

## The Moderating Roles of Gender and Socioeconomic Status in the Association Between Racial Discrimination and Psychological Adjustment

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*Racism-related stress poses a significant risk to the mental health functioning of many African American youth during the transition to adulthood. In light of the suggestion that personal and social factors might influence the association between racism-related stress and mental health functioning, this study examined the moderating roles of gender and socioeconomic status (SES) in the association between racial discrimination experiences and depressive symptoms, anxiety, and interpersonal sensitivity. Participants were 171 African American young adults (69% female; mean age = 18.4) recruited from a predominately White southeastern university. Regression analyses revealed that young African American men from lower SES backgrounds and women from higher SES backgrounds were most vulnerable to racial discrimination. These findings suggest that racism-related stress interacts with gender and SES to influence mental health correlates of racism-related stress during the transition to adulthood. We discuss how this knowledge can be used to inform assessment and cognitive-behavioral interventions for African American and other racial and ethnic-minority young adults.*

THE transition from adolescence to adulthood is characterized by increased stress, greater autonomy, and important life transitions such as high school graduation, beginning full-time work, and marriage (Arnett, 2003). For many African American emerging adults, these changes occur at a time when youth are becoming more aware of the role that their race plays in how society views them (Neblett et al., 2008), experiencing more racial discrimination (Hurd, Varner, Caldwell, & Zimmerman, 2014), and grappling with the significance and meaning of being African American. As the diversity among individuals in the United States continues to rapidly increase (Graham, Sorenson, & Hayes-Skelton, 2013) and the field of clinical psychology continues to emphasize culture, race, and ethnicity in research and clinical practice (Hoffman, 2013), clinicians will need the skills to understand and address the increased risk conferred by racism-related stress on African American young adults' mental health (Cooper, McLoyd, Wood, & Hardaway, 2008; Priest et al., 2013).

Although racism-related stress poses a significant risk to the mental health functioning of African American adolescents and young adults (Franklin & Boyd-Franklin, 2000; Priest et al., 2013), not everyone who experiences racial discrimination evidences poor mental health.

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Recently, scholars have suggested that gender and socioeconomic status (SES) may be two personal and social factors that might affect the mechanisms by which racism-related stress negatively impacts health (Williams & Mohammed, 2009). African American males may be more vulnerable to racism-related stress due to more negative stereotypes and increased exposure to racism relative to their female counterparts (Cooper et al., 2008); however, empirical studies also suggest that women may be more vulnerable to the impact of racial discrimination on mental health (Borrell, Kiefe, Williams, Diez-Roux, & Gordon-Larsen, 2006). With respect to SES, theory and empirical data (e.g., Borrell et al., 2006; Forman, 2003; Pieterse & Carter, 2007) suggest that low and high SES may increase mental health susceptibility to racism-related stress; thus, findings are mixed. This study examines gender and SES as moderators of the association between racial discrimination and mental health functioning in a sample of African American emerging adults. This line of inquiry fits with recent efforts to understand the role of culture, race, and ethnicity in (a) mental health racial disparities such as underutilization of services, attrition, and worse outcomes among minority populations (Gunther, 2013; Jelalian et al., 2008; Whaley & Davis, 2007); and (b) the provision of clinical services for marginalized and underserved populations in the United States (Hoffman, 2013).

### What Is Racism-Related Stress?

Drawing on Lazarus and Folkman's (1984) stress and coping theory, Harrell (2000) characterized *racism-related*

stress as “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” (p. 44). These experiences occur in multiple forms, but the most common include *racism-related life events*, time-limited events that occur across multiple domains (e.g., neighborhood, work, finances, education, social), and *daily racism microstressors* or “microaggressions” (Pierce, 1995). Microaggressions are “subtle, innocuous, preconscious or unconscious degradations and putdowns” (Pierce, 1995, p. 281) that take place daily and are often covert and unintentional (e.g., being ignored or overlooked while waiting in line, being mistaken for someone who serves others; Sue et al., 2007). While some have argued that microaggressions are now more prominent than life events (Graham et al., 2013), both kinds of experiences can contribute to one’s overall stress load and negatively influence African American psychological well-being in everyday life contexts (Graham et al., 2013; Harrell, 2000). Historically, research has shown that African Americans report higher levels of discrimination compared with Whites at every level of age, gender, education, and income (Forman, Williams, & Jackson, 1997).

### Developmental Significance and Context

Emerging adulthood is a developmental period during which African American young adults may be at increased risk and/or vulnerability to racism-related stress (Hurd et al., 2014). During the transition to adulthood, African American youth may experience increased opportunities for exposure to racial discrimination as they graduate from high school and begin to seek out jobs or continued educational experiences, and even develop intimate and romantic relationships (Pearlin, Schieman, Fazio, & Meersman, 2005; Tatum, 1997). Youth may encounter discriminatory hiring practices or exclusion from colleges or training programs despite meeting program requirements (Hurd et al., 2014) at a time when they no longer benefit from the same levels of parental involvement as during childhood and adolescence (Arnett, 2003). Furthermore, the developmental task of negotiating and developing a healthy identity and self-concept may confer additional stress as African American young adults grapple with the significance and meaning of an identity that is often devalued in society (Graham et al., 2013; Sue, 2010) and may even be at odds with the Eurocentric valuing of independence, autonomy, and self-sufficiency (e.g., honoring family obligations; Arnett, 2003). Some have attributed Black youths’ elevated rates of initiating substance use during emerging adulthood relative to early adolescence (Doherty, Green, Reisinger, & Ensminger, 2008; Gil, Vega, & Turner, 2002), the reversal of the low

rates of substance use observed in adolescence (Guthrie, Young, Williams, Boyd, & Kintner, 2002), and dramatic rises in suicide risk during young adulthood (Castle, Conner, Kaukeinen, & Tu, 2011) as indicators of the unique challenges and stressors African American youth may face during this transition. These challenges, in addition to, and in combination with the characteristic developmental tasks of emerging adulthood (e.g., increasing autonomy, developing a positive self-concept, launching a career), paint the picture of a potentially tumultuous time of transition that can be differentially experienced by African Americans.

### Racism-Related Stress and Mental Health

Recent reviews highlight the deleterious association between racism-related stress and negative mental health outcomes (e.g., Pascoe & Smart Richman, 2009; Pieterse, Todd, Neville, & Carter, 2012). In both cross-sectional and prospective studies, racism-related stress, and racial discrimination, in particular, has been found to be associated with anxiety, depression, psychological distress, hopelessness, loneliness, negative self-esteem, posttraumatic stress, social and emotional difficulties, somatic symptoms, stress, and even suicide in children and young people (Cooper et al., 2008; English, Lambert, & Ialongo, 2014; Priest et al., 2013; Smith-Bynum, Lambert, English, & Ialongo, 2014). Although relatively fewer studies have explicitly focused on emerging adult samples, several studies document the increased risk conferred by racial discrimination experiences on mental health outcomes during this developmental period (e.g., Banks, 2010; Banks & Kohn-Wood, 2007; Bynum, Burton, & Best, 2007; Jones, Lee, Gaskin, & Neblett, 2014; Rucker, West, & Roemer, 2010). A recent study by Lee, Neblett, and Jackson (2014) found that racism-related stress was positively associated with cognitive and somatic anxiety in a sample of 171 African American young adults. In another study, Hurd et al. (2014) found that perceived discrimination predicted increases in anxiety, depressive symptoms, and alcohol use in a sample of 607 Black emerging adults. These studies highlight the significance of racism-related stress experiences when considering the mental health needs of African American and other racial and ethnic-minority young adults.

One approach that may be useful in understanding the relation between racism-related stress and mental health and the roles of gender and SES in this association is the developmental psychopathology framework (Sroufe & Rutter, 1984). This framework seeks to elucidate individual patterns of adaptation and maladaptation, while also taking into account “biological, psychological and social-contextual aspects of normal and abnormal development across the lifespan” (Cicchetti, 2006, p. 1). The developmental psychopathology conceptual framework

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