

Racial Microaggressions, Psychological Well-Being, and Ethnic Identification among

People of Color in the U.S.

Imani R. Whitfield, M.S.Ed

Pace University

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NAME: Imani Whitfield

TITLE OF PROJECT: Racial Microaggressions, Psychological Well-Being,  
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DOCTORAL PROJECT COMMITTEE:

PROJECT ADVISOR: Lisa Rosenthal

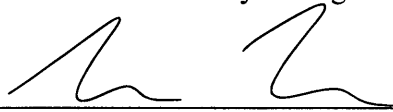
Name	
Assistant Professor	Pace University
Title	Affiliation

PROJECT CONSULTANT: Perna Arora

Name	
Assistant Professor	Columbia University
Title	Affiliation

FINAL APPROVAL OF COMPLETED PROJECT:

I have read the final version of the doctoral project and certify that it meets the relevant requirements for the Psy.D. degree in School-Clinical Child Psychology.

  
Project Advisor's Signature

5/7/19

Date

**Arora, Perna**  
Digitally signed by Arora, Perna  
DN: cn=Arora, Perna, o=Teachers College,  
Columbia University, ou,  
email=arora23@tc.columbia.edu, c=US  
Date: 2019.06.12 18:36:30 -05'00'  
Project Consultant's Signature

Date

## Abstract

Racial microaggressions are common, everyday slights and insults that have been associated with greater adverse psychological symptoms among people of color. Ethnic identification is the sense of belonging and connection people have with their ethnic group, which has been associated with greater psychological well-being among people of color. Research findings have been mixed about whether ethnic identification serves as a buffering moderator of effects of microaggressions on psychological outcomes. Further, many studies examining the impact of racial microaggressions have focused on adolescent or college student samples and members of one particular racial/ethnic group, with less work focused on adults of different racial/ethnic backgrounds. Continuing to explore associations among experiences of racial microaggressions, ethnic identification, and mental health outcomes among adults of color from different racial/ethnic backgrounds is important to understanding how best to intervene to support people of color both in society at large as well as in clinical settings. In the following study, I explored racial/ethnic differences in experiences of racial microaggressions as well as associations of those experiences with well-being indicators (i.e., anger, anxiety symptoms, depressive symptoms, and life satisfaction) among a sample of adults of color living in the U.S. Further, I tested whether ethnic identification plays a buffering role as a moderator of associations of experiences of racial microaggressions with well-being outcomes. I hypothesized that people of color who experience more racial microaggressions would have poorer well-being (i.e., greater anger, anxiety symptoms, and depressive symptoms, as well as lower life satisfaction), that ethnic identification would be associated with greater well-being, and that ethnic identification would buffer individuals from the adverse consequences of microaggressions for well-being. This study utilized linear regression and bootstrap moderation analyses to test these hypotheses.

Mostly consistent with hypotheses, racial microaggressions were associated with great anger, anxiety symptoms, and depressive symptoms, but were not associated with life satisfaction. Inconsistent with hypotheses, ethnic identification did not moderate any associations of racial microaggressions with psychological well-being symptoms, and ethnic identification was also directly associated with greater anger and depressive symptoms. Additionally, racial/ethnic group differences were found in mean levels of different types of microaggressions experienced, as well as in associations of microaggressions with mental health outcomes, helping to understand the different consequences of racial microaggressions for diverse groups. Findings can inform societal and clinical interventions aimed at supporting well-being among people of color in the U.S.

*Keywords:* anger, anxiety, depression, discrimination, ethnic identification, life satisfaction, racial microaggressions, racism, well-being

Racial Microaggressions, Psychological Well-Being, and Ethnic Identification among People of Color in the U.S.

The U.S. has a high prevalence of mental health disorders, with 45 states in 2015 reporting that 5,235,883 individuals 18 and older had a mental health diagnosis, the two most common being depression and anxiety (Substance Abuse and Mental Health Services Administration, 2017). While past research suggested similar prevalence rates of mental health disorders between white Americans and Americans of color (e.g., Landrine, Klonoff, Corral, Fernandez, & Roesch, 2006; Office of the Surgeon General, Center for Mental Health Services, & National Institute of Mental Health, 2001), more recent research has found Americans of color to have lower rates of mental health disorders than white Americans do (e.g., Breslau et al., 2017; Heeringa et al., 2004; McGuire & Miranda, 2008). Yet, there may be underestimation of prevalence among people of color, as they are more likely to wait until the severity of symptoms is high rather than when they are first present to seek help (Alegría, Pérez, & Williams, 2003) and have been found to be less likely to perceive a need for mental health treatment even when endorsing elevated levels of adverse mental health symptoms (Breslau et al., 2017). Further, people of color may have less access to mental health services and receive poorer quality mental health services than their white counterparts (Office of the Surgeon General, Center for Mental Health Services, & National Institute of Mental Health, 2001). There may be unique factors that affect mental health outcomes and treatment among people of color, which are critical to explore. Thus, understanding what factors contribute to and help to buffer people of color from mental health issues is important to know how to intervene to improve mental health services provided to communities of color.

Racism has long been considered a stressor that leads to mental health symptoms and disorders among people of color in the U.S. Kramer et al. (1973), stated that “Racist practices undoubtedly are key factors—perhaps the most important ones—in producing mental disorders in Blacks and other underprivileged groups...” (p. 353). Much research supports that this continues to be true, with various forms of discrimination, including specifically racism, being found to have adverse consequences for a range of well-being outcomes (Pascoe & Smart Richman, 2009; Williams & Mohammed, 2009). In recent years, with overt racism being less common (Wong et al., 2014), racial microaggressions have been studied as subtle forms of racial discrimination that the perpetrators may not be aware that they are enacting (Sue et al., 2007; Wong et al., 2014). Racial microaggressions include verbal and nonverbal communications to people of color that convey insults, snubs, and other subtle derogatory messages (Sue et al., 2007). Although racial microaggressions may initially cause minimal damage to people of color, over time their effects can accumulate and have a detrimental effect on well-being (Sue et al., 2007; Wang et al., 2011). For example, racial microaggressions have been associated with adverse mental health outcomes such as symptoms of anxiety and depression among people of color (Hollingsworth et al., 2017; Kim, Kendall, & Cheon, 2016; Sue, Capodilupo, & Holder, 2008). Yet, much of the work on well-being consequences of racial microaggressions has focused on college samples and members of one particular racial/ethnic group, suggesting the need for future work exploring these dynamics among adults of different racial/ethnic backgrounds.

Ethnic identification involves the sense of belonging and connection people have with their ethnic group (Phinney & Ong, 2007). Ethnic identification has long been thought of as a potential buffer of the adverse consequences of racism for people of color (Choi, Lewis, Harwood, Mendenhall, & Hunt, 2017). However, research findings have been mixed about

whether ethnic identification can buffer effects of racial microaggressions on mental health outcomes, with some studies finding support and others not finding support for this hypothesis (Lee, 2003; Phinney & Ong, 2007; Smokowski, Evans, Cotter, & Webber, 2014). These mixed findings suggest the need for more research to explore the potential buffering role of ethnic identification. Thus, the current investigation explored racial/ethnic differences in experiences of racial microaggressions, the consequences of those experiences for mental health outcomes, and the influence of ethnic identification on adults of color in the U.S. from diverse racial/ethnic backgrounds in order to inform interventions to support people of color.

### **Racial Microaggressions**

The forms that racism has taken in the U.S. have evolved over time. More overt forms of racism that categorized much of U.S. history have decreased since the Civil Rights Movement (Lilienfeld, 2017). The forms of racism that are more prevalent currently tend to be more covert, discrete, and subtle than old-fashioned racism. From the perspective of those holding racist beliefs, social psychologists have identified and studied these forms as modern racism (McConahay, 1986), aversive racism (Dovidio, Gaertner, Kawakami, & Hodson, 2002), and symbolic racism (Sears, 1988). From the perspective of targets of racism, public health and interdisciplinary scholars, including in psychology, have identified and studied major and everyday racism/discrimination (Williams & Mohammed, 2009; Williams, Yan Yu, Jackson, & Anderson, 1997) in relation to a range of mental and physical health outcomes. Focusing more on distinguishing multidimensional forms of subtle racism from the perspective of targets of racism, researchers have increasingly studied racial microaggressions.

Racial microaggressions were originally defined as “subtle, stunning, often automatic, and non-verbal exchanges which are ‘put downs’” (Pierce, Carew, Pierce-Gonzalez, & Wills,



1977, p. 65). More recently, Sue et al. (2007) expanded this definition of racial microaggressions into “brief and commonplace daily verbal, behavioral, and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, negative racial slights and insults to the target person or group” (p. 273). These experiences can be overlooked as innocuous or innocent, but they often leave the receiver feeling hurt and insulted (Lilienfeld, 2017; Sue et al., 2007). As stated previously, racial microaggressions are a form of racial discrimination that is more discrete and subtle, and perpetrators of microaggressions are often unaware of the potential harm in these actions (Wong et al., 2014). Even though the message may not have been directly intended as an insult, the racism in which it is embedded is still present, albeit hidden. Because of this subtleness, a person of color may or may not initially negatively respond to the situation because the perpetrator did not view their actions as harmful (Sue et al., 2007; Wong et al., 2014). However, a person of color may subsequently think about and decode this message to understand the underlying racial insult. The accumulation of these experiences over time can have harmful effects on well-being (Sue et al., 2007; Wang et al., 2011).

Sue et al. (2007) broke down microaggressions into three different forms: microassaults, microinsults, and microinvalidations. Microassaults are the more overt form of microaggressions, including name-calling (e.g., using racial slurs), avoiding interaction with certain populations, and discriminatory or unfair treatment of individuals based on their race/ethnicity (Sue et al., 2007). Microinsults are rude and insensitive communications that degrade an individual’s racial background or identification, such as ignoring a person of color’s contribution or assuming that a person of color’s success is due to affirmative action or external sources (Sue et al., 2007). Microinvalidations are verbal communications that marginalize, dismiss, or invalidate the contributions and perspectives of a person of color, such as denying the

importance of race/ethnicity and/or racism (i.e., colorblind theory) or assuming a person of color is an immigrant (Sue et al., 2007). Sue et al. (2007) also broke down the three forms of microaggressions into several distinct types within each form. Microassaults include one distinct form: *Environmental Microaggressions*, which are racial invalidations and insults that occur on environmental and systemic levels. Microinsults include four different forms: *Ascription of Intelligence*, which involves interpreting intelligence based on the person's race; *Second Class Citizen*, which involves treating a person or group as less important than other groups; *Pathologizing Cultural Values/Communication Styles*, which involves believing that the values and communication styles of people of color are abnormal; and *Assumption of Criminal Status*, which involves perceiving a person as dangerous or criminal due to their race.

Microinvalidations include four different forms: *Alien in One's Land*, which involves presuming that racial/ethnic minority citizens are foreigners; *Color Blindness*, which involves denial of seeing color or race; *Myth of Meritocracy*, which involves believing that race does not play a role in life successes; and *Denial of Individual Racism*, which involves denying personal racism or one's role in its perpetuation (Sue et al., 2007).

The ways that racial microaggressions are experienced by people of color can differ for different racial/ethnic groups and different individuals. Forest-Banks and Jenson (2015) explored experiences of racial microaggressions among African American, Asian American, and Latinx American college students. They found that African Americans experienced higher levels of racial microaggressions than the other groups, especially for "*Feelings of Second Class Citizenship*" and "*Assumptions of Criminality*." Latinx Americans experienced higher levels of "*Assumptions of Inferiority*" and "*Microinvalidations*." And, while Asian Americans overall experienced lower levels of racial microaggressions, they endorsed higher levels of

*“Exoticization and Assumptions of Similarity”* and *“Environmental Microaggressions”* (Forrest-Bank & Jenson, 2015). In another comparative study, Nadal et al. (2014) examined experiences of racial microaggressions among African American, Asian American, and Hispanic American college students. They found that African and Hispanic American participants experienced more *“Assumptions of Inferiority”* than Asian American participants did. African American participants also experienced the highest levels of *“Feelings of Second Class Citizens”* and *“Assumptions of Criminality,”* while Asian American participants experienced higher levels of *“Exoticization and Assumptions of Similarity”* and *“Environmental Microaggressions”* (Nadal, Griffin, Wong, Hamit, & Rasmus, 2014). Evidence from these comparative studies suggests that among people of color, different racial/ethnic groups experience racial microaggressions in diverse forms. Thus, it is important for research to continue to examine racial/ethnic differences in experiences of microaggressions, which the current study did.

### **Consequences of Racial Microaggressions for People of Color**

Racial microaggressions occur in a variety of settings, including classrooms (Ford, Scott, Moore, & Amos, 2013; Franklin, 2016; Kohli & Solórzano, 2012; Smith, Yosso, & Solórzano, 2006; Suárez-Orozco et al., 2015), workplaces (DeCuir-Gunby & Gunby, 2016; Smith, Yosso, & Solórzano, 2006), and counseling rooms (Davis et al., 2016; Hook et al., 2016; Sue et al., 2007). Some of these locations are places where people do not expect to encounter a racial microaggression (Sue et al., 2007). Even though microaggressions vary in terms of the level of consciousness and purposefulness on the part of the perpetrators, all of these experiences can result in people of color feeling demeaned, which can then have adverse consequences for their well-being (Davis et al., 2016; DeCuir-Gunby & Gunby, 2016; Kim et al., 2016). Nadal et al. (2014) found in their study with African American, Asian American, and Hispanic American

adults that greater experiences with racial microaggressions were associated with greater symptoms of depression. Huynh (2012) also found that racial microaggressions predicted symptoms of anger, depression, and anxiety in an adolescent Latinx and Asian American sample. Palmer and Maramba (2015) interviewed several Asian and Hispanic American undergraduate students, who reported feelings of discomfort and anxiety when they experienced racial microaggressions on campus. Kohli and Solórzano (2012) had adults of different racial/ethnic backgrounds reflect and discuss the ways that they experienced racial microaggressions related to language and their names when they were in primary education. They found that racial microaggressions from teachers mispronouncing their names resulted in several students feeling inadequate, embarrassed, alienated, lack of belonging, and anxious (Kohli & Solórzano, 2012). Although these studies examined consequences of microaggressions among multiple racial/ethnic groups, most studies have explored these consequences among only one racial/ethnic group.

**African Americans.** Sue et al. (2008) explored the ways that African American graduate students are affected by racial microaggressions by utilizing several focus groups. They found that the participants described experienced a range of emotions and reactions to experiencing microaggressions, including feeling “worthless,” “a threat,” “not fitting in,” “different,” “put in a spotlight,” or “being made to represent their race” (Sue et al., 2008). Hollingsworth et al. (2017) found that among African American undergraduate students, greater experiences of racial microaggressions were associated with higher levels of perceived burdensomeness toward other people and society, which in turn was associated with higher levels of suicidal ideation. Smith, Mustaffa, Jones, Curry, and Allen (2016) found that across college campuses in the U.S., African American men experienced racial misandry as a form of microaggressions. Racial misandry is

“an exaggerated pathological aversion toward Black males that is created and reinforced in societal, institutional, and individual ideologies, practices, and behaviors” (Smith et al., 2011, p. 63). In response to these microaggressions, male African American students reported feeling varying levels of frustration, shock, avoidance/withdrawal, disbelief, anger, defensiveness, uncertainty/confusion, resentment, anxiety, helplessness, hopelessness, and fear (Smith et al., 2016). These studies (e.g. Hollingsworth et al., 2017; Smith, Hung, & Franklin, 2011; Smith, Mustaffa, Jones, Curry, & Allen, 2016; Sue, Capodilupo, & Holder, 2008) found that African American women and men also felt a range of mental health symptoms as consequences of microaggressions, including anger, depression, shock, and feeling as a burden to other people.

**Asian Americans.** Previously some researchers believed that Asian Americans were not exposed to racism or discrimination because of being viewed as “model minorities” (Suzuki, 2002). However, this is an inaccurate assumption. For example, Thakore (2014) reminds us that “The assumption that Asian Americans are the model minority presupposes that they experience no discrimination in the United States. In fact, South Asians are subjected to the same discriminatory experiences of not being White as are other ethnic minorities in the United States” (Thakore, 2014, p. 153). And, research supports that not only do Asian Americans experience microaggressions, but they have adverse consequences for their well-being, as is found with other racial/ethnic groups. Nadal, Wong, Sriken, Griffin, and Fujii-Doe (2015) found that Asian American undergraduate students experienced all forms of microaggressions. However, microinvalidations, in particular, predicted greater levels of adverse mental health outcomes, including more symptoms of anxiety and depression, and loss of behavioral control. These findings suggest that the model minority myth, in particular, has adverse consequences for Asian Americans (Nadal et al., 2015). Ong, Burrow, Fuller-Rowell, Ja, and Sue (2013) found in their

study of first-year Asian American undergraduates that 78% of participants experienced a racial microaggression during the two-week study. Consistent with Nadal et al.'s (2015) findings, Ong et al. (2013) found that microinvalidations were the most common form of microaggressions reported, and greater microinvalidations were associated with higher levels of psychological distress, including negative affect and somatic symptoms. Kim, Kendall, and Cheon (2016) also found that greater experiences of microaggressions were associated with lower subjective well-being in a sample of Asian American college students. Choi et al. (2016) found in a sample of Asian American college students that there was a positive association between frequency of microaggressions and depressive symptoms.

**Latinx Americans.** Racial microaggressions have been found to affect Latinx Americans in similar processes as have been found among African Americans. Balagna, Young, and Smith (2013) conducted a study with Latinx American 6<sup>th</sup> grade students who were screened for behavioral disorders utilizing the Systematic Screening for Behavior Disorders by their teachers and the researchers. Only students who met or exceeded the normed cutoff for At Risk behaviors were included in their study. These 6<sup>th</sup> grade students were interviewed regarding their experiences of racial microaggressions. The students experienced racial microaggressions on a daily basis in their school. Additionally, the students identified comments from their classmates that focused on their ethnic/cultural identification, immigration status, and the way that they live as leading them to experience anger and react with violence (Balagna et al., 2013). Franklin, Smith, and Hung (2014) found in a study of Latinx graduate and undergraduate students that greater experiences with microaggressions were associated with negative psychological symptoms, including feelings of isolation, alienation, irritability, frustration, shock, disappointment, and agitation, as well as increases in their awareness of racism and experiences