

ETHNIC IDENTITY AND PSYCHOLOGICAL WELL-BEING AMONG YOUTH
IN RESIDENTIAL TREATMENT: EXPLORING LINKS WITH
SCHOOL SUCCESS AND PSYCHOLOGICAL DISTRESS

by

Robin Rae Bauer Sobansky

A DISSERTATION

Presented to the Faculty of
The Graduate College at the University of Nebraska

In Partial Fulfillment of Requirements

For the Degree of

Doctor of Philosophy

Major: Interdepartmental Area of Psychological and Cultural Studies

Under the Joint Supervision of Dr. Beth Doll and Dr. Theresa Graham

Lincoln, Nebraska

November, 2003

UMI Number: 3116609

INFORMATION TO USERS

The quality of this reproduction is dependent upon the quality of the copy submitted. Broken or indistinct print, colored or poor quality illustrations and photographs, print bleed-through, substandard margins, and improper alignment can adversely affect reproduction.

In the unlikely event that the author did not send a complete manuscript and there are missing pages, these will be noted. Also, if unauthorized copyright material had to be removed, a note will indicate the deletion.

UMI[®]

UMI Microform 3116609

Copyright 2004 by ProQuest Information and Learning Company.

All rights reserved. This microform edition is protected against unauthorized copying under Title 17, United States Code.

ProQuest Information and Learning Company
300 North Zeeb Road
P.O. Box 1346
Ann Arbor, MI 48106-1346

DISSERTATION TITLE

Ethnic Identity and Psychological Well-Being Among Youth in Residential
Treatment: Exploring Links with School Success and Psychological Distress

BY

Robin Rae Bauer Sobansky

SUPERVISORY COMMITTEE:

Approved

Date

Beth Doll
Signature

11-19-03

Beth Doll
Typed Name

Theresa Graham
Signature

12/3/03

Theresa Graham
Typed Name

Barbara Plake
Signature

11/19/03

Barbara Plake
Typed Name

Marcela Raffaelli
Signature

11/19/03

Marcela Raffaelli
Typed Name

Susan Swearer
Signature

11/19/03

Susan Swearer
Typed Name

Signature

Typed Name

UNIVERSITY OF
Nebraska | GRADUATE
COLLEGE

ETHNIC IDENTITY AND PSYCHOLOGICAL WELL-BEING AMONG YOUTH
IN RESIDENTIAL TREATMENT: EXPLORING LINKS WITH
SCHOOL SUCCESS AND PSYCHOLOGICAL DISTRESS

Robin Rae Bauer Sobansky, PhD

University of Nebraska, 2003

Advisors: Beth Doll and Theresa Graham

Despite evidence that ethnic identity development is a salient task in adolescence, the issue has not been examined among youth in residential care. This study examined the relationship between ethnic identity and psychological well-being in adolescents in a residential treatment program. More specifically, this study investigated whether ethnic identity was related to psychological adaptation and academic functioning among White and non-White adolescents in this setting. A chief interest of the study concerned the construct of developmental competence and adaptation and the theoretical notion that a strong ethnic identity might be significantly related to the absence of psychological distress and the presence of school competence among this unique population. Using surveys and archival records, data were collected and analyzed from 107 students (White = 49, non-White = 58) who attended high school in a residential treatment program. Results of the multiple regressions did not support the hypotheses that a strong ethnic identity, assessed by the Multigroup Ethnic Identity Measure (MEIM; Phinney, 1992) was positively related to school success and negatively related to psychological distress. Psychological distress was measured by the 10-item Multidimensional Anxiety Scale

for Children (MASC-10; March, 1997) and the Children's Depression Inventory (CDI; Kovacs, 1987). School success was measured by (a) school performance, as indicated by individual achievement test scores and cumulative high school grade point average; (b) future educational plans; and (c) involvement in extracurricular activities. Significant differences were found in ethnic identity between White and non-White participants. African American and other ethnically diverse adolescents had significantly higher scores on the MEIM than did the White youth. Significant age and gender differences were found for psychological distress and academic success as well. Results suggest there is a need for future studies to continue the line of research presented in this study.

PREVIEW

ACKNOWLEDGMENTS

Any great accomplishment by one is a reflection of the unending support and guidance of others. Of the many people that helped me to complete this dissertation, I would like to take this opportunity to thank those people who have given me special guidance and encouragement.

I am most indebted to Dr. Theresa Graham, my co-chair, but even more so my mentor and friend. With your caring guidance, patience, and belief in me, I have been able to keep my eye on the fulfillment of a lifelong goal. Thank you for challenging me to greater heights than I knew possible!

I sincerely thank Dr. Beth Doll, co-chair, and the members of my committee, Dr. Barbara Plake, Dr. Marcela Raffaelli, and Dr. Susan Swearer, for providing support and expertise throughout this endeavor. Thank you all for ensuring that this project was done in a thoughtful and mindful manner.

I wish to express my appreciation to Girls and Boys Town for the kind accommodation of my data collection needs. Also, I would like to thank Melanie Ballatore, Heather Lambert, Joy Pritchard, Mary Ann Terminello, Ruth Webb, and Jamie Hughes. To those who helped with data collection, thank you so much for your time and energy spent in the schools. Even more so, thank you for your unending support and encouragement.

I am especially grateful for a loving and supportive family. To my parents, Alvin and Darla Rae Bauer, your faith, guidance, and unending love are immeasurable. Thank you for teaching me to work hard and believe that anything is possible. To Stuart, thank you for being the best big brother anyone could ask for. To my sister, Cindy, thank you for your continued optimism and understanding of the importance of this journey for me. To Jeff, I can't thank you enough for the many times you came to my rescue! I am lucky to have such a wonderful brother and friend. And to Grandma Herron, thank you for your many prayers. To answer your question—yes, I am finally done!

Most importantly, I wish to thank my sons, Matthew and Cody, for their love, support, and understanding. This book is a reflection of your eternal optimism and faith in me. At times when I thought I would never finish, your smiles, hugs, and words of encouragement made all the difference. Thank you for allowing me to pursue my dreams, and I look forward to supporting you as you reach for your own stars.

DEDICATION

To Paul, whose love and strength surround me always...

PREVIEW

TABLE OF CONTENTS

	<u>Page</u>
ABSTRACT	ii
ACKNOWLEDGMENTS	iv
DEDICATION	v
TABLE OF CONTENTS	vi
LIST OF TABLES	xii
CHAPTER ONE: INTRODUCTION	1
Purpose of the Study	3
Ethnic Identity Development Theory	4
Phinney's Model	4
Ethnic Identity Measurement	5
The Construct of Competence	6
The Role of Adaptation in Competence.....	7
Ethnic Identity as a Marker of Developmental Competence	8
Ethnic Identity and Psychological Well-Being	9
Ethnic Identity and Academic Functioning.....	10
Ethnic Identity and Psychopathology.....	12
Summary	14
Definition of Terms.....	15
CHAPTER TWO: REVIEW OF THE LITERATURE	17
Residential Treatment	17

The GBT Model of Residential Care	18
Profile of GBT Youth	19
Family Home Program.....	19
GBT Education Program.....	20
Program Outcomes.....	21
Educational Outcomes	21
Clinical Outcomes.....	22
Potential Limitation of Residential Treatment.....	24
Ethnic Identity.....	25
Conceptual Frameworks for Ethnic Identity Development.....	27
Social Identity Theory.....	27
Acculturation as a Framework	29
Ethnic Identity Formation	31
Components of Ethnic Identity	37
Self-Identification and Ethnicity.....	37
Ethnic Behaviors and Practices.....	38
Affirmation and Belonging	41
The Measurement of Ethnic Identity.....	43
Multigroup Ethnic Identity Measure (MEIM)	44
Instrument Overview.....	44
Instrument Evaluation.....	45
MEIM and Developmental Outcomes	48

Academic Achievement	48
Career Decision-Making	50
Quality of Life	50
Self-Esteem	51
Summary	55
A New Perspective on Well-Being: Competence and Adaptation.....	55
Definition of Competence	56
Structural Components of Competence	57
Academic Achievement	58
Link between Competence and Psychopathology.....	59
Common Factors between Competence and Psychopathology.....	60
Competence Problems Resulting in Psychopathology.....	61
Integrative Study of Competence and Adaptation	63
Problems of Anxiety and Depression in Children and Adolescents	64
Anxiety.....	65
Types of Anxiety Disorders	65
Prevalence	67
Academic and Social Functioning	68
Depression.....	70
Types of Depressive Disorders	70
Prevalence	72
Academic and Social Functioning	74

Summary	75
Conclusion	75
Definitions and Measurement of Variables	77
Ethnic Identity	77
Demographics	78
Psychological Well-Being	78
Research Questions	79
CHAPTER THREE: METHODS	81
Setting	81
Participants	82
Measures	83
Student Information Sheet	83
Educational Records	84
Multigroup Ethnic Identity Measure	86
Multidimensional Anxiety Scale for Children-10	86
Children's Depression Inventory	87
Variables	89
Demographics	89
Ethnic Identity	90
School Success	90
Psychopathology	91
Procedures	92

Data Collection	92
Design	93
Analyses	93
Question One	93
Question Two.....	94
CHAPTER FOUR: RESULTS	95
Question One	95
Question Two.....	96
Differences in Ethnic Identity by Group	96
Analyses of Research Questions	100
Question One	100
White Participants.....	100
Multiple Ethnic Group	102
Question Two.....	103
White Participants.....	104
Multiple Ethnic Participants	104
Follow-up Analysis	106
CHAPTER FIVE: DISCUSSION	108
Results of this Study	108
Relationship between Ethnic Identity and Psychopathology	108
Relationship between Ethnic Identity and School Success.....	111
Between Group Differences in Ethnic Identity	114

Summary of Findings.....	117
Limitations of the Study.....	118
Directions for Future Research	120
Implications.....	122
REFERENCES	126
APPENDICES	165
A: University of Nebraska-Lincoln (UNL) Institutional Review Board	
Approval and Girls and Boys Town (GBT) Institutional Review Board	
Approval	165
B: UNL/GBT IRB Guardian Informed Consent Letter.....	168
C: UNL/GBT IRB Participant Assent Form	170
D: Student Information Sheet	172
E: Multigroup Ethnic Identity Measure (MEIM).....	174
F: Correlations of School Success and Psychopathology Variables	176

LIST OF TABLES

<u>Table</u>	<u>Page</u>
1: Summary of Demographic Characteristics of Participants	84
2: Means and Standard Deviations of MEIM Total Score by Ethnic Group	97
3: Means and Standard Deviations of Variables included in Multiple Regressions	98
4: Minimum and Maximum Values of Variables included in Multiple Regressions	99
5: Summary of the Two-Step Multiple Regression Analysis for Variables Predicting Psychopathology for White Participants	101
6: Summary of the Two-Step Multiple Regression Analysis for Variables Predicting Psychopathology for Multiple Ethnic Group	103
7: Summary of the Two-Step Multiple Regression Analysis for Variables Predicting School Success for White Participants	105
8: Summary of the Two-Step Multiple Regression Analysis for Variables Predicting School Success for Multiple Ethnic Participants	106
9: Comparisons of Mean Scores on Multigroup Ethnic Identity Measure	116
10: Correlations Among Variables for White Participants	176
11: Correlations Among Variables for Multiple Ethnic Participants	177
12: Correlations Among Variables for Total Participants	178

CHAPTER ONE

Introduction

Concern about the psychological well-being of children and adolescents in America is greater than ever. Alarming, about 9.5 million youth experience difficulties serious enough to warrant professional intervention (Bates, English, & Kouidou-Giles, 1997; Tuma, 1989). For more than one-half million of these children, residential placement is necessary due to significant emotional, behavioral, and/or familial dysfunction (Friman, 2000; Friman et al., 1996). As the problems experienced by children become more complex and challenging, the number of those placed in residential treatment settings is expected to increase (Chamberlain & Friman, 1997; Gilman & Handwerk, 2001).

Children of color are overrepresented in residential treatment programs (Chow, Jaffee, & Snowden, 2003; Kruzich, Friesen, Williams-Murphy, & Longley, 2002; U.S. Department of Health and Human Services, 2001). While African Americans make up approximately 12 percent of the total population (Aponte & Crouch, 2000), they constitute about 26 percent of the youth (from 10 to 19 years of age) in residential facilities (Kruzich et al., 2002). Even so, the needs of minority racial/ethnic groups remain poorly understood and largely unmet. Authorities in the field point to the lack of research devoted to the mental health status of ethnic minority adolescents (Kagawa-Singer, 1996; U.S. Department of Health and Human Services, 2001). Given the widespread recognition of the need to reduce health disparities for ethnic minorities and to develop effective services for all groups

(National Institute of Mental Health, 2000), the paucity of research in this specialized population is surprising.

Little is known about child and adolescent development in the context of this type of treatment. Programs are often based on theoretical models that incorporate developmental theory in principle. However, it is rarely clear how such theory is put into clinical practice (Miskimins, 1990; Zimmerman, 1990; as cited in Kools & Spiers, 2002). It is widely believed that mental health treatment for adolescents suffers from inattention to and/or a lack of understanding of developmental issues (Holmbeck & Kendall, 2002).

One factor that has gained recognition as important in adolescent development is ethnic identity (McMahon & Watts, 2002). Ethnic identity has been positively associated with a variety of developmental outcomes among a normalized population of youth and adults, including self-esteem (Roberts et al., 1999), academic achievement (Phinney, 1992), quality of life (Utsey, Chae, Brown, & Kelly, 2002), and coping (Zaff, Blount, Phillips, & Cohen, 2002).

Despite the documented connection between ethnic identity and developmental outcomes among youth in the general population, the relationship has not been examined within adolescents in residential placement. Indeed, no empirical studies of this specialized at-risk population were found that included an assessment of ethnic identity, and most documented interventions did not include goals of enhancing ethnic identity (McMahon & Watts, 2002). Most studies simply reported the ethnic composition of the participants when describing the demographic

characteristics of a residential sample. Again, this is surprising given the significant number of minority racial/ethnic children in residential treatment. Given that much remains unknown in our understanding of the role of ethnic identity in improving outcomes among youth in residential treatment, this study was crucial in order to better understand ethnic identity and psychological well-being in residential adolescents.

Purpose of the Study

The purpose of this study was to investigate the role of ethnic identity among adolescents in a residential treatment setting. Specifically, this research examined whether the presence of a positive ethnic identity was related to psychological well-being in a group of adolescents with a history of serious emotional and/or behavioral disturbance. Psychological well-being, as operationalized in this study, would be reflected in the presence of competence in developmentally salient tasks and the absence of psychopathology. Competence would be demonstrated by academic success, as indicated by good academic performance and achievement, self-identified future educational plans, and participation in extracurricular activities.

Psychopathology would be reflected in the presence of current symptoms of depression and anxiety. It was hypothesized that adolescents who indicated a strong ethnic identity would demonstrate fewer symptoms of depression and anxiety and higher levels of school success. It was anticipated that this study would provide information about the influence of a positive ethnic identity on the psychological well-being of a unique population of adolescents, i.e., those in residential treatment.

Such information would contribute to ensuring that developmentally appropriate and culturally sensitive services are provided in residential settings. This chapter continues with a brief overview of ethnic identity development, developmental competence, and psychological well-being. The research questions are then summarized.

Ethnic Identity Development Theory

The development of a positive sense of ethnic identity is an important task of adolescence (Phinney, Lochner, & Murphy, 1990). Ethnic identity includes a sense of membership in a particular ethnic group and the attitudes and feelings associated with that membership (Bernal & Knight, 1993; Keefe, 1992; Phinney, 1990), as well as with groups other than one's own (Tajfel, 1981). It is a complex, multidimensional construct that varies across members of a group (Phinney, 1996). While much research has focused on dimensions of ethnic identity that are unique to specific ethnic groups, the research presented here used methods developed by Phinney (1992) to study commonalities in the general phenomenon of ethnic identity across groups.

Phinney's model. According to Phinney (1992), "Each group has its unique history, traditions, and values; yet, the concept of belonging to one's own group is common to all human beings" (p. 158). From this perspective, ethnic identity is a multidimensional concept including self-identification as a group member, a sense of belonging and attachment, positive attitudes or feelings about one's group, and participation in the group's social activities and cultural traditions (Phinney, 1990).

Whereas ethnicity serves to differentiate subgroups of the population, ethnic identity may vary within as well as between ethnic groups.

Ethnic identity measurement. Early measurement research on ethnic identity generally focused on the relationship between a single ethnic minority group and the dominant group, i.e., Whites (Phinney, 1990; Rotheram, 1987). This approach implies that people of color define themselves exclusively or predominantly in relation to Whites, an assumption unsupported by empirical evidence (Yancey, Aneshensel, & Driscoll, 2001). Instruments have often been quite lengthy, have placed individuals in a predetermined stage of ethnic identity development, have focused on a particular aspect of ethnic identity, and have been culturally tailored to a particular ethnic group (e.g., the Racial Identity Attitude Scale; Yancey et al., 2001).

Phinney (1992) developed the Multigroup Ethnic Identity Measure (MEIM) in an effort to capture universal aspects of ethnic identity. The MEIM has been used extensively in research on multiple ethnic groups, including African American (Sellers, Smith, Shelton, Rowley, & Chavous, 1998; Smith & Brookins, 1997), Asian American (Feldman, Mont-Reynaud, & Rosenthal, 1992; Zaff et al., 2002), and Hispanic (Bernal, Knight, Organista, Garza, & Maez, 1993). Additionally, the scale is among the first in the field to be applicable to youth of European descent (McMahon & Watts, 2002). In the majority of these studies, participants have been students attending public high schools and colleges in large, diverse urban areas.

No research was found that examined ethnic identity development among youth in residential treatment even though ethnic minority children are

overrepresented in residential treatment programs (Coker, Menz, Johnson, & McAlees, 1996; Snowden, Cuellar, & Libby, 2003). It is alarming, then, that the issue of ethnic identity has not been addressed among this unique population. Despite the high numbers of diverse children currently in residential care, most programs have not considered the influence that a strong ethnic identity may have for youth in these settings. Understanding ethnic identity and its influence on salient developmental tasks is essential for ensuring the quality of services provided to youth in residential care. This study added to this limited body of research by investigating whether a strong ethnic identity might be a contributing factor in the psychological well-being of adolescents in a residential treatment program.

The Construct of Competence

While competence has had numerous meanings in psychology (Garnezy & Masten, 1991; Masten et al., 1995), it generally refers to a pattern of effective adaptation in the environment. Such adaptation can be evaluated broadly in terms of reasonable success with salient developmental tasks expected for a person of a given age and gender in the context of his or her culture, society, and time (Masten & Coatsworth, 1995; Masten et al., 1995). It also can be evaluated more narrowly in terms of specific domains of achievement such as academics, conduct, or peer acceptance. As competence results from complex interactions between children and their environment, it will change as they develop and mature or when the context changes. Furthermore, children are embedded within many other systems such as families and schools. As children grow up, the contexts in which they must function

will change. Thus, the ways in which they demonstrate competence will differ (Hammen, Rudolph, Weisz, Rao, & Burge, 1999; Masten & Coatsworth, 1995). Both their capabilities and the nature of the contexts in which they live will influence competence. For youth in residential treatment, these interactions are especially complex.

The Role of Adaptation in Competence

Most developmental theorists assume that many processes contribute to individual competence (Masten & Coatsworth, 1995; Sameroff, 2000; Waters & Sroufe, 1983). These processes require the coordination of various developmental tasks (i.e., cognitive, emotional, physical, and social activities) to achieve positive psychosocial outcomes (Masten et al., 1995; Masten & Curtis, 2000). These developmental tasks serve as valuable markers of how well development has been proceeding and as warning signs of possible trouble (Cicchetti, 1990; Sroufe, 1979; Waters & Sroufe, 1983). Indeed, “knowledge about normative development and developmental tasks provides key benchmarks by which behavior is evaluated as deviant and maladaptive or effective and successful” (Masten & Coatsworth, 1995, p. 715).

Successful adaptation has been defined from both internal and external adaptational perspectives. Psychological problems and symptoms associated with failures of internal adaptation are often conceptualized as “mental illness” or “mental disease.” Symptoms often include such affective experiences as depressed mood, anxiety, distress, and negative self-perceptions. Problems of external adaptation might

include trouble with the law, school or job failure, and social rejection (Masten & Coatsworth, 1995; Masten & Curtis, 2000).

Historically, psychological problems and symptoms were viewed within a disease model. Diagnostic terms were used to both describe and explain maladaptive behavior (Sameroff, 2000; Sroufe, 1997). More recently, a developmental psychopathology perspective has been promoted as the foundation for understanding, treating, and preventing such ‘mental disorders’ (Cicchetti, 1989; Sameroff, 2000; Shirk, Talmi, & Olds, 2000). This discipline has introduced an important reorientation to the study of mental health (Sameroff, 2000), in that the principles of development are viewed as active attempts of each individual to reach an adaptive relation to his or her environment (Sroufe & Rutter, 1984). Thus, it is imperative to attend to patterns of adaptation in addition to pathology when describing competence. A developmental perspective expands upon traditional models of psychopathology in that it emphasizes the constructive and adaptational processes of development (Sameroff, 2000; Sroufe & Rutter, 1984). Such an approach contributes to the identification of factors that influence a child’s ability to organize experience and, consequently, the child’s level of adaptive functioning.

Ethnic Identity as a Marker of Developmental Competence

To effectively study developmental competence, it is imperative to understand the particular features of the individual or the environment that may help to explain positive outcomes (Masten et al., 1999). The construct of ethnic identity may contribute to such an understanding, as “attitudes toward one’s own ethnicity are

central to psychological functioning” (Phinney, 1990, p. 499). Hence it is critical to determine and appropriately measure the emergence and salience of specific skills, such as ethnic identity development, that define the functional or adaptive competence of children.

To date, much of the extant literature on ethnicity and psychopathology lacks an explicit developmental focus. However, recent models of development propose that cultures, lifestyles, and even developmental outcomes that are different from the White middle-class mainstream are neither a product of pathology nor deficient relative to mainstream standards (Garcia Coll et al., 1996; Jensen & Hoagwood, 1997; Manson, Bechtold, Novins, & Beals, 1997; Ogbu, 1981; Serafica, 1997). Rather, they are legitimate adaptations to contextual demands and are valuable in their own right (Garcia Coll, Akerman, & Cicchetti, 2000). This study expanded this developmental focus to an at-risk population in that it considered the emergence and salience of ethnic identity and its role in psychological well-being for youth placed in residential treatment. Specifically, psychological well-being was operationalized from a developmental perspective.

Ethnic Identity and Psychological Well-Being

A developmental perspective emphasizes the constructive and adaptational processes of development (Sameroff, 2000; Sroufe & Rutter, 1984). Such an approach contributes to the identification of factors that influence a child’s ability to organize experience and, consequently, the child’s level of adaptive functioning. In this study, the construct of psychological well-being (i.e., presence of competence in

academic functioning and absence of psychopathology) is representative of the youths' adaptive functioning and competence.

There is limited research that has examined the relationship of ethnic identity and psychological well-being. Some studies have established a connection between ethnic identity and individual outcome variables, such as self-esteem (Lorenzo-Hernandez & Ouellette, 1998; Verkuyten & Lay, 1998) and academic achievement (Phinney, 1992). However, no studies of ethnic identity were found that included an expanded construct of psychological well-being, i.e., one that includes indicators of both competence and psychopathology. This investigation of the relationships among a strong ethnic identity and academic success, as well as ethnic identity and symptoms of depression and anxiety, addressed these connections.

Ethnic identity and academic functioning. Empirical studies have found racial and ethnic group differences in academic achievement (Cockley, 2002). These differences have been attributed to a variety of variables, including minority students' experiences of marginalization and racism (Arroyo & Zigler, 1995; Fordam & Ogbu, 1985), racial identity (Oyserman, Harrison, & Bybee, 2001; Sandoval, Gutkin, & Naumann, 1997), and motivation (Connell, Spencer, & Aber, 1994). Gender differences have been noted as well, in that some ethnic minority male students have been found to perform more poorly than their female peers (Connell et al., 1994).

Studies have begun to examine the relationship between academic achievement and ethnic identity. In her seminal study regarding the Multigroup Ethnic Identity Measure, Phinney (1992) examined differences in ethnic identity