



Coping with racial stress: An emerging public health issue

Cheryl Armstead, MS(R), Ph.D.
&
Eugena Griffin, MA

University of South Carolina, Department of Psychology &
SC Statewide Cancer Prevention Center

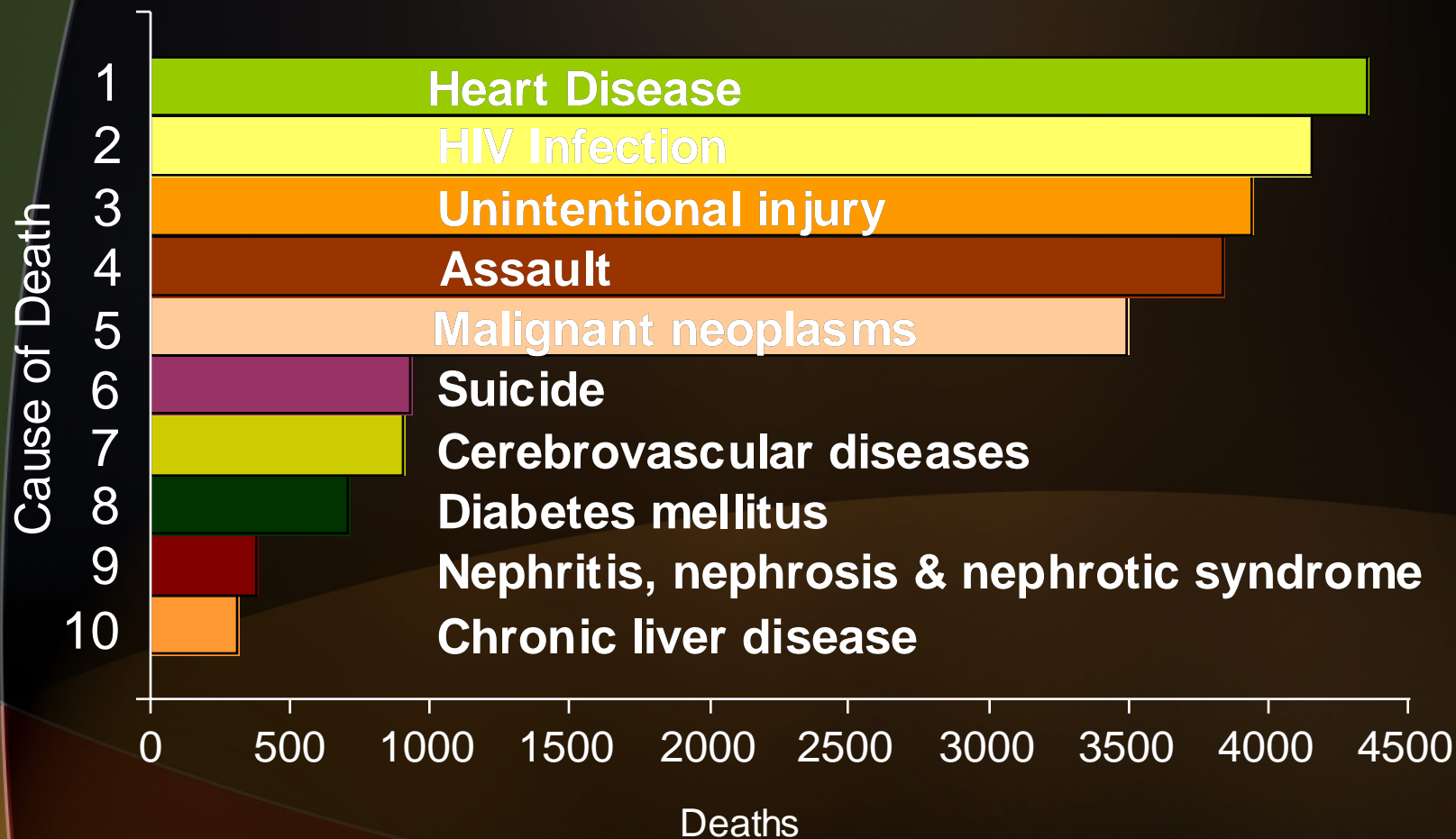
The background features a complex composition of overlapping shapes and gradients. On the left, there are several distinct colored regions: a dark green triangle at the top, a brown triangle below it, and a tan trapezoidal shape at the bottom. These are separated by thin white lines. The right side of the image is dominated by a large, smooth gradient that transitions from a dark, almost black color at the top to a bright, glowing orange and yellow at the bottom. The word "Background" is centered in the middle of this gradient in a bright yellow, sans-serif font.

Background

Health Disparities

- •A National priority
- •Many large scale epidemiological studies have found that disparities exist in life span, cancer, CVD, infant mortality, most chronic disease categories, motor vehicle accident and youth homicide
- Disparities also exist in mental health and risky health behaviors!
- •The elimination of health disparities by 2010
- •Attention has turned to studies of intervention and cause

Leading Causes of Death Among Black Americans, 25-44, 2002



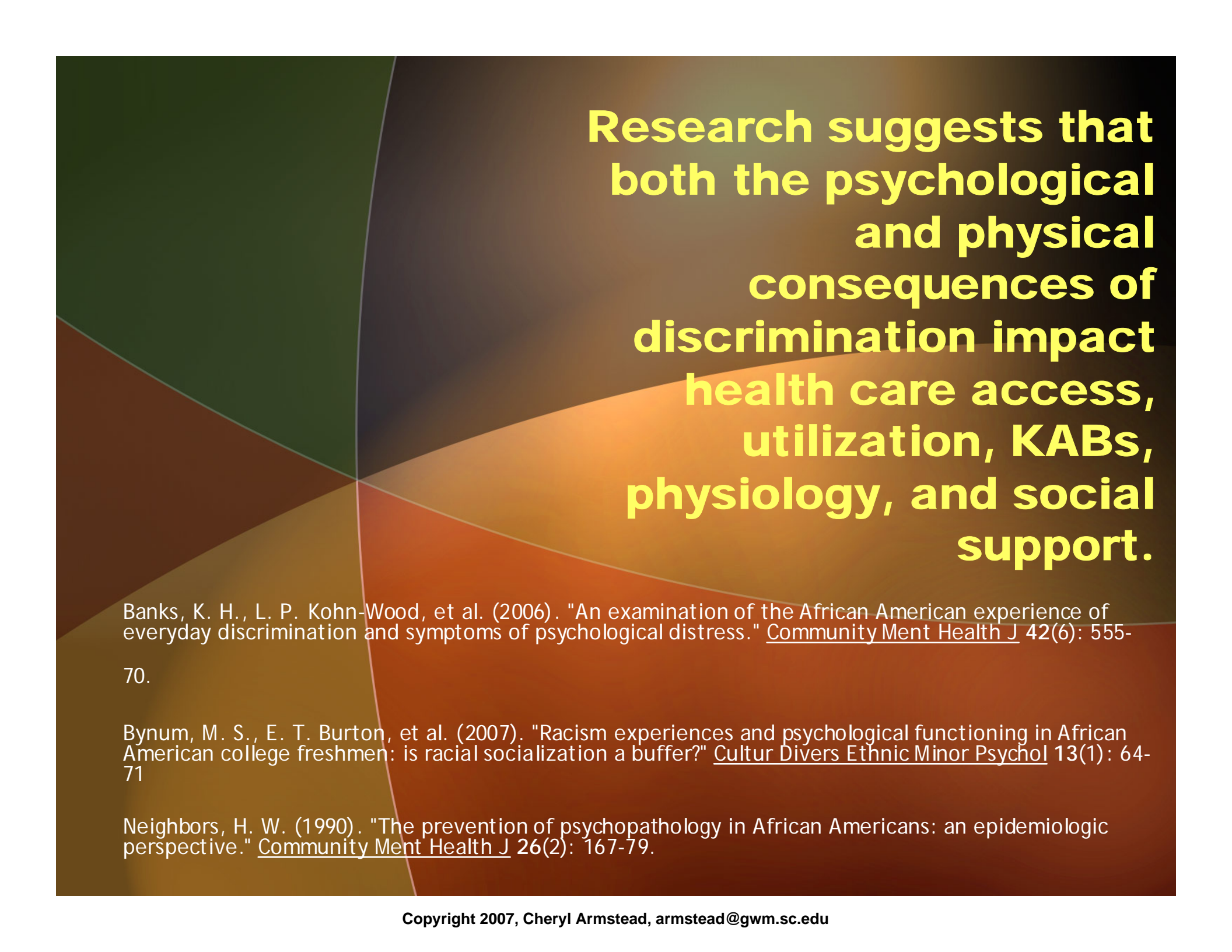
Source: U.S. Centers for Disease Control and Prevention. National Vital Statistics Reports, Deaths: Leading Causes for 2002. Public Health Service, 2003 (Vol. 53, No. 17)

Despite the end of legally-imposed segregation and improved opportunities for African Americans (AAs), studies document the persistence of discrimination.

- Recent research has indicated that the prevalence of both physical and mental disorders is estimated to be higher among Blacks than among Whites, most likely due to the nexus of race, racism, and socioeconomic disparity.

The stress paradigm helps us to bridge the gap between research and application





Research suggests that
both the psychological
and physical
consequences of
discrimination impact
health care access,
utilization, KABs,
physiology, and social
support.

Banks, K. H., L. P. Kohn-Wood, et al. (2006). "An examination of the African American experience of everyday discrimination and symptoms of psychological distress." Community Ment Health J 42(6): 555-70.

Bynum, M. S., E. T. Burton, et al. (2007). "Racism experiences and psychological functioning in African American college freshmen: is racial socialization a buffer?" Cultur Divers Ethnic Minor Psychol 13(1): 64-71

Neighbors, H. W. (1990). "The prevention of psychopathology in African Americans: an epidemiologic perspective." Community Ment Health J 26(2): 167-79.

Racism as a public health issue

- Racial discrimination remains an important public health issue which effects policy formation, mental health services delivery, and community prevention.



The present study examines the mental health effects of exposure to yearly or lifetime perceived racial discrimination

Learning objectives for this talk are to:

- Describe how coping with racism may affect the mental health of young African American men and women in South Carolina.
- Describe racial stress theory.
- Describe the unmet need for sociocultural translational research for African American communities.
- Summarize issues pertaining to the intersection of racial stress and mental health that health care may impact health care access and utilization.

The research objectives of the study were:

- To carry out a preliminary evaluation of the emotional and mental health correlates of perceived racism and
- To delineate the frequency of perceived racism in a sample of African American university students.

Methods

- 289 African American students at a predominately White university.
- Convenience sample.
- 124 male and 155 female participants completed self-report questionnaires.
- Students received course credit.

Questionnaires:

- The Perceived Racism Scale (PRS),
- Health Status Questionnaire,
- The SCL-90-R,
- The Trait Anxiety Inventory (STAIX),
- The Cook and Medley Hostility Scale

Perceived Racism Scale

PRS STRUCTURE

Please circle the number that corresponds to how often you experience each event.

	Not Applicable	Almost Never	Several Times a Year	Several Times a Month	Several Times a Week	Several Times a Day
A. How often has this happened in the <u>PAST YEAR</u> ?	0	1	2	3	4	5
B. How often has this happened during my <u>LIFETIME</u> ?	0	1	2	3	4	5

Statistical Design

- Demographic and SCL-90 responses were coded and scored.
- PRS scores were divided into 2 groups for analysis (high and low frequency of racial stress).
- ANCOVAs by yearly and lifetime racial stress
- Covariates: Age & Gender.



Results

Respondent Characteristics

	N	Minimum	Maximum	Mean	SD
Age	251	17.00	39.00	20.88	4.10
Lifetime Racial Stress	270	3.00	137.00	55.95	23.97
Yearly Racial Stress	270	3.00	185.00	55.99	25.44
Trait Hostility	258	55.00	217.00	108.22	54.26
Cynicism	252	15.00	57.00	28.97	14.11
Social Avoidance	252	4.00	9.00	6.49	1.06
Trait Anxiety	220	19.00	72.00	40.95	10.63
Anxiety Symptoms	264	10.00	41.00	15.30	5.25
Hostility Symptoms	262	6.00	27.00	9.26	3.86
Somatization	260	11.00	38.00	16.97	5.88
Depression	262	13.00	56.00	25.83	11.27
Distress	260	40.00	156.00	67.07	21.77
Valid N (listwise)	188				

Partial Correlations Between Lifetime and Yearly Racial Stress

- As expected, lifetime and yearly frequency of racial stress exposure were highly correlated even after controlling for age and gender.
 - $R=.94, p<.0001$

Racial Stress is modestly related to Trait Hostility, Cynicism, & Student Stress

Control Variables		Lifetime Racial Stress	Yearly Racial Stress
Age & Gender	Trait Hostility	0.15**	0.18**
	Cynicism	0.12*	0.16*
	Social Avoidance	-0.05	-0.03
	Student Stress	0.17*	0.18**
	Trait Anxiety	0.06	0.06

*p<.05, **P<.01

Symptomology was not associated with trait measures of adjustment after controlling for age and gender. All p s > 1.00

Effects of Yearly Racial Stress Exposure

High Frequency of Yearly Racial Stress Increases Distress-Related Symptomology

Dependent Variable		df	F	Sig.	Partial Eta Squared
Anxiety	Contrast	1.00	12.22	0.0010	0.05
	Error	238.00			
Hostility	Contrast	1.00	3.58	0.0600	0.01
	Error	238.00			
Somatization	Contrast	1.00	7.28	0.0100	0.03
	Error	238.00			
Depression	Contrast	1.00	31.11	0.0001	0.12
	Error	238.00			
Distress	Contrast	1.00	22.32	0.0001	0.09
	Error	238.00			

Effects of Lifetime Racial Stress Exposure

High Frequency of Lifetime Racial Stress Increases Trait Hostility & Cynicism

Dependent Variable		df	F	Sig.	Partial Eta Squared
HO	Contrast	1.00	14.40	0.002	0.07
	Error	189.00			
Cynicism	Contrast	1.00	12.81	0.0004	0.06
	Error	189.00			
Social Avoidance	Contrast	1.00	0.13	0.72	0.00
	Error	189.00			
Trait Anxiety	Contrast	1.00	0.04	0.84	0.00
	Error	189.00			
Student Stress	Contrast	1.00	2.23	0.14	0.01
	Error	189.00			



Conclusions

Study findings support:

- The notion that exposure to racism impacts psychosocial adjustment even during the college years.
- The notion that we cannot understand racism's influence on emotional adjustment or mental health without investigating cumulative effects of racism as a multi-dimensional phenomenon occurring over a lifetime.

The effects of racism on mental health on health care access and utilization may parallel psychosocial development



Cultural and developmental interpretations of the findings

- The unmet need for sociocultural translational research for African American communities.
- Issues pertaining to the intersection of racial stress and mental health that health care may impact health care access and utilization.

Our hope is that this study will facilitate our understanding of the variety of experiences of racism among African Americans and move us closer to reducing its prevalence and potentially untoward effects on mental health

Researchers, health providers, and institutions must be competent in understanding the myriad of coping responses to racial stress in the African American community to produce significant public health impact.

Special Thanks

- Laurie Cooper artwork
- Reality and Revealing