African Americans at PWIs: The Role of Race Consciousness and Ethnic Identity in Predicting Mental Health

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Abstract

African American students continue to be underrepresented at many American colleges and universities. These institutions are referred to as Predominantly White Institutions (PWIs). Some research suggests that the racial environment at PWIs negatively impacts the mental health (depression and anxiety) of African Americans. However, few studies consider how internal racial factors such as racial centrality and race consciousness (how often race is thought about) relate to mental health in a PWI context. This study investigates this question among 71 African American students at a PWI who completed questionnaires about their racial identity and mental health. Regression analysis indicated that centrality and race consciousness were not related to mental health outcomes. However, post hoc analyses revealed an interaction between race consciousness and private regard in predicting depression. Therefore, researchers and higher education administrators should consider both internal and external racial variables in understanding the mental health of African American college students.

Introduction

Historically, African Americans have been underrepresented at institutions of higher education in the United States. In fact, the majority of African American students attend institutions of higher learning where the racial/ethnic composition of the students, faculty, and staff is predominantly white (Predominantly White Institution [PWI]; Douglas, 1999). This environment may contrast sharply with the communities that many African American students may come from, where their cultural identity is more visibly represented. While the transition from high school to college creates stress for all freshman students, African American students may experience this transition as more stressful because of the differences in racial environment and the experiences that might coincide with this change (e.g., isolation, discrimination, and racism).

According to several researchers such as Harwood et. al (2012), African American students at describe their experiences as unwelcoming and unsupportive because of overt and
covert forms of racism. Earlier this year, Oberlin College in Ohio cancelled classes for a day after a student reported seeing a person resembling a Ku Klux Klan member near an African heritage house. This incident followed other recent hate incidents that occurred at the college which included posters with racial slurs written on them and other derogatory statements targeting various student communities around campus (Cable News Network, 2012). These events reinforce findings that some African Americans experience hostile peer communication (e.g. racist jokes, comments, racial slurs) at PWIs (Harwood et al., 2012, Solórzano et al., 2001). Such unique experiences are associated with many adverse outcomes such as low academic performance, higher levels of stress, mental health problems and even withdrawal from college (Harwood et al., 2012). As further evidence of the deleterious effects of a negative racial environment, recent data demonstrates that the gap in attrition rates between African American and White college students (with the former having higher rates; Guiffrida & Douthit, 2010) becomes even larger when focusing solely on predominantly white institutions (Bowen & Bok, 1998).

**Environmental Variables**

A significant body of research has demonstrated that the environment at predominantly white institutions strongly impacts African American students’ college experience. Many of these students may be first-generation college students, who have never been exposed to a predominantly white environment. Although many PWIs have become more diverse, African American students at PWIs may frequently experience racism. The term *racial microaggressions* refers to subtle and hidden forms of discrimination. In their investigation of racial microaggressions at a PWI, Harwood et al. (2012) conducted focus groups with students of color about their college experiences. Many students reported racist jokes and comments, racial slurs, and overall unequal treatment. For example, one student reported her roommate was “constantly saying little comments.” Another student noted the appearance of segregation in the residence halls reporting that certain halls were being referred to as “minority central” or “the projects” (Harwood, 2012). Similar to Harwood et al., Solorzano & Yosso (2001) also examined racial microaggressions and the experiences of African American college students. Many students reported similar overt and covert forms of racism.

Loo and Rolison (2012) investigated feelings of alienation among minority students in relation to their environment and found that African American students in a PWI experience more feelings of alienation than white students. If African American students do not feel welcomed or if they experience any kind of racial discrimination, they are more likely to drop out of that particular institution (Gloria et al., 1999). Consistently, many prior studies have found that African American students perceive their general campus climate more negatively than their white peers do (Reid & Radhakrishnan, 2003). Moreover, Gloria et al (1999) researched the influence of social support and university comfort on African American students’ persistence decisions (i.e. decisions concerned with staying in school). Consistent with the existing literature on the significant role of institutional climate, higher levels of social support and more comfort in the university environment were associated with more positive academic persistence decisions (i.e., students staying in school). Thus, a number of studies have established the significant role of environmental variables, such as the racial make-up of the school (i.e., PWIs) in the college experience of African Americans. However, less research has
considered how individual differences in internal racial processes might affect African American students’ adjustment to attending a PWI.

**Internal Variables**

In much of the research examining the impact of the experiences of African American students at PWIs on their psychological well-being, it is implicitly assumed that African American students experience feelings of alienation due to an incongruence between their own cultural values and beliefs and those of the PWI. However, less research has actually concentrated on African American students’ individual beliefs regarding race in relation to their psychological well-being and their own racial identity.

Minority students often face unique challenges regarding the meaning of their racial identity which may represent threats to their identity (Chavous, 2000). How each individual reacts to these challenges can lead to important individual differences that influence how his/her college environment affects him/her. Perceptions of college environments vary among African American students, and these individual differences are important to their college experiences. Thompson, Anderson, and Bakeman (2000) examined the effects of racial socialization and racial identity on acculturative stress and found that certain racial identity attitudes were associated with higher levels of acculturative stress. Individuals who had more Pre-encounter or Immersion attitudes tended to experience more acculturative stress. Individuals with Pre-encounter attitudes may be dealing with self-acceptance or anxiety related to being an African American while those holding immersion attitudes almost exclusively affiliate themselves with Black culture. Similarly, Lee and Ahn (2013) found different racial identity attitudes to be associated with different levels of discrimination and psychological distress. Pre-encounter attitudes were significantly related to psychological distress. Acknowledging the importance of perception and racial identity, this current study focuses on how certain aspects of racial identity interact to influence mental health. Specifically, we investigate the relationship between racial centrality and mental health.

**Ethnic Identity.** Ethnic identity has been one of the most heavily researched areas regarding the psychological experiences of African Americans. The experiences of African Americans differ from one individual to another. The significance and qualitative meaning that is attributed to being a member of the black racial group varies among African Americans. For example, some may place little significance on their race in defining themselves, while others may feel their race is a strong part of their identity. Even at similarly high levels of significance on race, individuals may differ in their meaning of what it means to be an African American (Sellers et al., 1998). Because of these many differences, understanding the significance of race in the experiences of African Americans is difficult. In this study, ethnic identity will be operationalized and evaluated using the Multidimensional Inventory of Black Identity (MIBI) which defines racial identity as part of a person’s self-concept related being an African American. The MIBI consists of three subscales: *Regard, Ideology,* and *Centrality*. The regard dimension refers to an individual’s judgment of his or her race in terms of feelings of positivity or negativity. Simply put, regard refers to how positive an individual feels about his or her race. Regard consists of both a private and public component. *Private regard* refers to how positively an individual feels toward his or her race as well as how positively an individual feels about
being a member of their race. Public regard refers to how individuals feel others view their race. It can be thought of as an individual’s assessment of how his or her group is viewed by the rest of society.

Ideology refers to an individual’s beliefs and opinions in regards to the how he or she feels member of his or her race should act. It is an individuals’ philosophy about the ways his or her race should live and interact with the rest of society (Sellers et al, 1998). The ideology dimension is compromised of four ideological philosophies: a nationalist philosophy, an oppressed minority philosophy, an assimilation philosophy, and a humanist philosophy.

Centrality, one of our variables of interest, refers to the extent to which a person normally defines himself or herself with regard to race. It is a measure of whether race is a core part of an individual. Centrality is concerned with the significance of race in an individual’s self-concept (Sellers et al, 1997). For instance, some African American women define themselves more by gender than by race while others may use race as a more essential self-defining characteristic (Sellers et al, 1998). What lies in one’s beliefs and attitudes regarding race is very essential and an ample amount of research suggest this is a major factor in social, mental, and academic outcomes. Sellers et al. (1998) explored the relationship between racial ideology, racial centrality, and academic outcomes. Both racial ideology and racial centrality were significantly related to students’ cumulative GPA. In addition, racial centrality appeared to moderate the relationship between racial ideology and academic performance.

Varying levels of racial centrality may also impact African American students differently. Chavous (2000) suggested that racial centrality may play a protective role in African American students’ feelings of social fit. She explored the relationship between African American students’ perceptions of their college environment and their beliefs regarding race (racial ideology and racial centrality). Racial centrality was related to students’ perceived environmental fit and organizational involvement. Thus, it would follow that centrality may be related to how African American students are adjusting to their new environment. The model we propose for the present study involves investigating the relationship between African American students’ levels of racial centrality and mental health outcomes.

Race Consciousness. Some students may notice the racial differences of the environment at a PWI while others may be completely obvious to such differences. This awareness or consciousness of race varies among African American college students and thus affects each student differently. Race Consciousness refers to the extent that an individual thinks about race. It is measured via the question, “How often do you think about race?” It is similar to the concept of racial salience in that both concepts deal with how prominent a role is given to race by the individual. Racial salience is concerned with the relevance of race to one’s self concept, and individual differences in racial salience become more evident in more ambiguous situations (Sellers et al., 1998). However, while racial salience refers to the importance of race in a particular moment or situation, race consciousness refers to thoughts about race on a normal basis. As previously mentioned, African American students may differ in how they define themselves. Levels of race consciousness may also vary between students leading to many different outcomes and perceptions among African American students. The present study
proposes that race consciousness may play a mediating or moderating role between racial centrality and mental health outcomes.

**African American Students and Mental Health Outcomes**

African American students attending PWIs may be more susceptible to negative psychological adjustment as a result of the added minority stress associated with the adjustment to what is often a new and different racial environment (Wei et al. 2010). Wei et al. examined the effects of perceived bicultural competence (PBC) and minority stress on depressive symptoms (2010). Based on LaFromboise’s Biculturalism Theory, PBC was defined as being able to “live effectively, and in a satisfying manner, within two groups without compromising one’s sense of cultural identity.” For example, minority students often need to interact with people from the majority culture as well as their own culture (Wei et al., 2010). Minority stress was found to be positively associated with depressive symptoms while PBC was found to be negatively associated with depressive symptoms. In other words, students’ sense of confidence in their abilities to function well in not only their own culture, but in another culture as well was related to higher psychological well-being. In another study, Mendoza-Denton et al. (2002) examined African American students’ expectations of being accepted or rejected on the basis of their minority status. Students high in race rejection sensitivity (RS-race) showed greater discomfort and less trust in the university negatively affecting their social relationships and psychological well-being.

Research has also found links between different aspects of racial identity and psychological symptoms. Neblett, Jr. et al. (2013) investigated the relationship between ethnic-racial socialization and the psychological adjustment of African American students. Racial identity (specifically, private regard attitudes or positive feelings about being African American) was found to act as a mediator in the relationship between ethnic-racial socialization behaviors and adjustment. In another study, Smedley et. al (1993) examined the relationship between minority status stress and the psychological adjustment of minority freshman. Minority status stress negatively impacted students negatively affecting their confidence and sense of belonging to the university. The impact was even greater for African American students. Further, Pillay (2005) examined unique relationship between racial identity and psychological health in African American students attending PWIs. Racial identity, specifically the Pre-Encounter and Encounter stages, was found to be negatively related to psychological health. Although outcomes such as higher attrition rates are very important, those outcomes are more distal, and more proximal outcomes such as mental health symptoms (e.g. mood and depression) need to be analyzed. Proximal factors are important to understand because of the possibility of earlier intervention. For this reason, we examine how differences in racial identity among African American students and how those differences influence mood (depression) and anxiety at a PWI. If more proximal outcomes such as anxiety and depression can be managed, more distal outcomes such as dropping out may be reduced.
The Present Study

In order to better understand the college experience of African American students attending PWIs, the present study aims to investigate the relationship between different internal racial variables and mental health outcomes among African American students at PWIs. In particular, this study will examine the relationship between Racial Centrality, Race Consciousness, and mental health as measured by anxiety and depression symptoms. We examine the effects of race consciousness by proposing two different models relating the three variables. First, we examine race consciousness as a mediator between racial centrality and mental health symptoms. Second, we examine race consciousness as a moderator between racial centrality and mental health symptoms.

In our first mediator model, we predicted that race consciousness would act as a mediator between racial centrality and mental health. First, we expected racial centrality to be correlated with depression/anxiety. Specifically, it was expected that students with higher levels of racial centrality would experience more symptoms of depression and/or anxiety. Next, we hypothesized that race consciousness would mediate this relationship. African American students with higher levels of racial centrality may be more likely to notice the racial differences and think about them more often if being African American is a central part of their identity. Consequently, this may lead to more feelings of alienation which may also lead to higher levels of depression and/or anxiety within the student.

We also investigated the role of race consciousness as a moderator between racial centrality, and depression and anxiety. Specifically, we expected those with higher levels of race consciousness to experience more depressive and anxious symptoms. We believe these students, especially those with higher levels of centrality, will be more likely to take note of the racial differences around campus thus leading to more depressive/anxious symptoms. On the other hand, we expect those with lower levels of race consciousness to experience fewer depressive and anxious symptoms. We predict this will be especially true of those students with lower levels of centrality.

Methods

Participants

Participants for the present study were 71 African American college students at a large, predominantly White university in the mid-Atlantic region of the United States. Participants were recruited through a participant pool run through the department of psychology and from the general college population. Participants were either given course credit (participant pool) or $10 in compensation (non-participant pool). Only participants who were current freshman or sophomores were eligible for participation. The final sample consisted of 33 freshmen (46.5%) and 38 sophomores (53.5%) and included 52 women (73.2%) and 19 men (26.8%). The age of participants ranged from 18 to 21 with a mean age of 18.85 years (SD=.73).
Measures

Demographics Questionnaire. Participants completed a demographics questionnaire asking about their age, gender, household composition, head of the household (and their highest grade completed), and family income. Family income was reported using a 1-5 scale where 1= $0-15K, 2= $15-30k, 3= $30-45K, 4= $45-60K, 5= $60-75K, and 6= $75K or higher.

Race Consciousness. One item from the Behavioral Risk Factor Surveillance System (BRFSS) was used to measure race consciousness. The BRFSS is a questionnaire typically used to collect data about health-related risk behaviors and chronic conditions. This question asked “How often do you think about your race?” and used an 8-point scale ranging from 1 (Never) to 8 (Don’t know/Not sure).

Racial Centrality. The Multidimensional Inventory of Black Identity (MIBI) was used to measure racial centrality. The MIBI consists of 7 subscales representing 3 dimensions of African American racial identity (Centrality, Ideology, and Regard). Our primary hypothesis focused on the Centrality subscale. This subscale is comprised of 8 items asking about the importance of race, which are rated on a Likert-type scale from 1 (strongly disagree) to 7 (strongly agree). Items include statements such as, “My destiny is tied to the destiny of other African-Americans.” and, “I have a strong sense of belonging to African-Americans.” Past research using this subscale has established sufficient reliability indexes ranging from .75 to .83 (Sellers, 1998).

Mental Health. The Brief Symptom Inventory-18 was used to measure the presence of symptoms of depression, anxiety, and somatization. This inventory consists of 18 items on which participants rated their level of distress over the past week using a 5-point scale ranging from 0 (not at all) to 4 (extremely). For the purposes of the present study, only the depression and anxiety subscales were used. Examples of items on the depression subscale include asking about symptoms such as “Feeling hopeless about the future” and “feelings of worthlessness”. Examples of items on the anxiety subscale include symptoms such as “nervousness or shakiness inside” and “trouble getting your breath”.

Procedure

Data for this study were taken from a larger data set examining the effect of environmental transitions on mental health. Participants completed an online survey that included the measures described above along with additional measures of GPA, health risk behaviors, and perception of campus racial climate. For the present study, we were only interested in the mental health outcomes and therefore limited our presentation and discussion to those measures relevant to our research question as well as data necessary for participant selection (BSI, MIBI, and Demographics questionnaire).
Results

Bivariate Correlations

The first step in our analyses was to conduct bivariate correlations between the primary variables of interest (see Table 1). Race consciousness was not significantly related to depression ($r = .097, p>.05$) or anxiety ($r = .055, p>.05$). Similarly, centrality was also not significantly related to depression ($r = -.089, p>.05$) or anxiety ($r = -.036, p>.05$). Although these variables were not significantly related, it is possible that race consciousness could still moderate the relation between centrality and mental health. However, in order for race consciousness to be a possible mediator between centrality and mental health, race consciousness would have to be related to mental health and to centrality. Because these requirements of mediation were not met we did not need to formally test for a mediation effect and were able to rule out this type of relationship.

Moderation Analyses

As previously mentioned, none of our variables were found to be correlated. However, it is still possible to have a moderation effect. To test for an interaction, we first centered race consciousness and racial centrality. Next, we computed an interaction term that consisted of the product of the centered variables. Finally, a hierarchal regression was run with depression as our outcome variable and race consciousness and centrality as the first predictors in the model (step 1) and the consciousness X centrality interaction as the second step in the model. An identical analysis was carried out with anxiety as the outcome variable. Our findings failed to reveal a significant main effect of race consciousness or centrality on depression or anxiety, nor was there a significant interaction between these variables in predicting depression or anxiety.

Post Hoc Analyses

The results obtained suggest that racial identity may not be meaningfully related to mental health among students at a PWI. However, it is also possible that the results are specific to the centrality subscale of the MIBI identity measure. Therefore, we decided to run analyses using the dimension of private regard in place of centrality. First, bivariate correlations were run to determine the correlation between private regard and mental health (anxiety and depression). No significant relationships were found to exist between any of the variables eliminating the possibility of a mediation effect.

However, even without any significant relationships among the zero-order correlations it is possible to have a significant interaction between centrality and race consciousness. Thus, we proceeded with our test of race consciousness as a moderator between racial centrality and mental health. First, race consciousness and private regard were centered. Next, we computed an interaction term that consisted of the product of the centered variables. Next, a hierarchal regression was run with depression as our outcome variable and race consciousness and private regard as the first predictors in the model (step 1) and the consciousness X private regard interaction as the second step in the model. An identical analysis was carried out with anxiety as the outcome variable. Our findings revealed a significant interaction between race consciousness,
private regard, and depression. Students who thought about their race more often reported less depressive symptoms the more they felt positively about their race (higher positive regard). For students that did not think about race as often, feeling more positively about their race was associated with more symptoms of depression.

Discussion

The primary goal of this study was to examine how different aspects of racial/ethnic identity interact to influence mental health in African American students attending a Predominantly White Institution (PWI). Specifically, we were interested in how race consciousness, centrality, and mental health (anxiety and depression) interacted to affect African American students. Although our initial hypotheses of mediation and moderation were not supported, a post-hoc analysis did reveal a significant interaction between race consciousness, private regard, and depression.

Our initial findings did not support our hypotheses and no significant relationships were found among our primary variables of interest, racial centrality, race consciousness, and depression/anxiety. Most notably, there was no relationship between centrality and depression or anxiety or between centrality and race consciousness. This finding is similar to those found in a study conducted by Rowley et al. (1998) where centrality was found not to be significantly related to personal self-esteem (PSE). Strongly identifying with one’s race does not necessarily lead to positive feelings about one’s race and a lack of identification with one’s race does not necessarily lead to negative feelings. Further, previous research has shown that different stages of racial identity and differences in racial socialization are associated with different levels of psychological stress (Thompson et al., 2000; Johnson & Arbona, 2006; Lee & Ahn, 2013). Thus, it is possible that within the current sample students may have expected and prepared themselves for this racial environment thereby overshadowing the possible effect of racial centrality and/or level of race consciousness. In fact it may be quite likely that African American students who decide to attend a PWI may be fully aware of the low diversity and racial disparities of the institution thus having a fair warning about what to expect should they decide to attend the institution. Sellers and Shelton (2003) found that students who expected others to view African Americans negatively did not experience as much distress when perceiving discrimination because this experience aligned with their worldview.

Moreover, with such possible expectations in mind, students may emphasize their focus on other important aspects of their college experience protecting themselves from the possible negative experiences of attending a PWI. Such students may ultimately do better at a PWI because they do not experience that discrepancy between their own expectations of attending a PWI and what is actually experienced once they start attending the institution. In addition, students with high levels of centrality may be aware of these racial differences and may notice other groups having similar experiences in terms of racial discrimination. Subsequently, these students may identify with those other racial groups thus buffering against the possible negative effects of a PWI. In support of this idea, Williams and Leonard (1998) reported that 81% of a sample of African American students identified with other racial groups based on racial identity views. Finally, it is possible that within the current sample many students may have come from
areas similar to the environment of a PWI thus buffering some of the negative effects (Dawson-Andoh, Soto, & Witherspoon, 2013).

Private Regard

Our post hoc analyses indicated a significant relationship between race consciousness, private regard, and depression. Specifically, our analyses revealed a significant interaction between private regard and depression. Students high in race consciousness felt less depressive symptoms the more they felt positively about their race. This finding is consistent with Lee and Ahn’s (2013) findings which found private regard to be negatively associated with psychological distress. For students that did not think about race as often, feeling more positively about their race was associated with more symptoms of depression. One possibility is that students may be experiencing some societal or interpersonal pressure leading them to suppress thoughts about their race which in turn can lead to the expression of more depressive symptoms. Students may be suppressing their thoughts about race in order to fit in the environment of the PWI. In order to protect against possible distress, students may be actively not thinking about race and instead focusing on other aspects of their college experience.

Limitations and Future Directions

Several limitations are worth noting. First, our study only consisted of students from the general campus population and the subject pool, thus lacking a clinical population. This may have limited the variability in symptoms of depression or anxiety making it more difficult to find a relationship between mental health and our other variables of interest. An additional limitation lies in the measurement of our variable, race consciousness. Race consciousness was measured only by one item (“How often do you think about you race?”). This one question may not be a valid measurement of race consciousness and may not accurately capture this concept. Developing more items to assess this concept may result in a more accurate representation of students’ race consciousness. Furthermore, we only examined freshmen and sophomore students leading us to question whether the impact of being at a PWI becomes more positive or more negative the longer students are there. Longitudinal studies of African American students where they can be followed throughout college or even starting from high school may allow us to gain a better understanding of the African American college experience. Finally, we did not examine the nature of participants’ previous racial environments. Some participants may come from communities or neighborhoods where their race is the majority while other participants may come from predominantly white areas. Transitioning from these different communities and neighborhoods may reduce or aggravate the impact of attending a PWI (Dawson-Andoh, Soto, & Witherspoon, 2013).

Conclusion

This study contributes to the growing number of studies seeking to understand the role that individual racial variables play in influencing mental health at PWIs. We demonstrate that the college experiences of African American students at PWIs may differ depending on the way in which each individual thinks about their race. Understanding how various ethnic identity factors may interact to influence mental health can be helpful to those concerned with helping
these students adjust to attending a PWI. Given that African American students generally perceive their campus environment more negatively than their white peers (Reid & Radhakrishnan, 2003; Harwood et al., 2012), understanding the experiences of African American students is crucial. Therefore, it is essential that researchers gain a better understanding of the unique individual characteristics of African American students and how these different characteristics interact to influence mental health outcomes at PWIs.
References


Table 1

Means, Standard Deviations, and Intercorrelations of Centrality, Race Consciousness, Anxiety, Depression, and Private Regard

<table>
<thead>
<tr>
<th>Correlations</th>
<th>Mean (SD)</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Centrality</td>
<td>3.91 (1.14)</td>
<td>-0.036</td>
<td>-0.089</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Race Consciousness</td>
<td>4.79 (2.12)</td>
<td>0.055</td>
<td>0.097</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Private Regard</td>
<td>5.48 (1.27)</td>
<td>-0.037</td>
<td>-0.029</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Anxiety</td>
<td>1.59 (.71)</td>
<td>-0.036</td>
<td>0.055</td>
<td>-0.037</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Depression</td>
<td>1.93 (.89)</td>
<td>-0.089</td>
<td>0.097</td>
<td>-0.029</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

Figure 1. Relationship between Race Consciousness, Private Regard, and depressive symptoms