themselves as African Americans, while learning how to affectively navigate through mainstream society, and also being cognizant of the existence of racial discrimination. Lastly, the third profile, Non-oriented, was characterized by relatively low endorsement of all aspects of Africultural assets (pride reinforcement, appreciation of
history, and alertness to racial discrimination); low endorsement of racial identity aspects of racial centrality and ethnic identity, moderate endorsement of racial identity aspects of regard for being African American (private regard), society’s view of African Americans (public regard); as well, low endorsement of all Africultural coping strategies (spirituality, communalism, emotional debriefing, and maintaining harmony). Individuals who comprise the Non-oriented profile were expected to be poorly adapted to racial discrimination, and thus experience undesirable outcomes (e.g. increased internalizing symptoms, increased anger, and decreased life satisfaction). These individuals have not truly internalized a sense of being African American or any other identity for that matter because they have not truly considered their cultural identity. Thus, by default, the fragile identity they have internalized is linked to mainstream culture. These individuals identify as being African American and are cognizant of racial discrimination, however when they experience discrimination they are without recourse in terms of decreasing the distress they experience. They have not internalized a positive sense of being African American; as well they do not possess the culturally relevant coping strategies that accompany an Africultural assets.

The Current Study

Based on the previous research, racial discrimination has detrimental effects on African American adolescents. Racial discrimination has been consistently linked to poor psychological well-being, specifically the experience of internalizing symptoms and anger during adolescence. Onset of internalizing disorders in childhood and adolescence predicts a more chronic course and is related to significant problems in adulthood (Petersen et al., 1993). Addressing these concerns as they arise can prevent future negative psychological
experiences that can otherwise continue into adulthood. Additionally, although less persistently investigated, racial discrimination has been found to depress African Americans’ overall satisfaction with life.

Equally as important as understanding the relationship among racial discrimination and psychological well-being for low income African American adolescents is the identification of protective factors that buffer them from detrimental outcomes. Racial socialization has been identified as a common parenting practice of African American parents. Research reveals that when African American adolescents receive and internalize messages of pride in their race and self-worth while being made aware of barriers present because of their race, the harmful impact of racial discrimination is less apparent. Racial identity is a widely studied construct among African American populations. Increased racial identification has been consistently linked with psychological well-being in African American adults. Less is known about the relevance of racial identity in youth; however, the few studies that have examined the role of racial identity for African American adolescents in stressful environments have recognized its buffering effects. Although considerable evidence supports the influence of coping in counteracting the effects of stress in adolescence, research has been limited with regard to race and socioeconomic status, with the majority of studies focusing on White adolescents of middle-class socioeconomic status. Additionally, researchers have concluded that the conceptualization of coping in White middle-class youth does not necessarily extend to African American youth, highlighting the need for a greater understanding of the unique coping strategies of African American youth. Examining coping in the context of culture may be more appropriate to the understanding
of coping strategies for African American youth. Novel to the realm of psychological development for African American adolescents, the current study investigated the protective roles of the aforementioned cultural factors in tandem, examining their cumulative effect on racial discrimination as it related to psychological well-being.

The purpose of this study was to examine the relationships among racial discrimination, to symptoms of depression and anxiety, anger, as well as level of life satisfaction. In addition, this study examined the roles of racial socialization, racial identity, and culturally relevant coping practices in protecting adolescents from the effects of racial discrimination. This integrative approach on adaptation to racial discrimination resulted in a more comprehensive understanding of the complex associations between racial discrimination and psychopathological symptoms and well-being in this population. The hypotheses of the current study were as follows:

1. **Hypothesis 1**: It was hypothesized that increased levels of racial discrimination would relate to increased symptoms of depression, anxiety, and anger.

2. **Hypothesis 2**: It was hypothesized that increased levels of racial discrimination would related to decreased life satisfaction.

3. **Hypothesis 3**: It was hypothesized that based on levels of Africultural assets endorsed, three groups/profiles would emerge among the sample: (1) Pro-Africultural, (2) Integrated, (3) Non-oriented.

4. **Hypothesis 4**: It was hypothesized that Africultural assets would moderate the relationship between racial discrimination and depression, anxiety, anger, and life satisfaction.
5. **Hypothesis 5:** It was hypothesized that individuals at the the Pro-Africultural level of Africultural assets would experience relatively moderate levels of internalizing symptoms, higher levels of anger, and moderate levels of life satisfaction.

6. **Hypothesis 6:** It was hypothesized that individuals at the Integrated level of Africultural assets would experience relatively lower levels of internalizing symptoms, lower levels of anger, and higher levels of life satisfaction.

7. **Hypothesis 7:** It was hypothesized that individuals at the Non-oriented level of Africultural assets would experience relatively higher levels of internalizing symptoms, higher levels of anger, and lower levels of life satisfaction.
CHAPTER THREE

METHODS

Participants

One hundred-fifty-one African American students in the ninth through twelfth grade from high schools and youth community groups were recruited for the current study. Of the 151 African American youth, 42% boys ($n = 63$) and 58% girls ($n = 88$). Youth were between the ages of 14 and 18 ($M = 16.26$, $SD = 1.33$). Participants were recruited from two high-schools and a teen community organization in a major Midwestern city (43%, $n = 65$), as well as from two schools in a major city in the South (57%, $n = 86$). Response rates for students that were recruited and participated ranged from approximately 10% to 87%, with smaller organizations with less students having significantly higher response rates. Participants were from low to upper middle class socioeconomic households, with most students being from a middle class background. All participating organizations were based in urban communities. The African American student population at 3 of the 4 recruited high schools, as well as the participating community organization, ranged from 98 to 100%. The remaining participating high school in the Midwest had a 15% African American student population. The current study’s estimated sample size will exceed that suggested by the standards outlined by Cohen (1992) for achieving a medium effect size (power = .80), with eight maximum predictors; because the number of predictor variables will be unknown before further analyses are conducted (i.e. cluster profiles from Hypothesis 3 will serve as
predictor variables) recruitment to exceed the estimated sample size necessary for medium effect size will be attempted. Active parental consent and student assent will be required.

Procedure

The lead researcher visited high schools informing faculty, staff, and students of the project and distributing parental recruitment letters and consent forms directly to all 9th – 12th grade students. The lead researcher then returned to the schools, collected signed parental consents and scheduled data collection with principals and necessary staff. Students who obtained parental consent and provided written assent were asked to complete a packet of pencil-and-paper psychological surveys. The survey completion was anonymous, as the nature of the study did not necessitate identifying or tracking participants. Data collection with students was conducted by classroom and was administered during non-instructional periods during regular school hours. Consistent with usual procedures for classroom-based data collection, students were asked to complete the forms individually and to remain at their seats for the task. Students were also told not to share their responses with one another and not to look at other student’s papers. The lead researcher and a research assistant administered the surveys, monitored progress, and answered questions in each group setting. Completion of the surveys for adolescents took approximately 30 minutes. The confidentiality of all participants was strictly protected during this study and will be thereafter. Names of participants and other identifying information did not appear on the surveys. Each adolescent who participated was entered into a raffle for the opportunity to win an Apple Ipad2 for completion of the survey packet.
Measures

Racial Discrimination. Participants’ experiences of racial discrimination was assessed with the Daily Life Experiences Scale (DLE; Harrell, 1994). The DLE is a subscale of the Racism and Life Experiences Subscale (RaLes), an 18-item self-report measure of the frequency and impact of racial “microaggression” occurring in the previous year. Participants were asked to report on a six point Likert scale how often an item occurred in the previous year “because you were Black” (0 = never, 1 = once, 2 = a few times, 3 = about once a month, 4 = a few times a month, 5 = once a week or more). Sample items include: “Being treated rudely or disrespectfully” and “Being observed or followed while in public places.” Higher scores reflect higher frequencies of experienced racial discrimination.

Psychometric analyses demonstrated adequate internal consistency and construct validity, and criterion-related validity for the DLE (Harrell, 1997). The overall racial discrimination score yielded an alpha reliability coefficient of .90 in the current sample.

The Racial Socialization Questionnaire – Teen (RSQ-T; Lesane-Brown, Scottham, Nguyen, & Sellers, 2006) was used to assess racial socialization. The RSQ-T is a 26-item scale used to examine the frequency of six types of parental socialization practices. Respondents reported on a 3-point Likert scale (0 = never, 1 = once or twice, and 2 = more than twice) the frequency with which their primary caregivers engaged in a range of socialization practices. The current study utilized three of the six subscales that comprise the RSQ-T: (1) racial pride, (2) racial barrier, and (3) self-worth. The Racial Pride subscale ($\alpha = .63$) consists of 4 items that examine the extent to which the primary caregiver encourages their child to take pride in their racial group, its history, and customs (e.g. “You should be
proud to be Black‖). The racial socialization pride score yielded an alpha reliability coefficient of .73 in the current sample. The Racial Barrier subscale (α = .69) consists of 4 items that measures the frequency with which messages that prepare the child for racial adversity experiences in society are communicated (e.g. “Black have to work twice as hard as Blacks to get ahead”). The racial socialization barrier score yielded an alpha reliability coefficient of .68 in the current sample. The Self-Worth (α = .74) consists of 4 items which measures the frequency primary caregivers communicate that the child is of value both as an individual and as a member of their racial group (e.g. “You can be whatever you want to be”). The racial socialization self-worth score yielded an alpha reliability coefficient of .76 in the current sample. Neblett, Smalls, Ford, Nguyen, and Sellers (2009) demonstrated the RSQ-T as a valid and reliable measure for African American early and middle adolescents.

Racial Identity. The Multidimensional Inventory of Black Identity – Teen (MIBI-T; Scottham, Sellers, & Nguyen, 2008) was used to assess adolescents’ racial identity. The MIBI-T is the adolescent version of the MIBI (Sellers, Rowley, Chvous, Shelton, & Smith, 1997) which was developed from the three stable dimensions of identity proposed in the Multidimensional Model of Racial Identity (MMRI): centrality, regard, and ideology (Sellers, Smith, Shelton, Rowley & Chavous, 1998). For the present study, participants’ scores on the centrality, public regard, and private regard scales were examined. Participants were asked to respond regarding the extent to which they agree with the items using a 5-point Likert scale. The Centrality subscale (α = .63) consists of 3 items measuring the extent to which being African American is central to the respondents’ definition of themselves (e.g. I have a strong sense of belonging to other Black people”). A higher score on the Centrality scale indicates that race
is a more important aspect of the individuals' definitions of self. The centrality score yielded an alpha reliability coefficient of .17 in the current sample. The Private Regard subscale ($\alpha = .72$) consists of 3 items measuring the respondent’s positive or negative feelings about being African American (e.g. “I am proud to be Black”). A higher score on the Private Regard scale indicates that participants have more positive views about being African American. The Public Regard subscale ($\alpha = .73$) consists of 3 items measuring the respondent’s views about whether others hold positive or negative beliefs towards Blacks (e.g. “Most people think that Blacks are as smart as people of other races”). The private regard score yielded an alpha reliability coefficient of .50 in the current sample. A higher score on the Public Regard scale indicates that participants view others as having positive beliefs about African Americans. The public regard score yielded an alpha reliability coefficient of -.75 in the current sample. Scottham and colleagues (2008) demonstrated evidence of construct validity and internal consistency for the MIBI-T within a sample of African American early and midle adolescents. Notably, the internal consistencies of the racial identity subscales of centrality and public regard were inadequate and thus these were removed from all analyses; hereafter, racial identity refers to the private regard subscale of racial identity.

**Culturally Specific Coping.** Adolescent’s culturally-specific coping responses was assessed using the *Africultural Coping System Inventory, Youth Version* (Y-ACS*I*; Gaylord-Harden and Utsey, 2007 unpublished manuscript). The Y-ACS*I* is adapted from the Africultural Coping System Inventory (*ACS*I*; Constantine, Donnelly, and Myers, 2002; Utsey, Brown, and Bolden, 2004; Utsey, Adams, and Bolden, 2000). The *ACS*I* was developed for use with African American adults and captures the unique coping mechanisms of people of African
descent. The Y-ACSI contains 52 items that are rated on a 4-point Likert scale (1 = Not at all, 2 = used a little, 3 = used some, and 4 = used a lot) and grouped into 4 factors: Emotional Debriefing, Spiritual-Based Coping, Communalistic Debriefing, and Maintaining Harmony. The Emotional Debriefing subscale is comprised of three factors: musical expression (attempts to manage stress by expressing oneself via music, e.g. “When I have a problem I sing”); physical activity/kinesthetic (attempts to manage stress by expressing oneself through physical activity and movement, e.g. “I dance with a group of friends”); and creative expression (attempts to manage stress by engaging in creative activities, e.g. “When I have a problem, I write in a notebook, diary or journal”). The emotional debriefing score yielded an alpha reliability coefficient of .79 in the current sample. The Spiritual-Centered Coping subscale examines spiritually-based attempts to manage a situation through having a direct relationship with God (e.g. “ask God for strength”) and/or engaging in spiritual activities (e.g. “I read my Bible or Qur’an”). The spirituality score yielded an alpha reliability coefficient of .85 in the current sample. The Communalistic Debriefing subscale investigates coping through a range of attempts that rely on others and rally social support and is comprised of two factors: expressive means of rallying social support to help deal with stress (e.g. “I call someone to talk about my problem”), and receptive attempts at receiving social support to address stress (e.g. “I think about a story that someone in my family told me”) (Utsey et al., 2000). The communalism score yielded an alpha reliability coefficient of .82 in the current sample. Lastly, the Maintaining Harmony subscale attempts to manage stressful situations by attempting to re-establish peace or tranquility in the presence of the stressor through either acceptance (e.g. “I just accept that I cannot change what has happened”),
and/or agency (e.g. “I try to make things better by being nice to others”). The maintaining harmony score yielded an alpha reliability coefficient of .69 in the current sample. Previous psychometric analyses demonstrate adequate reliability for the Y-ACSI subscales in a sample of early adolescent African American youth (emotional debriefing ($\alpha = .82$), spiritual-centered coping ($\alpha = .85$), communalistic ($\alpha = .91$), and maintaining harmony ($\alpha = .78$) (Gaylord-Harden & Cunningham, 2009).

**Depression.** Depressive symptomatology was assessed with the *Child Depression Inventory*, a widely used measure with well-established reliability and validity in youth as young as age 6 (*CDI*; Kovacs, 1992). The *CDI* consists of 27 items, each of which contains three sentences pertaining to one of five factors that can be scored: Negative Mood (scores range 0-12), Interpersonal Problems (scores range 0-8), Ineffectiveness (scores range 0-8), Anhedonia (scores range 0-16), and Negative Self-esteem (scores range 0-10). All scales were used for the current study, however item 9 pertaining to suicidal ideation was dropped. Respondents were asked to choose the sentence within each item that most closely described him or her in the past 2 weeks. Additionally, the items were combined to provide a score that measures overall depression with possible scores ranging from 0 to 54. The overall study score will be used as an index of depression in the current study. Higher scores indicate more depressive symptomatology. A three-alternative choice format was used ranging from 0 to 2 with total scores of 19 and above indicating significant levels of depression. The overall depression score yielded an alpha reliability coefficient of .80 in the current sample.
Anxiety. Anxiety symptoms was assessed with the Revised Children’s Manifest Anxiety Scale (RCMAS; Reynolds & Richmond, 1997). The RCMAS is a self-report measure containing 37 sentences about thoughts and feelings to which the respondent was asked to respond “yes” or “no”. Of the 37 items, 28 are items measuring anxiety symptoms, and 9 assess the extent to which the respondent is responding in a socially desirable manner. The measure provides an overall anxiety score as well as three subscales: physiological anxiety, worry/sensitivity, and social concerns. In each case, higher scores indicate increased anxiety symptomatology. The RCMAS is a widely-used measure of anxiety, and the reliability and validity of the measure have been well-established (Reynolds and Richmond, 1997). The overall anxiety score yielded an alpha reliability coefficient of .84 in the current sample.

Anger. Anger was assessed with the State-Trait Anger Expression Inventory (STAXI; Spielberger, 1988). The STAXI is a 44-item self-report measure that provides a general index of the frequency with which anger is expressed. The STAXI consists of five subscales: (1) State Anger, (2) Trait Anger, (3) Anger-In, (4) Anger-Out, and (5) Anger Control. For the purposes of the current study only two subscales: State Anger and Trait Anger were relevant. The 10-item State Anger subscale (α = .93) assesses current experiences of angry feelings (e.g., “I am furious”). Respondents reported on a 4-point Likert scale (1 = not at all, 2 = somewhat, 3 = moderately so, and 4 = very much so) the extent to which they were experiencing anger feelings. Higher scores are indicative of increased feelings of present anger. The state anger score yielded an alpha reliability coefficient of .90 in the current sample. The 10-item Trait Anger subscale (α = .86) assesses the frequency with which anger is typically experienced over a range of situations (e.g., “I am quick-tempered”). Respondents
reported on a 4-point Likert scale (1 = almost never, 2 = sometimes, 3 = often, and 4 = almost always) the frequency with which they typically experience anger feelings. Higher scores are indicative of increased feelings of typical anger across settings. The trait anger score yielded an alpha reliability coefficient of .87 in the current sample.

*Life Satisfaction.* Life satisfaction was assessed with the *Satisfaction With Life Scale* (SWLS; Diener, Emmons, Larsen, & Griffin, 1985). The SWLS is a 5-item self-report measure of global life satisfaction. Items are rated on a 7-point Likert scale (1 = Strongly Disagree, 2 = Disagree, 3 = Slightly Disagree, 4 = Neither Agree or Disagree, 5 = Slightly Agree, 6 = Agree, and 7 = Strongly Agree). The overall score was used as an index of life satisfaction in the current study. Higher scores indicate higher levels of satisfaction. Specifically, a score of 20 represents a neutral satisfaction with life while scores ranging between 5 and 9 represent extreme dissatisfaction and a score of 30 represents high satisfaction. A score between 23 and 28 represent average life satisfaction. The SWLS is a widely-used measure of life satisfaction, being supported across populations and cultural contexts. The reliability and validity of the measure have been well-established (Blais, Vallerand, Pettelier, & Briere, 1989; Diener, Emmons, Larsen, & Griddin, 1985; Larson, Diener, & Emmons, 1985). The overall life satisfaction score yielded an alpha reliability coefficient of .78 in the current sample.

*Demographic.* A brief demographic form was given to participants to obtain age, grade, gender, ethnicity, primary care giver, and number of people living in the participants' home.
CHAPTER FOUR

RESULTS

The results are presented in four steps. First, descriptive information, zero-order correlations, and ANOVAs are presented for all study variables. Second, correlations and hierarchical regression analyses used to test the effects of racial discrimination on internalizing, externalizing, and satisfaction outcomes are reported. Third, the results of the cluster analysis used to examine Africultural assets are presented. Finally, hierarchical regression analyses used to test the effects of racial discrimination on internalizing symptoms, externalizing symptoms, and life satisfaction and the moderating role of Africultural assets are reported.

Descriptive Analyses and Correlational Analyses

The means, standard deviations, and correlations for all variables are presented in Table 1. As expected, correlational analyses revealed that racial discrimination was significantly positively associated with depression, anxiety, and anger; however, racial discrimination was not associated with life satisfaction. Also, depression, anxiety, and anger were significantly positively associated with one another and negatively associated with life satisfaction. Correlational analyses also demonstrated that all coping variables were significantly, positively associated with one another. Unexpectedly, racial identity was not significantly associated with racial socialization. While racial identity was significantly positively associated with the spirituality and communalism subscales of cultural coping, it was not significantly associated with the emotional debriefing or maintaining harmony.
subscales of cultural coping. Racial socialization was significantly positively associated with emotional debriefing and communalism, but was not associated with spirituality or maintaining harmony. Spiritual coping was negatively related to depression and positively associated with racial identity. Emotional debriefing was significantly positively related to racial discrimination, anxiety symptoms, life satisfaction, and racial socialization. Communalistic coping was significantly positively related to racial identity and socialization. Lastly, maintaining harmony was significantly positively related to racial identity and anxiety.

ANOVAs were used to assess location (i.e., where participants were recruited, e.g. Midwest or Southern region of the United States), gender and grade differences on study variables. Results indicated location differences in regards to anxiety and emotional debriefing coping. Specifically, adolescents in the Midwest reported more anxiety ($M = 1.35, SD = .14$) than adolescents in the South ($M = 1.27, SD = .18$), $F(149) = 9.16, p = .003$. Adolescents in the Midwest also reported utilizing more emotional debriefing coping strategies ($M = 2.61, SD = .61$) than adolescents in the South ($M = 2.38, SD = .58$), $F(149) = 8.94, p = .003$. As well, the results indicated gender differences in regards to anxiety, as well as use of cultural coping strategies. Specifically, females reported more anxiety symptoms ($M = 1.34, SD = .18$) than male participants ($M = 1.26, SD = .15$), $F(149) = 8.41, p = .004$. Females also reported utilizing more emotional debriefing ($M = 2.61, SD = .62$) than males ($M = 2.21, SD = .52$), $F(149) = 16.94, p = .000$, and more communalistic strategies ($M = 3.04, SD = .61$) than males ($M = 2.72, SD = .69$), $F(149) = 9.02, p = .003$. Additionally, ANOVAs revealed grade differences in reported depressive symptoms and communalistic coping. In terms of depressive symptoms, post-hoc analysis revealed that eleventh graders
reported more symptoms of depression ($M = .47, SD = .23$) than twelfth graders ($M = .33, SD = .22$), $F(147) = 3.45, p = .018$; twelfth graders reported significantly more utilization of communalistic coping strategies ($M = 3.12, SD = .53$) than tenth graders ($M = 2.64, SD = .79$), $F(147) = 4.21, p = .007$.

**Hypotheses 1 and 2.** A series of two-step hierarchical regression analyses were conducted to test hypotheses 1 and 2, which predicted that higher levels of racial discrimination would be related to higher levels of depression, higher racial discrimination was related to higher depression, anxiety, and anger, and decreased life satisfaction scores, four separate regression analyses were conducted. For each model, location, gender and grade were entered in Step 1 to control for their possible effects. In Step 2, racial discrimination was entered. This resulted in four separate regression analyses conducted with depression, anxiety, anger, and life satisfaction respectively, as the dependent variable. For the first regression analysis, which examined racial discrimination’s role in predicting depression, step one resulted in a non-significant $R^2$, while a significant change in $R^2$ ($p = .01$) was observed in step two, revealing that racial discrimination was a significant predictor for depression ($\beta = .27, p = .00$) and accounted for 7.3% of the variance in depression scores. For the analysis examining the predicting power of racial discrimination on anxiety, each step resulted in a significant change in the model $R^2$. In the first step, location ($\beta = -.18, p = .02$) and gender ($\beta = .22, p = .00$) were significant; in the second step, racial discrimination stress was significant ($\beta = .31, p = .000$) in predicting anxiety, accounting for 9.5% of the variance in anxiety scores. In the final analyses for hypothesis 1, the first step resulted in a non-significant $R^2$, while a significant change in $R^2$ ($p = .06$) was observed in
step two identifying racial discrimination as a predictor for state anger ($\beta = .21, p = .01$), accounting for 4.5% of the variance in anger scores. For hypothesis 2, examining the predicting power of racial discrimination on life satisfaction, each stage resulted in a non-significant change in the models $R^2$. Thus, racial discrimination experiences predicted of symptoms of depression, anxiety, and anger, but not life satisfaction (Table 2).

*Cluster Analysis to Identify Cultural Groups*

Standard cluster analytic procedures were used to classify adolescents into Africultural asset profiles based on their reported pattern of cultural coping, racial socialization, and racial identity. The goal of cluster analysis is to maximize the homogeneity of individuals, while also maximizing the heterogeneity between individuals. First, agglomerative hierarchical cluster analysis was conducted to establish the number of clusters in the sample. Then, $k$-means cluster analysis procedures were used to group individuals. For the hierarchical procedures, solutions for 2-clusters through 6-clusters were tested using Ward’s method with squared Euclidean distances. An examination of the agglomeration schedule, dendrogram, and percentages of individuals in each cluster for each solution indicated that a 3-cluster solution best represented the data because the cluster profiles were most interpretable and they seemed to maximize both the homogeneity of individuals while also maximizing heterogeneity between the clusters. Using the 3-cluster solution and initial cluster centers obtained from the hierarchical analysis, a $k$-means cluster analysis was computed to reassign observations based on the minimization of distances between each observation and cluster centers.
To validate the derived cluster solution, replication analysis as outlined by Breckenridge (2000) was conducted. Replication analysis or cross-validation procedures are the recommended method of validating cluster solutions (Mandara, 2002). There are five steps to the cross-validation procedure. First, the data are randomly divided into two samples. Second, a full cluster analysis is performed on sample A. Third, a full cluster analysis is performed on sample B. Fourth, sample B is then classified into clusters according to the cluster centers derived from sample A. Finally, the agreement between the two sample B solutions is computed, with higher agreement between the two solutions indicative of a more reliable or stable cluster solution (Breckenridge, 2000).

Consistent with these procedures, the current sample was randomly divided into two subsamples (\( n_s = 74 \) and 69). Next, hierarchical cluster analysis using Ward’s method and squared Euclidian distances was conducted on sample A. An examination of the agglomeration schedule, dendrogram, and percentages of individuals in each cluster for each solution indicated that a 3-cluster solution best represented the data. A \( k \)-means cluster analysis was computed with 3 solutions. Then, this procedure was repeated with sample B, and the results again indicated three categories. Next, a \( k \)-means cluster analysis was conducted on sample B using the cluster centers from sample A. Finally, the two solutions from sample B were compared for agreement using Cohen’s kappa. The agreement between the two solutions was .81, indicating high reliability. The 3 x 3 contingency table is presented in Table 3.

The first cluster, characterizing 51% of the participants, demonstrated a relatively high level of all culturally relevant variables: racial socialization (pride, barrier, self-worth);
racial identity (centrality); cultural coping (communalism, emotional debriefing, maintaining harmony, and spirituality); which characterizes the Pro-AfriCultural profile. The second cluster, characterizing 25% of the participants was characterized by relatively high levels of all cultural coping variables (communalism, emotional debriefing, maintaining harmony, and spirituality), relatively moderate levels of racial socialization pride and worth and relatively low levels of racial socialization barrier, as well as relatively moderate levels of private regard. This profile is not well captured by any of the proposed Africultural assets; however it can be described as Partial Integration given the participants’ high endorsement of cultural coping and moderate endorsement of socialization and private regard. The third cluster, characterizing 24% of the participants, demonstrated a relatively low level of all culturally relevant variables: racial socialization (pride, self-worth); racial identity (centrality); cultural coping (communalism, emotional debriefing, maintaining harmony, and spirituality), except racial socialization barrier in which case a relatively moderate level was observed. This profile best characterizes the Non-oriented profile. Thus, hypothesis 3, which predicted the emergence of 3 clusters: Pro-AfriCultural, Integrated, and Non-oriented, was partially supported by the cluster analysis; two of the proposed clusters that emerged can be characterized as Pro-AfriCultural, and Non-oriented, as defined in this study. Means and standard deviations of study variables are presented for each cultural asset profile in Table 4. Figure 2 illustrates cultural factor means by Africultural assets.

Tests of Group Differences

There were no differences in gender distribution between culture groups, \( \chi^2(2) = 2.42, p = .29 \). There were no differences in location distribution between culture groups, \( \chi^2(2) = .073, p = .96 \). As well, there were no differences in grade distribution between culture
groups, \( \chi^2(6) = 11.76, p = .07 \). To test for systematic differences between cultural groups, psychological symptoms (internalizing, externalizing, and life satisfaction) and racial discrimination were used as dependent measures in a multivariate analysis of variance. The MANOVA resulted in a significant multivariate effect of Cultural Asset Group, with Wilks’ lambda = .88, \( F(10, 288) = 1.92, p < .05, \eta^2 = .06 \). Univariate tests showed differences in depressive symptoms, \( F(2, .201) = 4.06, p < .05, \eta^2 = .05 \). Post hoc comparisons demonstrated that Non-oriented individuals had significantly higher depression scores (\( M = .45, SD = .21 \)) than Pro-Africultural individuals (\( M = .32, SD = .23 \)). No additional differences in psychological outcomes distribution emerged between Africultural assets groups.

**Moderation Analyses**

Correlational analyses to examine the relationships between racial discrimination and outcome variables were conducted separately for each Africultural profile. More specifically, the strength of the relationships between the variables of interest for each profile was of interest. Amongst the individuals in the Pro-Africultural profile, racial discrimination was significantly positively associated with both depression \( r(77) = .280, p < .05 \) and anxiety symptoms \( r(77) = .284, p < .05 \), but was not significantly associated with anger \( r(77) = -.224, p = .05 \) or life satisfaction \( r(77) = -.081, p = .48 \). For individuals in the Partial Integration profile, a significant positive relationship between racial discrimination and anxiety \( r(38) = .336, p < .05 \) emerged, while the relationships between racial discrimination and life satisfaction \( r(38) = -.173, p = .30 \), racial discrimination and depression \( r(38) = .278, p = .09 \), and racial discrimination and anger \( r(38) = .046, p = .79 \) were not significant. For
individuals in the Non-Oriented profile, racial discrimination was significantly positively associated with both depression $r(36) = .351, p < .05$ and anxiety $r(36) = .447, p < .01$, while racial discrimination was not significantly related to anger $r(36) = .290, p = .09$ or life satisfaction $r(36) = -.168, p = .33$.

Correlational analyses to examine the relationships between racial discrimination and outcome variables were conducted separately by gender for each Africultural profile. For males in the Proafricultural profile, racial discrimination was not significantly related to depression $r(30) = .357, p = .05$, anxiety $r(30) = .188, p = .32$, anger $r(30) = .085, p = .66$, or life satisfaction $r(30) = -.230, p = .22$. For females in the Proafricultural profile, racial discrimination was significantly positively associated with anxiety $r(47) = .317, p < .05$, and anger $r(47) = .304, p < .05$; but not significantly related to depression $r(47) = .219, p = .14$, or life satisfaction $r(47) = .007, p = .96$. For males in the Partial Integration profile, racial discrimination was not significantly related to depression $r(14) = .012, p = .96$, anxiety $r(14) = -.043, p = .89$, anger $r(14) = -.049, p = .87$, or life satisfaction $r(14) = -.345, p = .23$. For females in the Partial Integration profile, racial discrimination was significantly positively related to anxiety $r(24) = .447, p < .05$; racial discrimination was not significantly related to depression $r(24) = .352, p = .09$, anger $r(24) = .074, p = .73$, or life satisfaction $r(24) = -.080, p = .71$. For males in the Non-Oriented profile, racial discrimination was significantly positively related to depression $r(19) = .521, p < .05$, and anger $r(19) = .498, p < .05$; racial discrimination was not significantly related to anxiety $r(19) = .141, p = .57$ or life satisfaction $r(19) = -.449, p = .05$. For females in the Non-Oriented profile, racial discrimination was significantly positively related to anxiety $r(17) = .6958, p < .01$; racial discrimination was not
significantly related to depression $r(17) = .146, p = .58$, anger $r(17) = .076, p = .77$, or life satisfaction $r(17) = .110, p = .67$.

A series of hierarchical regression analyses were conducted to assess whether Africultural assets would moderate the association between racial discrimination and outcomes (Holmbeck, 1997, 2002). Because three Africultural assets emerged, two dummy coded variables were created. In general, with k groups, k-1 will be dummy coded. Every observation in the Pro-Africultural profile was coded as 1 with Non-Oriented and Partial Integration coded as 0. Next, observations in the Partial Integration were coded as 1 and 0 otherwise. Observations in the Non-oriented profile did not require dummy coding. Regression analyses were conducted by centering the racial socialization (continuous variable) variable to create interaction terms between racial discrimination and the dummy-coded Africultural assets variable (Aiken & West, 1991).

To examine whether Africultural asset profile would moderate the relationships between racial discrimination and internalizing, externalizing, and life satisfaction outcomes, racial discrimination was multiplied by Africultural assets to create interaction terms. For each model, location, gender, and grade were entered in Step 1. In Step 2, the centered racial discrimination variable and the Africultural assets variable was entered. In Step 3, the interaction term created for racial discrimination and Africultural assets was entered. This was conducted for each outcome of interest, which resulted in four regressions conducted with depression, anxiety, anger, and life satisfaction respectively as the dependent variables.

*Interaction analyses involving Pro-Africultural cultural profile predicting psychological outcomes.*

Contrary to predictions, Pro-Africultural profile did not interact with racial discrimination to
predict psychological outcomes. The results demonstrated main effects for racial discrimination ($\beta = .30, p = .010$) and Pro-Africultural profile ($\beta = .03, p = .003$) in the prediction of depression. As well, main effects for location ($\beta = -.18, p = .027$), gender ($\beta = .23, p = .003$), and racial discrimination ($\beta = .39, p = .001$) in the prediction of anxiety was observed.

**Interaction analyses involving Partial Integration cultural profile predicting psychological outcomes.**
The Partial Integration Africultural assets did not interact with racial discrimination to predict psychological outcomes. The results demonstrated main effects for racial discrimination ($\beta = .27, p = .006$) and Partial Integration profile ($\beta = .22, p = .007$) in the prediction of depression. Main effects for location ($\beta = -.18, p = .023$), gender ($\beta = .22, p = .004$), and racial discrimination ($\beta = .32, p = .000$) in the prediction of anxiety were observed. Additionally a main effect for racial discrimination ($\beta = .26, p = .007$) in the prediction of anger was observed.

**Interaction analyses involving Non-Oriented Africultural assets predicting psychological outcomes.**
Contrary to predictions, Non-Oriented Africultural assets did not interact with racial discrimination to predict psychological outcomes. The results indicated a main effect for racial discrimination ($\beta = .27, p = .002$) in the prediction of depression; as well, racial discrimination ($\beta = .18, p = .045$) predicted anger. Additionally, main effects for location ($\beta = -.18, p = .022$), gender ($\beta = .23, p = .003$), and racial discrimination ($\beta = .27, p = .001$) were observed in the prediction of anxiety.
CHAPTER FIVE

DISCUSSION

The identification of the effects of aversive racial discrimination on African American adolescents and factors that buffer and protect against psychopathology is an important task for developmental researchers. The current study investigated associations amongst aversive racial discrimination and symptoms of depression, anxiety, anger, and overall life satisfaction among African American adolescents from major cities in the Midwest and the Southern region of the country, living in urban communities. As expected, aversive racial discrimination predicted increased symptoms of depression, anxiety, and anger. Unexpectedly, aversive racial discrimination experiences did not predict a decrease in overall life satisfaction. As predicted Pro-Africultural and Non-Oriented Africultural asset profiles emerged from the sample, however unexpectedly, an Integrated Africultural asset profile did not emerge. Instead, a third profile, Partial Integration with similar characteristics to an Integrated profile was revealed. Specifically, the Partial Integration profile was characterized by low levels of barrier messages, as opposed to the moderate levels expected for an Integrated profile. As well, moderate levels of racial socialization worth messages were observed within the Partial Integration profile as opposed to the high levels expected in an Integrated profile. Africultural assets characterization did not prove to be a buffering agent, weakening the relationship between racial discrimination and internalizing and externalizing symptoms for adolescents.
Fitting with previous research, females in the study experienced overall higher rates of anxiety symptoms than males (Handwerk, Clopton, Huefner, Smith, Huff, & Lucas, 2006; Luo, Wang, Zhu, & Yao, 2008). However, rates of depression were similar across gender. Rates of depression reported by adolescents in the current study would be characterized as mild and not clinically significant. While gender differences in reports of internalizing symptoms is a consistent finding in developmental literature, some researchers have revealed gender similarities in rates of depressive symptoms. For example, in a longitudinal study, assessing depressive symptoms over several years for psychiatrically-referred youth and adolescents; no gender differences in rates or risk of recurrence of depression were found (Kovacs, 2001). Additionally, gender differences in rates of depression were unsubstantiated in a longitudinal study with a non-clinical sample of African American youth (Shaffer, Forehand, & Kotchick, 2002). Gender invariance in rates of depression may be attributed to the low and invariable rates of depression observed across the current sample. As noted by Compas and colleagues (1997), gender effects on depression may be more readily identified in clinical samples of youth, endorsing relatively high overall levels of depressive symptoms.

Overall, females in the current sample engaged in more communalistic and emotional debriefing coping strategies than males. Gender differences in coping strategies among African American adolescents have been revealed in previous research; however few studies to date have examined differences in culturally relevant coping strategies. In regards to mainstream or universal coping, adolescent girls have been found to engage in more emotion-focused coping and social support seeking, while their male counterparts rely more
on distraction and cognitive restructuring strategies (Compas et al., 2001; Gaylord-Harden et al., 2008; Tolan et al., 2002). Additionally, among African American early adolescents, females used more coping strategies related to expressing feelings, while boys used more physical release of emotions (Carlson & Grant, 2008). Thus, the differences in culturally-relevant coping detected in the current study are consistent with the aforementioned research on universal coping, identifying girls as more likely to use culturally relevant strategies related to emotional debriefing and rallying communal support. As mentioned, adolescents were recruited from urban areas in both the Midwest and the South.

Interestingly, adolescents from the Midwest reported relatively more anxiety and more use of emotional debriefing coping. While there is no research to date that examines regional differences of rates of anxiety amongst adolescents within the United States, the difference that emerged in the current study is commensurate with a recent study revealing regional disparities in rates of anxiety amongst African American adults (Simming, van Wijngaarden, & Conwell, 2011). This finding may illuminate differences in the cultural role of anxiety that exists regionally. Additionally, the same may be true in regards to emotional debriefing coping. While there is no research to date examining regional differences in emotional debriefing coping, a single research study to date exists examining regional differences in emotional expressiveness. Pennebaker and colleagues (1996) examined differences in emotional expressiveness across 26 countries. They were unable to observe significant regional differences in rates of emotional expression within the United States. The significant disparity regarding emotional debriefing observed in the current study may also be explained via region cultural norms with regards to acceptable expressions of emotion.
Interestingly, there were no regional/location disparities that emerged for reported frequency of aversive racial discrimination experiences. Although no postulations were made in regards to location disparities in aversive racial discrimination in the current study, given the history of this country this is a notable finding. Historically and presently, the South has been characterized as highly racially segregated and racially tense. Research has revealed negative racial attitudes in the South as recently as the 1990s (Glaser, 1992). Thus, the lack of disparity in perceived racial discrimination experiences amongst the Midwest and the South is of note. Overall, rates of reported aversive racial discrimination experiences were low to moderate; it may be the case that while more overt racism is generally thought to occur at a higher prevalence in Southern regions in the US, covert forms of racism may be more evenly distributed across regions.

Racial Discrimination and Internalizing and Externalizing Symptoms

Consistent with previous literature, African American adolescents in the current study reported experiencing microaggressions (Thomas, Caldwell, Faison, & Jackson, 2009); with the average frequency being between one and a few microaggressions a year and the maximum being a few times a month. Consistent with predictions, aversive racial discrimination experiences was related to higher levels of internalizing and externalizing symptoms for African American adolescents. This finding is commensurate with previous research (Wong, Eccles, & Sameroff, 2003), which has revealed that African American adolescents who are susceptible to racial discrimination experienced increased symptoms of depression. For example, one study examined the effects of racial discrimination stress amongst middle-school age African American youth who resided in communities and
attended schools that were almost exclusively African American (Gaylord-Harden & Cunningham, 2009). For these youth, discrimination stress was a significant predictor of depressive and anxiety symptoms above and beyond the effects of stressors in the family, peer, school, and community contexts, suggesting that even infrequent experiences of racial discrimination are harmful. Few studies have examined the role of aversive racial discrimination experiences on psychological well-being among African American adolescents. Notably, the detrimental effects of subtle discriminatory acts appear to mimic those of overt forms of racial discrimination for African American adolescents.

As expected, aversive racial discrimination experiences were related to higher levels of anger amongst adolescents. This is commensurate with previous research, which identifies anger as a common response to racial discrimination among African American adolescents and young adults (Swim et al., 2003; Terrell et al., 2006). Notably, anger can be conceptualized as a particularly dangerous emotional response to racial discrimination. More specifically, while anger is a common response to aversive racial discrimination experiences, it has been found to mediate the causal relationship between racial discrimination and substance use among African American youth (Gibbons, Etcheverry, Stock, Gerrard, Weng, Kiviniemi, and O’Hara, 2010). Additionally, amongst African American adults, anger responses to racial discrimination have been found to be associated with increased depressive symptoms (Pittman, 2011). Anger is commonly manifested as aggression (Berkowitz and Harmon-Jones, 2004). However, unlike the behavioral expression of depression or anxiety (e.g. feeling despondent, ruminating, nail biting, etc.), overt anger expression is oftentimes not feasible or appropriate due to negative consequences associated
with such expression (e.g. legal repercussions of engaging in physically aggressive behaviors, school suspension, labeling as oppositional etc.). This is especially true given that this type of discrimination is often reported to occur in academic settings (Thomas, Caldwell, Faison, & Jackson, 2009). Thus, African American adolescents are charged with the task of suppressing anger in response to these experiences, an undertaking that has negative health implications (e.g. substance abuse, hypertension) (Gibbons et al., 2010; Peters, 2004).

Previous research examining the effects of racial discrimination on life satisfaction amongst African Americans has been mixed. Several studies have revealed a direct negative relationship between racial discrimination experiences and life satisfaction amongst African American young adults (Prelow et al., 2006; Seaton et al., 2008). However, findings from the current study are commensurate with the literature that has failed to uncover this significant negative relationship between discrimination and life satisfaction (Barnes & Lightsey, 2005; Utsey, Ponterotto, Reynolds, & Cancelli, 2000). One explanation for why racial discrimination was not related to life satisfaction in the current study may be that racial discrimination experiences by and large were reported as being perpetrated by adults (e.g. teachers, store personnel, police officers, etc.) versus peers. Research has shown that for adolescents, racial discrimination experiences are less impactful on psychological symptoms when the discriminator is an adult, as compared to a peer (Greene, Way, & Pahl, 2006). Specifically, Greene and colleagues (2006) found that racial discrimination by peers was detrimental to the self-esteem and depressive symptoms of adolescents over time, where discrimination by adults was related only to self-esteem concerns. Given the importance of peer relationships in adolescence, this finding is not surprising. Thus, it may be that for
adolescents in this study, racial discrimination by adults does not relate to overall life satisfaction, as their lives are more centralized around peer relationships at this stage. There are significant methodological differences in the assessment of life satisfaction across studies, which may account for the inconsistency in findings. Specifically, some studies utilize a one-item assessment of life satisfaction while others assess life satisfaction with multiple items. One-item assessment is likely not to capture overall life satisfaction, and thus life satisfaction in some samples may be under-represented; making findings of the effects of racial discrimination on life satisfaction in such studies spurious. Another explanation for the lack of support for aversive racial discrimination’s link to life satisfaction in the current study may be explained by the developmental stage with which participants fall. It may be the case that in adolescence other life factors (e.g. interpersonal relationships) play a significantly larger role in youth’s conceptualization of life satisfaction, relative to racial discrimination experiences. Additionally, by the very nature of their development, adolescents’ may lack experience regarding frequency of what they perceive as microaggressions, thus the cumulative affects of such experiences may not impact their overall life satisfaction at this stage. Finally, the fact that life satisfaction was not directly examined in the context of racial discrimination in the current study may account for the lack of association gleaned amongst racial discrimination and life satisfaction.

Africultural Assets Promoting Adaptation

The current study proposed the emergence of three Africultural asset profiles: (1) Pro-Africultural, (2) Integrated, and (3) Non-oriented. While, two of the three proposed profiles were revealed, a culturally Integrated profile was not identified. This finding may be
reflective of a methodological issue regarding sample size and characteristics. Mandara (2003) identified the investigation of typologies in relative small and nonrandom samples as a significant issue within child and family psychology. Small nonrandom samples are unlikely to produce natural typologies because they are not likely to exist within the data. While adequate sample size and randomness are not clear, it may have been the case for the current study that the sample size was not large and/or random enough to adequately represent each cultural “type” explored. On the other hand, the profiles that emerged in the current sample may accurately reflect the patterns of these cultural constructs in African American adolescents. Based on the primary socialization model, attitudes, values, and behaviors appropriate to individuals as members of a culture are learned (Oetting & Donnerneyer, 1998). While the primary socialization model was developed to explain deviant social behaviors amongst adolescents (i.e. substance use), the current study extends this theory to explain adaptive cultural behaviors among African American adolescents. Three profiles/patterns of culturally relevant attitudes, values, and behaviors emerged in the current study. In the primary socialization model, the premise for the expectation of specific patterns is that values, attitudes and behaviors are learned and internalized based on parental racial socialization. This finding supports the tenets of the primary socialization theory. Notably, centrality, which is thought to be directly influenced by racial socialization, is a prominent mechanism of primary socialization theory. Unfortunately, because the role of centrality could not be adequately examined in the current study, this aspect of the primary socialization model could not be explored. Additionally, primary socialization posits that cultural factors are interrelated and should work in tandem to promote a model of
adaptation in response to aversive racial socialization in African American adolescents. In sum, commensurate with the primary socialization model, cultural typologies or Africultural asset patterns integrating parental racial socialization did emerge in the current study; however, profiles did not serve as buffers for adolescents exposed to racial discrimination, failing to provide a model of adaptation for Africultural assets. Thus, the current study provides partial support for the primary socialization model in regards to adaptive cultural dynamics amongst adolescents.

Two of the hypothesized cultural typologies, characterized by relatively low and high endorsement of racial socialization, racial identity, and cultural coping practices, did emerge. The emergence of these contrasting profiles suggests somewhat of an “all-or-nothing” adoption of cultural factors amongst African American adolescents in the current study. Specifically, either youth are (1) taught a great deal about pride in African American culture, have high regard for their culture, and are choosing to engage in cultural coping strategies, while also reporting being bombarded with messages of racial inequality without being provided a balance of information about the role of racism in society as well as the progress that has occurred in regards to racism (Pro-Africultural) or (2) taught relatively little about African American culture, receive relatively few messages about pride, and fail to engage in cultural coping strategies when compared to their counterparts (Non-Oriented). In theory, the Pro-Africultural group has an increased likelihood of hyper-suspicion and hypersensitivity to daily encounters and a tendency to view these encounters as racist attacks. Like the Pro-Africultural coping profile, the Non-oriented group is also thought to lack balance in their exposure to African American culture. It is presumed that individuals in this
typology are unaware of society’s role or their role within the African American culture. Thus, these individuals are expected to be ill prepared in the face of microaggressions, especially considering their unlikelihood to engage in cultural coping in response to such experiences. Furthermore, the emergence of two polarized Africultural assets and a partially integrated profile may speak to the difficult task of African American adolescents and their families in urban communities to adequately integrate varying levels of cultural factors (e.g. varying socialization messages and racial identity) in the presence of aversive racial discrimination. This study did reveal a third Africultural asset pattern that was not clearly defined as Integrated, however was relatively more integrated than the Pro-Africultural and Non-Oriented profiles that emerged in that while individuals in this profile engaged in high levels of cultural coping, they reported moderate levels of racial pride messages, self-worth messages, and private regard, and relatively low endorsement of racial barrier messages. Because of the relatively low endorsement of barrier messages as compared to their endorsement of pride and worth messages, it seems that this profile is moving towards a more balanced adoption of cultural indices. Notably, the Partial Integration profile is the smallest profile to emerge; calling into question its consistency. Perhaps with a larger sample size, this profile would be better developed and reflect a truly Integrated adoption of cultural assets.

Africultural asset profile did not attenuate the relationships between aversive discrimination experiences and internalizing and externalizing symptoms as predicted in the current study. While as separate constructs, racial identity, racial socialization, and cultural coping have been found to promote psychological well-being in African American
adolescents and young adults exposed to prejudice and racial discrimination (Constantine et al., 2002; Neblett et al., 2008; Ashburn-Nardo, Monteith, Arthur, & Bain, 2007; Sellers et al., 1998; Sellers et al., 2003), when varying levels of these cultural factors were teased apart to create profiles, differences in endorsement level failed to mitigate the problematic relationship between aversive racial discrimination and psychological outcome. One possible explanation for this may be methodological. The sample size for the current study may have limited the strength of constructs given the number of constructs and outcomes examined. A larger sample size for the number of factors examined in the current study may result in increased heterogeneity among the cultural typologies that emerged, as well as more robust reports of racial discrimination and outcomes. Another explanation may be that the cultural assets comprising Africultural assets in the current study may have diverse effects on the relationships between racial discrimination and psychological outcomes. Specifically, it may be the case that certain cultural factors (e.g. cultural coping) are best understood as moderators for racial discrimination and outcomes, while other factors, such as racial identity are best understood as a mediator (Branscombe, Schmitt, & Harvey, 1999). Because the current study examined the cultural constructs in tandem as moderators, potential mediating relationships were overlooked. Additionally, the current study’s inability to find Africultural asset profile as a buffer may be due to the roles of the cultural indices examined at the adolescent stage of development. Specifically, research has revealed a great deal of variance in regards to level of ethnic identity development amongst African American adolescents (Seaton, Scottham, & Sellers, 2006). It may be the case that for the adolescents in the current study, their racial identities are not fully developed. The low internal consistency
finding for two of the three racial identity factors in the current study may support this claim. Underdeveloped or not yet developed racial identity could arguably weaken the effect of Africultural asset profile membership’s role as a buffering agent for racial discrimination and psychological symptoms. Along this thread, the role of centrality as a buffer for racial discrimination’s affects on psychological well-being has garnered significant empirical support (Ashburn-Nardo, Monteith, Arthur, & Bain, 2007; Sellers et al., 1998; Sellers et al., 2003). Failing to maintain centrality as one of the cultural indices comprising Africultural assets may have weakened the effect buffering effect of Africultural assets. Notably, while Africultural assets did not serve as a buffer for African American adolescents exposed to microaggressions in the current study, Africultural assets did have direct affects on depressive symptoms. Specifically, Pro-Africultural assets was directly linked to lower levels of depressive symptoms, while Non-Oriented orientation was associated with increased depressive symptomatology. Additionally, a correlational analysis revealed a stronger positive relationship between racial discrimination and internalizing symptoms for those individuals comprising the Non-Oriented asset profile as compared to those identified as Pro-Africultural or Partially Integrated culturally. Thus, one can infer that those adolescents comprising the Pro Africultural and Partial Integration Africultural profiles, fare better in regards to the role racial discrimination has on their psychological well-being. Moreover, in regards to gender, females appear to experience increased anxiety symptoms as they experience aversive racial discrimination regardless of Africultural asset profile membership. Their male counterparts however appear to experience the detrimental relationship between racial discrimination experiences and psychological outcome (i.e. depressive symptoms and
anger) when they are Non Oriented Africulturally. This further illustrates the detrimental relationship between racial discrimination and psychological adjustment generally, as well as the disservice done to adolescents when they are not oriented Africulturally to combat this general and omnipresent relationship.

While the current study is unique in its examination of cultural typologies formed from several cultural constructs, researchers who have examined typologies based on single cultural constructs (e.g. racial socialization) have found associations with depressive symptoms (Neblett et al., 2008). Neblett and colleagues (2008) examined typologies among African American adolescents based on aspects of parental racial socialization. Their research revealed that high levels of racial socialization message transmission from African American parents to their children made adolescents less likely to experience depressive symptoms. Additionally, adolescents in their low frequency racial socialization group experienced relatively more depressive symptoms. Further, high levels of racial socialization in the area of pride has been found to be associated with increased self-esteem and decreased lethargy among African American boys (David and Stevenson, 1997), while high endorsement of racial socialization messages was related to decreased depressive symptoms of sadness and helplessness and increased self-esteem among African American girls (Stevenson, Reed, Bodison, & Bishops, 1997).

While the relationships that emerged among Pro-Africultural assets and Non-oriented Africultural assets cannot be discussed in the context of racial discrimination or causality, this finding conveys that adolescents characterized as having received high dosages of messages of pride in themselves and their race, as being prepared for racism and obstacles
related to race, and as having internalized positive beliefs about the African American race, while relying often on the utilization of cultural coping strategies are better equipped to handle insults that may otherwise contribute to depressive symptomatology. Interestingly, it appears that these insults may not have to be specific to racial discrimination experiences. In turn, adolescents who have not received positive messages about their culture, have not internalized positive attitudes towards the African American culture, and who utilize cultural coping strategies to a relatively lesser degree, may experience a greater impact in response to insults to their esteem and worth to a greater degree. Additionally, because these individuals employ cultural coping strategies at relatively lower rates, they are likely ill-equipped to appropriately combat these insults.

Commensurate with the primary socialization theory, aspects of the Africultural assets that emerged rely heavily on quality relationships with significant others (e.g. caregivers, Oetting & Donnermeyer, 1998). Specifically, to receive racial socialization messages, an adolescent would have to have engaged in a relationship with an invested caregiver. Also, communalistic coping requires an adequate social support network; as well, cultural coping strategies are likely modeled by significant figures in the adolescent’s life. Thus, perhaps it is the quality of the interpersonal relationships that foster cultural constructs which affect differences in rates of depression for African American adolescents (LaGreca & Moore-Harrison, 2005).

Thus, similar to previous research we can conclude that instilled pride in the African American culture, and the knowledge and utilization of cultural coping practices in conjunction with preparation for aversive discrimination experiences is more favorable than
lack of preparation in the aforementioned areas when considering depressive symptoms for African American adolescents.

**Implications for Future Research**

The current study suggests that aversive racial discrimination experiences pose challenges for African American adolescents in regards to internalizing and externalizing symptoms. Prevention and intervention programs aimed at lowering rates of depression, anxiety and anger amongst African American adolescents would benefit from acknowledging and processing the role of racial microaggressions. Research should continue to identify cultural factors that ameliorate the deleterious effects of aversive racial discrimination on psychological well-being for these youth. Additionally, research will benefit from continuing to explore the protective roles of Africultural assets based on cultural factors that have been identified as adaptive, as well as factors that have yet to be explored (e.g. classification and acknowledgement of subcultures within the African American culture, assimilation to mainstream culture, etc.). Future research should continue to build upon research in this realm by improving assessment constructs such as life satisfaction and racial identity constructs of centrality and public regard among African American adolescents in urban communities. Another consideration for future research is the exploration of the role(s) of intra-group stigmatization based on skin tone on psychological well-being amongst African American adolescents (Harvey, LaBeach, Prigden, & Gocial, 2005). Addressing issues of construct conceptualization among African American adolescents in urban communities, as well as the utilization of multi-method assessment practices, will undoubtedly enhance this realm of research.
Limitations and Strengths

The current study is not without limitations. One limitation of the current study was the sole reliance of adolescent’s self-report on all surveys. Relying solely on self-report responses can result in shared method variance, and an inflation of the association between variables. While it can be difficult for others to accurately report on an individual’s experience of aversive racial discrimination, racial identity, and cultural coping responses, future studies may consider a multimethod approach to data collection. For example, researchers examining parent and adolescent reports of racial socialization responses to stress found consistency in reports, strengthening the validity of their findings (Connor-Smith, Compas, Wadsworth, Thomsen, & Saltzman, 2000). Another limitation involves the cross-sectional nature of the current study, which limits the ability to infer causal relationships between experiences of racial microaggressions, depression, anxiety, anger, and life satisfaction. Another limitation is that neither coping nor outcomes variables were assessed in the context of an aversive racial discrimination event. Thus, reports of depression, anxiety, anger, and life satisfaction could be related to factors extraneous to aversive racial discrimination experiences.

Despite its limitations, the current study has several strengths. First, the current study assessed both the frequency and appraisal of aversive racial discrimination experiences among African American adolescents. This contributes to the paucity of research assessing this form of racial discrimination in this population (Sellers et al., 2006). Secondly, the current study extends previous research by examining the roles of multiple cultural factors in an adolescent sample. Previous research has highlighted the importance of utilizing a
cultural-asset framework, utilizing multiple cultural factors, in developmental research with African American youth (Gaylord-Harden, Burrow, and Cunningham, 2012). Our understanding of the role of racial identity in African American adolescents remains unclear and the current study sheds some light on this issue. Additionally, the examination of cultural coping as opposed to mainstream forms of coping among African American adolescents may be more appropriate for investigating coping strategies among African American adolescents.

The findings from the current study illustrate that aversive racial discrimination is prevalent and has detrimental effects on internalizing and externalizing outcomes for African American adolescents. Additionally, the current study is the only to examine a range of cultural constructs as moderators. In doing so, the current study enhances previous literature by not only highlighting the importance of a range of cultural constructs in regards to developmental research with minority individuals, it introduces the method of examining multiple cultural factors by using cluster analysis.

Summary and Conclusions

In sum, African American adolescents residing in urban communities in multiple regions of the United States are exposed to aversive racial discrimination. Examining relationships between aversive racial discrimination, internalizing symptoms, externalizing symptoms, and life satisfaction provides a comprehensive picture of risk for psychopathology in African American adolescents. Like overt and less frequent experiences of racial discrimination, microaggressions have damaging effects on psychological and perhaps physical outcomes for African American adolescents. While overall life satisfaction
was not affected by experiences of aversive racial discrimination, a more accurate and culturally appropriate means of assessing life satisfaction may render different results. This may reflect the manifestation of adaptation amongst African American adolescents in need of further exploration. While cultural Pro-Africultural, Non-Oriented, and Partial Integration profiles did not mitigate the relationship between aversive racial discrimination, depression, anxiety, and anger, this does not negate the potential benefits of positive racial identity, adaptive racial socialization, and the utilization of culturally relevant coping strategies. Further, Pro-Africultural identification appears more adaptive with regard to lower levels of depressive symptoms than lack of cultural assets.

In sum, at a time when the first African American President prepares for re-election in the wake of such tragedies as the loss of Trayvon Martin, the difficult mission of African American parents of preparing their teens for the reality of racial discrimination while instilling pride and other adaptive cultural values has never been more evident. Thus, the roles of these cultural concepts should continue to be explored as adaptive factors among African American adolescents, as this realm of research can be incredibly impactful on the African American community.
APPENDIX A

TABLES
Table 1. Descriptive Statistics and Intercorrelations Among Study Variables.

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<td>2.89</td>
<td>2.63</td>
<td>2.44</td>
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<tr>
<td>SD</td>
<td>.94</td>
<td>.23</td>
<td>.17</td>
<td>1.28</td>
<td>.61</td>
<td>.64</td>
<td>.53</td>
<td>.39</td>
<td>.66</td>
<td>.56</td>
<td>.76</td>
<td>.61</td>
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</tbody>
</table>

p<.05, **p<.01.
Table 2. Summary of Simple Regression Analyses for Racial Discrimination Predicting Internalizing Symptoms, Externalizing Symptoms, and Life Satisfaction. 
(N = 150)

<table>
<thead>
<tr>
<th>Location</th>
<th>Depression</th>
<th>Anxiety</th>
<th>Anger</th>
<th>Life Satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>SE B</td>
<td>β</td>
<td>B</td>
</tr>
<tr>
<td>Location</td>
<td>.056</td>
<td>.038</td>
<td>.122</td>
<td>-.063</td>
</tr>
<tr>
<td>Gender</td>
<td>.041</td>
<td>.037</td>
<td>.089</td>
<td>.077</td>
</tr>
<tr>
<td>Grade</td>
<td>-.025</td>
<td>.017</td>
<td>-.126</td>
<td>-.180</td>
</tr>
<tr>
<td>Racial Discrimination</td>
<td>.066</td>
<td>.019</td>
<td>.273**</td>
<td>.056</td>
</tr>
</tbody>
</table>

$R^2$  

<table>
<thead>
<tr>
<th>$E$</th>
</tr>
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<tbody>
<tr>
<td>3.84</td>
</tr>
</tbody>
</table>

10.04
| 2.31 |

| 1.07 |

*p<.05. **p<.01.
Table 3. Cross-Validation of Adolescent Agricultural Assets Clusters.

<table>
<thead>
<tr>
<th>Cluster from Subsample B</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cluster from Subsample B</td>
<td>19</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>3</td>
<td>2</td>
<td></td>
<td>33</td>
</tr>
</tbody>
</table>

Note. A x B refers to clusters derived from subsample B using cluster centers from subsample A. $\chi^2(4, N=69) = 91.64, p < .001$, Cohen’s Kappa = .81.
Table 4. Descriptive Statistics Among Study Variables by Cultural Asset Profile.

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Std. Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ProAgricultural</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Racial Discrimination</td>
<td>1.75</td>
<td>.970</td>
</tr>
<tr>
<td>Racial socialization</td>
<td>1.81</td>
<td>.187</td>
</tr>
<tr>
<td>Racial identity (private regard)</td>
<td>4.47</td>
<td>.505</td>
</tr>
<tr>
<td>Spirituality</td>
<td>2.80</td>
<td>.634</td>
</tr>
<tr>
<td>Communalism</td>
<td>3.13</td>
<td>.431</td>
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<tr>
<td>Maintaining Harmony</td>
<td>3.00</td>
<td>.498</td>
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<tr>
<td>Emotional Debriefing</td>
<td>2.49</td>
<td>.585</td>
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<tr>
<td>Depressive Symptoms</td>
<td>.325</td>
<td>.231</td>
</tr>
<tr>
<td>Anxiety Symptoms</td>
<td>48.18</td>
<td>6.27</td>
</tr>
<tr>
<td>Anger</td>
<td>1.49</td>
<td>.646</td>
</tr>
<tr>
<td>Life Satisfaction</td>
<td>24.47</td>
<td>6.66</td>
</tr>
<tr>
<td><strong>Partial Integration</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Racial Discrimination</td>
<td>1.84</td>
<td>1.04</td>
</tr>
<tr>
<td>Racial socialization</td>
<td>1.24</td>
<td>.288</td>
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<tr>
<td>Racial identity (private regard)</td>
<td>4.45</td>
<td>.571</td>
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<tr>
<td>Spirituality</td>
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<td>.624</td>
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<td>.504</td>
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<tr>
<td>Depressive Symptoms</td>
<td>.404</td>
<td>.217</td>
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<tr>
<td>Anxiety Symptoms</td>
<td>49.52</td>
<td>6.76</td>
</tr>
<tr>
<td>Anger</td>
<td>1.57</td>
<td>.617</td>
</tr>
<tr>
<td>Life Satisfaction</td>
<td>24.24</td>
<td>5.94</td>
</tr>
<tr>
<td><strong>Non-Oriented</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Racial Discrimination</td>
<td>1.50</td>
<td>.754</td>
</tr>
<tr>
<td>Racial socialization</td>
<td>1.32</td>
<td>.434</td>
</tr>
<tr>
<td>Racial identity (private regard)</td>
<td>4.22</td>
<td>.504</td>
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<tr>
<td>Spirituality</td>
<td>1.86</td>
<td>.591</td>
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<td>Communalism</td>
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<td>.610</td>
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<tr>
<td>Anxiety Symptoms</td>
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<td>Anger</td>
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<td>.536</td>
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<tr>
<td>Life Satisfaction</td>
<td>22.25</td>
<td>6.17</td>
</tr>
</tbody>
</table>
APPENDIX B

FIGURES
Figure 1. Moderational model for associations between aversive racial discrimination and psychological outcomes as moderated by Africultural assets.

**Moderators**
- Pro-Africultural Profile
- Integrated Profile
- Non-Oriented Profile

**Stressor**
- Aversive Racial Discrimination

**Outcomes**
- Depression
- Anxiety
- Anger
- Life Satisfaction
Figure 2. Adolescent’s cultural strategies means by Africultural assets type.
APPENDIX C

YOUTH MEASURES
THE RACISM AND LIFE EXPERIENCE SCALES 
(RaLES)

DAILY LIFE EXPERIENCES (RACIAL HASSLES)

DAILY LIFE EXPERIENCE (RACIAL HASSLES). These questions ask you to think about experiences that some people have as they go about their daily lives. Please first determine how often you have each experience because of your race or racism. Use the scale in the first column and write the appropriate number on the first blank line. Next, use the scale in the second column to indicate how much it bothers you when the experience happens. Write the appropriate number on the blank line.

<table>
<thead>
<tr>
<th>How often because of race?</th>
<th>How much does it bother you?</th>
</tr>
</thead>
<tbody>
<tr>
<td>0=never</td>
<td>0=has never happened to me</td>
</tr>
<tr>
<td>1=less than once a year</td>
<td>1=doesn't bother me at all</td>
</tr>
<tr>
<td>2=a few times a year</td>
<td>2=bothers me a little</td>
</tr>
<tr>
<td>3=about once a month</td>
<td>3=bothers me somewhat</td>
</tr>
<tr>
<td>4=a few times a month</td>
<td>4=bothers me a lot</td>
</tr>
<tr>
<td>5=once a week or more</td>
<td>5=bothers me extremely</td>
</tr>
</tbody>
</table>

1) Being ignored, overlooked, or not given service 
   (in a restaurant, store, etc.)

2) Being treated rudely or disrespectfully

3) Being accused of something or treated suspiciously

4) Others reacting to you as if they were 
   afraid or intimidated

5) Being observed or followed while in public places
6) Being treated as if you were "stupid", being "talked down to"

7) Your ideas or opinions being minimized, ignored, or devalued

8) Overhearing or being told an offensive joke or comment

9) Being insulted, called a name, or harassed

10) Others expecting your work to be inferior

11) Not being taken seriously

12) Being left out of conversations or activities

13) Being treated in an "overly" friendly or superficial way

14) Being avoided, others moving away from you physically

15) Being mistaken for someone who serves others (i.e., janitor, bellboy, maid)

16) Being stared at by strangers

17) Being laughed at, made fun of, or taunted

18) Being mistaken for someone else of your same race (who may not look like you at all)

19) Being asked to speak for or represent your entire racial/ethnic group (e.g., “What do _____ people think”?)

20) Being considered fascinating or exotic by others
Racial Socialization Questionnaire

For the teen version, the stem of each question reads: “How often has your parent(s)…” The parent version reads, “How often have you told the target child that…” Each question has a response scale ranging from 0 (Never), 1 (Once or Twice), 2 (More than Twice).

Racial Pride Messages
1. Been involved in activities that focus on things important to Black people
2. Talked with you about Black History
3. Told you that you should be proud to be Black
4. Told you never to be ashamed of your black features (hair texture, lip shape, skin color, etc.)

Racial Barrier Messages
1. Told you that some people think they are better than you because of their race
2. Told you that Blacks have to work twice as hard as Whites to get ahead
3. Told you that some people may dislike you because the color of your skin
4. Told you that some people tried to keep Black people from being successful

Self-Worth Messages
1. Told you that you are somebody special, no matter what anybody says
2. Told you to be proud of who you are
3. Told you that skin color does not define who you are
4. Told you that you can be whatever you want to be
MIBI - T

What is your racial/ethnic self-identification? ____________________________
Please use this self-identification in the blanks below to respond to the following statements.

1 = Really Disagree
2 = Kind of Disagree
3 = Neutral
4 = Kind of Agree
5 = Really Agree

_____1. I feel close to other Black people.
_____2. I have a strong sense of belonging to other Black people.
_____3. If I were to describe myself to someone, one of the first things that I would say is that I'm Black.
_____4. I am happy that I am Black.
_____5. I am proud to be Black.
_____6. I feel good about Black people.
_____7. Most people think that Blacks are as smart as people of other races.
_____8. People think that Blacks are as good as people from other races.
_____9. People from other races think that Blacks have made important contributions.
AFRICULTURAL COPING SYSTEMS INVENTORY-YOUTH VERSION
(Gaylord-Harden and Utsey, 2007)

Instructions

The statements below represent some ways people cope with problems or stressful situations in their daily lives. Before you respond to the statements below, you will need to think of something stressful that happened to you within the past week or so. A “stressful situation” is any problem or situation that you find troubling or causes you to worry. These problems may be related to your family, friends, school, relationships, or other things you consider important in your life. To help us understand the stressful situation you are thinking of when responding to the statements in this survey, please write one or two sentences that describes what happened in the situation you are thinking of.

Use this space to describe your stressful situation:

DID YOU REMEMBER TO DESCRIBE YOUR STRESSFUL SITUATION?

A. Circle the number that shows how stressful this problem was for you or how much you worried about it.

   1  2  3  4

   Not at all  A little  Somewhat  Very

B. Circle the number that shows how much control you think you have over this problem.

   1  2  3  4

   Not at all  A little  Somewhat  Very

Think of the stressful situation that has been a problem for you. For each item on the list below, circle one number from 1 (not at all) to 4 (a lot) that shows how much you do these things when you have problems like these. Please let us know about everything you do, think, and feel, even if it doesn’t make things better.
1. I try to make other people laugh so that I feel better about my problems. 1 2 3 4
2. When things don’t go my way, I just accept the way things are. 1 2 3 4
3. I just accept that I cannot change what has happened. 1 2 3 4
4. I tell myself that I’ve got to be patient and believe in myself. 1 2 3 4
5. I try to make things better by being nice to others. 1 2 3 4
6. I try to make things better by trying to see things from someone else’s point of view. 1 2 3 4
7. I try to make things better by being respectful to other people. 1 2 3 4
8. When I have a problem with someone, I try to talk to them about it and work it out. 1 2 3 4
9. I listen to music or the radio. 1 2 3 4
10. I listen to my favorite song over and over. 1 2 3 4
11. I play a contact sport (like basketball or football) to let my feelings out. 1 2 3 4
12. I work on my athletic moves to take my mind off my problems. 1 2 3 4
13. When I have a problem, I try to relax or do something relaxing. 1 2 3 4
   Check all that you do:
   □ Lying down and putting something over my head.
   □ Going to sleep
   □ Soaking in the bathtub
   □ Taking deep breaths
   □ Other _______________________
14. I dance or make up dance routines to take my mind off the problems. 1 2 3 4
15. I dance with a group of friends. 1 2 3 4
16. I try to make things better by doing right by people. 1 2 3 4
17. I remember what someone else (like mom, dad, grandmother, friend) told me to do about the problem.

18. When I have a problem, I write.
   **Check all that you do:**
   - Poetry
   - Songs
   - Raps/rhymes
   - Short stories
   - Other ________________

19. When I have a problem, I write in a notebook, diary or journal.

20. When I have a problem, I do something artistic.
   **Check all that you do:**
   - Drawing, painting, sketching
   - Singing
   - Playing an instrument (drum, piano)
   - Other ________________

21. When I have a problem, I sing.

22. I sing my favorite song over and over again.

23. I make sure I am around other people and am not alone.

24. I spend time around my friends.

25. I spend time around my family.

26. I do things to look my best.
   **Check all that you do:**
   - Get my nails done
   - Get my hair done or hair cut
   - Put on my favorite clothes
   - Put on my favorite jewelry
   - Other ________________________

27. I talk about the problem to someone in my family.
   **Check all that you talk to:**
   - My Mother/Father
   - My Grandmother/Grandfather
   - My Brother/Sister
   - My Auntie/Uncle
☐ My Cousin(s)
☐ My Godmother/Godfather
☐ My Godbrother/Godsister
☐ Other ______________________

28. I talk about the problem to someone my age outside of my family.  1  2  3  4

   Check all that you talk to:
   ☐ My Friend
   ☐ My Girlfriend/Boyfriend
   ☐ My “play” cousin, brother, or sister
   ☐ Other ______________________

29. I talk about the problem to an adult outside of my family.  1  2  3  4

   Check all that you talk to:
   ☐ My pastor
   ☐ A teacher
   ☐ A doctor
   ☐ My friend’s mother or father
   ☐ Other ______________________

30. I talk about the problem with someone I can trust.  1  2  3  4

31. I talk about the problem with someone who understands what I am going through.  1  2  3  4

32. I call someone to talk about my problem.  1  2  3  4

33. I listen to other people’s point of view.  1  2  3  4

34. I pray or talk to God.  1  2  3  4

35. I go to church or mosque to feel better.  1  2  3  4

36. I ask someone to pray for me.  1  2  3  4

37. I read my Bible or Qur’an.  1  2  3  4

38. I put it in God’s hands.  1  2  3  4

39. I write down my prayers or write a note to God.  1  2  3  4

40. I ask God for strength.  1  2  3  4
41. I think about somebody I respect and how he/she might handle the problem.  

42. I repeat to myself over and over that everything is okay.  

43. I first try to deal with it myself, then if I can’t deal with it, I get help from someone else.  

44. I try to focus on the present (here-and-now) rather than what might happen in the future.  

45. I think about what a relative who has passed away would tell me to do.  

46. I kept something from someone close to me who died, and I use it when I have a problem.  

47. I go to a quiet, special, or sacred place.  

48. Someone in my family has special powers, and they tell me what to do about my problem.  

49. Someone in my family has special powers, and they make things better.  

50. I tried to get as many people as I could to help me.  

51. I helped my family with things around the house.  

52. I think about a story that someone in my family told me.
The Satisfaction with Life Scale

DIRECTIONS: Below are five statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by placing the appropriate number in the line preceding that item. Please be open and honest in your responding.

1 = Strongly Disagree
2 = Disagree
3 = Slightly Disagree
4 = Neither Agree or Disagree
5 = Slightly Agree
6 = Agree
7 = Strongly Agree

_____1. In most ways my life is close to my ideal.
_____2. The conditions of my life are excellent.
_____3. I am satisfied with life.
_____4. So far I have gotten the important things I want in life.
_____5. If I could live my life over, I would change almost nothing.
Kiddos sometimes have different feelings and ideas.

This form lists the feelings and ideas in groups. From each group of three sentences, pick one sentence that describes you *best* for the past two weeks. After you pick a sentence from the first group, go on to the next group.

There is no right or wrong answer. Just pick the sentence that best describes the way you have been recently. Put an X next to your answer. Put the X in the box next to the sentence that you pick.

Here is an example of how this form works. Try it. Put an X next to the sentence that describes you *best*.

**Example:**
- I read books all the time.
- I read books once in a while.
- I never read books.

---

**Remember, pick out the sentences that describe you best in the PAST TWO WEEKS.**

**Item 1:**
- I am sad once in a while.
- I am sad many times.
- I am sad all the time.

**Item 2:**
- Nothing will ever work out for me.
- I am not sure if things will work out for me.
- Things will work out for me O.K.

**Item 3:**
- I do most things O.K.
- I do many things wrong.
- I do everything wrong.

**Item 4:**
- I have fun in many things.
- I have fun in some things.
- Nothing is fun at all.

**Item 5:**
- I am bad all the time.
- I am bad many times.
- I am bad once in a while.

---

**Item 6:**
- I think about bad things happening to me once in a while.
- I worry that bad things will happen to me.
- I am sure that terrible things will happen to me.

**Item 7:**
- I hate myself.
- I do not like myself.
- I like myself.

**Item 8:**
- All bad things are my fault.
- Many bad things are my fault.
- Bad things are not usually my fault.

**Item 9:**
- (Blank)

---

*Turn over and fill out the other side.*
Remember, pick out the sentences that describe you best in the past two weeks.

<table>
<thead>
<tr>
<th>Item</th>
<th>Sentence</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>I feel like crying every day.</td>
</tr>
<tr>
<td></td>
<td>I feel like crying many days.</td>
</tr>
<tr>
<td></td>
<td>I feel like crying once in a while.</td>
</tr>
<tr>
<td>11</td>
<td>Things bother me all the time.</td>
</tr>
<tr>
<td></td>
<td>Things bother me many times.</td>
</tr>
<tr>
<td></td>
<td>Things bother me once in a while.</td>
</tr>
<tr>
<td>12</td>
<td>I like being with people.</td>
</tr>
<tr>
<td></td>
<td>I do not like being with people many times.</td>
</tr>
<tr>
<td></td>
<td>I do not want to be with people at all.</td>
</tr>
<tr>
<td>13</td>
<td>I cannot make up my mind about things.</td>
</tr>
<tr>
<td></td>
<td>It is hard to make up my mind about things.</td>
</tr>
<tr>
<td></td>
<td>I make up my mind about things easily.</td>
</tr>
<tr>
<td>14</td>
<td>I look O.K.</td>
</tr>
<tr>
<td></td>
<td>There are some bad things about my looks.</td>
</tr>
<tr>
<td></td>
<td>I look ugly.</td>
</tr>
<tr>
<td>15</td>
<td>I have to push myself all the time to do my schoolwork.</td>
</tr>
<tr>
<td></td>
<td>I have to push myself many times to do my schoolwork.</td>
</tr>
<tr>
<td></td>
<td>Doing schoolwork is not a big problem.</td>
</tr>
<tr>
<td>16</td>
<td>I have trouble sleeping every night.</td>
</tr>
<tr>
<td></td>
<td>I have trouble sleeping many nights.</td>
</tr>
<tr>
<td></td>
<td>I sleep pretty well.</td>
</tr>
<tr>
<td>17</td>
<td>I am tired once in a while.</td>
</tr>
<tr>
<td></td>
<td>I am tired many days.</td>
</tr>
<tr>
<td></td>
<td>I am tired all the time.</td>
</tr>
<tr>
<td>18</td>
<td>Most days I do not feel like eating.</td>
</tr>
<tr>
<td></td>
<td>Many days I do not feel like eating.</td>
</tr>
<tr>
<td></td>
<td>I eat pretty well.</td>
</tr>
<tr>
<td>19</td>
<td>I do not worry about aches and pains.</td>
</tr>
<tr>
<td></td>
<td>I worry about aches and pains many times.</td>
</tr>
<tr>
<td></td>
<td>I worry about aches and pains all the time.</td>
</tr>
<tr>
<td>20</td>
<td>I do not feel alone.</td>
</tr>
<tr>
<td></td>
<td>I feel alone many times.</td>
</tr>
<tr>
<td></td>
<td>I feel alone all the time.</td>
</tr>
<tr>
<td>21</td>
<td>I never have fun at school.</td>
</tr>
<tr>
<td></td>
<td>I have fun at school only once in a while.</td>
</tr>
<tr>
<td></td>
<td>I have fun at school many times.</td>
</tr>
<tr>
<td>22</td>
<td>I have plenty of friends.</td>
</tr>
<tr>
<td></td>
<td>I have some friends but I wish I had more.</td>
</tr>
<tr>
<td></td>
<td>I do not have any friends.</td>
</tr>
<tr>
<td>23</td>
<td>My schoolwork is alright.</td>
</tr>
<tr>
<td></td>
<td>My schoolwork is not as good as before.</td>
</tr>
<tr>
<td></td>
<td>I do very badly in subjects I used to be good in.</td>
</tr>
<tr>
<td>24</td>
<td>I can never be as good as other kids.</td>
</tr>
<tr>
<td></td>
<td>I can be as good as other kids if I want to.</td>
</tr>
<tr>
<td></td>
<td>I am just as good as other kids.</td>
</tr>
<tr>
<td>25</td>
<td>Nobody really loves me.</td>
</tr>
<tr>
<td></td>
<td>I am not sure if anybody loves me.</td>
</tr>
<tr>
<td></td>
<td>I am sure that somebody loves me.</td>
</tr>
<tr>
<td>26</td>
<td>I usually do what I am told.</td>
</tr>
<tr>
<td></td>
<td>I do not do what I am told most times.</td>
</tr>
<tr>
<td></td>
<td>I never do what I am told.</td>
</tr>
<tr>
<td>27</td>
<td>I get along with people.</td>
</tr>
<tr>
<td></td>
<td>I get into fights many times.</td>
</tr>
<tr>
<td></td>
<td>I get into fights all the time.</td>
</tr>
</tbody>
</table>
"WHAT I THINK AND FEEL" (RCMAS)

Cecil Reynolds, Ph.D., and Bert D. Richmond, Ed.D.

Published by
WESTERN PSYCHOLOGICAL SERVICES
13331 Wilshire Boulevard
Los Angeles, CA 90025-1209
Evaluation and Instruction

Name: _______________________

Age: ______  Grade: ______

Sex (circle one):  Girl  Boy

Today's Date: _______________________

School: _______________________

Teacher's Name (optional): _______________________

DIRECTIONS

On the back of this form, there are some sentences that tell how some people think and feel about themselves. Read each sentence carefully. Circle the word Yes if you think the sentence is true about you. Circle the word No if you think it is not true about you. Circle an answer for every sentence, even if it is hard to choose one that fits you. Do not circle both Yes and No for the same sentence. If you want to change an answer, draw an X through your first answer and then circle your new choice.

There are no right or wrong answers. Only you can tell us how you think and feel about yourself. Remember, after you read each sentence, ask yourself, "Is it true about me?" If it is, circle Yes. If it is not, circle No.
Circle one answer for each sentence.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>1. I have trouble making up my mind.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>2. I get nervous when things do not go the right way for me.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>3. Others seem to do things easier than I can.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>4. I like everyone I know.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>5. Often I have trouble getting my breath.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>6. I worry a lot of the time.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>7. I am afraid of a lot of things.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>8. I am always kind.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>9. I get mad easily.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>10. I worry about what my parents will say to me.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>11. I feel that others do not like the way I do things.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>12. I always have good manners.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>13. It is hard for me to get to sleep at night.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>14. I worry about what other people think about me.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>15. I feel alone even when there are people with me.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>16. I am always good.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>17. Often I feel sick in my stomach.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>18. My feelings get hurt easily.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>19. My hands feel sweaty.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>20. I am always nice to everyone.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>21. I am tired a lot.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>22. I worry about what is going to happen.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>23. Other people are happier than I.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>24. I tell the truth every single time.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>25. I have bad dreams.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>26. My feelings get hurt easily when I am fussed at.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>27. I feel someone will tell me I do things the wrong way.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>28. I never get angry.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>29. I wake up scared some of the time.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>30. I worry when I go to bed at night.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>31. It is hard for me to keep my mind on my schoolwork.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>32. I never say things I shouldn’t.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>33. I wiggle in my seat a lot.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>34. I am nervous.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>35. A lot of people are against me.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>36. I never lie.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>37. I often worry about something bad happening to me.</td>
</tr>
</tbody>
</table>
Demographic Questionnaire

1. MALE       FEMALE

2. How old are you? __________

3a. Circle the category that best describes your race or ethnicity.
    Asian
    Black or African American
    African
    AfroCarribean (e.g., Jamaican)
    Hispanic or Latino
    Native Hawaiian or other Pacific Islander
    White
    Other ________________________________

3b. What country are your parents from? __________________

4. What grade are you in?
   Eighth (8th)   Ninth (9th)   Tenth (10th)   Eleventh (11th)   Twelfth (12th)

5. Circle all of the people that live at home with you
   My Mom
   My Dad
   My Sisters   How many? ____
   My Brothers  How many? ____
   My Grandmother
   My Grandfather
   My Aunt
   My Uncle
   My Cousins  How many? ____
   Others ____________________________

6. Circle the person you live with that takes care of you.
   My Mom and Dad
   My Mom only
   My Dad only
   My Grandmother and Grandfather
   My Grandmother only
   My Grandfather only
   My older sister
My older brother
My Aunt
My Uncle
My older cousin
Fall 2010

Dear Parent/Guardian:

You and your teen are invited to participate in a research project being conducted at ________ High School. We are interested in learning more about the types of stress adolescents experience and resilience factors that protect them from negative outcomes associated with stress. We are inviting all 9th through 12th grade students to meet with researchers from Loyola University Chicago to fill out a packet of surveys. Students who participate will meet the researchers in a room assigned by the principal to complete the survey packet. The packet of surveys will take approximately 1 hour to complete. Students will be told that they do not have to complete any parts of the surveys that they do not wish to complete and they will be assured that there will be no consequences should they decide not to participate.

Every student at ________ High School in ninth through twelfth grade is being asked to participate; no student is being singled out. Information will be collected confidentiality meaning that students will not put their names or any other identifying information on the surveys. All data will be encoded with ID numbers; all publications and reports to the school resulting from this research will appear as group analyses. A blank survey packet is available for your viewing in the main office of the school.

Dr. __________, the Principal of ________ High School has approved this project. 

Please read the information on the following pages carefully. This information fully describes the research project. If you would like for your teen to participate in our project,
please sign the last page and return the entire form to school with your teen or mail the
signed form in the self-addressed, stamped envelope. If you have any questions concerning
this project or if you would like to receive a summary of the findings of the project upon
completion, please call us at (773) 508-3005 and ask to speak to Jamila Cunningham.

We look forward to working with ________________ high school, and we greatly
appreciate your support.

Sincerely,

Jamila Cunningham, M. A.
Doctoral Candidate
Loyola University Chicago
APPENDIX E
PARENT CONSENT
WHY IS THIS STUDY BEING DONE?

Your teen is invited to participate in a research project, which is designed to identify culturally- and contextually-relevant resilience factors that protect adolescents from negative outcomes associated with stress. This project is being conducted by Jamila Cunningham, M.A. a graduate student at Loyola University Chicago working under Professor Noni Gaylord-Harden. I ask that you carefully read through the following information.

WHAT WILL MY TEEN AND I BE ASKED TO DO?

- Adolescents will be asked to complete the packet of surveys at school in a 1-hour session. Students in your teen’s classroom who are participating will meet with the researcher in a room at the school designated by the principal. All participants in your teen’s classroom will complete the surveys at the same time. At least two (2) research assistants from Loyola will be available to assist youth in completing the surveys.
- There will be no right or wrong answers to the surveys. This is not an evaluation.
- Students will be asked to answer questions about experiences of racial discrimination as well as cultural factors such as racial socialization, racial identity, and cultural coping that play a role in their discrimination experiences.

WHAT ARE THE POSSIBLE RISKS OR SIDE EFFECTS (BAD THINGS) OF THE STUDY?

Although risks are minimal, some of the coping and stress questions may bring up unpleasant thoughts or feelings. Please note that racial discrimination can be a sensitive
issue for some individuals. If you wish to view the surveys before your teen participates, please call Jamila Cunningham at the number below and she will arrange a time for a researcher to meet with you at your teen’s school to review the surveys. Your teen does not have to complete any parts of the surveys or answer any questions that he or she does not wish to complete. Students can write “skip” next to any item that they do not want to answer without penalty. A blank survey packet is available for your viewing in the main office of the school.

If your teen is having some uncomfortable thoughts and/or feelings, the research assistants are available to answer questions or address concerns. If we feel that additional attention is needed, we will accompany your teen to the school counselor’s office. If you have questions or concerns, you can call Jamila Cunningham at (773) 508-3005. There will be no penalty should your teen decide to withdraw or not to finish.

**ARE THERE BENEFITS (GOOD THINGS) TO TAKING PART IN THE STUDY?**

There is no direct benefit to participants. The research project is being conducted to help us learn more about the effects of racial discrimination on adolescents and possible protective factors that can promote resilience in this population. This information can then help in the design of intervention programs to support adolescents’ use of protective factors.

**WHAT WILL WE RECEIVE FOR PARTICIPATING?**

Each student who completes the surveys will receive a movie pass (good for one free movie) for completion of the survey packet.

**WHO WILL KNOW ABOUT WHAT WE DID IN THE STUDY OR HAVE ACCESS TO OUR PRIVATE INFORMATION?**
All of the information that will be collected is confidential—no student’s names or other identifying information will be requested or collected. Each survey packet will be assigned a code number. No student will ever be identified by name in any of the information recorded in writing. **No information about any teen’s answers will be made available to any teacher or administrator at _______ Elementary School.** Information presented at conferences or for publication will not identify any individuals who participated.

**ARE THERE SITUATIONS IN WHICH OUR INFORMATION MAY BE RELEASED?**

If it becomes apparent to us during the meetings that your teen is experiencing physical or sexual abuse, we are required by law to report such instances to Child Protective Services in the best interest of your teen. Also, if you or your teen provides information during the program that suggests he or she is in current danger to him/herself or other people, we are mandated by law to contact the appropriate agencies. If these potential situations arise, we will first talk with your teen privately. If additional attention is needed, we will then ask your teen to speak with a school counselor and accompany them to a counselor’s office. Parents/caregivers will then be contacted by phone and informed of the situation. Finally, the appropriate agency will be contacted or appropriate referral call will be made. All calls will be made on-site from _______ Elementary School. At all times, we will follow the Chicago Public Schools’ guidelines for such situations.

**WHAT ARE MY RIGHTS AND MY TEEN’S RIGHTS AS RESEARCH PARTICIPANTS?**

Your teen’s participation in the research project is voluntary. By signing this consent form, you agree to have you and your teen take part in this study. You may take your teen out of this study at any time without penalty by contacting Jamila Cunningham. If you have any questions at any time, please contact Jamila Cunningham at (773) 508-3005. Or if you would like to find out more about your rights as a research participant in this study, you can contact:
Compliance Manager  
Office of University Research Services  
Loyola University Chicago  
(773) 508-2686

PLEASE SIGN BELOW AND RETURN THE FORM TO SCHOOL WITH YOUR TEEN OR MAIL THE FORM IN THE SELF-ADDRESSED, STAMPED ENVELOPE

I agree to allow my teen to participate in this project. I have read and understand the above information. I have had an opportunity to ask questions and all of my questions have been answered.

___________________________________  __________________________________
Name of Teen (PLEASE PRINT)  Name of Teen’s Teacher

___________________________________  __________________________________
Parent/Guardian Signature  Date
RESILIENCE PROJECT
PARENT CONSENT FORM

WHY IS THIS STUDY BEING DONE?

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_____________________________________  __________________________________
Name of Teen (PLEASE PRINT)                        Name of Teen’s Teacher

_____________________________________  __________________________________
Parent/Guardian Signature                        Date
APPENDIX F

YOUTH ASSENT
RESILIENCE PROJECT
YOUTH ASSENT FORM

WHAT IS THIS STUDY ABOUT? You are being asked to be in a research project at _______ Elementary School. This project wants to identify culturally- and contextually-relevant resilience factors that protect adolescents from negative outcomes associated with stress. Jamila Cunningham, a graduate student at Loyola University Chicago is in charge of this project; Jamila Cunningham works under Noni Gaylord-Harden, a professor at Loyola University Chicago. You and your parent(s) decide whether or not you want to be in the study and you may stop participating at any time. We would like to explain how the project works below.

WHAT WILL I BE ASKED TO DO? If you participate in the project, you will meet with students from Loyola University. You will complete a packet of surveys, which will not have any right or wrong answers. You will complete the surveys with other students in your classroom in a room assigned by your principal. Students from Loyola University will be available to help you complete the surveys and answer any questions that you may have. It will take about 1 to 1½ hours to finish all of the surveys.

WHAT ARE THE RISKS (BAD THINGS) OF THE STUDY? Some of the questions about racial discrimination stress may cause you to have unhappy thoughts or feelings. Some of the questions ask about whether or not you have dealt with certain racial discrimination experiences which may be sensitive issues for you. If anything makes you feel worried, angry, or sad, we will talk to you alone to answer any questions. If needed, we will ask you to meet with one of the counselors at school. If you have questions, you can call Jamila Cunningham at (773) 508-3005. You do not have to answer anything that you do not want to answer. There will be no penalty if you decide that you do not want to finish the questions.
WHAT ARE THE BENEFITS (GOOD THINGS) TO TAKING PART IN THE STUDY? The research project is being done to help us learn more about how people your age handle racial discrimination. What we learn can help us create programs to help adolescents to use positive ways to deal with this specific concern.

WHAT WILL I GET FOR PARTICIPATING? Each student who participates will receive a movie pass (good for one free movie) for completion of the survey packet.

WHO WILL KNOW ABOUT WHAT I DID OR SAID IN THE STUDY? All of the information on your surveys will be private and confidential. In other words, we will NOT ask you to write your name on the survey. Each survey will be assigned a code number and only the researchers will have the lists of code numbers. You will never be mentioned by name in anything we write about the project. No information about your answers will be made available to any teacher or administrator at _________ Elementary School. If you tell us that you are in danger because someone else is hurting you, or that you are a danger because you are hurting yourself or other people, the law requires us to tell the right person or agency. First, we will talk with you alone. Next, we may ask you to talk to a counselor at school. We will go with you when you talk to the counselor. Next, if we feel that we need to call an agency, we will call your parents first, and then call the agency.

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_____________________________________
Print Your Name

____________________________
Sign Your Name (write in cursive)  Write today’s date
RESILIENCE PROJECT
YOUTH ASSENT FORM

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Office of University Research Services
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PLEASE SIGN BELOW AND RETURN THE ENTIRE FORM TO THE RESEARCHER

I agree to participate in this research project. I have read and understand how this study works and what I will be asked to do. I have had a chance to ask questions and all of my questions have been answered.

_____________________________________
Print Your Name

_____________________________________
_____________________________
Sign Your Name (write in cursive)   Write today’s date
REFERENCE LIST


VITA
Jamila Cunningham was born and raised in Chicago, Illinois. Prior to entering Loyola University Chicago’s Clinical Psychology doctoral program, Jamila graduated from Emory University in Atlanta, Georgia, earning a Bachelors of Arts in Psychology with Highest Distinction in 2006. At Emory, Jamila worked as a research assistant in the Clinical Psychophysiology laboratory, sparking and solidifying her interest in clinical psychology. Once at Loyola, Jamila honed her clinical and assessment skills at rigorous practicum sites such as Loyola University Chicago’s Wellness Center, John H. Stroger Jr. (formerly Cook County) hospital, and the University of Chicago’s Department of Pediatric Neuropsychology. As a result of Jamila’s extensive training experiences throughout her graduate career, she was invested in training at an internship site with a broad generalist focus. Jamila selected Emory University’s School of Medicine Internship training program to meet her training needs. While on internship, Jamila conducted individual, couples, and family therapy, psychological evaluations, and forensic assessments at the Fulton County Jail.

In addition to her clinical prowess, Jamila has engaged in thoughtful research endeavors. During her first year as a graduate student, Jamila ran her research laboratory while her advisor was on maternity leave, serving as project coordinator for ongoing research projects. Additionally, Jamila explored her own research interests through her thesis and dissertation projects.

Currently, Jamila resides in Washington, DC where she is a Psychology Associate at Georgetown University’s Counseling and Psychiatric Service.