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Natalie Delgado

BARRY UNIVERSITY

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by

Natalie Delgado, B.A.

A THESIS

Submitted to the Faculty of Barry University in partial fulfillment of the requirements for the degree of Master of Science

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| Approved: | |
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| Pamela Hall, Ph.D. Assistant Professor of Psychology | Karen A. Callaghan, Ph.D., Dean College of Arts and Sciences |
| Linda Bacheller, J.D., Psy. D. Assistant Professor of Psychology | Date |
| Sabrina Des Rosiers, Ph.D. Assistant Professor of Psychology | |

Introduction

Identity development and formation are important aspects of development during adolescence. Adolescence is a period where an individual asks questions such as "who am I?" and "where do I fit into this world?" This form of abstract thinking is a characteristic of this developmental period which parallels this notion of figuring out who the self is in terms of who the individual could be in life (Schwartz et. al., 2013). It is a form of self-examination that people undergo to help categorize the self with respect to where they fit in society.

Identity is defined as the integration of the self that an individual has developed through one's experiences and innate characteristics (Erikson, 1968). It is the combined perception a person has about oneself through overcoming various developmental crises. Within identity formation there are various subgroups or sub-identities that comprise an individual's comprehensive identity. Researchers have explored identity of individuals at different developmental stages of their lives. In each developmental stage there are various sensitive developmental periods whereby an individual is confronted with life experiences that influence the person's sense of self in relation to others and the world. Each stage of development builds upon the other so as to create one cohesive identity. A stage entails different experiences and tasks that are to be mastered to aid an individual in learning, assimilating, and accommodating information into what fits into the person's sense of self (Erikson, 1950). Within the various stages of development, adolescence is the focus of identity development.

Identity has been the topic of exploration in the fields of clinical and developmental psychology for decades. Identity formation is a complex developmental process that is exhibited throughout the life span; however, the focus of identity development occurs during adolescence and early adulthood (Schwartz et. al., 2013). This period of life is indicative of the importance of

identity development whereby the individual begins to focus on the self and where the individual is open to new opportunities and experiences.

Erikson (1950) focused on adolescence as the stage where individuals engage in behaviors and thoughts about identity because it is the developmental stage where individuals are confronted with identity crises. Autonomy is a factor that is important for identity development as it is a force or motivation for adolescents and young adults to spend time to find themselves (Schwartz et. al., 2013). It is a period where individuals explore various experiences as they may no longer be bound by rules or boundaries set by parents or society. The time that is taken out by individuals to integrate these new opportunities spans across various aspects of the self such as one's philosophy on life, sexual orientation, religion or spirituality, career options, and many more (Schwartz et al., 2013). Among these factors is one's sense of belonging or association to his or her ethnic or racial group.

For the purpose of this study, adolescents will be examined to see how the level of their ethnic identity influences their psychological well-being. The remainder of this section critically reviews the initial discussion on identity and identity models that help to formulate an understanding of its development. It will also contain a review of the contemporary literature regarding ethnic identity development and how it impacts psychological well-being. The review concludes with a summary and critique of the existing literature, followed by a discussion of the specific research question and hypotheses suggested by the lack of literature pertaining to the population of Haitian adolescents in question for this thesis.

Theories of Identity Development

Adolescence is a period where an individual actively engages in explorative behaviors such as learning cultural practices and learning about one's culture. This exploration eventually

comes to a resolution where the individual develops an attachment towards a particular group. Various identity development theories and models are used to understand its development and the significant impact it has on people's lives and well-being. The purpose of the present study is to examine the impact of Haitian adolescents' ethnic identity on their psychological well-being.

Erikson's Psychosocial Identity Development

Erikson's (1968) psychosocial identity model is the source from which ethnic identity is rooted. The life cycle encompasses the gradual development of identity; however, it is indicated that identity is not formally constructed until adolescence. Erikson proposes that human growth and development covers various psychosocial stages whereby individuals are confronted with conflicts that stir crises in which they attempt to overcome (Erikson, 1968). Each successive stage builds upon the other as the individual is piecing together the various experiences from each developmentally sensitive period. This accumulation of experiences allows for the individual to learn because it can cause a significant change in one's perspective. Erikson (1968) indicated that the stages prior to identity development are necessary for an individual to develop physiologically, mentally, and socially to guide the self during identity exploration.

The purpose is for the individual to emerge from each stage with a new sense of unity and to actively master a healthy personality. Not every person is capable of mastering the crisis and thus emerges from the stage with an increased vulnerability and potential maladjustment (Erikson, 1968). Erikson (1968) proposes that this vulnerability is not to be seen as merely a weakness. This vulnerability may also be a strength whereby it can provide growth and awareness on how factors in one's environment influence a variety of functions.

Adolescence is the period where an individual develops the necessary components of physiological growth, cognitive maturation, and the social responsibility to experience the

identity crisis stage of development (Erikson, 1968). Identity is a subjective feeling one has of sameness that allows the individual to have a sense of self. It aids in the decisions an individual makes for key aspects in life. Identity is developed through one's reflections and observations during adolescence and adulthood that eventually lead to one's identity achievement (Erikson, 1968).

The goal of identity development is to have an achieved identity where the individual is committed to the decisions of one's self identification. An achieved identity is a cohesive self-structure made up of one's interests, values, identifications, and experiences that were brought on by one's environment (Erikson, 1950). An achieved identity is not accomplished by every individual leading them to have role confusion and the inability to make meaningful commitments in their lives.

Marcia's Identity Status Model

Marcia (1980) expanded on Erickson's stage of identity development. Marcia stated that identity development is formed via two processes: exploration and commitment. Exploration is defined as the active effort one engages in when experiencing or sorting through the numerous aspects that help define one's acceptance of identity such as religion, sexual orientation, etc., (Marcia, 1966). Commitment is defined as an individual's selection or acceptance of one or more of the options that were experienced during the exploration phase.

Marcia postulates four identity statuses that an individual may develop as the result of the decision he or she makes during by exploration or commitment process. These four identity statuses are achieved, moratorium, identity foreclosure, and identity diffusion. An achieved identity is one where the individual explored aspects of identity and has made a commitment to one's identity. Moratorium is a period where the individual is in continuous exploration and has

yet to make a commitment. Identity foreclosure is when an individual has made a commitment without having explored identity issues. Identity diffusion is characterized by the lack of engagement in both exploration and commitment.

Along with each of these identity statuses is a culmination of accompanying psychological impacts. For example Luyckx and colleagues (2006) indicate that those in moratorium are characterized as curious and open to new things while also having poor psychological well-being exhibited through symptoms of anxiety and depression. Foreclosure encompasses self-satisfaction with one's decisions. These individuals have minimal internalizing symptomology (Schwartz, Beyers, et. al., 2009). Diffusion is the status whereby an individual possesses more adverse personality and negative psychological aspects. Schwartz and colleagues (2005) characterize this status with the absence of direction in one's life therefore displaying low levels of self-esteem.

Social Identity Theory

According to Lewin (1948) social identity is the need for an individual to identify with a group to maintain a sense of well-being. Lewin's idea was further developed by Tajfel and Turner (1979) in their work on social identity theory. Social identity theory postulates that the mere membership in a group provides an individual with a feeling of belonging that contributes to one's positive self concept. The theory proposes that social identity is a relational term by which people are viewed through both the similarities and differences one has with others. It is a concept that encompasses a shared sense of social interactions.

For the purpose of this research, this paper will focus on racial and ethnic identity.

Research has supported Du Bois's writings on racial and ethnic identity as it underlines the significance of integrating both the majority and minority identities. There are various factors

that aid in this integration such as one's experiences and the environment. For example, an integrated or affirmed identity in marginalized ethnic groups is taught by parents to aid their children in preparing for experiences of oppression along with promoting cultural enrichment and pride (Hughes 2003). It is imperative to understand the level of integration/acceptance, or lack thereof, an individual has towards their ethnic identity as it may lead to adverse psychological effects. By understanding the degree of one's sense of belonging to an ethnicity has on psychological well-being people can then employ factors that aid in the integration of the self.

Ethnic Identity Development

One of the first individuals to discuss ethnic identity was W.E.B. Du Bois. Du Bois's (1903) notion of double consciousness revolves around the fusion of an individual's racial objectification and his or her sense of self with respect to culture. It is proposed that when an individual is discriminated against it does not only impact the individual self but also their cultural self. Du Bois (1903) explained how the Negro is born into the world with a second consciousness because the world does not allow for him to have his true consciousness.

Therefore, he develops a double consciousness whereby the individual has a sense of seeing the self through another person's perspective alongside his own sense of being (Du Bois, 1903). This double consciousness is to be fused to aid the individual in having the ability to move between the two frames of consciousness. Du Bois (1903) continues to explain how a Negro is always aware of his "twoness" where he can feel himself as both a Negro and an American which encompasses two ideals within one person. The American Negro is explained as an individual who has undergone hardships to merge this double consciousness as a means to develop a true self. The individual's double consciousness consists of how he presents to the majority,

American, as well as how he presents to his own racial group. DuBois's work was pivotal in the area of research on identity development.

Distinguishing between Key Concepts: Ethnic Identity, Acculturation and Racial Identity

There has been confusion between the terms race, ethnic identity, and acculturation in research. Therefore it is important to distinguish among these terms in order to have a clear operational definition of the construct observed in the present study, ethnic identity. Although these terms may have some similar components, they each have their own distinct definition. With this, it is necessary to define each term so as to make clear that these terms are not to be used interchangeably as they are separate constructs. Phinney (1990) reviewed 70 studies to examine how ethnic identity is defined, what components encompass identity, and discussed these findings. She found discrepancies in the definitions of ethnic identity in some instances. In other instances there was a lack of or the lack thereof an operational definition of ethnic definition. Ethnic identity is how an individual identifies with his or her ethnic group or subgroup of a larger society (Phinney, 1990). The following sections provide further analysis of the definition of these terms.

Race

Race refers to the power associated with a social hierarchy within a group of people (Markus, 2008). The variation with races is related to the societal worth of a dominant group over a subordinate one. This power differential also encompasses prejudices and stereotypes for both groups. Ethnicity differs from race in that it is a way of life as the individuals identify themselves not by power but through their shared characteristics, such as values and customs within the group. An ethnicity can encompass races in which both the dominant and subordinate groups both share similar values. Markus (2008) explained that race and ethnicity are similar

creations people made to organize themselves into distinguishable groups within their community. For the purpose of this project, ethnic identity not acculturation or racial identity will be examined amongst an unexplored ethnic group; Haitian immigrants.

Ethnic Identity

There are various aspects that characterize one's identity such as their ethnic identity. Ethnic identity encompasses a sense of shared identity with others who are in the same ethnic group. People develop positive self attitudes from having a sense of sameness in a group that is meaningful to them (Phinney 1989; Tajfel & Turner, 1986). Ethnic identity is thought to exhibit a similar process of development as identity formation. It is a multifaceted construct that is ever changing and develops overtime. Psychological well-being is associated with ethnic identity since the crystallization of or lack of identity has psychological implications. It is a salient component in identity formation for ethnic groups especially when those minority groups are in an ethnically diverse country.

Ethnic identity is crucial for normative identity development as well as for personal adjustment in adolescence. An additional conceptualization by Cross (1971) on ethnic identity among African Americans was influenced by W.E.B. DuBois. This construction of identity encompasses marginalization, internal racism, and intergroup oppression. Cross and Cross (2008) explain how adolescents do not separate their cultural, racial, or ethnic factors of their personal identity. Cross and Cross's (2008) research argued that racial-ethnic-cultural identity is the term to use for adolescents' experiences related to their psychological state as they do not separate these groups from their self identification.

Acculturation

Ethnic identity has been used synonymously with acculturation in the literature; however, they are two distinctly different constructs. Acculturation is a broad term used for one's changes in cultural attitudes, values, and beliefs when he or she comes into contact with two distinct cultures. Acculturation is often used interchangeably with ethnic identity; however, they are distinguishable concepts as previously noted. Acculturation exhibits a focus on how minority groups adjust in terms of attitudes, behaviors, and values based on the dominant culture (Berry, Trimble, & Olmedo, 1986). Ethnic identity focuses on the individual rather than a group and how the person relates to his or her respective minority group within the dominant culture (Phinney, 1990).

Just as ethnic identity encompasses phases such as searching and commitment, acculturation consists of four categories. Berry (1980) created a model for acculturation where one's level of the new receiving culture acquisition and level of heritage-culture retention is used to develop the concepts of assimilation, separation, integration, and marginalization.

Assimilation is defined as the individual accepting of the new culture while disregarding their heritage culture. Separation is when the individual rejects the new receiving culture while retaining the heritage culture. Marginalization is where the individual rejects both the receiving and heritage cultures. Lastly, integration is where the individual is accepting of the new receiving culture and is also capable of retaining their heritage culture.

ERI Models of Development

Although a distinction has been made between ethnic identity and race, there are models that acknowledge the distinct nature as well as account for the overlap of these terms. A model that employs the use of both ethnicity and race is the Ethnic-Racial Identity Developmental

Model. Schwartz et. al. (2014), propose that these two terms can be conceptualized as a meta-construct to better measure individuals' experiences that may not be distinctly ethnic or racial. They explain that by combining these terms into the ERI model allows for an individual to identify as a member of a certain group because these terms encompass one's perception of the self as a member of a group. This proclamation of identifying to a particular group may have positive or negative influences on the individual. Because of the similarities between race and ethnicity, it was deemed applicable to combine the terms to better understand one's identification to a group based on experiences.

The Ethnic and Racial Identity (ERI) model of identity development is a psychological construct that reflects the attitudes and beliefs that people have towards their ethnic-racial groups as well as how those attitudes and beliefs change over time (Umana-Taylor et. al., 2014). It encompasses an individual's overall experiences that involve one's racial experiences and ethnic background. ERI explains ethnic-racial self-labeling that people undergo starting in childhood. During childhood, children undergo developmental periods where racial-ethnic knowledge, labeling, and constancy are processed (Umana-Taylor et. al., 2014). This is done as the child begins to identify and label the self into his or her own ethnic and racial categories. These aspects or factors come together to form one's ethnic-racial identity. During adolescence, the increase in social-cognitive ability allows for the individuals to comprehend how race and ethnicity affect one's experiences (Urmana-Taylor et. al., 2014; Quintana, 1999). This process continues throughout the lifespan and has several implications for psychological well-being and adjustment in adolescence.

Rivas-Drake and colleagues (2014) employ the term ERI, or ethnic and racial identity, in their research because they do not aim to separate the terms based on the psychological meaning

of membership to a group, racial heritage, or demographic factors. They intend on using the term to focus on the overall social and psychological experiences that people have when identifying with a racial or ethnic group. Rivas-Drake and colleagues (2014) aimed to examine whether previous literature supports that ethnic and racial identity are positively associated with adjustment factors in adolescent minorities. They reviewed the links between psychosocial, academic, and health outcomes of minority adolescents: African American, Latino, Asian American, and Native American. Ethnic and racial identity was associated with adaptive and positive outcomes. It was found that this is especially true among African American adolescents.

Phinney Ethnic Identity Model and the MEIM

One of the leading researchers who have examined the relationship between identity and well-being is Phinney. Phinney described ethnic identity as involving behaviors through customs, traditions, and social interactions that encompass ethnicity. Phinney and colleagues (1998) created the MEIM scale to create a distinction between acculturative behaviors and ethnicity. Phinney postulated that there is a difference between these constructs and wanted to clarify the difference in how these behaviors influence one's identification with a group and their sense of self.

According to Phinney and Tarver (1988), over 30% of the Caucasian and African American middle school students were found to be in the searching or exploration stage while 29% were in the commitment stage of identity development. Gender differences were found in the African American students where females were in the state of searching. Ethnic identity was less salient for the Caucasian adolescents. This supported previous findings indicating that people from ethnic majority groups score lower on ethnic identity constructs than those from ethnic minority groups (Greig, 2003; Roberts, Phinney, Masses et al., 1999).

Phinney and Ong (2007) reexamined the Multigroup Ethnic Identity Measure to examine its level of accuracy in measuring ethnic identity as well as examine whether it is appropriately measuring two factors: exploration and commitment. Exploration, as defined by Phinney and Ong (2007), is when an individual actively seeks information and experiences that are relevant to his or her own ethnic background. It consists of the individual learning cultural traditions and practices, conversing with others, and partaking in cultural events. Adolescence is characterized by this phase of exploration, however, this process can be continuous throughout one's lifetime (Berry, Phinney, Sam, & Vedder, 2006). Commitment on the other hand is one's sense of belonging to the ethnic group (Phinney & Ong, 2007). This aspect is important to ethnic identity as it is when the individual has an understanding of the meaning of being linked to an ethnicity.

How has Psychological Well-being been defined and measured

Psychological well-being has been examined in the literature in a myriad of ways.

Psychological well-being is studied according to the way the researcher operationalizes a particular construct such as depression, anxiety, or self-esteem. In some instances there are scales that researchers used to measure psychological well-being (Phinney et. al., 2001 & Umana et. al., 2014). In essence, these researchers define psychological well-being based on how one construct negatively or positively affects psychological functioning.

Among the numerous assessments is the Ryff Scales of Psychological Well-Being. The Ryff Scale is a popular scale utilized in literature as it allows for a dynamic concept to be measurable. Psychological well-being encompasses various psychological, social, health related behaviors, and subjective constructs which often makes it difficult to measure. The Ryff focuses on measuring these facets of well-being by asking questions regarding self-acceptance,

interpersonal relationships, autonomy, sense of purpose in life, values, pursuit of meaningful goals, and one's continued growth as an individual in society (Seifert, 2005).

For the purpose of the present study, psychological well-being will be defined as the positive or negative impact one's ethnic identity development has on levels of anxiety, depression, and self-esteem. Each construct will be measured using three separate scales.

Significance of Prior Research on Identity and Psychological Well-being

Findings have been mixed regarding the relationship between ethnic identity and internalizing and externalizing factors. Internalizing factors influence the self as they are harmful actions that affect the individual personally, whereas externalizing factors influence others. For example internalizing symptoms are self-esteem, depression and anxiety (Perle et al. 2013) and externalizing symptoms are aggression and violence behavior towards others (Liu, 2004).

Various studies have examined ethnic identity and depression and anxiety. An early study that consisted of a sample of African American and Puerto Rican high school students examined the relationships between the various stages of ethnic identity formation with externalizing and internalizing symptoms (Rotheram-Borus, 1989). Those who were in the moratorium, stage of searching without commitment, were found to be more likely to exhibit externalizing and internalizing symptoms (Rotheram-Borus, 1989). Less self destructive behavior was found in those with an achieved ethnic identity, but this identity formation was still found to have levels of nervousness and inattentiveness. It is indicated from these findings that an achieved identity can be a protective factor for adverse outcomes while exploration lends itself to making the individual vulnerable during ethnic identity development. Furthermore, the findings indicate regardless of the phase of identity development an adolescent is in, it is still a vulnerable period

where the phase of identity development may lend itself to be protective against only some adverse psychological functioning.

Identity confusion begins to develop as people become overwhelmed by the incongruence of the self based on expectations brought upon society as well as the self (Schwartz et. al, 2009). Schwartz and colleagues (2009) indicate that as the individual engages in confusion due to the multifaceted components of developing an identity it can result is various maladaptive psychological symptoms. This period of transitioning and exploring one's identity is linked to these symptoms; however, these symptoms may dissipate once the individual establishes his or her identity.

Schwartz and colleagues (2009) study aimed to focus on the aspect of identity exploration and its relationship to both adaptive and maladaptive symptoms of psychological well-being in a multicultural sample. Adaptive psychological symptoms were classified as self-esteem, locus of control, ego strength, and purpose of life while maladaptive symptoms were stated as anxiety, depression, deviance, and impulsivity. Their findings were supported in that personal identity exploration was found to be associated with maladaptive psychological well-being as anxiety, depression, impulsivity, and deviance were found to be elevated in their sample.

Self-esteem

Psychological functioning of individuals from a number of ethnic backgrounds is an essential part of ethnic identity. According to the developmental model, an achieved ethnic identity predicts high self-esteem. This is important since members of minority ethnic groups tend to face discrimination and negative attitudes thus influencing one's self concept (Taijfel, 1978). Therefore, having an achieved or committed identity can be associated with positive

attitudes with respect to one's ethnic group. Other studies have also explored the relationship between ethnic identity and self-esteem (Phinney & Chavira, 1992; Greig, 2003).

Phinney and Charvia (1992) examined how high self esteem is related to ethnic identity among high school and college students. It was found that students from the minority ethnic group were shown to have a positive association between high self esteem and ethnic identity. This relationship was not found in those from the majority ethnic group. Furthermore, an achieved ethnic identity indicated a higher self esteem in African American and Hispanic high school students who were followed on through adulthood (Phinney & Charvia, 1992). This was found to be consistent over both baseline and follow-up into adulthood where self esteem was consistent over time even though ethnic identity went through developmental changes.

Identity completion is the last stage of ethnic identity development. An achieved ethnic identity is expressed as one's secure feeling of oneself (Greig, 2003; Phinney, 1992). Having an achieved ethnic identity has been found to be associated with positive attitudes for one's group such as ethnic pride (Phinney, 1990, 1992). Positive mental health has been found to be a protective factor against negative mental health functioning (Miller & MacIntosh, 1999; Roberts et al, 1999). Positive aspects of psychological functioning, such as self esteem, have been associated with ethnic identity. A positive relationship has been consistently found between self esteem and one's ethnic identity (Phinney & Charvia, 1992).

Anxiety

In terms of identity development and psychological well-being, anxiety is one of the symptoms associated with identity exploration. Luyckx and colleagues (2006) reported that maladaptive symptoms such as anxiety and depression are present during the exploration phase. The maladaptive aspects related to identity development are evident as it requires for individuals

to become more flexible when assimilating, accommodating, and even abandoning aspects of themselves as they develop their sense of self (Grotevant, 1987). This is due to the unexpected and vague nature of developing the self that some individuals experience as they are attempting to make new decisions in their lives. This self doubt exacerbates the feelings of anxiety, inadequacy, and other maladaptive symptomology as the individual gradually becomes unsure on how to establish an integrated self.

Depression

In terms of internalizing symptoms, Roberts and colleagues (1999) examined the relationship between ethnic identity, depression, and loneliness in middle school students. The results showed that ethnic identity was inversely related to loneliness and depression in African American students. This finding was only found in the African American students and was not shown in the Mexican-American members of the sample. Findings such as this indicate how an achieved ethnic identity status can provide protective factors for internalizing symptoms for African American adolescents.

Anxiety and Depression

Other studies have examined other internalizing variables that may be influenced by ethnic identity such as depression and anxiety (Roberts et al., 1999; Swenson & Prelow, 2005). Roberts and colleagues (1999) conducted a study with minority middle school students and found positive associations between ethnic identity and various positive mental health functioning aspects. Increased levels of self-esteem, optimism, coping, and general mastery were found to be associated with ethnic identity. Street and colleagues (2009) found that 10 to 14 year olds who had an achieved ethnic identity were seen to have lower depressive symptoms. Similar

results were previously found among adolescents who had a higher MEIM score were linked to have fewer depressive symptoms (Swenson & Prelow, 2005).

A meta-analysis was conducted by Smith and Silva (2011) to examine the relationship between ethnic identity and personal well-being in people of color. The analysis was conducted on 184 studies where a modest effect size was found between the two variables. It was found that this relationship was stronger for adolescents and young adults than for older adults. No differences were found in the study across gender, race, or socioeconomic status. Ethnic identity was, however, associated strongly with positive well-being than with adverse psychological constructs within the sample as a whole.

The impact of ethnic identity on symptoms of anxiety and depression has been examined in African Americans with the use of the Phinney MEIM scale. Williams and colleagues (2012) examined how ethnic identity contributes to African American's coping skills and resilience.

The African American adults were compared to the European Americans to compare how ethnic identity affects the anxiety and depression levels of the sample. African Americans with a higher ethnic identity had reduced levels of anxiety and depression whereas the same was not true of European Americans (Williams et. al, 2012). These findings corroborate previous notions where having a more positive ethnic identity can be a protective factor for ethnic groups (Breslau et al., 2005).

Gender Differences

Few studies have examined gender differences as it pertains to identity and well-being. The findings are inconsistent regarding the relationship between self-esteem, gender and ethnic identity. An affirmed ethnic identity was found to be positively associated to global self esteem in African American adolescent girls (Turnage, 2004). However, Mandara and colleagues (2009)

found that an achieved ethnic identity in African American adolescents was positively associated with self esteem, but only in boys.

The findings in the literature are inconsistent regarding the relationship between self-esteem, gender and ethnic identity. An affirmed ethnic identity was found to be positively associated to global self esteem in African American adolescent girls (Turage, 2004). However, Mandara and colleagues (2009) found that an achieved ethnic identity in African American adolescents was positively associated with self esteem, but only in boys.

Implications for Ethnic Identity Research

The implications for understanding the relationship between ethnic identity and psychological well-being are necessary in developing culturally sensitive interventions. Ethnic identity has been found to influence school adjustment for immigrant families as they attempt to adjust to a new society. Previous work has indicated that one's bicultural orientation is necessary for an improvement in academic performance (Portes & Rumbaut, 1990). Among the Hispanic population it has been found that those who were bicultural and were bilingual appeared to have higher educational performances and goals (Portes & Rumbaut, 1990). To further support these findings, Olneck (1995) reported assimilation was found to be beneficial and associated with increased academic performances within the immigrant student population. Oyserman and colleagues (1995) found that national identity has been found to be indicative of enhancing school performance when achievement is an important part of one's identity.

Inconsistencies have been found however within the literature with respect to which subform of identity is associated with academic adjustment. Previous research has found national identity to be indicative of school adjustment and well-being whereas others have reported that ethnic identity is prominent within itself to impact a student's academic ability. Other studies, such as Rotheram-Borus (1990), have also reported that there is no association between identity and educational adjustment in immigrant students. Due to the lack of literature on the Haitian population, the purpose of the present study is to add to the current literature by examining how ethnic identity in this population. The present study not only aims to understand the effects ethnic identity has on the psychological well-being of Haitian American adolescents, but also to provide clarification to the relationship between these two factors and insight into potential culturally sensitive interventions pertinent to the achievement of this population.

Rationale

The United States encompasses an array of ethnic populations, one of which is the growing Haitian community. Haitians were the second largest population of African American immigrants in the U.S in 2009 (Buchanan, Albert, & Beaulieu, 2010). The extensive literature on ethnic identity development and its effects on internalizing and externalizing symptoms is limited in grouping African Americans into a broad category, whereas those in the Hispanic or Latino populations have been studied as a whole as well as by the various ethnic groups: Puerto Rican, Mexican, etc.

The change in the United State's population demonstrates a need to understand the racial and cultural/ethnic identity of these groups particularly since research has shown that identity effects well-being. The purpose of the present study aims to determine if the Haitian population's ethnic identity will influence their well-being. Specifically, the study will attempt to understand the effects of ethnic identity on the internalizing symptoms of depression, anxiety, and self esteem in Haitian adolescents. It will also attempt to determine if gender differences trend in these relationships. Understanding the well-being of this population has significant mental health

and possibly education outcomes. This group may need culturally sensitive interventions in the abovementioned areas.

Hypotheses

H1: Ethnic identity will predict self esteem.

H2: Ethnic identity will predict depression and anxiety.

H3: Gender differences will be explored to determine if ethnic identity will predict self esteem, anxiety, and depression in females, but not in males.

Methods

Participants

This study will be based on archival data from Dr. Pamela D. Hall's on-going research project which has obtained IRB approval.

Participants were recruited from the Haitian Empowerment and Literacy Program (H.E.L.P) held at the South Florida, Barry University campus. Flyers were distributed to the public schools in the North Miami, North Miami Beach, or Little Haiti areas of Miami-Dade County for recruitment. Participants were recruited from the Haitian Empowerment and Literacy Program (H.E.L.P) held at the South Florida, Barry University campus. Flyers were distributed to the public schools in the North Miami, North Miami Beach, or Little Haiti areas of Miami-Dade County for recruitment. Participants included 110 Haitian American students who completed the measures. Of the 110 participants, 7 participants were deleted due to withdrawal in the program or missing data on the measures. Participants included 103 adolescent individuals (40 = male; 63 = female) that were used in the data analysis. The average age was reported as 12.08. Ethnicity was reported for the sample as 100% (n = 103) Haitian by the parents in the demographic questionnaire that was given during enrollment into the H.E.L.P. summer program.

However, the students reported their own ethnic identity as well as their parent's in the measures used for the study.

Measures

The participants were part of a large study and asked to complete a variety of measures: Multigroup Ethnic Identity Measure, Rosenberg's Self Esteem Scale, Reynold's Depression Scale Inventory, and Multicultural Anxiety Scale for Children-10.

Multigroup Ethnic Identity Measure (MEIM). Participants were asked to answer 12 statements regarding ethnic identity. The MEIM consists of two factors: exploration and commitment. Items 1, 4, and 5 asses exploration such as I have often done things that will help me understand my ethnic background better, while items 2, 3, and 6 assess commitment such as I have a strong sense of belonging to my own ethnic group. The items were answered based on a 5-point Likert scale (1 – strongly disagree; 5 = strongly agree). Phinney reported a Cronbach's alpha of .89 for the MEIM scale (Phinney, 1992). Phinney also reported a Cronbach alpha for each of the subscales as .86 for the Searching/ Belonging subscale and .84 for the Achievement subscale (Phinney, 1992).

Rosenberg's Self-Esteem Scale. The participants were asked to answer the 10 item self-esteem scale. The questions were answered based on a 4-point Likert scale (1- strongly agree; 4-strongly disagree. The measure demonstrates internal consistency with a Guttman scale coefficient of reproducibility of .92. (Rosenberg, 1965).

Reynolds Adolescent Depression Scale- 2nd Edition. The RADS-2 is a 30-item self-report inventory. Each item presents a statement such as "I feel happy", "I feel important", or "I feel like talking to other students". Respondents answer these statements using a 4-point Likert-type format: 1-Almost never, 2-Hardly ever, 3-Sometimes, 4-Most of the time. The RADS-2 contains

a total depression scale and four sub-scales: Dysphoric Mood, Anhedonia/Negative Affect, Negative Self-Evaluation, and Somatic Complaints. The Anhedonia/Negative Affect items are reversed scored. The reversed scored items are worded positively so that when reversed scored, they represent greater depression (Reynolds, 2002).

Sub-Scales Defined

Dysphoric Mood: This sub-scale includes eight items that evaluate symptoms associated with dysphoric mood. Symptomatology includes sadness, crying behavior, loneliness, irritability, worry, and self-pity. This sub-scale evaluates negative emotional state associated with depression.

Anhedonia/Negative Affect: This sub-scale includes seven items that evaluate symptoms associated with anhedonia/negative affect. Symptoms includes disinterest in having fun, disinterest in engaging in pleasurable activities with other children, disinterest in talking with and eating meals with others, and negative affect. Items in this sub-scale are reversed-scored with higher scores indicating a greater likelihood of depression.

Negative Self-Evaluation: This subscale includes eight items that evaluates symptoms associated with negative feelings towards oneself. Symptoms include low self-worth, self-denigration, thoughts of self-harm, feelings that parents and others don't care about or like the adolescent, and thoughts about running away. Self-harm may include thoughts of actions toward self-mutilation or suicidal ideations.

Somatic Complaints: This sub-scale consists of seven items which evaluates somatic and vegetative complaints. Such complaints includes stomachaches, feeling ill, fatigue, sleep disturbance, boredom, or feeling mad or dissatisfied with life.

Reynolds reports the raw score norms for the 30 individual items. The scores for each individual item range from 0 to 4. Higher scores indicate higher levels of symptomatology. Reynolds also reports standard or t-score norms for the four subscales and the overall depression scale. The cut-off standard score (t-score) for the RADS-2 is 61. Standard scores of 61 and lower are in the "normal range". Standard scores of 61-64 indicate "mild clinical depression". Standard scores of 65 to 69 indicate "moderate clinical depression". Standard scores of 70 and above indicate "severe clinical depression" (Reynolds, 2003).

Multicultural Anxiety Scale for Children-10. The MASC-10 was given to all participants to answer the 10 item questionnaire to indicate the level of severity of anxiety. The MASC-10 encompasses the four basic scales of the MASC: physical symptoms, harm avoidance, social anxiety, and separation/panic. The MASC-10 was reported to have a Cronbach alpha of .91 for within a Caucasian population and has been found to have a .76 Cronbach alpha in an African American youth population (March, 1999).

Results

Regression analyses were conducted to examine whether ethnic identity predicts self-esteem, anxiety, and depression. Ethnic identity was not a significant predictor, F(1, 102) = 1.577, p = .212 with an R² of .015, for self-esteem or for anxiety F(1, 102) = .013, p = .908 with an R^2 of .000. Additionally, ethnic identity was not a significant predictor ($\beta = -.118$,n.s.) of depression; however, a regression analysis revealed that ethnic identity ($\beta = -.197 p < .05$) predicted the Anhedonia and Negative Affect subscale of the Reynolds' depression measure, F(1, 102) = .045.

When conducting regression analyses on the subgroups of the MEIM, Searching and Committed, a Committed ethnic identity ($\beta = -.256 p < .05$) predicted depression, F(1, 102)

4.987, p = .029. The explorative hypothesis of analyzing gender differences yielded no significant results between the male and female participants for self-esteem, anxiety, or depression.

In the present sample, Cronbach's alpha coefficients for self-esteem, anxiety, and depression were .32, .71, and .60 respectively. This indicates that the self-esteem measure holds an unacceptable reliability for the sample while the anxiety and depression measures hold acceptable levels of reliability.

Discussion

The results of the present study contribute to the scarcity of literature on the Haitian population in understanding how their ethnic identity influences their internalizing symptoms and psychological well-being. The first set analyses which were conducted to determine if the Multigroup Ethnic Identity Measure total score predicted internal symptoms. Internalizing symptoms were measured via the Multicultural Anxiety Scale for Children-10, Reynolds Adolescent Depression Scale-2, and the Rosenberg's Self-Esteem Scale. There were not significant findings. However, there was a significant relationship between ethnic identity and the depression subscale Anhendonia/Negative. This finding showed that ethnic identity predicted symptoms of depression related to negative affect on items such as disinterest in having fun, disinterest in engaging in pleasurable activities with other children, disinterest in talking with and eating meals with others. Further analyses were done by dividing the Multigroup Ethnic Identity Measure score into searching and committed. Phinney and other researchers have split the score to examine the impact that these two different identity styles may have on psychological wellbeing or internalizing symptoms (Phinney & Landin, 1998; Phinney, 2001; Phinney & Ong, 2007).

There were not significant findings for the total Multicultural Anxiety Scale for Children10 score, the fours subscales or for the Rosenberg for either committed or searching identity
styles. However, there was a significant relationship between the committed ethnic identity and
the Reynolds Adolescent Depression Scale-2 total score. This finding showed that ethnic identity
predicted symptoms of depression when the individual has a committed ethnic identity style.

However, this finding is inconsistent with prior research. The literature has shown that a
searching or explorative ethnic identity is indicative of negative internalizing symptoms such as
anxiety and depression (Swenson & Prelow, 2005; Smith & Silva, 2011; Williams et. al, 2012).

This suggests that further research is needed to determine if this finding would be replicated in
the Haitian population.

This discrepancy between the findings and previous research may be attributed to the Mutligroup Ethnic Identity Measure scale's narrowed view on ethnic identity as being classified in only two groups: Searching and Committed. The Haitian population may need the measure to be adapted by implementing Marcia's (1966) model of ethnic identity. By splitting the measure's items based on the four types of identity development of achieved, foreclosed, moratorium, and diffusion, it may be more culturally sensitive for the Haitian population. The Haitian culture and values hold a dominant collectivistic and filial influence. Therefore, the students that were categorized as Committed in the present study may have been better classified as foreclosed as their family's level of ethnic identity may be more imposed or ingrained in them rather than accepted or achieved by the individual based on his or her own identity exploration experiences.

Previous studies have created adaptations to measures such as in Schwartz, Unger, Lorenzo-Blanco, Des Rosiers, Villamar, Soto, and Szapocznik's (2013) study where they not only designed a measure for perceived context of reception, but they also provided support for

the factorial validity, internal consistency reliability, and incremental and discriminant validity of scores generated by this measure as well as in the additional measures utilized for the study. For example, to assess identity they administered the American Identity Measure, which parallels Phinney's Multigroup Ethnic Identity Measure in terms of item content and structure. Schwartz and colleagues (2013) adapted the measure by modifying the wording to "the United States" in place of "my ethnic group." The Psychometric analyses supported the concurrent validity, construct validity, factorial validity, and internal consistency reliability of the modifications made to the American Identity Measure scores as indicated by the strong Cronbach's alphas found for both samples in the study (Schwartz et al., 2012; Schwartz, Weisskirch, et al., 2011).

Limitations

The lack of significance in the results for the current study may be attributed to various limitations: lack of power from the small sample size, age of participants, and need for adaptations of the measures that were used to assess internalizing symptoms. Identity as a whole is not accomplished or fully experienced until late adolescence and early adulthood. The mean age of 12.03 showed that a majority of the participants were not at the developmental milestone of identity. For future analyses of the Haitian population may need to implement adaptations to the measures utilized in the study to account for cultural sensitivity. Aside from the participants being preadolescent, the measures used for the study may not have had items that were applicable or sensitive to the Haitian population. The low Cronbach's alphas found for the measures provide support for the need of modifying psychological measures to ensure they are culturally sensitive for the population and pertain to their experiences and expression of symptoms.

Future research will require additional studies using a larger sample, modification for culturally sensitive implemented measures, and the examination of other variables that may impact the psychological well-being of Haitian-American youth. Further evidence may provide a clearer understanding of what factors, in addition to ethnic identity that may be contributing to their psychological well-being. This could be helpful to mental health providers, educators, and other professionals who are supporting the overall well-being of this growing population.

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The Multigroup Ethnic Identity Measure (MEIM)

In this country, people come from many different countries and cultures, and there are many different words to describe the different backgrounds or ethnic groups that people come from. Some examples of the names of ethnic groups are Hispanic or Latino, Black or African American, Asian American, Chinese, Filipino, American Indian, Mexican American, Caucasian or White, Italian American, and many others. These questions are about your ethnicity or your ethnic group and how you feel about it or react to it.

| Please fill in: In terms of ethnic group, I consider myself to be | | | | | | |
|---|-----------|--------------|-----------------------|--|--|--|
| Use the numbers below to indicate how much you agree or disagree with each statement. | | | | | | |
| (4) Strongly agree | (3) Agree | (2) Disagree | (1) Strongly disagree | | | |
| 1- I have spent time trying to find out more about my ethnic group, such as | | | | | | |

- its history, traditions, and customs.
- 2- I am active in organizations or social groups that include mostly members of my own ethnic group.
- 3- I have a clear sense of my ethnic background and what it means for me.
- 4- I think a lot about how my life will be affected by my ethnic group membership.
- 5- I am happy that I am a member of the group I belong to.
- 6- I have a strong sense of belonging to my own ethnic group.
- 7- I understand pretty well what my ethnic group membership means to me.
- 8- In order to learn more about my ethnic background, I have often talked to other people about my ethnic group.
- 9- I have a lot of pride in my ethnic group.
- 10- I participate in cultural practices of my own group, such as special food, music, or customs.
- 11- I feel a strong attachment towards my own ethnic group.



Test Booklet

by William M. Reynolds, PhD

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|---------------------------------|--|---------------------------------|------------|
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Directions: Listed below are some sentences about how you feel. Read each sentence and decide how often you feel this way. Decide if you feel this way almost never, hardly ever, sometimes, or most of the time. To answer each item, circle the number under the answer that best describes how you really feel. Remember, there are no right or wrong answers. Just choose the answer that tells how you usually feel.

| i. Saari | | Almost | Hardly ever | Some- times | Most of the time |
|-------------|--|--------|----------------|----------------|------------------|
| 1. | I feel happy | 1 | 2 | 3 | 4 |
| 2. | I worry about school | . 1 | 2 | 3 | 4 |
| 3. | I feel lonely | 1 | 2 | 3 | 4 |
| 4. | I feel my parents don't like me | 1 | 2 | 3 | 4 |
| 5. | I feel important | 1 | 2 | 3 | 4 |
| 6. | I feel like hiding from people | 1 | 2 | 3 | 4 |
| 7. | I feel sad | -1 | - 2 | 3 | 4 |
| 8. | I feel sad | ::1 | 2 | 3 | 4 |
| 9. | I feel that no one cares about me | - 1 | 2 | 3 | 4 |
| 10. | I feel like having fun with other students | 1 | 2 | 3 | 4 |
| 11. | I feel cick | 1 | 2 2 | 3 | 4 |
| 12. | I feel loved | 1. | 2 | 3 | 4 |
| 13. | I feel like running away I feel like hurting myself | 1 | - 2 | 3 | 4 |
| 14. | I feel like hurting myself | 1 | 2 | 3 | 4 |
| 15 | I feel that other students don't like me | 1 | 2 | 3 | 4 |
| 16. | I feel life is unfair | 1 | 2 | 3 | 4 |
| 17. | 1 IOO 1110 10 HIR AIL | 1 | 2 | 3 | 4 |
| | I feel tired | . 1 | 2 | 3. | 4 |
| | I feel I am bad | | 2 | 3 | 4 |
| | I feel I am no good | | - 2 | 3 | 4 |
| 21. | I feel sorry for myself | . 1 | 2 | 3 | 4 |
| 22. | I feel mad about things | -1 | 2 | 3 | 4 |
| | I feel like talking to other students | 1 | 2 | 3 | 4 |
| 24. | I have trouble sleeping | 1, | 2 | 3 | 4 |
| 25. | I feel like having fun | 1 | 2 | 3 | . 4 |
| 26 | I feel worried | 1 | 2 | 3 | 4 |
| 27. | I get stomachaches | 1 | 2 | 3 | 4 |
| 28. | I feel bored | 1 | 2 | 3 | 4 |
| | I like eating meals | 1 | 2 | 3 | 4 |
| 30. | I feel like nothing I do helps any more | 1 | 2 | 3 | 4 |
| 11 | | | - | | |

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MASC-10: Multidimensional Anxiety Scale for Children-10 Item

by John March, M.D., M.P.H.

| Client ID: | | Age: | Sex: | Male Female |
|-----------------------|---------------|------|------|--------------|
| Data | | | | (Circle one) |
| Date: / / Month Day Y | School Grade: | | | |

This questionnaire asks you how you have been thinking, feeling, or acting recently. For each item, please circle the number that shows how often the statement is true for you. If a sentence is true about you a lot of the time, circle 3. If it is true about you some of the time, circle 2. If it is true about you once in a while, circle 1. If a sentence is not ever true about you, circle 0. Remember, there are no right or wrong answers, just answer how you have been feeling recently.

Here are two examples to show you how to complete the questionnaire. In Example A, if you were hardly ever scared of dogs, you would circle 1, meaning that the statement is rarely true about you. In Example B, if thunderstorms sometimes upset you, you would circle 2, meaning that the statement is sometimes true about you.

| | | never true about me | rarely true about me | sometimes true about me | often true about me |
|----|---|------------------------------|-------------------------------|----------------------------------|------------------------------|
| | Example A I'm scared of dogs | 0 | 1 | 2 | 3 |
| | Example B Thunderstorms upset me | 0 | 1 | 2 | 3 |
| | | | | | |
| | Now try these items yourself. | | | | |
| | The idea of going away to camp scares me | 0 | 1 | , 2 | 3 |
| | I'm afraid that other kids will make fun of me | | 1 | 2 | 3 |
| | 3. I try to stay near my mom or dad | | 1 | 2 | 3 |
| 4 | 4. I get dizzy or faint feelings | 0 | 1 | 2 | 3 |
| 4 | 5. I feel restless and on edge | 0 | 1 | 2 | 3 |
| 6 | 6. I feel sick to my stomach | 0 | 1 | 2 | 3 |
| 7 | 7. I get nervous if I have to perform in public | 0 | 1 | 2 | 3 |
| .8 | Bad weather, the dark, heights, animals, or bugs scare me | 0 | 1 | 2 | 3 |
| 9 | P. I check to make sure things are safe | 0 | 1 | 2 | 3 |
| 1 | 0. I feel shy | 0 | 1 | 2 | 3 |
| | | | | | |



Rosenberg Self-Esteem Scale (Rosenberg, 1965)

The scale is a ten item Likert scale with items answered on a four point scale - from strongly agree to strongly disagree. The original sample for which the scale was developed consisted of 5,024 High School Juniors and Seniors from 10 randomly selected schools in New York State.

Instructions: Below is a list of statements dealing with your general feelings about yourself. If you strongly agree, circle SA. If you agree with the statement, circle A. If you disagree, circle D. If you strongly disagree, circle SD.

| 1. | On the whole, I am satisfied with myself. | SA | Α | D | SD |
|-----|--|----|---|---|----|
| 2.* | At times, I think I am no good at all. | SA | Α | D | SD |
| 3. | I feel that I have a number of good qualities. | SA | A | D | SD |
| 4. | I am able to do things as well as most other people. | SA | A | D | SD |
| 5.* | I feel I do not have much to be proud of. | SA | A | D | SD |
| 6.* | I certainly feel useless at times. | SA | A | D | SD |
| 7. | I feel that I'm a person of worth, at least on an equal plane with | SA | Α | D | SD |
| | others. | | | | |
| 8.* | I wish I could have more respect for myself. | SA | A | D | SD |
| 9.* | All in all, I am inclined to feel that I am a failure. | SA | A | D | SD |
| 10. | I take a positive attitude toward myself. | SA | A | D | SD |

Scoring: SA=3, A=2, D=1, SD=0. Items with an asterisk are reverse scored, that is, SA=0, A=1, D=2, SD=3. Sum the scores for the 10 items. The higher the score, the higher the self esteem.

The scale may be used without explicit permission. The author's family, however, would like to be kept informed of its use:

The Morris Rosenberg Foundation c/o Department of Sociology University of Maryland 2112 Art/Soc Building College Park, MD 20742-1315

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References with further characteristics of the scale:

Crandal, R. (1973). The measurement of self-esteem and related constructs, Pp. 80-82 in J.P. Robinson & P.R. Shaver (Eds), Measures of social psychological attitudes. Revised edition. Ann Arbor: ISR.