



Angry rumination moderates the association between perceived ethnic discrimination and risky behaviors



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ARTICLE INFO

Article history:

Received 26 August 2014
Received in revised form 15 January 2015
Accepted 27 January 2015
Available online 18 February 2015

Keywords:

Perceived ethnic discrimination
Angry rumination
Risky behaviors

ABSTRACT

Perceived ethnic discrimination (PED) is associated with increased engagement in risky behaviors in ethnic minority emerging adults. Risky behaviors may reflect efforts to cope with emotional distress like depression or anxiety resulting from PED, particularly for individuals with poor emotion regulation skills. We hypothesized that the association between PED and risky behaviors would be particularly strong for emerging adults with tendencies for angry rumination. We further hypothesized that increased depressive and anxious symptoms would mediate the effect of the PED-rumination interaction on risky behaviors. In this survey study, 155 ethnic minority college students completed measures of PED, depressive and anxiety symptoms, trait angry rumination, and risky behaviors. Analyses revealed that angry rumination moderated the association between PED and greater risky behaviors. Depressive and anxiety symptoms did not mediate this effect. Although cross-sectional, these findings suggest that individuals with poor coping skills may be especially likely to respond to stressors such as PED by engaging in risky behaviors. Implications include using rumination-focused interventions in order to prevent engagement in risky behaviors in ethnic minority emerging adults.

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1. Introduction

Individuals of all ethnic minority groups who perceive greater discrimination report worse depression, anxiety, and physical health (Paradies, 2006; Pascoe & Richman, 2009). Another important potential outcome of perceived ethnic discrimination (PED) is risky behaviors, such as unsafe sexual practices, aggressive and/or violent behaviors, rule breaking, dangerous and/or illegal behaviors, self-injurious behaviors, and alcohol and/or drug use (Auerbach, Abela, & Ho, 2007). Substantial past research has examined associations between PED and these types of risky behaviors in adolescents and young adults (for reviews, see Paradies, 2006; Priest et al., 2013). However, these reviews suggest that one-third of studies find no association between PED and risky behaviors, suggesting the presence of moderating factors. In this study, we examined whether angry rumination moderates the association between PED and risky behaviors in ethnic minority emerging adults. We also explored whether the interaction between angry rumination and PED is associated with increased depressive and anxious symptoms and whether these symptoms in turn explain greater risky behaviors.

1.1. PED and risky behaviors

Several studies suggest that PED predicts risky behaviors in emerging adults across a range of ethnic minorities. For instance, African Americans who reported greater PED during their youth and adolescence reported engaging in more substance use and risky sexual behaviors as young adults (Borrell et al., 2007; Gerrard et al., 2012; Stock, Gibbons, Peterson, & Gerrard, 2013). Similarly, PED is associated with more aggression, substance use, and suicide attempts in ethnic minority college students in general (Borders & Liang, 2011; Gomez, Miranda, & Polanco, 2011; Hatzenbuehler, Corbin, & Fromme, 2011). Emerging adulthood (Arnett, 2000) is a developmental period between ages 18 and 25 characterized by identity exploration in many areas of life (e.g., career, relationships). Emerging adults have high rates of risky behaviors, which may reflect reactions to newfound independence, unfamiliar environments, and novel responsibilities, as well as neural processes involving reward pathways and prefrontal functioning (Arnett, 2000; Blakemore & Robbins, 2012; Huynh & Fuligni, 2012). Negative events such as PED during this uncertain time may make ethnic minorities particularly vulnerable to risky behaviors and subsequent consequences like repeated victimization and/or incarceration (Brame, Bushway, Paternoster, & Turner, 2014).

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Theorists argue that risky behaviors may arise in part from a desire to avoid or escape aversive emotional states (Cooper, Agocha, & Sheldon, 2000). Thus, individuals may binge on substances, steal, or aggress because the immediate reduction of emotional distress is worth any potential future consequence. In support of this theory, significant associations exist between depressive and anxious symptoms and later risky behaviors in adolescents and young adults (Auerbach et al., 2007; Auerbach, Claro, Abela, Zhu, & Yao, 2010). Moreover, depressive and anxious symptoms mediate the prospective associations between PED and substance use and risky sexual behaviors in African-American youth (Gibbons, Gerrard, Cleveland, Wills, & Brody, 2004; Roberts et al., 2012).

1.2. Coping as a moderator

The association between PED and risky behaviors is stronger for some ethnic minorities than for others. Recent research suggests that risky behaviors are particularly likely for individuals with maladaptive coping skills. These individuals may turn to risky behaviors because they lack more effective coping strategies. Emotion regulation motives in fact predict risky alcohol and sex behaviors (Cooper et al., 2000). Moreover, adolescents with maladaptive coping strategies engaged in more risky behaviors in response to negative events than did adolescents with adaptive coping strategies (Auerbach, Abela, Zhu, & Yao, 2007). Similarly, Gerrard and colleagues (2012) found an interaction between coping and PED, such that PED was associated with increases in substance use only among African-American adolescents who used substances as a form of emotional coping. Unfortunately, this study only included African-American participants and did not assess other types of risky behaviors. Moreover, identifying specific maladaptive coping strategies might suggest particular targets for clinical interventions.

We propose that angry rumination, or thinking repeatedly about past angering experiences and perceived offenses, is a specific coping strategy that may put ethnic minorities at particular risk for risky behaviors. Rumination in general is associated with psychological distress and poor physical health (Nolen-Hoeksema, Wisco, & Lyubomirsky, 2008; Watkins, 2008). Because rumination involves dwelling on negative experiences, it prolongs and intensifies existing emotional distress (Thomsen, 2006). Thus, if minority individuals who perceive discrimination also have a tendency to cope with negative events by ruminating about them, they will likely experience heightened depressive and anxious symptoms. Moreover, angry rumination in particular is associated with impulsivity and risky behaviors such as aggression and alcohol use (Anestis, Anestis, Selby, & Joiner, 2009; Gilbert, Cheung, Irons, & McEwan, 2005; Sukhodolsky, Golub, & Cromwell, 2001). People who engage in angry rumination are also less likely to forgive people who wronged or mistreated them (Barber, Maltby, & Macaskill, 2005). One previous study found that angry rumination was associated with greater PED, depressive symptoms, and aggressive tendencies in ethnic minority college students (Borders & Liang, 2011). Thus, we argue that angry rumination is a particularly relevant coping strategy for minorities facing PED, both because it maintains emotional distress and because it contributes to risky behaviors.

1.3. The current study

In this cross-sectional study, we examined perceived ethnic discrimination, depressive and anxious symptoms, and angry rumination as factors that may contribute to risky behaviors in ethnic minority college students. In line with past research (e.g., Auerbach et al., 2007; Borders & Liang, 2011; Watkins, 2008), we

expected that both PED and angry rumination would be related to worse depressive and anxiety symptoms, and that these symptoms would be associated with more risky behaviors. We also hypothesized that greater perceived discrimination would be associated with increased risky behaviors, particularly for individuals who frequently engage in angry rumination. To our knowledge, no previous research has tested the moderating role of rumination on the effects of PED. Moreover, we expected that the effect of the PED-rumination interaction would be mediated by depressive and anxious symptoms, such that ruminators who perceive more ethnic discrimination would experience greater symptoms, which would in turn contribute to engagement in risky behaviors.

2. Method

2.1. Participants

The sample consisted of 155 ethnic minority students (74% female) from a public liberal arts college in the northeastern United States. The mean age of participants was 19 years old ($SD = 1.30$, range = 18–27). Approximately 21% of participants were African American, 27% were Asian American, 32% were Hispanic/Latino/a, 6% were South Asian/Indian, 12% were mixed ethnicities, and 2% were “other” (participants self-identified as Middle Eastern, Jamaican, or Haitian-American). For analysis purposes below, we grouped the South Asian/Indian, mixed, and “other” participants.

2.2. Procedure

Approximately 60% ($n = 93$) of participants were recruited from the psychology subject pool. These participants completed an online survey in a psychology classroom and received course credit. The other 62 participants (40%) were recruited at monthly meetings of ethnic minority student organizations (e.g., Union Latina, Black Student Union). They completed paper-and-pencil versions of the study measures immediately after the end of their organization meeting. These participants received \$5 for completing the measures. For all participants, the measures were presented in random order. All responses were anonymous. Informed consent was obtained prior to completing the measures, in compliance with the college internal review board.

2.3. Measures

2.3.1. Perceived ethnic discrimination

Participants responded to six items assessing PED (adapted from Armenta & Hunt, 2009). The measure assesses both personal experiences of discrimination (e.g., “I experience discrimination because of my ethnicity”) and perceived group-based discrimination (e.g., “People from my ethnic group are deprived of opportunities that are available to others”). For all items, respondents indicated their agreement on a 7-point Likert scale. Higher summed scores indicate greater PED (possible range = 7–42). This measure correlates with group identification and self-esteem, suggesting construct validity (Armenta & Hunt, 2009). Internal consistency in this sample was sufficient ($\alpha = .71$).

2.3.2. Angry rumination

The 19-item Anger Rumination Scale (Sukhodolsky et al., 2001) assesses tendencies to engage in repeated thoughts about anger-related experiences (e.g., “I keep thinking about events that angered me for a long time”). Participants indicated how well the items correspond to their beliefs about themselves on a 4-point scale from *not at all* to *almost always*. Higher summed scores indicate greater angry rumination (possible range = 4–76). This

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