

# An Examination of the Relationship Between General Life Stress, Racism-Related Stress, and Psychological Health Among Black Men

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This study explored the relationship among general life stress, racism-related stress, and psychological health in a sample of 220 Black men. Participants completed a personal data form, the Perceived Stress Scale (S. Cohen, T. Kamarck, & R. Mermelstein, 1983), a modified version of the Schedule of Racist Events (H. Landrine & E. A. Klonoff, 1996), and the Mental Health Inventory (C. T. Veit & J. E. Ware, 1983). Results of hierarchical regressions indicated that when general stress was controlled, racism-related stress predicted an additional 4% of variance in psychological distress for working class men and an additional 7% for middle–upper class men. Racism-related stress also predicted an additional 5% of variance in psychological well-being for middle–upper class men; however, it was not predictive of psychological well-being for working class men. Implications for counseling practice and future research are discussed.

*Keywords:* racism, mental health, Black men, general life stress, social class

Over the past decade, there has been a significant increase in scholarship focusing on the relationship between racism-related life experiences and psychological health among Black Americans. Currently, the accepted understanding is that racism, as evidenced by discrimination, is generally associated with poorer health status and that this association is the strongest in the case of mental health (Williams, Neighbors, & Jackson, 2003). Although this finding appears to be quite robust, studies conducted by Fischer and Shaw (1999) and Peters (2004) are representative of research that has reported a nonsignificant association between experiences of racism and psychological health in Black populations. Some scholars have contended that the influence of racism-related experiences on mental health might also be affected by variables such as general life stress and gender (Jackson, Hogue, & Phillips, 2005; Moradi & Subich, 2003). Given the somewhat inconclusive nature of the extant literature, the current investigation therefore seeks to explore the association between general life stress and racism-related stress and to examine the influence of these variables on the psychological health of a sample of Black American men.

## Racial Categorization and Black Men

The detrimental effect of racial categorization on the social status of Black Americans is evident across a range of indicators, such as health status, poverty, and education (Gordon, Gordon, &

Nembhard, 1995; National Urban League, 2006). Social scientists have consistently reported that, as a group, Blacks tend to be at the lowest levels of social stratification (Marger, 2003) and continue to experience significant disparities in the areas of health, education, and wealth (Williams & Collins, 2004). There also is some evidence that Black men experience more intense discrimination than Black women across several domains, including education, criminal justice, and retail sales (Sidanius & Pratto, 1999). Social scientists often reference two indicators of social participation, namely rates of incarceration and employment, when discussing the current status of Black men within American society (Western & Pettit, 2005). Mauer (2003) reported that almost one in three young Black men, ages 20–29, were under some form of criminal justice supervision. Moreover, half of all prison inmates are Black, a statistic that is significantly disproportionate to the percentage of Blacks in the general population. When one looks at employment rates, it is evident not only that Black men experience higher rates of unemployment but that even when they are employed, their incomes are significantly less than those of their White counterparts (Western & Pettit, 2005). Some have argued that these types of statistics reflect the impact of structural racism and also represent a significant source of stress that is associated with the unequal status experienced by Blacks in the United States (Jackson & Volckens, 1998). An additional factor thought to have an important psychological impact is what Franklin (1999) referred to as the *invisibility syndrome*. Franklin contended that Black men tend to be assessed and interacted with on the basis of inaccurate assumptions and negative stereotypes, as opposed to their individual achievements or characteristics. For example, a Black man could be very successful in his given career and still have difficulty hailing a cab on the basis of the widely accepted assumption that Black men are dangerous (Franklin, 2004). These race-related occurrences are thought to have important implications for the general well-being of Black men and, as such, are increasingly being understood within the rubric of racism-related stress.

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### Racism-Related Stress

Among Black adults in the United States, it is fairly well documented that a sizable number encounter stressful life conditions, including consistent exposure to various forms of racism (Feagin, 1991, 2001). Although findings drawn from the stressful life event literature point to a positive relationship between stressful life events and psychological distress (Kessler, 1997), only relatively recently have scholars started to view race-related events or nondominant social status as a type of life stressor (Allison, 1998). An understanding of the manner in which racism-related life experiences impact psychological health has been greatly enhanced by the development of two models of race-related stress (Clark, Anderson, Clark, & Williams, 1999; Harrell, 2000), both of which are grounded in the interactional model of stress initially formulated by Lazarus and Folkman (1984).

Harrell (2000) proposed a model of racism-related stress in which she identified six types of race-related stressors: (a) racism-related life events, (b) vicarious racism experiences, (c) daily racism microstressors, (d) chronic-contextual stress, (e) collective experience of racism, and (f) transgenerational transmission of group traumas. Harrell's conceptualization draws directly on the stress-as-interaction model by placing emphasis on both the environment (racism-related incidents) and the individual (cultural worldview and racial identity). She stated that racism-related stress is "the race-related transactions between individuals or groups and their environment that emerge from the dynamics of racism, and that are perceived to tax or exceed existing individual and collective resources or threaten well-being" (p. 44).

Clark et al. (1999) posited a model of racism-related stress that focuses on the role environmental stimuli play in relation to both personal prejudice and aspects of institutional racism. According to Clark et al., the experience of racism is understood to have a negative effect on one's access to resources, opportunity for improvement of social status, and psychological well-being. A central construct of their model focuses on how an individual perceives the environmental stimuli, a process reflective of the appraisal aspect of the Lazarus and Folkman (1984) model. For Clark et al., if an individual perceives an environmental stimulus as racism, he or she will use various coping responses. The coping responses, in turn, influence the extent of the physical and/or psychological harm associated with the outcome of the stimulus. Although the stress process is associated with contextual factors such as socioeconomic status and psychological make-up, ultimately, the environmental stressor has the potential to adversely impact a range of health-related outcomes. The Harrell (2000) and Clark et al. models provide important frameworks within which to understand those empirical findings that have outlined a positive association between experiences of racism and psychological distress.

### Racism as a Unique Stressor

The notion that racism represents a unique source of life stress has only received scant attention in the empirical literature. Sanders-Thompson (2002) is reflective of one of the few studies that attempted to directly test this hypothesis. Using the Daily Stress Inventory and the Experience of Discrimination Questionnaire, Sanders-Thompson surveyed 156 individuals from different

racial backgrounds. The sample included 70 African Americans, 58 White Americans, 18 Asian Americans, and 6 Hispanic Americans. Results revealed a significant effect for ethnicity when Sanders-Thompson compared scores on the stress inventory. That is, Asian Americans reported the highest amount of daily stress, whereas African Americans reported the highest rate of experiences of discrimination. Recognizing the discrepancy in sample sizes as a significant limitation, Sanders-Thompson concluded that, on the basis of her analysis, it was unclear whether racism-related stress was a distinct source of stress for Blacks.

Taylor and Turner's (2002) investigation of the relationship between perceptions of discrimination and depression in a sample of 5,924 high school students found that Black students reported higher levels of stress and more frequent exposure to discrimination. However, when the authors controlled for social stress, exposure to discrimination did not predict any symptoms of depression. They concluded that in some circumstances, general life stress might play a greater role in psychological distress than discrimination or racism-related stress.

The interplay between perceptions of racism and other contextual factors, such as socioeconomic status, gender, and religion, has also been noted in the literature. In a study of African Americans' perceptions of discrimination, Gary (1995) found that African American men who were young and who were unmarried, had a college-level education, and/or were employed were more likely to perceive racial discrimination than their counterparts who did not share these demographic characteristics. With regard to gender, studies have suggested that Black men have a higher incidence of racial harassment and discrimination than Black women (Sellers & Shelton, 2003) and also have posited that the experience of racism might be qualitatively different across genders (Moradi & Subich, 2003).

### Purpose of the Study

In general, the literature supports an association between racism-related stress and psychological health. However, it appears that researchers have not routinely considered the role of general life stress when exploring the impact of racism on psychological health. Thus, the extent to which racism-related stress influences psychological health when general life stress is accounted for is less clear. The purpose of this study therefore was to examine the influence of perceived racism-related stress on psychological health and to explore the predictive quality of racism-related stress on psychological health when controlling for general life stress. Two specific and related research questions guided the analysis:

1. Is racism-related stress significantly associated with psychological health?
2. Is racism-related stress a unique predictor of psychological health above general life stress?

### Method

#### *Participants*

The participants were 220 Black American men primarily recruited from barbershops in New York and Washington, DC. In

addition, a smaller data collection was undertaken at a 4-year college in New York. The ages of the participants ranged from 18 to 53 years old, with a mean of 28.73 ( $SD = 8.17$ ). Participants described themselves as working class (46%;  $n = 101$ ), middle class (45%;  $n = 99$ ), and upper class (7%;  $n = 16$ ). Twenty-two percent ( $n = 49$ ) of the participants had obtained an undergraduate degree, and 10% ( $n = 22$ ) had a graduate degree. The educational status of the remaining participants ranged from a high school diploma or equivalent (18%;  $n = 40$ ) to some college courses taken (33%;  $n = 73$ ). The most frequently identified religious orientations were Christian (30%;  $n = 67$ ), Baptist (25%;  $n = 55$ ), and Catholic (13%;  $n = 29$ ). Nine percent ( $n = 20$ ) identified religious orientation as none, and a notable number of participants failed to respond to this category (14%;  $n = 30$ ). The locations of data collection were as follows: barbershops in New York City (68%;  $n = 149$ ), Washington, DC (23%;  $n = 49$ ), and a college campus in New York (11%;  $n = 21$ ). In terms of ethnic group affiliation, 75% ( $n = 151$ ) identified as African American, 19% ( $n = 39$ ) as Caribbean, and 3% ( $n = 6$ ) as African. Within the occupation category, participants identified their specific type of employment. The data were subsequently coded according to categories such as professional, service, media, technology, arts, and trades. The most frequent categories were service (32%;  $n = 72$ ), student (19%;  $n = 41$ ), and professional (11%;  $n = 24$ ). Seven percent ( $n = 16$ ) of the participants described themselves as self-employed, and 3% ( $n = 6$ ) reported being unemployed. Finally, 8% ( $n = 19$ ) reported having been diagnosed with either a medical or a psychiatric condition, such as diabetes, depression, or asthma. All demographic categories were self-report.

### Measures

The Perceived Stress Scale (PSS; Cohen, Kamarck, & Mermelstein, 1983) is a 14-item self-report measure designed to assess the degree to which individuals perceive their life as stressful. The researcher obtains a single PSS score by summing all of the items with higher scores, reflective of higher perceptions of life stress, and lower scores, reflective of lower perceptions of stress. Psychometric data for the PSS have been found to be adequate, with internal consistency, as measured by Cronbach's alpha, ranging from .84 to .86 (Cohen & Williamson, 1988). For the purposes of the current investigation, the 10-item version of the PSS was used, with an obtained Cronbach's alpha reliability coefficient of .76. Cohen and Williamson reported that the PSS can be considered predictive of physical and psychological health independently of measures of psychological symptomatology. Scores on the PSS have been positively correlated with maladaptive health-related behaviors, such as increased smoking and higher rates of relapse among people attempting to quit smoking (Cohen, Sherrod, & Clark, 1986), providing evidence of construct and concurrent validity. Furthermore, Kuiper, Olonger, and Lyons (1986) found the PSS to be associated with greater vulnerability to depressive symptoms related to stressful life events.

The original Schedule of Racist Events (SRE; Landrine & Klonoff, 1996) is an 18-item self-report measure that assesses the frequency and stressfulness of selected racist experiences faced by Black Americans. The current study used a modified version of the SRE. In the original version, two of the response options focus on a time frame in which racist events are experienced (lifetime

experiences and experiences within the past year); the third response assesses the stressful impact of the events. For the purposes of this study and with the authors' permission, two important modifications were made to the SRE. The time frame was changed from past year and lifetime to past month and past year, and the Appraised Stressfulness of Racist Events subscale was attached to each time period. We computed a scale score by summing the items in each subscale. Higher scores reflect higher frequency and higher racism-related stress. The time modification was instituted in an attempt to tap into the immediacy of the events as well as to establish consistency with the time frames of the other measures used in the study, which asked participants to reflect on their life experiences over the past month. Additionally, an attempt was made to associate the stress response directly to the time frame of the identified racist incident.

The SRE provides two types of scores. First, a frequency score is derived from participants' responses to how often they experienced certain events. These responses range from 1 (*this did not happen to me*) to 6 (*this happened almost all the time [more than 70% of the time]*). For the stressfulness score, respondents used a full anchored response scale with options ranging from 1 (*not stressful*) to 6 (*extremely stressful*). The modified version used for the current study produced four separate scores—past month frequency of racist events, past month racism-related stress, past year frequency of racist events, and past year racism-related stress. Higher scores reflect higher frequencies of racist events and higher racism-related stress. Landrine and Klonoff (1996) reported Cronbach's alpha internal reliability coefficients of .95 and .95 for the Year and Lifetime Racist Experiences scales and .93 for the Appraised Stressfulness of Racist Events scale. Obtained Cronbach's alpha reliability coefficients for the subscales used in the current study were as follows: .89 for the Past Month Racist Experiences scale, .86 for the Appraised Stressfulness of Past Month Racist Events scale, .88 for the Past Year Racist Experiences scale, and .89 for the Stressfulness of Past Year Racist Events scale. Klonoff, Landrine, and Ullman (1999) provided evidence for construct validity, as indicated by significant correlations between scores on the SRE and scores on the Hopkins Symptom Checklist. Results indicated that participants with high stress-related symptoms reported more frequent racist experiences over the past year and lifetime. The SRE is considered to be an effective instrument for assessing perceptions of racist events and the perceived stressfulness of those events (Utsey, 1998).

The Mental Health Inventory (MHI; Veit & Ware, 1983) is a 38-item measure assessing both psychological distress and well-being in adults. The MHI produces three indexes—psychological distress, psychological well-being, and global mental health. Psychological distress is computed from the following subscales: Anxiety, Depression, and Loss of Behavioral/Emotional Control. Psychological well-being is computed from the following subscales: General Positive Affect and Emotional Ties. The current investigation used the psychological distress and psychological well-being indexes.

The MHI has been used extensively in studies focusing on nonpsychiatric samples, and evidence of psychometric adequacy has been well established (Siegel, Karus, Raveis, & Hagen, 1998; Veit & Ware, 1983). Cronbach's alpha reliability coefficients for the current investigation were .93 for psychological well-being and .89 for psychological distress. Concurrent and convergent validity

for the MHI have been established through positive correlations with measures such as the Center for the Epidemiological Studies—Depression Scale, the Positive and Negative Affect Schedule, and the Dyadic Adjustment Scale (Manne & Schnoll, 2001; Siegel et al., 1998).

A personal data sheet was included to obtain participants' age, race, ethnicity, place of birth, social class, occupation, income, educational status, and medical and psychiatric history.

### Procedure

The data collection procedure involved the following steps. A survey packet was created and included a cover letter, the personal demographic form, and the self-report instruments. Prior to the distribution of packets, the instruments were counterbalanced to account for potential order effects. The cover letter served as the informed consent form, and the act of participation was viewed as the evidence of informed consent. Participants were informed that they would be participating in research focusing on the experience of discrimination among Black men. Data collection took place over a period of 6 months. Participants recruited at barbershops responded to flyers inviting their participation and were given \$5 on completion of the survey packet. For data collected at the college campus, participants were recruited from classes in the African studies program. Of the 50 packets distributed at the college, 21 packets were returned. The overall data collection yielded a total of 237 survey packets. After an initial examination of the data, 17 packets were discarded because of incomplete data.

## Results

### Preliminary Analysis

To assess for any significant differences on the predictor variables (perceived stress and racism-related stress), we conducted a one-way multivariate analysis of variance (MANOVA) by which mean scores on perceived stress and racism-related stress were compared on the three levels of social class. Because of the extremely discrepant cell sizes of ethnicity and religious orientation, these variables were not included in the MANOVA. The overall MANOVA revealed a significant effect for social class (Wilks's  $\Lambda = .98$ ),  $F(4, 424) = 5.08$ ,  $p \leq .01$ . Post hoc analysis using Tukey's honestly significant difference test indicated that mean scores on the PSS were significantly higher than scores for both middle class ( $p \leq .05$ ) and upper class ( $p \leq .01$ ) groups. For mean scores on racism-related stress, individuals in the working class group had significantly higher scores than those in the middle class group ( $p \leq .01$ ; see Table 1). Given the pattern of significant differences, the sample was divided into two groups, namely working class ( $n = 101$ ) and middle–upper class ( $n = 115$ ). Subsequent analyses were conducted separately for each group.

Correlations and coefficient alphas for the variables under consideration are presented in Table 2, and means, standard deviations, and ranges of scores for each social class group are presented in Table 3. The frequency of racist events as measured in percentages is documented in Table 4. These findings suggest that Black men continued to experience a relatively high percentage of racist incidents. Of note is the finding that 53%–67% of respondents felt

that their life would have been different if they had not experienced racist events over the prior month and year.

### Primary Analyses

To establish the relationship between racism-related stress and psychological health, we examined the correlation matrix. Variables entered into the bivariate correlational analysis included psychological distress, psychological well-being, perceived stress, and all four scores from the modified SRE. The scores on the SRE were significantly related, as evidenced by the Pearson's correlation coefficient, which ranged from .72 to .90. To maintain consistency with other measures that asked participants to reflect on their life experiences over the past month, we selected the past month racism-related stress score to examine the relationship between racism-related stress and psychological health. For the working class group, racism-related stress was positively associated with psychological distress ( $r = .44$ ,  $p < .01$ ) and was inversely related to psychological well-being ( $r = -.29$ ,  $p < .01$ ). The middle–upper class group displayed a very similar pattern. Racism-related stress was also positively related to psychological distress ( $r = .44$ ,  $p < .01$ ) and inversely related to psychological well-being ( $r = -.33$ ,  $p < .01$ ). The findings from this set of analyses indicate that racism-related stress was significantly associated with psychological health. Furthermore, an increase in racism-related stress was associated with an increase in psychological distress and a decrease in psychological well-being. These findings are consistent with prior research, as summarized by Williams et al. (2003).

To examine whether racism-related stress was a unique predictor of psychological health when we controlled for general life stress, we conducted two sets of hierarchical regression analyses for each social class group. In the first regression analysis, the criterion variable was psychological distress, and the predictor variables were perceived stress on Step 1 and past month racism-related stress on Step 2. For the second regression analysis, the criterion variable was changed to psychological well-being, and the order of entry for the predictor variables remained the same.

Results of the hierarchical regression analysis are presented in Table 5. For the working class group, when we controlled for perceived stress, racism-related stress was a unique predictor of psychological distress ( $\Delta R^2 = .04$ ),  $F(1, 99) = 8.13$ ,  $p < .01$ , and was not a significant predictor of psychological well-being ( $\Delta R^2 = .003$ ),  $F(1, 99) = 0.46$ . For the middle–upper class group, when we controlled for perceived stress, racism-related stress was a unique predictor of both psychological distress ( $\Delta R^2 = .07$ ),  $F(1, 113) = 15.78$ ,  $p < .01$ , and psychological well-being ( $\Delta R^2 = .05$ ),  $F(1, 113) = 5.95$ ,  $p < .05$ . These results suggest that, for the current sample of Black men, racism-related stress did play a role in their psychological health. Furthermore, the manner in which racism-related stress influences psychological health appears to be linked to social class status. For working class participants, racism-related stress was a unique predictor of psychological distress; however, it had no predictive ability for psychological well-being. For middle–upper class participants, racism-related stress was a unique predictor of both psychological well-being and psychological distress. The results also indicate that although racism-related stress was a significant predictor, general life stress accounted for

Table 1  
*Multivariate Analysis of Variance Post Hoc Comparisons of Mean Scores on Perceived Stress and Racism-Related Stress by Social Class*

Variable	Social class group					
	Working		Middle		Upper	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Perceived stress	18.15 <sub>a</sub>	5.84	15.99 <sub>a</sub>	4.80	13.36 <sub>a</sub>	4.04
Racism-related stress	33.55 <sub>b</sub>	16.35	27.25 <sub>b</sub>	11.03	27.24	12.91

Note. Wilks's  $\Lambda = .98$ ,  $F(4, 424) = 5.01$ ,  $p \leq .01$ . Means sharing subscripts are significantly different at the  $p < .05$  level, as assessed by Tukey's honestly significant difference test.

a much greater percentage of the variance in both psychological well-being and psychological distress.

### Discussion

Findings from the empirical literature in general support the notion that racism-related stress influences psychological health (Williams et al., 2003; Williams & Williams-Morris, 2000). Moreover, qualitative studies examining the experience of discrimination as reported by Blacks indicate that racism is perceived as stressful and that these experiences are reported as having a negative influence on an individual's sense of well-being (Carter, Forsyth, Mazzula, & Williams, 2005; Swim, Hyers, Cohen, Fitzgerald, & Bylsma, 2003). The findings of the current investigation are consistent with both the general stressful life events literature and emerging literature on racism-related stress (Harrell, 2000; Kessler, 1997). Additionally, the reported frequency of racist incidences in the current sample was noted to be greater than the frequency reported by female participants in a study that used the same measure to assess racist incidents (see Kwate, Valdimarsdottir, Guevarra, & Bovbjerg, 2003), which thereby provides some support for the notion that the experience of racism for Black populations might vary as a function of gender.

Kessler (1997) has documented that the most consistent psychological responses to stressful life events are depression and anxiety. For participants in the current study, general life stress accounted for a greater variance in psychological health than did

racism-related stress. However, stress associated with racist events did contribute in a unique and independent fashion to both distress and well-being. The suggestion is that Black men do experience racism as a unique source of stress and that these experiences influence the individuals' psychological health. However, it is important to note that the strength of these relationships was quite weak.

Conversely, the magnitude of the relationship between general life stress and racism-related stress presents intriguing insight into the intersection of specific stressors associated with racism and more general life stressors associated with everyday events. The intersection of discrimination, race- or ethnicity-related stress, and general life stress has led to the development of conceptual models aimed at integrating the experience of prejudice into the general stress process (Slavin, Rainer, McCreary, & Gowda, 1991). The results of the present study are reflective of some of the challenges associated with attempting to assess the impact of racism-related stress as distinct from other sources of life stress. Given the fact that general life stress has a stronger relationship to both psychological distress and well-being, one could conclude that, for Black men, racism-related stress, although it is a unique source of stress, is not a dominant or primary source of stress. Yet the fact that racism has been implicated at both individual and structural levels (Jackson & Volckens, 1998) could indicate that, for Black men, relevant stressors most likely incorporate elements of racism that are embedded in the social, occupational, legal, educational, and

Table 2  
*Correlation Matrix and Coefficient Alphas for Perceived Stress, Psychological Well-Being, Psychological Distress, and the Four Scores on the Modified Schedule of Racist Events*

Variable	1	2	3	4	5	6	7	$\alpha$
1. RRE	—	.89**	.90**	.77**	.33**	-.26**	.46**	.89
2. RRS	.85**	—	.79**	.87**	.28**	-.33**	.44**	.86
3. YRE	.86**	.78**	—	.83**	.29**	-.28**	.38**	.88
4. YRS	.72**	.87**	.85**	—	.26**	-.40**	.37**	.89
5. PSS	.31**	.39**	.29**	.39**	—	-.40**	.66**	.79
6. PSW	-.16	-.28**	-.18	-.39**	-.61**	—	-.51	.93
7. PSD	.46**	.44**	.39**	.40**	.61**	-.57**	—	.89

Note. The upper diagonal represents the middle-upper class group ( $n = 115$ ), and the lower diagonal represents the working class group ( $n = 101$ ). RRE = past month racist experiences; RRS = past month racism-related stress; YRE = past year racist incidents; YRS = past year racism-related stress; PSS = perceived stress; PSW = psychological well-being; PSD = psychological distress.

\*\*  $p < .01$ .

Table 3  
Means, Standard Deviations, and Ranges of Scores for Study Variables by Social Class Group

Variable	Working class			Middle-upper		
	<i>M</i>	<i>SD</i>	Range	<i>M</i>	<i>SD</i>	Range
PSS	18.15	5.84	4–33	15.62	4.83	4–25
RSS	33.55	16.35	17–88	27.28	11.47	17–63
PSD	59.45	18.31	27–112	52.61	16.43	25–90
PSW	55.24	12.61	21–76	58.95	10.26	30–78

Note. PSS = perceived stress; RSS = past month racism-related stress; PSD = psychological well-being; PSW = psychological well-being.

recreational areas of their life (Franklin, 2004). The findings of the current study also question the utility of attempting to isolate racism-related stress as a unique stressor given the pervasive nature of racism in American society.

An unintentional finding of the current investigation is the differential manner in which racism-related stress was related to psychological health on the basis of social class status. In the present sample, all of the participants reported experiencing some type of racist incident in the prior month and year. In addition, racist events were easily identified as stressful, yet for individuals in the working class group, racism-related stress did not seem to influence their sense of well-being. Brown et al. (2000) have found that, for Black Americans, subjective well-being tends to be significantly associated with race relations only when other variables, such as socioeconomic status, geographical location, religiosity, and family structure, are not accounted for. When these variables are included, the effect of race disappears.

The fact that racism-related stress appeared to influence both well-being and distress in the upper-middle class groups seems to indicate that the presence of racism continues to be an important determinant of life experiences for Black men, irrespective of

social mobility. The role of socioeconomic status versus racial oppression as a source of social, health, and economic problems for Black Americans remains a source of debate (Schiele, 2005). However, the findings in this study lend support to the notion that for Black Americans and Black men in particular, social mobility encompasses hidden costs, one of which could be a greater sensitivity to experiences of racism and discrimination (Cole & Omari, 2003). Simply having access to greater resources and social opportunity might not necessarily protect Black men from the ongoing experience of invisibility or the negative stereotypes by which Black men are portrayed (Franklin, 2004).

#### Limitations

It is clear that the manner in which a construct is measured has an important bearing on findings associated with the construct of interest. One limitation of the current study therefore pertains to the manner in which the SRE assesses racist events. The SRE provides a prescribed set of racist incidents and then proceeds to assess stress levels associated with those incidents. In this sense, the range and nature of the assessed racist events are limited.

Table 4  
Percentage of Men Who Experienced Racism in the Past Month and Past Year

Type of racism	Past month	Past year
Treated unfairly by neighbors	28	36
Made fun of, picked on, pushed, or hit	17	21
Forced to take drastic steps (e.g., moving, legal action)	22	23
Treated unfairly by people you thought were friends	26	28
Accused or suspected of doing wrong (e.g., stealing)	35	46
Treated unfairly by employers, bosses, supervisors	37	31
Gotten into an argument or fight about something racist	28	38
Called a racist name	24	31
Treated unfairly by coworkers, fellow students, colleagues	34	42
Treated unfairly by teachers and professors	22	31
People misunderstood your intentions and motives	51	57
Treated unfairly by people in helping professions (doctors, etc.)	29	34
Wanted to tell someone off for being a racist	51	64
Treated unfairly by institutions (schools, police, courts)	46	55
Been really angry about something racist	52	58
Treated unfairly by strangers	56	70
Treated unfairly by people in service jobs (store clerks, waiters)	51	64
How different would your life have been if you had not experienced racism?	53	67

Note. Percentages reflect the proportion of men who endorsed the item at a level greater than *never* or *not at all*.

Table 5  
*Hierarchical Regressions With Perceived Stress and Racism-Related Stress as the Predictor Variables and Psychological Well-Being and Distress as the Criterion Variables*

Variable	<i>B</i>	<i>SE B</i>	$\beta$	<i>R</i>	Adj. <i>R</i> <sup>2</sup>	$\Delta R^2$	<i>F</i> <sup>a</sup>
Working class group hierarchical regression of psychological distress, perceived stress, and racism-related stress ( <i>n</i> = 101)							
Step 1—PSS				.61	.37		58.64**
Step 2—RRS	5.11	1.79	.24	.65	.41	.04	8.13**
Working class group hierarchical regression of psychological well-being, perceived stress, and racism-related stress ( <i>n</i> = 101)							
Step 1—PSS				.60	.36		56.73**
Step 2—RRS	−0.81	1.19	−.06	.61	.37	.01	0.46
Middle–upper class group hierarchical regression of psychological distress, perceived stress, and racism-related stress ( <i>n</i> = 115)							
Step 1—PSS				.63	.38		72.30**
Step 2—RRS	0.41	0.11	.28	.68	.46	.08	15.78**
Middle–upper class group hierarchical regression of psychological well-being, perceived stress, and racism-related stress ( <i>n</i> = 115)							
Step 1—PSS				.46	.21		30.92**
Step 2—RRS	−0.19	0.07	−.21	.50	.24	.04	5.95*

Note. PSS = perceived stress; RRS = past month racism-related stress.

<sup>a</sup>For the first two regressions, *F*(1, 99); for the second two, *F*(1, 113).

\* *p* < .05. \*\* *p* < .01.

Carter et al. (2005) have argued for an expanded definition of racism to be used in racism-related research. The distinction between racial harassment and racial discrimination within the rubric of racist events that Carter et al. proposed could possibly garner a more complete picture of the nature of racist events and accompanying racism-related stress.

In relation to the research methodology, correlation studies have been critiqued for their inability to establish causality (Campbell & Stanley, 1966). Although this limitation certainly applies to the current study, it is also important to recognize that the intent of the study was to investigate relationships, not to uncover causality per se. However, the extent to which racism-related stress actually produces psychological distress cannot be determined with the present methodology. For example, one could argue that psychological distress might, in fact, influence one's perception of racist incidents and the stressfulness one ascribes to the incident. The MHI's Psychological Distress subscale includes an index of depression; therefore, the extent to which an undiagnosed depression or even a depressed affect might have influenced participants' response pattern is unclear.

### *Implications for Counseling and Research*

The need to draw attention to social and political structures that impinge on the mental health of Black American men has been consistently highlighted in the literature (Gary, 1995). The current investigation provides evidence to suggest that Black men continue to report relatively frequent incidents of racism and that these incidents are experienced as stressful. Therefore, when working with Black men, clinicians are encouraged to explore and validate

as necessary the clients' experience of racism-related stress. Furthermore, because of the pervasive nature of racism within U.S. society, for this population, general life stress might also carry an element of racism-related stress, even if not directly acknowledged or recognized by the individual.

With regard to areas for future research, an ongoing examination of the interplay between racism-related stress and general life stress is viewed as critical. Pearlin (1999) has referred to status strains as "stressors that arise directly from one's position in social systems having unequal distribution of resources, opportunities and life chances, power and prestige" (p.164). The identification of racism-related stress as a status strain and the manner in which it evolves from chronic strain to psychological stressor could be a useful and needed area of investigation if counseling psychology is going to more effectively respond to the ongoing presence and impact of racial inequalities within American society. Finally, the literature makes reference to variables that might offer a protective quality against the harmful psychological effects of racism-related stress. These include such constructs as spirituality (Hunter & Lewis-Coles, 2004), Afrocentric worldview (Elligan & Utsey, 1999), and racial identity (Carter & Pieterse, 2005). Empirical examinations of the potential buffering effects of these variables are clearly needed and could be highly informative to clinicians working with those individuals and groups for whom racism remains an integral aspect of their life experiences.

### *Summary and Conclusion*

The current study examined the association between general life stress and racism-related stress and sought to investigate the pre-

dictive nature of racism-related stress on psychological health when controlling for general life stress. The results provide some support for the notion that encounters with racism are associated with the psychological health of Black men. Additionally, the findings underscore the need to broaden our understanding of the manner in which racism-related stress is embedded in measures of general life stress as it pertains to Black populations. We hope that continued efforts in this area will provide clinicians with a greater understanding of the role of racism-related stress and thereby allow for more effective interventions in response to the social and psychological needs of Black men.

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