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The Protective Effect of Adult Mental Health Upon the Utilization of Racial Socialization Parenting Practices

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SUMMARY

The purpose of this paper is to examine the impact of parental mental health and types of racial socialization. The sample consisted of 169 African-American parents and their children (ages 9–11) who participated in a federally funded research project, “Knowledge about the African American Research Experience” (KAARE). Bivariate analyses revealed significant positive relationships between parent mental health status and two forms of racial socialization: *spiritual/religious coping*, and *racial awareness teaching*, while multivariate analyses supported the positive association between parental mental health and *spiritual/religious coping*. These results suggest that parental characteristics may influence the use of specific types of racial socialization to assist youth in coping with discriminatory societal messages.

Keywords

Racial socialization; cultural parenting practices; African-American youth

Racism is an adverse and hostile aspect of American society that negatively impacts the health and well-being of persons of African-American descent (Bowen-Reid & Harrell, 2002; Brown et al., 2000). Somewhat lesser attention has focused upon the impact of racism upon African-American youth (Fisher, Wallace, & Fenton, 2000; Scott, 2003), although research suggests that they too are adversely affected by discrimination (Fisher et al., 2000; Simons et al.,

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2002). More specifically, Simons et al. (2002) found that both individual experiences as well as the observation of racial discrimination within one's community was associated with depressive symptoms among children, while African-American adolescents reported feeling distressed over what they believed to be prejudicial treatment within educational and institutional sectors, although they evidenced higher self-esteem and lesser perceptions of peer discrimination than other minority groups (Fisher et al., 2000).

A main strategy African-American families use to contend with racism is to convey messages framed within a cultural perspective (McKay, Atkins, Hawkins, Brown, & Lynn, 2003; Stevenson, 1995). In particular, racial socialization messages are defined as communicating about one's race, how they are perceived in society due to their racial affiliation, and how to operate effectively within larger social structures with varying levels of racial discrimination (for review see Hughes, Rodriguez, Smith, Johnson, Stevenson, & Spicer, 2006). Generally, racial socialization parenting practices fall into one of two areas: (1) *proactive messages* which represent efforts by parents to instill pride in their children in the African American culture and direct them to cultural resources; and (2) *protective messages* which represent efforts to warn children about the struggles they will face due to their race (Hughes & Demo, 1990; Marshall, 1995; Sanders-Thompson, 1994; Stevenson, 1995). Within these categories, the literature has identified specific culturally-based parenting constructs, with two main variables being *spiritual or religious coping* (SRC) and *racial awareness teaching* (RAT).

Religiosity and spirituality are major sources of strength for many African Americans (Stevenson, 1994). Through *spiritual or religious coping*, a proactive form of racial socialization (Stevenson, 1994), it is hypothesized that African American children are taught that belief in God, dependence on religion, and family practice of religion through organized religious institutions are resources vital to their well-being and a source of support available throughout their lives. Messages reflect that "depending on religion and God can make a person better able to make good life decisions" and "a belief in God can help a person cope through life struggles" (Stevenson, 1994). Through religious or spiritual coping, African American children may be taught from an early age that a belief that God can protect them from the racial hatred of this world and are provided with a larger network of support (e.g., other church members) to draw upon as a resource.

On the other hand, *racial awareness teaching* is considered a protective form of racial socialization, and the primary construct that alerts African American children to the presence of racial discrimination in U.S. society and instructs them on how to cope with it (Stevenson, 1994; 1995). Messages within this construct represent efforts of African Americans to protect children from (racist) threats inherent in the larger social structure that may evidence hostility and inequity toward African Americans due to their race. For example, children may be made aware of racial injustices (e.g., more job opportunities would be available to African Americans if people were not racist) or negative racial stereotypes that the larger social structure may harbor about Blacks (Stevenson, 1995).

Over the past twenty years, a number of studies have linked the presence of racial socialization to outcomes for African American youth, including positive socio-emotional functioning (Caldwell, Zimmerman, Bernat, Sellers, & Notaro, 2002; McAdoo, 1985; Spencer, 1983); academic outcomes (Bowman & Howard, 1985; Chavous et al., 2003); self-esteem (Bowman & Howard, 1985; Sanders-Thompson, 1994); behavioral competence (Caughy, O'Campo, Randolph, & Nickerson, 2002); and lower levels of depression and anger (Stevenson, Reed, Bodison, & Bishop, 1997). Further, racial socialization beliefs also have been linked to family-level outcomes, including parental involvement in children's schooling (McKay et al., 2003) and the quality of mother/child interactions (Frabutt, Walker, & MacKinnon-Lewis, 2002). Thus, these cultural variables appear to be efficacious at assisting youth in developing the

needed strategies and resources to deal more successfully with a world that is discriminatory towards children of color.

A principal component of understanding the endorsement of racial socialization is to identify what parental characteristics are associated with their use. The literature in this area has predominantly focused upon sociodemographic factors such as the parent's socioeconomic status and geographic location, or their identity and sense of affiliation with their cultural group (see Hughes et al., 2006, for a comprehensive review). However, very little attention has focused upon parental attributes, such as mental health status, and how that affects endorsement of these important cultural variables. Understanding the link between parental mental health and employing these cultural strategies is of great import given that these methods go beyond typical parenting practices and can offer African-American youth the skills to cope effectively and function in a discriminating society, not to mention enhance the parent's interaction and involvement with their child. Accordingly, this study was undertaken to explore the relationship between parental mental health and endorsement of proactive and protective racial socialization practices.

METHOD

Research Design

This study is a secondary data analysis of existing data collected through an NIMH funded research project entitled "Knowledge about the African American Research Experience" (KAARE; McKay, Paikoff, Bell, & Parenoff, 1997). The purpose of KAARE was to identify influential factors that effect informed consent, initial engagement, and ongoing involvement in developmental research. Data provided by 169 of the 170 respondents that participated in the KAARE were used in this analysis.

Sample

The current sample included 169 low-income, inner-city African American adult caregivers of children (ages 9–11; 62% female), living in a community characterized by significant psychosocial stressors, including poverty, high levels of community level violence, substance use and HIV infection. Adult caregivers provided all data employed in the current research. Ninety-three percent of adult caregivers were mothers and 7% were fathers. The mean age of adult caregivers was 33.8 years ($SD=7.4$). More than half (63%) of adult caregivers became parents in adolescence (age 18 or younger). Thirty-four percent of caregivers had between three to five children, 33% had between one and three children, and 30% had five or more children living in the home. Most adult caregivers were not married (77%) at the time of interview: 70% were single, never married; and 7% were separated, divorced, or widowed.

The majority of adult caregivers attained a high school level education (81%); 17% had some trade school or a college education; and 2% had an education level below high school. More than half of adult caregivers (58%) were not working outside their home at the time of data collection, and almost two-thirds of the sample (63%) reported their total income for the last year to be \$9,000 or less. Seventy percent of all adult caregivers reported that they were receiving public assistance at the time of their interviews. Approximately 95% of families live in subsidized housing.

Instruments

Adult mental health state was measured via the State-Trait Anxiety Inventory for Adults (STAI Y) (Spielberger, Gorsuch, Lushene, Vagg, & Jacobs, 1983), a general measure of anxiety in adults (a child version is also available). The scale consists of two subscales, *State* and *Trait*, consisting of 20 items each. The *State* subscale measures transitory periods of anxiety, and

asks respondents to rate how they are feeling *at this moment*; responses are anchored along a four-point Likert scale ranging from 1= “not at all,” to 4= “very much so.” The *Trait* subscale measures more lasting states of anxiety, in which respondents to rate how they *generally* feel on a similar Likert scale ranging from 1= “almost never,” to 4= “almost always.” The possible range of each subscale is 20–80. A score of 39–40 indicates a clinically significant level of anxiety (Kvall, Ulsten, Nordhus, & Engedal, 2005).

Racial Socialization was measured via the *Scale of Racial Socialization for African American Adolescents* (SORS-A; Stevenson, 1994), which is a 45-item instrument completed by caregivers that assesses race-related beliefs and messages of child rearing in multiple dimensions of racial socialization in the African American culture. The scale contains four subscales: cultural pride reinforcement (range=7–28, $\alpha=.71$), racial awareness teaching (range=6–24, $\alpha=.59$), extended family caring (range=9–36, $\alpha=.70$), and spirituality and religious coping (range=7–28, $\alpha=.71$). Each item is scored along a 4-point Likert scale (1=Strongly agree, 4=Strongly disagree).

Data Analysis

There were two steps involved in the data analysis. First, a set of correlational analyses were conducted to determine if racial socialization practices were associated with independent variables (i.e., parental hassles and uplifts, parent mental health) at the bivariate level. Next, an ordinary least squares (OLS) regression was employed to examine the influence of multiple independent variables on racial socialization parenting practices at the multivariate level. Only independent variables that were significantly ($p<.05$) associated with racial socialization parenting practices at the bivariate level were used as independent variables in the OLS regression model. Parent educational level was controlled for in at the multivariate level due to an association between education and the utilization of these techniques as documented in the literature (Hughes & Chen, 1997; Thorton, 1997; Thorton, Chatters, Taylor, & Allen, 1990). Checks for multicollinearity among independent variables revealed no significant problems (Menard, 1995).

RESULTS

Description of Study Variables

Mean parent ratings of a proactive form of racial socialization tended to be high. Of a possible range of 7–28, the mean parent ratings of spiritual and religious coping was 21.7 ($SD=4.1$), which falls into the upper-third of scale values. However, parents tended to report a less frequent use of racial awareness teaching. With a potential scale range of 8–32, the mean value representing parent use of rating of racial awareness teaching was close to the center of scale values ($M=22.8$; $SD=4.7$). Parents also described themselves as having a fairly positive mental health state, with mean ratings ($M=67.9$; $SD=8.9$) in the upper-third of scale values. Lastly, parents described a relatively low mean number of parent hassles ($M=25.1$; $SD=16.0$), along with a fair number of parent uplifts ($M=75.1$; $SD=22.6$).

Bivariate Analyses

Bivariate analysis indicated a significant positive correlation between *Spiritual/Religious Coping* and parent mental health ($r(169)=.21$, $p<.05$) and parent uplifts ($r(169)=.27$, $p<.01$), while parent hassles ($r(169)=.01$, $p=.86$) were unrelated. Additionally, bivariate analyses indicated a significant positive correlation between *Racial Awareness Teaching* and parent mental health ($r(169)=.15$, $p<.05$).

Multivariate Analyses

When parent mental health was related to parent use of *Racial Awareness Teaching* at the multivariate level (controlling for education), the OLS model was not significant and is therefore not presented. Table 1 presents the results of an OLS regression model examining the influence of multiple independent variables on parent use of *Spiritual and Religious Coping*. The overall model proved to be highly significant ($F(167)=5.94, p<.01$). Furthermore, analysis indicated a significant positive relationship between *Spiritual and Religious Coping* and both parent uplifts ($B=.04, \beta=.23, p<.01$) and parent mental health status ($B=.07, \beta=.16, p<.05$).

DISCUSSION

This study is an encouraging attempt towards understanding the association between parental characteristics and communicating specific types of racial socialization. Accordingly, the main finding of the study, which revealed parents who had a positive mental health state were more apt to utilize the proactive racial socialization practice *spiritual or religious coping*, is one of the first links to be established between mental health status and the endorsement of racial socialization messages, and suggests that indeed, the psychological state of the parent does exert a considerable influence upon the utilization of these important parenting skills.

This finding has important implications for the mental health field. Indeed, given the multiple positive outcomes associated with spiritual or religious connectedness among youth (Bowman & Howard, 1985; Caldwell et al., 2002; McAdoo, 1985; Spencer, 1983; Stevenson et al., 1997), and that positive mental health status was related to using this parenting skill, efforts to provide and improve access to mental health treatment in African-American communities could serve to enhance the health and well-being for the entire family.

In light of this important finding, one avenue of future research could be to explore whether healthier caregivers were more spiritually connected, and whether the caregiver's perception of the benefits of this connection influenced the utilization of the parenting technique *spiritual/religious coping*. More specifically, caregivers who were spiritually connected might have been more likely to use spiritual or religious parenting practices with their children because they recognized the benefits of spirituality to their own mental well-being. However, while a large body of literature has linked spirituality to positive mental health in adult samples (Ellison, Boardman, Williams, & Jackson, 2001; Ellison & Gay, 1990; Hughes & Demo, 1990), how their spirituality affects the use of this particular parenting technique is currently unknown. Hence, such future studies could offer much benefit towards clarifying what role the caregiver's religiousness has in their parenting methods.

In close, this study is a promising step towards understanding how parental characteristics influence the use of racial socialization by minority families. Such an endeavor is of critical importance considering the constant threat of racial discrimination and the myriad benefits of such techniques to the health and functioning of African-American youth.

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TABLE 1

Ordinary least squares regression examining the relationships between independent variables and parent use of spiritual and religious coping ($n = 169$)

Variable	<i>B</i>	<i>SE B</i>	β
Parent uplifts	.04	.01	.23 ^{**}
Parent mental health status	.07	.04	.16 [*]

Note: $R^2 = .10$, Adj. $R^2 = .08$, $df = 167$, $F = 5.94$,

*
 $p < .05$,

**
 $p < .01$.