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THE ROLE OF RACIAL IDEOLOGY IN THE RELATION BETWEEN RACIAL DISCRIMINATION AND PSYCHOLOGICAL WELL-BEING AMONG AFRICAN AMERICAN COLLEGE STUDENTS

by

CIERA LEWIS

Under the Direction of Ciara Smalls Glover, PhD

ABSTRACT

The present study examined whether two dimensions of racial ideology, specifically *nationalist ideology* and *assimilationist ideology*, moderate the link between racial discrimination and a comprehensive measure of psychological well-being (*i.e.*, well-being, self-esteem, and depressive symptoms). The purpose was to understand how each ideology may be a risk or protective factor. The study was conducted with 339 African American college students attending a large ethnically diverse minority-serving institution. Results revealed that frequency of perceived racial discrimination was linked to poor psychological well-being. Nationalist

ideology was not associated with psychological well-being outcomes and assimilationist ideology was associated with poor psychological well-being. Contrary to hypotheses, racial ideologies did not buffer or exacerbate the link between racial discrimination and psychological well-being. This study emphasizes the importance of examining multiple indicators of psychological well-being and suggests that future work should consider the influence of a multicultural context when studying racial processes among college students.

INDEX WORDS: African American, Racial discrimination, Racial identity, Psychological wellbeing

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by

CIERA LEWIS

Thesis Submitted in Partial Fulfillment of the Requirements for the Degree of

Masters of Arts

in the College of Arts and Sciences

Georgia State University

2018

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College of Arts and Sciences

Georgia State University

May 2018

DEDICATION

This thesis is dedicated to those who doubt their ability to persist after experiencing adversity.

ACKNOWLEDGEMENTS

I want to acknowledge that I could not have done this work alone. I would like to express my deepest appreciation to my committee chair, research advisor and mentor, Dr. Ciara Smalls Glover, for her guidance and support throughout this process. I would like to thank my committee members, Drs. Laura McKee and Erin Tone, for their feedback and time. Thank you to my parents, Laurie and Jerry Lewis, for influencing my work ethic and for being my motivation to start this whole journey as a first-generation college and graduate student. Thank you to my partner, Ebenezer Keane-Rudolph, for the unconditional love, encouragement, and support since day one. Thank you to all my family, friends, and mentors-I am, because you are. Special thank you to my fellow Black scholars, Rachel Johnson, Zinat Taiwo, Brielle James, Christyl Wilson, Khalil Thompson, Allana Zuckerman, Dr. Dominique Thomas, and Dr. Jacque-Corey Cormier who provided inspiration, encouragement, feedback, and accountability. I am grateful for the funding and support provided to me by the American Psychological Association Minority Fellowship Program (MFP). I am also grateful to be a part of the MFP family who all inspire me. Lastly, thank you to the Resilient Youth and Families Lab for providing data and thank you to the study participants who shared their experiences and made this whole project possible.

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1 INTRODUCTION

The first year of college can be a stressful but exciting time as individuals have an opportunity to explore their identity, challenge their worldview, and develop a better understanding of societal norms and beliefs separate from those endorsed by their parents (Arnett, 2000, 2007; Pascarella & Terenzini, 1991). Individuals in college gradually spend less time with family and more time engaging with society, which may lead to greater exposure to life perspectives unlike their own, and for African Americans, these perspectives may include exposure to racism and discrimination.

We know from decades of research that experiencing (or perceiving) racial discrimination is common among African Americans (Kessler, Mickelson & Williams, 1999) and that frequently experiencing racial discrimination leads to poor physical and mental health outcomes (Paradies, 2006; Pascoe & Smart Richman, 2009; Schmitt et al., 2014; Smith & Trimble, 2016; Williams, Neighbors & Jackson, 2003). For example, perceptions of racial discrimination have been linked to increased perceived stress, general distress, depressive symptoms, conduct problems, anxiety, and decreased self-esteem, well-being, and sense of mastery/control among African American youth and young adults (Brody et al., 2006; Greene, Way & Pahl, 2006; Neblett et al., 2008; Williams et al., 2003). Racial identity has been identified as a factor that provides protection against some of the deleterious effects of racial discrimination (Banks & Kohn-Wood, 2007; Harrell, 2000; Neblett, Shelton & Sellers, 2004; Sellers et al., 2003a, Sellers & Shelton, 2003b). Racial identity is multifaceted and includes an examination of how central one's identity is to their self-concept (centrality), how one feels about being part of their racial group (private regard), how one perceives others think of their racial group (public regard), and how one believes people in their racial group should think, act, and behave (racial

ideology). Researchers have sufficiently examined the ways in which racial centrality and racial regard influence the discrimination-distress association, however, research concerning the way in which individuals' racial ideology influences their reaction to racial discrimination has been limited (Banks & Kohn-Wood, 2007; Sellers & Shelton, 2003b).

The first aim of this study was to determine how racial discrimination is associated with multiple indicators of mental health (well-being, self-esteem and depressive symptoms) among African American emerging adults who attend an ethnically diverse minority-serving institution. The second aim was to examine whether two racial ideologies (nationalist and assimilationist) had a direct link to mental health outcomes. The last goal was to examine the extent to which two racial ideologies moderate the association between racial discrimination and mental health outcomes. By examining an understudied facet of racial identity in an ethnically diverse context, we hope to provide a more balanced understanding of how racial identity may act as a risk or protective factor in the presence of racial discrimination.

1.1 **Racial Discrimination**

Unfair treatment based on race is particularly prevalent among college students. For example, D'Augelli and Hershberger (1993) found that 41% of African American college students who attended a predominantly White institution (PWI) reported occasionally hearing disparaging racial remarks. Past survey research found that 98% of 153 participants reported experiencing some form of racism (i.e., 1% to 10% of the time) in the past year (Landrine & Klonoff, 1996). Another study, using a daily diary methodology, revealed that about two thirds of 51 African American college student participants reported at least one experience in a 2-week period. There is variability in how one experiences discrimination and these experiences differentially influence one's psychological well-being. If racial discrimination is conceptualized as a stressor, the way in which it affects an individual's psychological well-being is expected to be influenced by individual appraisal of the event and coping processes (Lazarus & Folkman, 1984)

The Transactional Model of Stress and Coping (Lazarus & Folkman, 1984) proposes that there is a transaction between situational and personal characteristics that leads a person to perceive an event as stressful. The concept of appraisal aids in explaining why individuals who experience a similar stressor might respond differently. The stressful situation may involve goals, values, or beliefs that are more personally salient for one individual compared to another, or an individual may be better prepared than another to control the situation's outcome. Similar to appraisal, examining an individual's coping responses might help explain why not all who experience racial discrimination have poor psychological outcomes. Two individuals may cope with the same stressful situation in different ways because of variability in their resources, experiences, motivation, preferences, and skills for coping. Therefore, examining differences in individual-level characteristics, such as racial identity, may provide insight into factors that mitigate the effects of racial discrimination on psychological outcomes.

1.2 **Racial Identity**

One individual characteristic of African Americans found to consistently influence the link between racial discrimination and psychological well-being is racial identity (Banks & Kohn-Wood, 2007; Harrell, 2000; Neblett et al., 2004; Sellers et al., 2003a; Sellers & Shelton, 2003b). In the present study, racial identity refers to "the attitudes and beliefs regarding the significance and meaning that people place on race in defining themselves" (Sellers et al., 1998a, p. 19). Following this definition, racial identity is best conceptualized by the Multidimensional Model of Racial Identity (MMRI) framework proposed by Sellers and colleagues (1998a) as a way of understanding the significance and meaning of race to the self-concepts of African Americans.

The MMRI is concerned with the status of an individual's racial identity, rather than its development. Some underlying assumptions associated with the MMRI are 1) identities are stable properties of the person that may be situationally influenced, 2) individuals have different identities that are hierarchically ordered, 3) an individuals' perception of their racial identity is the most valid indicator of their identity and 4) there is no pre-determined definition of what it means to be African American. This model of racial identity makes no value judgment as to what constitutes a healthy versus unhealthy racial identity and does not claim that any identity is, in and of itself, good or bad.

The MMRI proposes that there are four dimensions of African American racial identity: salience, centrality, regard, and ideology (see Sellers et al., 1998a, for a review). *Salience* refers to how relevant one's racial identity is to their self-concept at a particular point in time or a particular situation. *Centrality* is the degree to which an individual's race is central to how one normatively defines oneself. *Racial regard*, comprising two dimensions (private and public), is an individual's judgment of his or her race. *Private regard* refers to the degree to which individuals feel positively or negatively towards their racial group as well as how they feel about being African American. *Public regard* refers to the degree to which individuals feel that others in mainstream society view African Americans in a positive or negative way. Lastly, *racial ideology* is defined as an individual's beliefs, attitudes, and opinions about how African Americans should live, think, and act. According to Sellers and colleagues (1998a), there are four prevalent ideological philosophies: assimilationist, humanist, nationalist and oppressed minority. These four ideologies consist of individuals' attitudes concerning: political/economic development, cultural/social activities, intergroup relations, and perceptions of the dominant

group (Sellers et al., 1998a). *Assimilationist* ideology emphasizes the importance of becoming like the rest of mainstream American society and *humanist* ideology stresses the similarities among all humans belonging to the human race. *Nationalist* ideology stresses the uniqueness of being African American, while *oppressed minority* ideology emphasizes the similarities in oppression faced by African Americans and oppression that other minority groups face. The four ideologies represent different ways in which racial identity is manifested and each differentially relate to psychological and behavioral outcomes (Sellers et al., 1998a).

To empirically test the theory and conceptual dimensions described in the MMRI, Sellers and colleagues (1997; 1998a) developed the Multidimensional Inventory of Black Identity (MIBI). The MIBI consists of three scales that measure centrality, regard, and ideology dimensions of racial identity. Since the MMRI makes no judgment as to what constitutes a healthy versus unhealthy racial identity, it is a useful model for examining how racial identity influences psychological outcomes. It is hypothesized that the elements of racial identity interact in complex and important ways to affect psychological well-being among African Americans. Rather than looking at whether high or low racial identity is correlated with psychological outcomes, the MIBI allows researchers to ask questions about how the nuanced facets of identity are related to psychological outcomes. The MIBI has been widely used across studies to examine how dimensions of racial identity are related to a variety of outcomes; however, most research focuses on examining the centrality and regard dimensions.

For example, researchers find that the more central one's Black identity is to one's selfconcept, the more they report experiencing racial discrimination in the past year (Sellers & Shelton, 2003b). Individuals who report high racial centrality have poorer mental health outcomes after experiencing racial discrimination when compared to those for whom racial identity is less central to their self-concept (Branscombe et al., 1999; Major, Quinton & McCoy, 2002; Sellers et al., 2003a; Sellers & Shelton, 2003b). In terms of racial regard, researchers found that males with lower private regard who also experienced racism had greater anxiety as compared to those with higher private regard (Bynum, Best, Barnes & Burton, 2008). Researchers also found that individuals who believed that other groups perceive African Americans negatively (i.e., low public regard) were buffered from the negative impact of racial discrimination on psychological distress (Sellers et al., 2003a; Sellers et al., 2006).

In terms of racial ideology, Sellers & Shelton (2003b) found that individuals who endorsed a nationalist ideology were protected from the negative impact of perceived racial discrimination at event-specific and global distress levels. Using a latent profile analysis, Banks and Kohn-Wood (2007) found that individuals in the Integrationist cluster, those who highly endorse the ideology that Blacks should strive to fit into mainstream society (assimilationist ideology) and de-emphasized the importance of one's race (humanist ideology and low racial centrality), reported higher depressive symptoms in the presence of racial discrimination. These findings highlight the importance of moving beyond racial group identification to consider how the qualitative meaning of racial identity may impact the effects of perceived racial discrimination on psychological well-being.

Although the literature on racial identity is vast, very few studies examined the racial ideology aspect and those that did tended to examine how racial ideology influences academic outcomes (e.g., Sellers et al. 1998b; Smalls, White, Chavous, & Sellers, 2007). In the past ten years, only a few studies have specifically examined how racial ideology influences the link between racial discrimination and mental health outcomes among African American college students (e.g., Banks & Kohn-Wood, 2007; Sellers & Shelton, 2003b). Given the lack of research

on this aspect of racial identity, it is important to continue to explore the complex ways in which racial ideology interacts with psychological well-being.

1.3 **Psychological Well-Being**

Well-being is more the absence of disease or illness. The meaning and measurement of psychological well-being is widely varied in the literature; it has been conceptualized as both the presence of positive psychological constructs (e.g., self-esteem, self-efficacy, sense of mastery, and life satisfaction) and the absence of psychopathology (indicated by low endorsement of depression and anxiety symptoms). In the present study, definitions from the literature were combined to conceptualize psychological well-being as a multifaceted construct that includes individual's cognitive evaluations of themselves and emotional reactions to their life (Diener & Diener, 2005; Ryff, 1989).

Diener and Diener's (2005) guidelines for aspects to consider when measuring well-being assisted in the operationalization. They state that a measure of well-being should 1) examine something that resides within the experience of the individual, 2) include positive measures, and 3) involve a global assessment of all aspects of an individual's life. Diener and Diener's (2005) guidelines provide important perspectives that are often overlooked in studies that examine well-being as an outcome. Researchers often exclusively examine the negative psychological reactions and psychopathology of individuals even though positive reactions, in terms of pleasant affect and life satisfaction, are of equal theoretical importance and should be afforded equal empirical attention.

Another important point that Diener and Diener (2005) argue is that a single score of well-being over-simplifies the phenomenon. They suggest that multiple scores capturing many aspects of well-being such as various emotions, emotional intensity, and life satisfaction are

likely to lead to more sophisticated theories and understanding. Thus, in the present study, three measures were used to capture the essence of psychological well-being.

1.4 **Rationale for the Present Study**

This study is informed by Sellers & Shelton's (2003b) work that aimed to longitudinally examine the influence of perceived racial discrimination on mental health outcomes and further to examine whether different dimensions of racial identity moderate that link. Sellers & Shelton's (2003b) study was conducted with African American college freshmen from three different public predominately white institutions (PWIs); one in the suburban Midwest, one in the urban Midwest and the final in the suburban Southeast. The present study aims to extend this work by examining whether racial ideologies moderate the association between perceived discrimination and psychological well-being specifically among African American college students who attend an ethnically diverse minority-serving institution in the Southeast. Sampling from an ethnically diverse university may provide unique insight into the generalizability of previous findings.

An additional intent of the present study is to add to the small literature base (e.g., Banks & Kohn-Wood, 2007; Sellers & Shelton, 2003) regarding the extent to which racial ideologies act as protective or risk factors for psychological well-being among African American emerging adults in college who have experienced racial discrimination. To accomplish the objectives of this study, the direct link between racial discrimination and psychological well-being was examined. Next, the links between racial ideologies and psychological well-being were explored. Finally, associations among racial discrimination, racial ideology, and psychological well-being outcomes were examined.

1.5 **Research Questions and Hypotheses**

 Does an individual's self-reported experience with racial discrimination predict their psychological well-being?

Hypothesis 1a: Given findings by Sellers & Shelton (2003), Neblett et al. (2008), Greene et al. (2006) and numerous past studies, it was hypothesized that endorsing more frequent experiences of racial discrimination would be related to poorer psychological well-being.

 Are nationalist and assimilationist ideologies related to psychological well-being? Hypothesis 2a: It was expected that highly endorsing a nationalist ideology (emphasizing the uniqueness of being African American) would be positively associated with psychological well-being.

Hypothesis 2b: It was hypothesized that highly endorsing an assimilationist ideology (emphasizing the importance of blending into mainstream society) would be negatively associated with psychological well-being.

3. Do racial ideologies moderate the association between perceived racial discrimination and psychological well-being?

Hypothesis 3a: It was hypothesized that highly endorsing a nationalist ideology would

buffer African American college students from the negative effects of racial discrimination on psychological well-being. Sellers & colleagues (1998b) posed that theoretically, individuals who endorse this ideology may expect to experience racial discrimination in their daily lives and may be more prepared to deal with it. The concept of racial discrimination is not foreign to the way in which these individuals engage with the world, so they may be able to better handle the stress. Hypothesis 3b: On the other hand, it was predicted that highly endorsing an assimilationist ideology may not buffer the negative effects of racial discrimination on psychological well-being and may even exacerbate them. Experiencing racial discrimination may be incongruent with these individuals' worldviews and it may be psychologically taxing to reconcile these inconsistencies.

2 METHODS

2.1 **Participants**

Data were collected from fall 2016 to spring 2017. Participants were 339 African American undergraduate college students at a large racially heterogeneous minority-serving institution in the Southeastern United States. In terms of ethnicity, the entire sample identified as African American/Black. Participants were between the ages of 18 and 25 (M=18.54, SD = 0.90). Both female (79%) and male (21%) students participated and all identified as either freshmen (83%) or sophomore (17%) with regard to college classification. Twenty percent of participants identified as first-generation college students. A majority of participants lived oncampus (65%), while 22% lived at home with their parents and 13% lived off-campus either alone or with a roommate. Thirty-nine percent of participants were employed at least part-time and 94% indicated that their marital status was single—never married.

2.2 **Procedures**

After receiving institutional review board approval for the study, the university's online psychology research and testing site (i.e., SONA) was used to recruit African American undergraduate students enrolled in introductory level psychology courses. On SONA, participants were provided information about the study, inclusion/selection criteria, and directions for gaining access to the online survey created through Qualtrics. The larger study inclusion criteria included being 18 to 25 years of age, self-identifying as African American or Black, self-identifying with freshman or sophomore college classification, and being able to read and provide informed consent in English. Participants that met the selection criteria and were interested in participating read the consent form and indicated their consent by clicking "yes" in the online survey.

Next, participants completed the online survey that took approximately 1-2 hours to complete. Participants were asked a series of demographic questions including age, gender, race/ethnicity, parents' race/ethnicity, marital status, highest level of education, college generational status, current employment, area of employment, as well as living situation. The survey also included several measures designed to address the objectives of the larger study regarding racial identity, racial discrimination, racial socialization, parent-child communication, health, academic outcomes and emerging adulthood. Participants received two units of extra credit for their psychology courses as compensation for their participation.

Although the larger study recruited all individuals who broadly identified as Black, the present study focused on African Americans to examine within-group variation. Individuals who identified racially as Black but when further prompted to specify their ethnic group did not endorse African American were excluded; these participants included individuals who identified as biracial, multiracial, African, Caribbean, and Afro-Latino.

2.3 Measures

2.3.1 Racial Discrimination.

Racial discrimination was measured using the Daily Life Experience (DLE) subscale which is part of the Racism and Life Experience scales developed by Harrell (1997). The DLE scale is a self-report measure that assesses the frequency and impact of experiencing 20 microaggressions due to race. Participants were asked to "assess each item and report how frequently the event happened because of [their] race" using a 6-point scale with the following labels: 0 (*never*), 1 (*less than once a year*), 2 (*a few times a year*), 3 (*about once a month*), 4 (*a few times a month*), 5 (*once a week or more*). Total scores for frequency were calculated by averaging across items; higher scores indicate greater frequency of experiencing racial discrimination. The DLE is found to be reliable among African American samples. For example, Harrell (1997) found the measure highly reliable among a sample of African American college students ($\alpha = .90$). The DLE had excellent reliability in the present study, $\alpha = .95$.

2.3.2 Racial Identity.

The Multidimensional Model of Racial Identity-Teen (MIBI-t; Scottham, Sellers, & Nguyên, 2009) was used to examine racial identity; it is a version of Sellers and colleagues (1997) Multidimensional Model of Racial Identity (MIBI). The main difference between the MIBI-t and the original MIBI is that the teen version uses simplified wording of items and is shorter in length. The MIBI-t was designed to capture teen's racial identity using 21-items that express racial identity constructs in age appropriate terms. Like the original MIBI, MIBI-t was created and validated for use with Black populations and includes seven subscales; racial centrality, public regard, private regard, and four racial ideologies: assimilationist, humanist, nationalist and oppressed minority (Scottham et al., 2008). This study focused on two of the racial ideology subscales (nationalist and assimilationist) which examine the beliefs, attitudes, and opinions about how Blacks should think, act, and behave. Although there are four racial ideologies in the MIBI, this study focused on the two ideologies that have the most empirical attention. Additionally, nationalist is a race-focused ideology while assimilationist is characterized by a de-emphasis of race, thus, examining these two ideologies allows for a nuanced understanding to emerge regarding how ideologies may impact psychological wellbeing.

Nationalist ideology stresses the uniqueness of being Black. The subscale consisted of three items (e.g., "Black parents should surround their children with Black art and Black books") and had acceptable reliability in the current study, $\alpha = .76$. Participants indicated the extent to which they agreed with each item on a 7-point scale ranging from 1 (*slightly disagree*) to 7 (*strongly agree*). Total scores were calculated by averaging across items. Higher scores indicate a greater endorsement of nationalist ideology.

Assimilationist ideology emphasizes the importance of becoming like the rest of mainstream American society. The subscale was made up of three items (e.g., "Blacks should act more like Whites to be successful in this society") and had acceptable reliability in this study, $\alpha = .74$. Participants indicated the extent to which they agreed with each item on a 7-point scale ranging from 1 (*slightly disagree*) to 7 (*strongly agree*). The total subscale score was generated by averaging across all items. Higher scores indicate a greater endorsement of assimilationist ideology.

2.3.3 Psychological Well-Being Outcome Measures.

Researchers often exclusively examine the negative psychological reactions and psychopathology of individuals resulting from experiences of racial discrimination. To examine reactions to racial discrimination using a strengths-based approach it is important to also examine a range of psychological well-being outcomes. In this study psychological well-being was measured with multiple indicators: well-being, self-esteem, and depressive symptoms. These three constructs were selected because they are considered key components of well-being (Diener, Lucas, & Oishi, 2003) and were used in previous studies examining the effects of racial discrimination on racial minorities (e.g., Branscombe et al., 1999; Sellers & Shelton, 2003b). *Well-Being.* To capture the essential components of positive psychological well-being a shortened version of Ryff's (1989) Psychological Well-Being measure was used. According to Ryff (1989), individuals are functioning well when they like most parts of themselves, have warm trusting relationships, see themselves developing into better people, have a direction in life, are able to shape their environments to satisfy their needs, and have a degree of self-determination. Ryff's measure assessed these domains with 18 items (six subscales made up of three items each): self-acceptance, positive relations with others, personal growth, purpose in life, environmental mastery, and autonomy. Participants were asked to indicate on a scale from 1 (*strongly agree*) to 6 (*strongly disagree*) how much they agreed with each statement. An example item is, "For me, life has been a continuous process of learning, changing and growth." A total well-being score was computed by reverse coding negatively worded items and summing across all items; the total score was used for all analyses. Higher scores indicate better well-being. The scale had good reliability in the present study $\alpha = .85$.

Self-Esteem. Participants' attitudes about their self-worth were assessed using Rosenberg's (1965) Self-Esteem scale. Participants responded to 10 items using a 4-point response scale from 1 (*strongly agree*) to 4 (*strongly disagree*) to indicate the extent to which they agreed with statements. Examples of items include: "On the whole I am satisfied with myself" and "I feel that I'm a person of worth, at least on an equal plane with others." Items were summed to calculate a total score where higher scores correspond with higher levels of selfesteem. This measure was found to be reliable when used with African American populations (Hoelter, 1983; Hughes & Demo, 1989) and had good reliability in the present study, $\alpha = .89$.

Depressive Symptoms. The 20-item Center for Epidemiologic Studies Depression scale (CES-D; Radloff, 1977) was used to evaluate whether participants experienced symptoms

associated with depression during the past week. Symptoms assessed included, depressed mood, feelings of guilt and worthlessness, helplessness and hopelessness, psychomotor retardation, loss of appetite, and sleep disturbance. Example items are "I felt depressed" and "I had crying spells." Participants were asked to indicate how often they experienced each of the symptoms during the past week on a scale from 1 (*rarely*) to 4 (*most of the time*). Items with positive wording (e.g., "I felt happy") were reverse coded. Scores were summed with a range of 0 to 60 where higher scores indicate more symptoms of depression. Scores between 16 and 26 are considered indicative of mild depression and scores ≥ 27 are suggestive of major depression. The CES-D has frequently been used to assess depressive symptoms in previous research with African Americans (Sellers & Shelton, 2003b) and is found to be acceptable and reliable for use with college students (Radloff, 1991). The CES-D had excellent reliability in the present study $\alpha = .92$.

2.4 Data Analytic Plan

First, preliminary analyses were conducted to investigate bivariate relationships among study variables. Structural equation modeling using MPlus 7 software (Muthén & Muthén, 2010, 2012) was used to examine whether two dimensions of racial ideology, namely nationalist and assimilationist ideologies, moderate the association between racial discrimination and psychological well-being outcomes among African American college students.

The chi square (χ^2) statistic, Comparative Fit Index (CFI), Root-Mean-Square Error of Approximation (RMSEA), and Standardized Root-Mean-Square Residual (SRMR) were used to assess model fit. The CFI has an upper ceiling of 1.00 and values > 0.90 indicate acceptable fit and > 0.95 indicate good fit. RMSEA and SRMR represent model misfit, thus, values of < 0.10 indicate acceptable fit and values < 0.06 indicate good fit (Kline, 2005). Typically, model fit is also informed by Chi-square tests; however, they are sensitive to sample size and, in very large

samples, often have an inflated *p*-value and appear statistically significant; therefore, the previously listed indices were used as better indicators of model fit.

Control variables. Participant gender and racial centrality were held constant in structural equation models. Past studies conclude that gender is an important factor in determining the influence of racial discrimination on mental health; males tend to endorse more frequent racial discrimination and the link between racial discrimination and poor mental health outcomes is stronger for females compared to males (Banks, Kohn-Wood & Spencer, 2006; Greer et al., 2009). We did not expect to find gender differences in endorsement of racial ideology because Rowley, Chavous, & Cooke's (2003) study with 724 African American college students found no evidence of gender differences in racial ideology even when examined using both variable-centered and person-centered approaches. Racial centrality is included as a control variable because past research found that individuals who report high racial centrality have poorer mental health outcomes after experiencing racial discrimination and report experiencing more discrimination when compared to those for whom racial identity is less central to their self-concept (Branscombe et al., 1999; Sellers et al., 2003a; Sellers & Shelton, 2003b), thus, it is important to consider the variance it accounts for in analyses.

3 RESULTS

3.1 **Preliminary Analyses**

Descriptive statistics for key study variables are summarized in Table 1. All predictor variables were centered, and tests were run to examine all study variable variance inflation factors (VIF), which are indicators of multicollinearity. The model VIF estimates were within the recommended ranges (less than 10) for all variables.

Ninety-two percent of participants reported experiencing an incidence of racial discrimination, and on average, this happened less than "once per year," (M = 1.36, SD = 1.11).

Data indicate that some discrimination experiences were more common than others; participants reported being treated rudely or disrespectfully (72%), overhearing or being told an offensive joke (69%), and being stared at by strangers (68%) most frequently. There were no significant gender differences in reported frequency of racial discrimination, t(336) = -1.31, p = 0.19.

Overall, participants reported high racial centrality (M = 5.54, SD = 1.11) and this did not differ across gender, t(337) = -1.75, p = 0.08. In terms of racial ideology, participants reported low endorsement of assimilationist ideology overall (M = 1.88, SD = 1.24), however, males (M =2.38, SD = 1.48) tended to endorse higher levels of assimilationist ideology than females (M =1.75, SD = 1.14), t(337) = 3.88, p < 0.01. Participants reported high endorsement of nationalist ideology (M = 5.79, SD = 1.07) and females (M = 5.92, SD = 1.02) endorsed higher levels of nationalist ideology than males (M = 5.03, SD = 1.14), t(337) = -4.42, p < 0.01.

In terms of psychological well-being, participants had a mean depressive symptom score of 19.71 (SD = 12.32); scores between 16 and 26 indicate mild depression (Radloff, 1977). There were no statistically significant differences in depression scores across gender, t(337) = -1.50, p = 0.13. Participants reported an average self-esteem score of 1.86 (SD = 0.57) and an average well-being score of 4.57 (SD = 0.71); there were no significant gender differences in self-esteem, t(337) = 0.40, p = 0.69 or well-being, t(337) = -0.54, p = 0.59.

Pearson's product-moment correlations were conducted to examine bivariate associations among key study variables; several associations were statistically significant (see Table 1). The psychological well-being variables were all significantly correlated with each other in that selfesteem and well-being were positively correlated with each other and each negatively correlated with depressive symptoms. Racial discrimination was positively associated with nationalist ideology and depressive symptoms, but negatively associated with self-esteem and well-being. Nationalist and assimilationist ideologies were negatively associated with each other. Nationalist ideology was not significantly associated with any psychological well-being variables. Assimilationist ideology was positively associated with depressive symptoms but negatively

associated with self-esteem and well-being.

	1	2	3	4	5	6	7	8
1. Gender								
2. Centrality	.10							
3. Assimilationist	21**	07						
4. Nationalist	.23**	.41**	12*					
5. Discrimination	.07	.08	.10	.26**				
6. Depressive Symp.	.08	09	.28**	.10	.29**			
7. Self-Esteem	02	.10	28**	01	13*	64**		
8. Well-Being	.03	.15**	39**	.04	19**	63**	.72*	
M		5.54	1.88	5.79	1.36	19.71	31.33	4.57
SD		1.11	1.24	1.07	1.17	12.32	.64	.71
Min		1	1	1	0	0	10	1.89
Max		7	7	7	4.56	49	40	6
Range		1-7	1-7	1-7	0-5	0-49	10-40	0-6

Table 1: Descriptives and Correlations Among Key Study Variables

Note. N = 339.

p* < .05 *p* < .01

3.2 **Exploratory Measurement Model**

Three mental health measures were included in this study to capture the comprehensive essence of psychological well-being. Because these mental health measures were thought to assess different aspects of the same construct a latent psychological well-being factor was explored. The measurement model of the latent psychological well-being factor included three indicators; total scores from psychological well-being, self-esteem and depressive symptoms measures, and was assessed for fit (see Figure 1). The latent factor had good fit; χ^2 (3) = 459.84, p < 0.01, CFI = 1.00, TLI = 1.00, RMSEA = 0.00, SRMR = 0.00. The factor loadings were all significant. Well-being had a factor loading of 0.85, self-esteem loaded at 0.85 and depressive symptoms had a negative factor loading of -0.75. The factor was interpreted as an indicator of positive psychological well-being, where higher scores suggest better well-being.

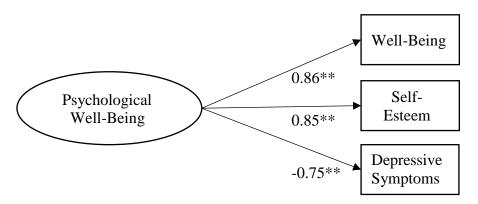


Figure 1: Measurement model of psychological well-being latent factor outcome variable.1.1 Structural Model

After establishing that the psychological well-being latent factor measurement model was psychometrically sound, a structural equation model was used to examine: 1) the association between racial discrimination and psychological well-being, 2) the association between racial ideologies and psychological well-being and 3) whether nationalist and assimilationist ideologies moderate the association between racial discrimination and psychological well-being. The chi square value for the overall model was significant; however, all other indices indicated that the model fit the data well; χ^2 (14) = 37.48, *p* < 0.01, *CFI* = 0.96, TLI = 0.93, RMSEA = 0.07, SRMR = 0.03. As displayed in Figure 2, results revealed racial discrimination was associated with poor psychological well-being (β = -0.21, *p* < 0.01). Nationalist ideology (β = -0.03, *p* = 0.70) was not significantly associated with well-being. Assimilationist ideology was associated

with poor psychological well-being ($\beta = -0.39$, p < 0.01). There were no significant interactions between racial discrimination and nationalist ($\beta = 0.02$, p = 0.70) or racial discrimination and assimilationist ($\beta = 0.05$, p = 0.42) ideologies. With regard to control variables, centrality was positively associated with well-being where the more central one's race was to their self-concept, the better well-being they reported, ($\beta = 0.15$, p < 0.01). Gender was not significantly associated with well-being ($\beta = -0.09$, p = 0.11).

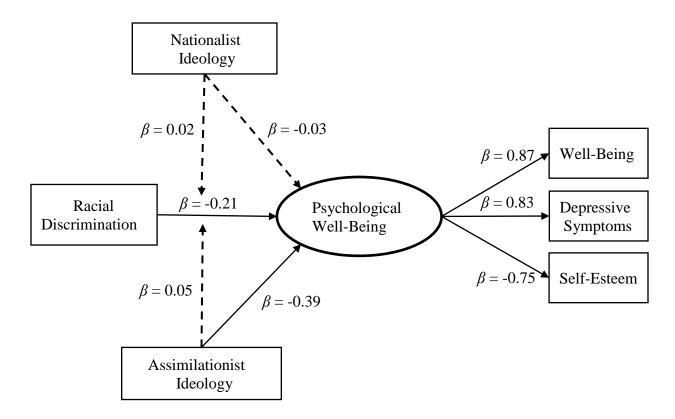


Figure 2: Racial ideology moderating the relationship between racial discrimination and psychological well-being outcomes.

Note. Dashed lines represent non-significant paths, solid lines represent significant paths. Control variables are not included in image for simplicity.

3.3 Exploratory Secondary Analysis

The previous analyses revealed that the control variable, racial centrality, was

significantly associated with the latent psychological well-being factor. Exploratory path analysis was conducted to better understand the nuances of how racial centrality may be associated with each indicator of psychological well-being. Centrality was positively associated with the measure of psychological well-being ($\beta = 0.15$, p < 0.01). The negative association between centrality and depressive symptoms ($\beta = -0.10$, p = 0.07) and the positive association between centrality and self-esteem were both trending toward significance ($\beta = 0.10$, p = 0.05).

4 **DISCUSSION**

The goal of the present study was to gain a deeper understanding of how nationalist and assimilationist ideologies may influence the link between racial discrimination and psychological well-being among African American college students who attend a large ethnically diverse minority-serving institution. Results revealed that perceived frequency of racial discrimination was linked to poor psychological well-being. Nationalist ideology was not associated with psychological well-being and assimilationist ideology was associated with poor psychological well-being. Contrary to hypotheses, racial discrimination and racial ideologies did not significantly interact to influence psychological well-being. This study emphasized the importance of examining multiple indicators of psychological well-being and the importance of studying racial processes among college students who are in a diverse context.

4.1 **Psychological Well-Being**

In this study, psychological well-being was conceptualized as a multifaceted construct that includes individual's cognitive evaluations of themselves and emotional reactions to their life (Diener & Diener, 2005; Ryff, 1989). A latent psychological well-being factor was explored and demonstrated good fit indicating that well-being, self-esteem, and depressive symptoms are distinct but related constructs that capture the essence of psychological well-being as defined in this study. Furthermore, results provide support for the idea that psychological well-being should, and can, be measured as a multifaceted construct that includes both positive and negative aspects. Results lead us to a more balanced understanding of how racial discrimination and racial ideology relate to a broad range of mental health outcomes as past studies often conceptualized well-being as a lack of psychopathology.

4.2 **Racial Discrimination**

In this study, African American college students who attend an ethnically diverse minority-serving institution reported experiencing low rates of global racial discrimination. Despite low rates of racial discrimination, a structural equation model revealed results consistent with past findings: that there is a link between perceived racial discrimination and poor psychological well-being among African American college students (Paradies, 2006; Pascoe, & Smart Richman, 2009; Schmitt et al., 2014; Williams et al., 2003). These results are powerful because they indicate that even low levels of perceived racial discrimination have significant impact on immediate psychological well-being for African American college students.

4.3 Racial Identity

Nationalist and assimilationist ideologies did not moderate the link between racial discrimination and psychological well-being. It was hypothesized that nationalist ideology would buffer the negative effects of racial discrimination on psychological well-being; however, there was not a significant interaction between racial discrimination and nationalist ideology. It was also hypothesized that assimilationist ideology would exacerbate the link between racial discrimination and poor psychological well-being. Although both racial discrimination and assimilationist ideology were associated with psychological well-being outcomes in the same manner, assimilationist ideology did not exacerbate the adverse effects of racial discrimination.

Analyses revealed that, even when gender, racial centrality and endorsement of nationalist ideology are accounted for, higher prioritization of assimilating to dominant society was related to poorer psychological well-being (low well-being, low self-esteem, and high depressive symptoms). Overall, participants in this study did not highly endorse an assimilationist ideology. However, even low endorsement of assimilationist ideology had a negative influence on overall psychological well-being. These findings indicate that prioritizing conforming to the dominant society may not be adaptive for African American college students who regularly interact in a multicultural setting.

It is interesting that despite high mean nationalist ideology scores across the sample, nationalist ideology was not significantly associated with psychological outcomes and did not buffer the negative effects of racial discrimination. These results do not align with previous empirical research which found that endorsing a nationalist ideology buffered the negative impact of perceived racial discrimination at event-specific and global distress levels for African American students at PWIs (Sellers & Shelton, 2003b).

Taken together, results emphasize the importance of considering the context in which racial processes are studied. A study conducted by Cokely (1999) found that racial composition of college environment facilitated the development of certain racial ideologies. Moreover, African Americans at PWIs endorsed higher assimilationist and humanist ideologies compared to those at Historically Black Colleges and Universities (HBCU) who had high nationalist ideologies (Cokely, 1999). Results are also suggestive of the importance of examining the qualitative meaning of racial identity as African Americans' ideas about how Black people should think, act, and be treated in society may influence their psychological well-being. This study did not support the idea that endorsing a nationalist or assimilationist ideology protects against (or exacerbates) the negative influence of racial discrimination. But, it is feasible that other racial ideologies such as humanist ideology (stresses the similarities among all humans belonging to the human race) or oppressed minority (emphasizes the similarities in oppression faced by African Americans and oppression that other minority groups face) may be more prevalent and important for African American students at an ethnically diverse minority-serving institution.

4.4 Limitations and Future Directions

There are several study considerations to address and a few suggestions for directions in response to these limitations. First, this study is cross-sectional; thus, we cannot infer that racial discrimination influences poor psychological outcomes. However, Sellers and Shelton's (2003b) longitudinal study provides support for the idea that the direction of the association is from racial discrimination to poor well-being and not the other way around. Future studies should continue to use longitudinal designs to examine the directionality of the association between racial discrimination and mental health outcomes.

Second, it is encouraging to know that there are low rates of perceived racial discrimination among this sample of African American college students who attend a heterogeneous minority-serving institution. However, the way racial discrimination was measured in this study may not be capturing the full range of experiences these students encounter, given the multicultural context in which they often interact. For instance, the assumption of this study was that unfair treatment at the individual level was most impactful for psychological well-being, but perhaps structural or historical unfair treatment has a stronger impact on psychological well-being. Future studies could look beyond the interpersonal level of racial discrimination (*e.g.*, institutional, societal) as well as examine various sources or agents of racial discrimination (*e.g.*, peers, teachers, online incidents) to unpack the types of unfair treatment that individuals who spend a lot of time in non-White settings may encounter.

Additionally, it is possible that event-specific outcomes, like the extent to which individuals are bothered by a discriminatory incident, influence the relationship between global experiences of racial discrimination and broad mental health outcomes. This study did not account for how distress associated with perceived discriminatory incidents interacts with the frequency of such events and the source of discrimination. Thus, future studies should consider examining a multifaceted racial discrimination construct that accounts for the complex ways in which frequency, source and intensity of racial incidents interact to influence psychological well-being.

A possible measurement limitation is the way in which racial ideologies were measured in this study. A shortened version of the Multidimensional Inventory of Black Identity adapted for teens (i.e., MIBI-t) was used, with three items intended to capture the essence of each ideology. Although the nationalist and assimilationist ideology subscales had acceptable reliability ($\alpha = .76$, $\alpha = .74$ respectively), it is possible that a measure containing additional items for each subscale may yield different results. Racial ideology as conceptualized by Sellers and colleagues (1998b) is thought to be manifested across four areas of functioning. Racial ideologies consist of individuals' attitudes with respect to: (a) political/economic development, (b) cultural/social activities, (c) intergroup relations, and (d) perceptions of the dominant group. The three items that make up each ideology subscale in the MIBI-t do not necessarily capture the nuances of how individual's philosophies vary across these different areas of functioning. The three-item MIBI-t nationalist ideology subscale in particular seems to capture the economic and cultural/social activity areas of functioning. The MIBI-t assimilationist ideology subscale captures intergroup relations and perceptions of the dominant group. Perhaps ensuring that the ideology subscales tap into all four domains of functioning may provide a better understanding of how the complete scope of ideology influences psychological well-being. Future studies should consider examining the validity and factor structure of the racial ideology component of the MIBI.

It may be beneficial for future work to examine whether oppressed minority ideology or humanist ideology moderate the link between racial discrimination and psychological wellbeing, as they have the potential to influence well-being outcomes for African American college in students in a multicultural setting. Oppressed minority and humanist ideologies were not explored in the current study as there was not strong theoretical rationale for how these ideologies individually influence mental health outcomes. Simultaneously examining how all four racial ideologies (nationalist, assimilationist, oppressed minority and humanist) directly and interactively effect racial discrimination may provide a richer understanding of how the ideologies work individually to influence psychological well-being.

4.5 **Study Significance**

African American emerging adults enrolled in college are vulnerable to psychological maladjustment due to increased stress and numerous life transitions that take place during this phase of life. This study aimed to examine race-related factors that might have influence on psychological well-being among individuals from this population. Results from this study may allow researchers to better understand how individual racial ideologies, which are understudied in racial research, relate to psychological outcomes and promote further investigation into this facet of racial identity. An individual's beliefs about the ways African Americans should think, act, and behave in society have relevance to that individual's ability to interpret and react to racial discrimination (e.g., Sellers & Shelton, 2003b). Thus, it is worth continuing to examine the influence of racial ideology on mental health outcomes. This study also aims to encourage researchers to examine psychological well-being as a multifaceted construct using more than one mental health indicator.

This study is novel in that it examined racial ideologies individually, rather than as a profile, as past research has; this allows for a deeper understanding of how each ideology may be protective against the adverse effects of racial discrimination. Additionally, this study

emphasizes the importance of studying racial processes among emerging adults in a diverse context.

4.6 **Implications for Clinical Practice**

Mental health practitioners should be aware that even infrequent experiences of racial discrimination (occurring less than once per year) can have immediate negative implications for African American college students' psychological well-being. Growing evidence suggests that social identities have an important role in preventing and resolving depression and distress. In racial identity research, a sense of belonging has been found to have protective effects against psychological distress even when identifying with a marginalized group (Cruwys et al., 2014) and in the presence of race-related stress (Branscombe, Schmitt & Harvey, 1999; Sellers et al., 2006). Due to the importance of social experiences to well-being, and to the etiology and maintenance of depression (e.g., Barnett & Gotlib, 1988), it is worth exploring with clients how social factors like racial identity and the meaning of that identity may influence their well-being while in college.

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