UNIVERSITY OF CALIFORNIA,
IRVINE

The Mediating Role of Coping Strategies between Ethnic Identity

and Well-Being for Asian Americans

THESIS

submitted in satisfaction of the requirements
for the degree of

MASTER OF ARTS

in Social Ecology

by

Gary Xia

Thesis Committee:
Chancellor's Professor Chuansheng Chen, Chair
Professor Emerita Ellen Greenberger
Assistant Professor Paul Piff

2019

DEDICATION

To my family and friends, in recognition of their worth and support, and providing me with

wisdom and opportunity.

TABLE OF CONTENTS

Page

LIST OF FIGURES

LIST OF TABLES

ACKNOWLEDGMENTS

First, I would like to express my deep appreciation to my committee chair, Chuansheng Chen, who has taught and mentored me about the intricacies of becoming a psychology researcher. Without his help and guidance, this dissertation would not have been possible.

I would also like to thank my committee members, Paul Piff and Ellen Greenberger, who have also provided me with the advice and guidance needed to learn and grow as a psychology researcher.

In addition, I would also like to thank Cheryl Kaiser, for taking a chance on me and providing me with the opportunity to learn the knowledge and skills necessary to be eligible for graduate school. Finally, I would like to thank all the research assistants that I've worked with at the University of Washington and University of California, Irvine, for not only helping with our research projects, but helping me grow and mature as a human being.

ABSTRACT OF THE THESIS

The Mediating Role of Coping Strategies between Ethnic Identity

and Well-Being for Asian Americans

By

Gary Xia

Master of Arts in Social Ecology

University of California, Irvine, 2019

Professor Chuansheng Chen, Chair

This study examined the potential mediating effect of coping strategies on the relationship between ethnic identity and well-being for Asian Americans. Data were collected from 645 Asian American students at a large west coast university in the United States (81% female, mean age = 21.23 years). Mediation analysis indicated that detachment from social support as a coping strategy was a consistent partial mediator for all three indices of well-being outcomes (depression, self-esteem, and life satisfaction), whereas education and advocacy was a partial mediator only for depression. These results contribute to the theoretical framework of coping with discrimination, highlight the need for a more comprehensive scale to assess coping strategies in the context of discrimination, and have practical implications for interventions related to Asian Americans' coping with discrimination.

Keywords: discrimination, ethnic identity, coping, Asian Americans

Introduction

Much evidence has linked racial discrimination to harmful physical health outcomes (i.e., higher stress levels, elevated blood pressure and heart rates, higher chance of cardiovascular diseases), negative mental health outcomes (i.e., anxiety, depression), and adverse health behaviors (e.g., smoking, alcohol use, and drug use) (Crocker, Major, & Steele, 1998; Major, Mendes, & Dovidio, 2013; Trawalter, Richeson, & Shelton, 2009). Representing a racial minority group as well as an immigrant group, Asian Americans experience discrimination and its consequences (Gee, 2002; Gee, Delva, & Takeuchi, 2007; Gee, Spencer, Chen, Yip, & Takeuchi, 2007; Mereish, Liu, & Helms, 2012; Yoo & Lee, 2008).

One of the major protective factors against the negative consequences of discrimination is a strong sense of ethnic identity (Phinney, 2003; Yoo & Lee, 2005). Ethnic identity reflects the degree to which a person has a sense of belonging and attachment to his/her ethnic group (Phinney, Berry, Vedder, & Liebkind, 2006; Phinney & Ong, 2007), which develops over time, but especially during adolescence, through exploration (i.e., seeking information and experiences relevant to one's ethnicity) and commitment (i.e., a strong attachment and personal investment to one's ethnic group). Specifically with Asian Americans, an extensive literature review has identified many studies that found ethnic identity to be correlated with higher levels of self-esteem, higher resilience for racial discrimination, better mental health, and fewer adverse health behaviors (Nguyen & Wong, 2013).

Which mechanisms explain the positive effects of strong ethnic identity against discrimination? Phinney (2003) believes that individuals who developed strong ethnic identity may be able to use certain coping strategies to protect themselves from discrimination. Indeed, previous studies have demonstrated that coping strategies are associated with well-being (Meyer,

1

2003; Noh, Beiser, Kaspar, Hou, & Rummens, 1999; Wei, Ku, Russell, Mallinckodt, & Liao, 2008; Yoo & Lee, 2005). However, it is unknown whether and how specific coping strategies may serve as the mediating mechanism for the effects of ethnic identity on well-being in response to discrimination.

Previous studies have examined some of the strategies that Asian Americans use to cope with discrimination. Some studies have used the Coping Strategies Inventory (CSI; Tobin, Holroyd, Reynolds, & Wigal, 1989), which is a scale that measures general coping strategies for all types of stressors and broadly focuses on problem-solving strategies, positively restructuring stressful situations, social support, expressing emotions, problem avoidance, wishful thinking, and self-blame/social withdrawal. Although these aspects of coping strategies are applicable to coping with discrimination, the CSI does not take into consideration the unique factors of discrimination that separate it from other stressors, including the pervasiveness of discrimination, and how it has deep roots in institutional systems and cultural norms (Jones, 1997; Miller & Kaiser, 2001). In addition, discrimination is a unique stressor because it targets not only the individual, but also the social group that the individual identifies with (Crocker et al., 1998; Miller & Kaiser, 2001). Wei, Alvarez, Ku, Russell, and Bonett (2010) subsequently developed the Coping with Discrimination Scale (CDS), with five coping strategies: *education/advocacy, resistance, internalization, drug and alcohol use,* and *detachment*. Each of these strategies was created in conjunction with the racial/cultural identity development (R/CID) model developed by Sue and Sue (2003), which provided a conceptual framework of stages of racial and cultural identity development.

According to Wei et al. (2010), in the earlier stages of racial/cultural identity development, racial minorities are likely to hold a preference for a dominant group, as their

minority group status is repeatedly reinforced and perpetuated by societal definitions as inferior. When racial minorities first experience discrimination, they may turn to *internalization* as a strategy: feeling shame and confusion from being discriminated against, and attribute the cause of discrimination to their own inferiority. In this first stage of racial identity development, individuals may also use *detachment* as a coping strategy, by distancing themselves from social support, and not having a clear idea on how to deal with discrimination. In the middle stages of racial identity development, minorities start to realize the prevalence of discrimination, and struggle with their own inconsistent experiences, after encountering information or experiences that are inconsistent with the societal views of inferiority towards minority groups. They may experience negative emotions of guilt and shame from their earlier preferences for the oppressive, dominant group, leading them to turn to the use of *drugs and alcohol* to cope with feelings of dissonance and confusion, as well as the pain and pressure from experiences of discrimination. Individuals may also begin to have a greater understanding of social issues and their role as a victim, and they may also experience feelings of anger, directed outwardly at the dominant group, and confront others for discriminatory behavior (i.e., *resistance*). Finally in the later stages of racial identity development, individuals engage in more introspection and realize that anger and other negative emotions are not only psychologically demanding, but these negative emotions also do not devote more energy to eliminate discrimination towards their social group. Individuals may think of systematic plans to deal with discrimination. At this point, minorities may also have more social, economic, educational, and psychological resources to deal with discrimination, and focus more on self-exploration and educating and helping others to prepare themselves with discrimination (*education/advocacy*).

In terms of the correlations between coping strategies and psychological well-being, Wei and colleagues (2010) found that detachment, drug/alcohol use, and internalization were negatively correlated with self-esteem, whereas resistance was positively correlated with self-esteem. Detachment was negatively correlated with life satisfaction, and detachment and drug/alcohol use were positively correlated with depressive symptoms. They further found that ethnic identity was positively correlated with education/advocacy and resistance and negatively correlated with detachment. The current study aimed to replicate Wei et al. (2010) results with a large sample of Asian Americans, and to test a mediation model that may specify which coping strategies would serve as the mediating mechanism between ethnic identity and a given measure of well-being (depression, self-esteem, and life satisfaction). There were two main differences between Wei et al. (2010) study and this study. First, Wei et al. (2010) included various ethnic groups (with samples sizes ranging from 26 to 134 Asian Americans, 16 to 74 African Americans,14 to 82 Latino/a Americans, and 6 to 49 Multiracial participants, depending on the study), whereas this study focused on Asian Americans (N=645). Second, whereas Wei et al. (2010) focused on establishing the reliability and validity of the CDS, the current study aimed to examine the mediating roles of coping strategies between ethnic identity and well-being. It is worth mentioning that one previous study (Umaña-Taylor, Vargas-Chanes, Garcia, & Gonzales-Backen, 2008) used structural equation modeling to find a mediating role of proactive coping strategies (3-item scale) in the relationship between ethnic identity and self-esteem with a sample of Latino adolescents. The current study extended that study in terms of the sample, multiple mediators, statistical method, and more well-being measures (see below).

Figure 1 shows the model tested in this study. We hypothesize that ethnic identity would be positively related to one or more positive well-being outcomes (higher self-esteem and life

satisfaction and lower depressive symptoms), and that these relationships would be mediated by the use of certain coping strategies. We controlled for sex, age, perceived discrimination, parental education (proxy for socioeconomic status), and perceived stress (in order to separate discrimination-related stress from general stress).

[Figure 1]

Methods

Participants

Participants consisted of 645 Asian college students at the University of California, Irvine (81% female, mean age = 21.23 years, $SD = 2.71$), and included both Asian American and Asian international students. Participants were recruited through the UCI Human Subjects Lab Pool. Participants were granted extra credit for their courses for participating in the online survey. A consent information sheet was presented to participants at the beginning of the survey. Participants were able to indicate consent by manually choosing to "agree" or "do not agree" to participate in the study. The information sheet stated that participants could stop at any time and provided the contact information of the lead researcher and the UCI Institutional Review Board, if the participants had any questions. All procedures and measures of the study were approved by the UCI Institutional Review Board.

Measures

Multigroup Ethnic Identity Measure – Revised (MEIM-R). The MEIM-R is a 6-item scale that measures individual levels of ethnic identity (Phinney & Ong, 2007), using a 5-point Likert scale (from 1 = "Strongly Disagree" to 5 = "Strongly Agree"). This scale focuses on two

aspects of ethnic identity: exploration (e.g., "I have done things that will help me understand my ethnic background better"; α = .83) and commitment (e.g., "I have a strong sense of belonging to my own ethnic group"; α = .86). The total α = .89 for the current sample.

Coping with Discrimination Scale (CDS). The CDS (Wei et al., 2010) is a scale that measures participants' coping strategies in regard to discrimination, with 25 items, using a 6-point Likert scale (from 1 = "Never Like Me" to 6 = "Always Like Me"). There are five subscales with five questions each: education/advocacy (e.g., "I educate myself to be better prepared to deal with discrimination"; α = .84 for the current sample), internalization (e.g., "I wonder if I did something to provoke this incident"; α = .76), drug and alcohol use (e.g., "I use drugs or alcohol to take my mind off things"; α = .80), resistance (e.g., "I directly challenge the person who offended me"; α = .69), and detachment (e.g., "I've stopped trying to do anything"; α = .72).

Center for Epidemiologic Studies Depression Scale Revised (CESD-R-10). The CESD-R-10 (Andersen, Malmgren, Carter, & Patrick, 1994) is a revised, shortened version of the CESD, measuring self-reports of depressive symptoms that participants have experienced in the past week. The CESD-R-10 includes 10 questions, using a 4-point Likert scale (0 = "Rarely or None of the Time [Less than 1 Day]"; 1 = "Some or a Little of the Time [1-2 Days]"; 2 = "Occasionally or a Moderate Amount of Time [3-4 Days]"; 3 = "All of the Time [5-7 Days]"). A sample item is "I was bothered by things that usually don't bother me." The α = .80 for the current sample.

Satisfaction with Life Scale (SWLS). Diener, Emmons, Larsen, & Griffin (1985) created this scale to measure global cognitive judgments of satisfaction with one's own life. The SWLS contains 5 items, using a 7-point Likert scale (from 1 = "Strongly Disagree" to 7 =

"Strongly Agree"). A sample item is " In most ways my life is close to my ideal." The $\alpha = .87$ for the current sample.

Rosenberg Self-Esteem Scale. The Rosenberg self-esteem scale is a scale measuring participants' levels of trait self-esteem (Rosenberg, 1965). Ten questions are included, using a 4-point Likert scale (from 1 = "Strongly Agree" to 4 = "Strongly Disagree"). A sample item is "On the whole, I am satisfied with myself." The $\alpha = .86$ for the current sample.

Perceived Stress Scale (PSS). The PSS (Cohen, Kamarck, & Mermelstein, 1983) was developed to measure general perceptions of stress in the past month, and was used as a control variable for the present study. The PSS contains 10 questions, using a 4-point Likert scale (0 = "Never to 4 = "Very Often"). A sample item is "In the last month, how often have you been upset because of something that happened unexpectedly?" The $\alpha = .89$ for the current sample.

Subtle and Blatant Racism Scale for Asian American College Students (SABR-A[2]). The SABR-A[2] was created and validated by Yoo, Steger, & Lee (2010) to assess the racial experiences of Asian American college students. It consists of 8 items on a 5-point Likert scale (from 1 = "Almost Never" to 5 = "Almost Always"). It includes both subtle (e.g., "I am treated differently because I'm Asian") and blatant (e.g., "In America, I am made fun of because I'm Asian") experiences of discrimination. The $\alpha = .85$ for the current sample.

Parental Education. Parental education was assessed using the following scale for each parent (1 = "None"; 2 = "Primary, elementary, or middle school"; 3 = "High school or GED"; 4 = "Technical or vocational school"; 5 = "Some college, no degree"; 6 = "Associate degree"; 7 = "Bachelor's degree"; 8 = "Graduate degree [e.g., Master's, Doctorate, Medical, Law]"). Scores were averaged for the mother and father of the participants.

Results

Means, standard deviations, and zero-order correlations among ethnic identity, coping

strategies, and well-being are presented in Table 1. For the control variables (not shown in Table

1), the mean level of perceived stress was 3.14 ($SD = .69$), mean level of perceived

discrimination was 2.14 ($SD = .74$), and mean level of parental education was 5.33 ($SD = 1.91$).

[Table 1]

Analyses of depression as dependent variable

The data were analyzed using the SPSS program PROCESS (Hayes, 2012; Hayes, 2013).

The results of the analysis using a simple mediation model (PROCESS Model 4), indicated that

ethnic identity was significantly and negatively related to detachment ($B = -.17$, $SE = .05$, $t(538)$

$= -3.68$, $p < .001$), education/advocacy ($B = .31$, $SE = .05$, $t(538) = -5.68$, $p < .001$), and

drug/alcohol use ($B = -.29$, $SE = .05$, $t(538) = -5.67$, $p < .001$). Ethnic identity was not

significantly related to internalization ($B = .01$, $SE = .05$, $t(538) = .26$, $p = .797$) and resistance (B

$= -.07$, $SE = .05$, $t(538) = -1.38$, $p = .170$). Whereas depression was significantly and positively

related to detachment ($B = .10$, $SE = .02$, $t(533) = 4.60$, $p < .001$) and education/advocacy (B

$= .05$, $SE = .02$, $t(533) = 2.88$, $p = .004$), it only had a marginal, positive relationship to

drug/alcohol use ($B = .03$, $SE = .02$, $t(533) = 1.74$, $p = .082$).

The coping strategies as mediators between ethnic identity and depression were assessed

by the indirect effects of ethnic identity on depression. The indirect effect of detachment was -

.017 ($SE = .006$) with a bootstrap (5000 samples), yielding a 95% CI of -.030 to -.006. The

indirect effect of education/advocacy was .015 ($SE = .006$) with a bootstrap (5000 samples),

yielding a 95% CI of .005 to .028. These results showed significant mediation effects of

detachment and education/advocacy, but the other three coping strategies did not show a significant mediating effect (see Figure 2). There was a significant direct effect of ethnic identity on depression ($B = -.083$, $SE = .022$, $p < .001$).

[Figure 2]

Analyses of self-esteem as dependent variable

The results of the analysis indicated that self-esteem was significantly and negatively related to detachment ($B = -.13$, $SE = .02$, $t(533) = -5.89$, $p < .001$) and internalization ($B = -.07$, $SE = .02$, $t(533) = -4.03$, $p < .001$). The indirect effect of detachment was .021 ($SE = .007$) with a bootstrap (5000 samples), yielding a 95% CI of .009 to .038 (see Figure 3). No other coping strategies significantly mediated the relationship between ethnic identity and self-esteem. There was a significant direct effect of ethnic identity on self-esteem ($B = .078$, $SE = .022$, $p < .001$).

[Figure 3]

Analyses of life satisfaction as dependent variable

The results of the analysis indicated that life satisfaction was significantly and negatively related to detachment ($B = -.20$, $SE = .06$, $t(533) = -3.19$, $p = .002$). The indirect effect of detachment was .035 ($SE = .016$) with a bootstrap (5000 samples), yielding a 95% CI of .010 to .071 (see Figure 4). No other coping strategies significantly mediated the relationship between ethnic identity and life satisfaction. There was a significant direct effect of ethnic identity on life satisfaction ($B = .195$, $SE = .067$, $p = .004$).

[Figure 4]

Discussion

Although previous studies of Asian Americans have examined the relationship between ethnic identity and well-being (Nguyen & Wong, 2013; Lee, 2005; Smith & Silva, 2011; Yip, Gee, & Takeuchi, 2008), as well as the relationship between coping strategies and well-being (Amirkhan, 1990; Folkman & Lazarus, 1988; Miller & Kaiser, 2001; Noh & Kaspar, 2003; Pascoe & Smart Richman, 2009; Ravindran, Matheson, Griffiths, Merali, & Anisman, 2002; Wei et al., 2008), the present study is the first to propose that the use of certain coping strategies mediates the relationship between ethnic identity and well-being for Asian Americans. The findings of the present study also contribute to the theoretical literature on coping with discrimination. Stigma can be viewed as devalued social identity (Miller & Kaiser, 2001), and seeing one's own group become devalued can diminish the security and sense of belonging that group membership can provide. Stress occurs when the demands placed on an individual exceed the individual's coping resources (Lazarus & Folkman, 1984), and stigma and perceived discrimination can both act as sources of stress.

According to Lazarus and Folkman's (1984) Transactional Model of Stress and Coping, individuals can respond to stress through two processes: cognitive appraisals and coping. Cognitive appraisals examine and evaluate stigma and discrimination (stressors), while coping strategies are used to deal with those stressors. Primary appraisals evaluate if the stressor has the potential to be harmful, while secondary appraisals evaluate the individual's coping resources and options to determine if they can prevent harm from the stressor. In the case of stigma and discrimination, if the individual appraises that he or she has the coping resources to deal with the event, then the individual may not interpret the event as stressful. Coping strategies are

10

subsequently used to deal with stressors that are evaluated as potentially harmful. The process of coping can be seen as the individual interacts with the environment by addressing internal demands (e.g., internalization) or external demands (e.g., education/advocacy). According to Lazarus and Folkman (1984), personal, situational, and structural factors can affect cognitive appraisals and coping strategies in response to a stressor.

Consistent with previous research (Nguyen & Wong, 2013), the results of the present study indicate that ethnic identity was positively related to self-esteem and life satisfaction and negatively related to depression. The relationships between ethnic identity and all three well-being outcomes (depression, self-esteem, and life satisfaction) were all partially mediated by the use of detachment as a coping strategy. These findings are consistent with, and contribute to the existing theoretical framework of coping with discrimination. Individuals with strong ethnic identity have spent the time to explore and commit to their ethnic group, which may provide them with a deeper understanding of the nuances of discrimination and stigma. As a result, this provides individuals with a more effective primary appraisal, by allowing a more informed evaluation of whether an instance of discrimination can be potentially harmful. In addition, a strong ethnic identity also allows for a more effective secondary appraisal, as it may provide individuals with a better understanding of their existing coping resources to overcome discrimination.

Detachment involves individuals distancing themselves from social support, and not having a clear idea on how to deal with discrimination (Wei et al., 2010). As strong ethnic identity involves a sense of belonging and attachment to one's ethnic group, it would discourage individuals from removing themselves from their social groups, especially those groups consisting of members of the same race and ethnicity. Individuals with weak ethnic identity and

less effective primary and secondary cognitive appraisal may also have less access to different coping strategies, as well as a lack of understanding on how to use them. Also, these individuals may misevaluate the coping resources around them by believing that their social support network will not improve the situation, and distance themselves from social support. Previous research has demonstrated that a lack of social support is associated with poorer well-being outcomes (Juang & Alvarez, 2010; Juang, Ittel, Hoferichter, & Gallarin, 2016). In addition, social support can provide individuals with a safe environment to express emotions, better understand discrimination, and help them think of possible problem-solving opportunities (Compas, Connor-Smith, Saltzman, Thomsen, & Wadsworth, 2001). The use of detachment as a coping strategy deprives individuals of these benefits, leading to a vicious cycle of perpetuating a lack of understanding on how to deal with discrimination.

The second mediator we found was education/advocacy. Unlike detachment, this mediation effect was limited to depression as an outcome, and contrary to the findings of Wei et al. (2010), it was a positive effect. One explanation is that Asian Americans who have explored and committed to their ethnic identity may be more knowledgeable and devoted to their racial/ethnic group, and focus more time on educating others to prepare themselves with discrimination and engaging in activism. However, education and advocacy is likely to be associated with increased exposure and heightened awareness of discrimination and societal problems against their own racial/ethnic group. In addition, although successful attempts at education and advocacy may be rewarding, there are also likely to be unsuccessful attempts that may take a psychological toll. Examples of unsuccessful attempts of education and advocacy can include rejection and criticism of beliefs from in-group and out-group members, confrontation during activism, and lack of noticeable impact. Such incidents may not have resulted in poorer

well-being in terms of self-esteem (e.g., failed attempts can be easily attributed to the hostile recipients or the larger societal problems) and life satisfaction (e.g., presumably only a small part of these participants' life is devoted to education and advocacy about discrimination), but they can certainly be discouraging and hence depressing.

It is worth discussing why the other three coping strategies (drug and alcohol use, internalization, and resistance) were not found to have any mediation effects. First, ethnic identity was negatively correlated with the use of drugs and alcohol as a coping strategy in response to discrimination, but the latter did not make a unique contribution to any index of well-being. At the bivariate level, drug/alcohol use was correlated with lower self-esteem and life satisfaction and more depressive symptoms, which suggests that its moderate association with well-being was overwhelmed by the strong mediation effect of detachment. In other words, future research and intervention programs should focus on reducing detachment rather than drug/alcohol use to help Asian Americans to cope with discrimination.

Second, contrary to previous research (Wei et al., 2010), resistance had no correlation with ethnic identity (thus no mediation effect).[1] As resistance involves confrontational activity in response to perceived discrimination, Asian families may not endorse it to maintain values of harmony and avoid conflict; therefore, resistance may be unrelated to ethnic identity development for Asian Americans.

Third, internalization also did not have a relationship with ethnic identity, which is consistent with Wei et al. (2010) for their subsample of Asian Americans (Study 2). It is possible that internalization is a general coping strategy more closely related to personality traits or attributional styles than to the process of exploring or committing to one's ethnic identity. Regardless whether individuals have committed the time to develop their ethnic identity,

---

[1]In study 2 of Wei et al. (2010), the researchers examined data for different racial groups. For Asian Americans, the results indicated that resistance was positively correlated with ethnic identity ($r = .24$, $p < .01$).

individuals who have internalizing attributional styles would still experience feelings of shame and confusion from instances of discrimination.

There are several limitations in the present study that should be acknowledged. First, all measures used in the study were based on self-report from one-time data collection, so self-report bias and common method bias should be acknowledged and no causal direction can be ascertained. Future research should gather data from multiple sources and methods (e.g., observations, experimentally induced feelings of discriminations, behavioral measures such as angry punishment). Second, although the CDS from Wei and colleagues (2010) includes five coping strategies and is the most relevant to coping with discrimination, it is possible that it might have missed many other coping strategies such as problem-solving (Heppner, Cook, Wright, & Johnson, 1995; Noh & Kaspar, 2003; Wei et al., 2008; Yoo & Lee, 2005), cognitive reappraisal (Crocker & Major, 1989; Gross & John, 2003; Umaña-Taylor et al., 2008; Yoo & Lee, 2005), social support (Noh & Kaspar, 2003; Yoo & Lee, 2005), and avoidance and suppression (Gross & John, 2003; Noh et al., 1999). Missing in particular are strategies that may enhance well-being (the current mediators of detachment and education/advocacy both lower well-being and/or increased depression). Discoveries of such strategies would have important implications for intervention programs to help minority individuals to cope with discrimination. It may also be beneficial for future researchers to create a new scale to focus on coping with a single, acute experience of discrimination, as well as a broad assessment of coping with the awareness that race-related issues are an ongoing stressor. Our sample also reported a generally low level of perceived discrimination (SABR-A^2; $M = 2.14$, $SD = .74$), which is similar to all three previous studies by Yoo and colleagues (2010), with which the SABR-A^2 was validated (Study 1: $M = 2.47$, $SD = .73$; Study 2: $M = 2.08$, $SD = .80$; Study 3: $M = 1.96$, $SD = .82$). To

study the role of ethnic identity and coping strategies in coping with discrimination, samples that experience an above-average amount of discrimination may be particularly relevant.

Despite the limitations of the present study, the results have practical implications. The present study showed that ethnic identity was associated with positive well-being outcomes, and negatively associated with detachment, a maladaptive coping strategy related to negative well-being outcomes. Ethnic identity and social support can be encouraged and strengthened by building a stronger community, through providing educational resources about discrimination, organizing community events, and forming more accessible community centers for Asian families. Counselors and community organizations can share this information with families and children to better understand the factors that influence the use of different coping strategies in response to discrimination. They can explain the role of ethnic identity in the use of different coping strategies, and how to maximize ethnic identity. Providing brief workshops and seminars in K-12 schools and universities not only provide a place to educate people about diversity and discrimination, but also foster relationships and social support networks.
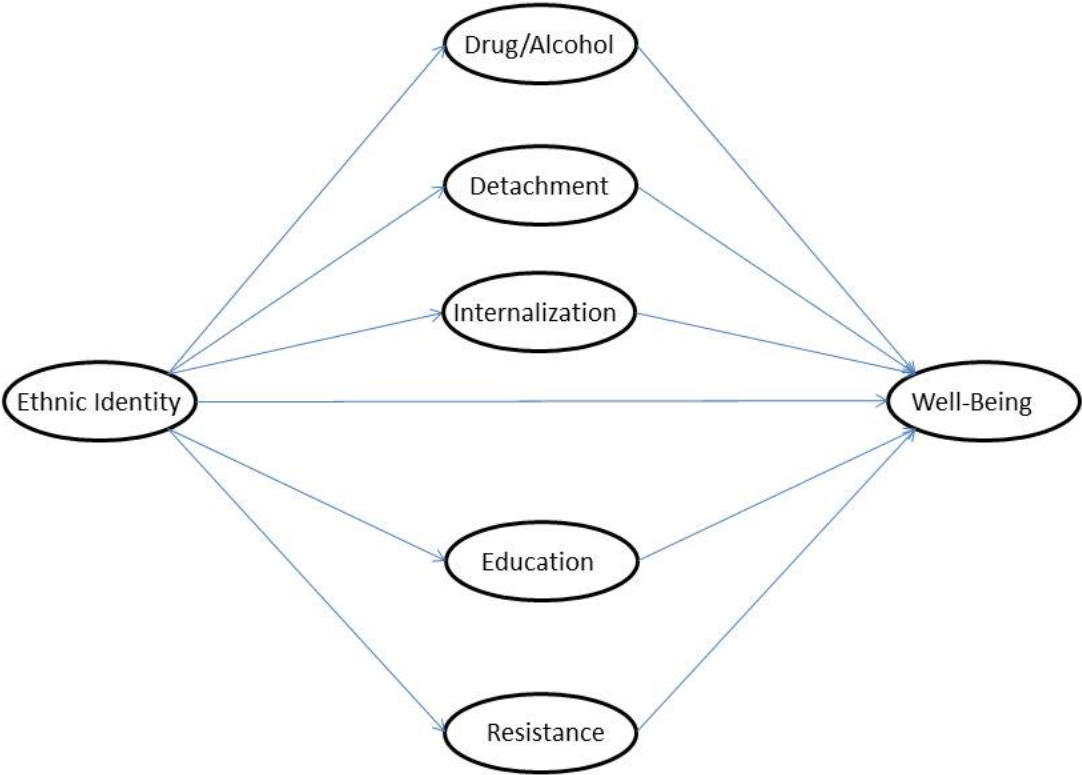
Figure 1. The conceptual model of our study.

Table 1

Descriptive Statistics and Zero-Order Correlations

|	Measure	1	2	3	4	5	6	7	8	9
Coping with Discrimination	1. Education/Advocacy	--								
	2. Resistance	.22***	--							
	3. Drug/Alcohol Use	.04	.39***	--						
	4. Internalization	.15***	.10*	.22***	--					
	5. Detachment	.08*	.13**	.29***	.43***	--				
Ethnic Identity	6. Ethnic Identity	.25***	-.07	-.22***	.01	-.14***	--			
Well-Being	7. Life Satisfaction	.05	-.06	-.08	-.11*	-.26***	.16***	--		
	8. Depression	.13**	.17***	.20***	.25***	.43***	-.14**	-.45***	--	
	9. Self-Esteem	.01	-.06	-.15***	-.31***	-.45***	.13**	.51***	-.56***	--
	M	3.25	2.59	1.67	2.94	2.42	3.74	4.12	2.15	2.71
	SD	1.01	.86	.94	.97	.89	.75	1.21	.52	.47

*p < .05, **p < .01, ***p < .001
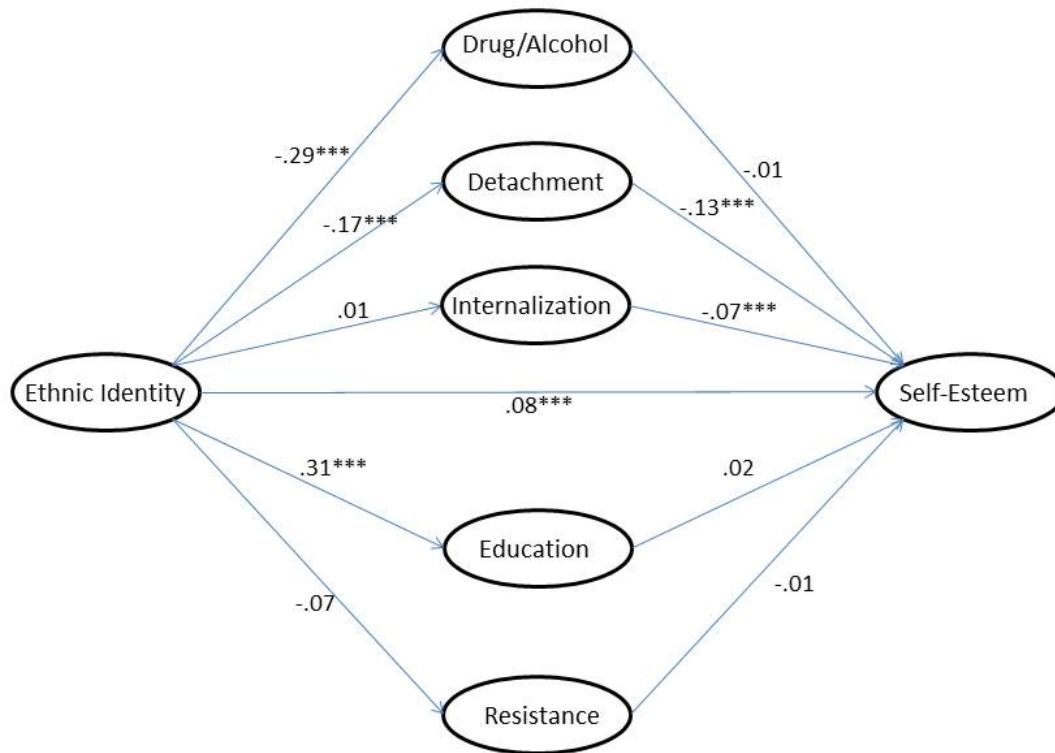
Figure 2. Mediation Model with Depression as Outcome Variable.
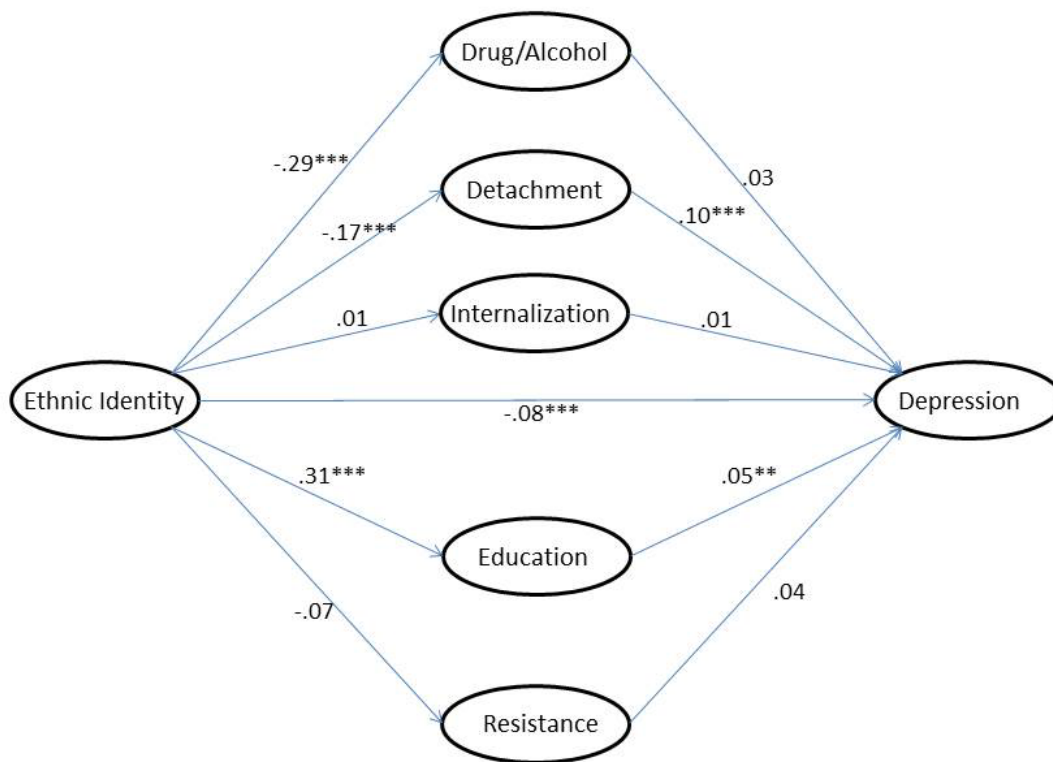
p < .05, **p* < .01, ***p* < .001

Figure 3. Mediation Model with Self-Esteem as Outcome Variable.
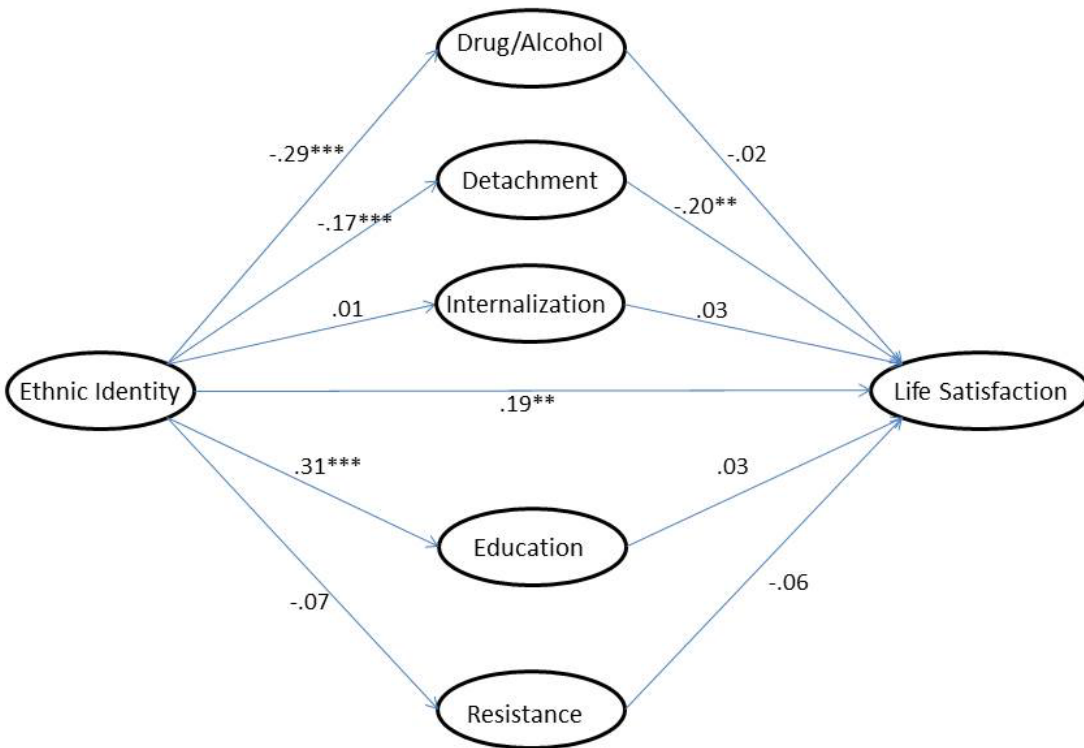
*p < .05, **p < .01, ***p < .001

Figure 4. Mediation Model with Life Satisfaction as Outcome Variable.

*p < .05, **p < .01, ***p < .001

References

Amirkhan, J.H. (1990). A factor analytically derived measure of coping: The Coping Strategy Indicator. *Journal of Personality and Social Psychology, 59(5),*1066-1074. doi: 10.1037/0022-3514.59.5.1066

Andersen, E. M., Malmgren, J. A., Carter, W. B., & Patrick, D. L. (1994). Screening for depression in well older adults: Evaluation of a short form of the CES-D. *American Journal of Preventive Medicine, 10*(2), 77–84. doi: 10.1016/s0749-3797(18)30622-6

Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior, 24*(4), 385-396. doi: 10.2307/2136404

Compas, B. E., Connor-Smith, J. K., Saltzman, H., Thomsen, A. H., & Wadsworth, M. E. (2001). Coping with stress during childhood and adolescence: Problems, progress, and potential in theory and research. *Psychological Bulletin*, *127*(1), 87-127. doi: 10.1037/0033-2909.127.1.87

Crocker, J., & Major, B. (1989). Social stigma and self-esteem: The self-protective properties of stigma. *Psychological Review*, *96*(4), 608-630. doi: 10.1037/0033-295x.96.4.608

Crocker, J., Major, B., & Steele, C. (1998). Social stigma. In D. Gilbert, S. T. Fiske, & G. Lindzey (Eds.), *Handbook of social psychology* (4th ed., pp. 504–553). Boston, MA: McGraw-Hill. Doi: 10.1037/0033-295x.96.4.608

Diener, E. D., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The satisfaction with life scale. *Journal of personality assessment*, *49*(1), 71-75. Doi: 10.1207/s15327752jpa4901_13

Folkman, S., & Lazarus, R.S. (1988). Coping as a mediator of emotion. *Journal of Personality and Social Psychology, 54(3),* 466-475. Doi: 10.1037/0022-3514.54.3.466

Gee, G. C. (2002). A multilevel analysis of the relationship between institutional and individual racial discrimination and health status. *American Journal of Public Health*, *92*(4), 615-623. Doi: 10.2105/ajph.92.4.615

Gee, G. C., Delva, J., & Takeuchi, D. T. (2007). Relationships between self-reported unfair treatment and prescription medication use, illicit drug use, and alcohol dependence among Filipino Americans. *American journal of public health*, *97*(5), 933-940. Doi: 10.2105/ajph.2005.075739

Gee, G. C., Spencer, M., Chen, J., Yip, T., & Takeuchi, D. T. (2007). The association between self-reported racial discrimination and 12-month DSM–IV mental disorders among Asian Americans nationwide. *Social Science & Medicine*, *64*, 1984-1996. Doi: 10.1016/j.socscimed.2007.02.013

Gross, J. J., & John, O. P. (2003). Individual differences in two emotion regulation processes: implications for affect, relationships, and well-being. *Journal of personality and social psychology*, *85*(2), 348-362. Doi: 10.1037/0022-3514.85.2.348

Hayes, A. F. (2012). PROCESS: *A versatile computational tool for observed variable mediation, moderation, and conditional process modeling* [White paper]. Retrieved from http://www.afhayes.com/public/process2012.pdf.

Hayes, A. F. (2013). *Introduction to mediation, moderation, and conditional process analysis*. New York: Guilford Press.

Heppner, P. P., Cook, S. W., Wright, D. M., & Johnson, W. C. (1995). Progress in resolving problems: A problem-focused style of coping. *Journal of Counseling Psychology*, *42*(3), 279-293. Doi: 10.1037/0022-0167.42.3.279

Jones, J. M. (1997). *Prejudice and racism* (2nd ed.). New York, NY: McGraw-Hill.

Juang, L. P., & Alvarez, A. A. (2010). Discrimination and adjustment among Chinese American

adolescents: Family conflict and family cohesion as vulnerability and protective

factors. *American Journal of Public Health*, *100*(12), 2403-2409. Doi:

10.2105/ajph.2009.185959

Juang, L., Ittel, A., Hoferichter, F., & Gallarin, M. M. (2016). Perceived racial/ethnic

discrimination and adjustment among ethnically diverse college students: Family and

peer support as protective factors. *Journal of college student development*, *57*(4), 380-394.

Doi: 10.1353/csd.2016.0048

Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping.* New York, NY: Springer

Publishing Company.

Lee, R. M. (2005). Resilience against discrimination: Ethnic identity and other-group orientation

as protective factors for Korean Americans. *Journal of Counseling Psychology*, *52*(1),

36-44. Doi: 10.1037/0022-0167.52.1.36

Major, B., Mendes, W. B., & Dovidio, J. F. (2013). Intergroup relations and health disparities: A

social psychological perspective. *Health Psychology*, *32*(5), 514-524. Doi:

10.1037/a0030358

Mereish, E. H., Liu, M. M., & Helms, J. E. (2012). Effects of discrimination on Chinese, Pilipino,

and Vietnamese Americans' mental and physical health. *Asian American Journal of

Psychology*, *3*(2), 91-103. Doi: 10.1037/a0025876

Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual

populations: conceptual issues and research evidence. *Psychological Bulletin, 129*(5),

674-697. Doi: 10.1037/0033-2909.129.5.674

Miller, C., & Kaiser, C. (2001). A theoretical perspective on coping with stigma. *Journal of Social Issues, 57*, 73–92. Doi: 10.1111/0022-4537.00202

Nguyen, C. P., & Wong, Y. J. (2013). The influence of ethnic identity on Asian Americans' well-being: A critical review of the literature. In E. Nöhammer (Ed.), *Psychology of well-being: Theory, perspectives and practice*. Hauppauge, NY: Nova Science.

Noh, S., Beiser, M., Kaspar, V., Hou, F., & Rummens, J. (1999). Perceived racial discrimination, depression, and coping: A study of Southeast Asian refugees in Canada. *Journal of Health and Social Behavior*, *40*(3), 193-207. Doi: 10.2307/2676348

Noh, S., & Kaspar, V. (2003). Perceived discrimination and depression: Moderating effects of coping, acculturation, and ethnic support. *American Journal of Public Health*, *93*(2), 232-238. Doi: 10.2105/ajph.93.2.232

Pascoe, E. A., & Smart Richman, L. (2009). Perceived discrimination and health: A meta-analytic review. *Psychological Bulletin, 135*, 531–554. Doi: 10.1037/a0016059

Phinney, J. S. (2003). Ethnic identity and acculturation. In K. M. Chun, P. B. Organista, & G. Marin (Eds.), *Acculturation: Advances in theory, measurement and applied research* (pp. 63–82). Washington, DC: American Psychological Association.

Phinney, J. S., Berry, J. W., Vedder, P., & Liebkind, K. (2006). The acculturation experience: Attitudes, identities, and behaviors of immigrant youth. In J. W. Berry, J. S. Phinney, D. L. Sam, & P. Vedder (Eds.), *Immigrant youth in cultural transitions: Acculturation, identity, and adaptation across national contexts* (pp. 71–116). Mahwah, NJ: Erlbaum.

Phinney, J. S., & Ong, A. D. (2007). Conceptualization and measurement of ethnic identity: Current status and future directions. *Journal of Counseling Psychology*, *54*(3), 271-281. Doi: 10.1037/0022-0167.54.3.271

Ravindran, A.V., Matheson, K., Griffiths, J., Merali, Z., & Anisman, H. (2002). Stress, coping,

    uplifts, and quality of life in subtypes of depression: A conceptual frame and emerging

    data. *Journal of Affective Disorders, 71,* 121-130. Doi: 10.1016/s0165-0327(01)00389-5

Rosenberg, M. (1965). Society and the adolescent self-image. Princeton, NJ: Princeton

    University Press.

Smith, T. B., & Silva, L. (2011). Ethnic identity and personal well-being of people of color: A

    meta-analysis. *Journal of Counseling Psychology*, *58*(1), 42-60. Doi: 10.1037/a0021528

Sue, D. W., & Sue, D. (2003). *Counseling the culturally diverse: Theory and practice* (4th ed.).

    New York, NY: Wiley.

Tobin, D. L., Holroyd, K. A., Reynolds, R. V., & Wigal, J. K. (1989). The hierarchical factor

    structure of the coping strategies inventory. *Cognitive Therapy and Research, 13,* 343-

    361. Doi: 10.1007/bf01173478

Trawalter, S., Richeson, J. A., & Shelton, J. N. (2009). Predicting behavior during interracial

    interactions: A stress and coping approach. *Personality and Social Psychology Review,*

    13, 243–268. Doi: 10.1177/1088868309345850

Umaña-Taylor, A. J., Vargas-Chanes, D., Garcia, C. D., & Gonzales-Backen, M. (2008). A

    longitudinal examination of Latino adolescents' ethnic identity, coping with

    discrimination, and self-esteem. *The Journal of Early Adolescence*, *28*(1), 16-50. Doi:

    10.1177/0272431607308666

Wei, M., Alvarez, A. N., Ku, T., Russell, D. W., & Bonett, D. G. (2010). Development and

    validation of a Coping with Discrimination Scale: Factor structure, reliability, and

    validity. *Journal of Counseling Psychology, 57*(3), 328-344. Doi: 10.1037/e631242010-

    001

Wei, M., Ku, T.-Y., Russell, D. W., Mallinckrodt, B., & Liao, K. Y.-H. (2008). Moderating effects of three coping strategies and self-esteem on perceived discrimination and depressive symptoms: A Minority Stress Model for Asian international students. *Journal of Counseling Psychology*, *55*(4), 451-462. Doi: 10.1037/a0012511

Yip, T., Gee, G. C., & Takeuchi, D. T. (2008). Racial discrimination and psychological distress: the impact of ethnic identity and age among immigrant and United States-born Asian adults. *Developmental psychology*, *44*(3), 787-800. Doi: 10.1037/0012-1649.44.3.787

Yoo, H. C., & Lee, R. M. (2005). Ethnic identity and approach-type coping as moderators of the racial discrimination/well-being relation in Asian Americans. *Journal of Counseling Psychology*, *52*(4), 497-506. Doi: 10.1037/0022-0167.52.4.497

Yoo, H. C., & Lee, R. M. (2008). Does ethnic identity buffer or exacerbate the effects of frequent racial discrimination on situational well-being of Asian Americans? *Journal of Counseling Psychology, 55*(1), 63-74. Doi: 10.1037/0022-0167.55.1.63

Yoo, H. C., Steger, M. F., & Lee, R. M. (2010). Validation of the subtle and blatant racism scale for Asian American college students (SABR-A²). *Cultural Diversity and Ethnic Minority Psychology*, *16*(3), 323-334. Doi: 10.1037/a0018674