

Coping Options: Missing Links between Minority Group Identification and Psychological Well-Being

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Using concepts from social identity theory (Tajfel & Turner, 1979) and Lazarus and Folkman's (1984) cognitive theory of stress and coping we tested the capacity for group identification to foster beliefs in one's ability to cope successfully and in turn predict psychological well-being. Black American participants appraised the availability of coping options that varied by level of identity (individual, intragroup, and intergroup) as well as function of coping (problem-focused and emotion-focused). Replicating prior work, participants who were higher in racial group identification reported more positive well-being. Appraisals of individual emotion-focused and intergroup problem-focused options mediated the relationship of group identification with both self-esteem and life satisfaction. Appraisals of intergroup emotion-focused options also partially mediated the relationship between group identification and life satisfaction. Findings suggest that the relationship between minority group identification and well-being may partly be due to its influence over a person's sense that they and their group can respond effectively to disadvantage.

En utilisant les concepts de la théorie de l'identité sociale (Tajfel & Turner, 1979) et de la théorie cognitive du stress et du faire face de Lazarus & Folkman (1984), nous examinons la capacité de l'identification au groupe à stimuler la croyance dans le succès à faire face et donc à prédire un bien-être psychologique. Les participants noirs-américains évaluent les différentes façons possibles de faire-face qui varient selon le niveau d'identité (individuelle,

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intra-groupe ou inter groupe) ainsi que la fonction de faire-face (centré sur le problème ou centré sur l'émotion). En répliquant un premier travail, les participants qui scorent le plus haut dans l'identification à leur groupe racial font preuve de plus de bien-être positif. Les évaluations individuelles focalisées sur l'émotion et celles inter groupes centrées sur le problème relient l'identification au groupe à l'estime de soi mais aussi à la satisfaction dans la vie. Les évaluations relatives à l'intergroupe et centrées sur l'émotion lient aussi partiellement l'identification au groupe à la satisfaction dans la vie. Les résultats montrent que la relation entre l'identification au groupe minoritaire et le bien-être est en partie due à son influence sur la signification que des personnes donnent au fait que eux-mêmes et leur groupe peuvent effectivement répondre à ce désavantage.

INTRODUCTION

Disadvantaged social groups (e.g. ethnic minorities, women) face a number of threats to their psychological well-being. Members of disadvantaged groups report experiencing negative treatment frequently and across a wide variety of life domains (Feagin, 1991, 1992; Noh & Kaspar, 2003; Landrine & Klonoff, 1996; Swim, Hyers, Cohen, Fitzgerald, & Bylsma, 2003), including housing, education, employment, and treatment within the criminal justice system (Sigelman & Welch, 1991). In addition to the threats to well-being posed by negative treatment, members of disadvantaged groups face the threat of recognising that such negative treatment reflects pervasive devaluation and rejection on the basis of group membership (Schmitt & Branscombe, 2002). Experiences of mistreatment as well as perceptions of disadvantage can be conceptualised as *stressors*—life events that threaten the self and have the potential to affect an individual's mental health adversely (for related ideas see Major & O'Brien, 2005; Miller & Kaiser, 2001; also see Williams & Williams-Morris, 2000, for a comprehensive review focusing on the Black American experience). Indeed, perceptions of being devalued among disadvantaged groups have been linked to low self-esteem (Branscombe, Schmitt, & Harvey, 1999), depressive symptoms (Noh & Kaspar, 2003), and anxiety (Klonoff, Landrine, & Ullman, 1999; Landrine & Klonoff, 1996). Similar effects on self-esteem have been observed in studies employing experimental manipulations of disadvantage (e.g. Branscombe, 1998; Schmitt, Branscombe, & Postmes, 2003).

Despite evidence of the negative consequences that discrimination and feelings of devaluation can have on members of disadvantaged groups, there are ways in which members of these groups manage to cope with such stressors (Crocker & Major, 1989). One important contribution made by the cognitive theory of stress and coping (Lazarus & Folkman, 1984) is that the consequences of stressful circumstances are not a direct result of those circumstances but are determined by individuals' appraisals of both those circumstances and their options for coping with stressors (Lazarus &

Folkman, 1984; Park & Folkman, 1997; Major, McCoy, Kaiser, & Quinton, 2003). One factor that has been shown to protect members of disadvantaged groups from the threats posed by feelings of marginalisation and devaluation is identification with one's disadvantaged ingroup (Schmitt & Branscombe, 2002). Identifying with one's group in response to feelings of mistreatment is inversely related to depressive symptoms (Gaudet, Clément, & Deuzeman, 2005), psychological distress (Sellers, Caldwell, Schmeelk-Cone, & Zimmerman, 2003), and low self-esteem (Phinney, 1990).

We seek to expand on previous studies that have shown that group identification can buffer the psychological harm caused by feelings of unjust treatment among disadvantaged groups. Using social identity theory (Tajfel & Turner, 1979) and the cognitive theory of stress and coping (Lazarus & Folkman, 1984), we examined whether beliefs about what can be done to cope with a stressor, also known as appraisals of coping options, mediate the relationship between group identification and well-being. Within the stress and coping literature, appraisals of coping options are generally conceptualised as beliefs about what an individual can do *as an individual* to cope with their particular circumstances. In contrast, social identity-based perspectives on stress and coping suggest that appraisals of one's stressful circumstances might also include more collective, or group-based, options for coping (see Haslam, 2004; Haslam & Reicher, 2006). Because group-based disadvantage is a stressor that is shared with other ingroup members, appraisals of coping options may include beliefs about intergroup relationships. Therefore, along with assessing beliefs about what an individual can do on their own to cope with group-based disadvantage we also assessed whether beliefs about what one's group can do together to cope with disadvantage would mediate the relationship between group identification and well-being.

Group Identification and Psychological Well-Being

When a disadvantaged group member feels devalued by a higher status group, psychologically investing more in one's disadvantaged group can have positive consequences for psychological well-being (Schmitt & Branscombe, 2002). According to social identity theory (SIT; Tajfel, 1978), individuals are motivated to achieve a positive ingroup identity based on favorable comparisons with relevant outgroups. For example, if a Black American considers the relative position of Black Americans as a group, the relevant comparison group is likely to be White Americans. According to Tajfel and Turner (1979), "the lower is a group's status in relation to relevant comparison groups; the less is the contribution it can make to positive social identity" (p. 19). This suggests that disadvantaged groups face identity threat to the degree that they feel marginalised or devalued.

When one lacks the social mobility to leave a lower-status group and join the relevant higher-status group, then a more viable option is to identify with one's lower-status ingroup and work to protect its identity and interests. Therefore identification with one's ingroup is an adaptive strategy for members of disadvantaged groups when faced with pervasive rejection and mistreatment from a higher-status group.

Indeed, a number of studies have confirmed that a sense of shared social identity helps to buffer members of disadvantaged groups from the negative consequences associated with stressors related to their status. Among a group of first-generation Irish immigrants to England, feeling that Irishness was a core part of their self-concept was positively related to the adoption of healthy behavior (Walsh & McGrath, 2000). For Black and Latino Americans in the United States, racial group identification has been found to have the capacity to alleviate the negative consequences associated with perceiving oneself as a victim of racial prejudice (Branscombe et al., 1999; Postmes & Branscombe, 2002; Romero & Roberts, 2003). Additionally, Haslam, Ryan, Postmes, Spears, Jetten, and Webley (2006) found that among participants involved in a group project that encountered difficulties over time, participants who self-categorised at the group level were more resilient compared to participants whose personal identity was salient. This suggests that thinking of oneself in terms of a shared group identity rather than as an individual acting alone can result in a higher tolerance of stressful circumstances.

Although data suggest that minority group identity can contribute positively to psychological well-being, little research has directly investigated the processes involved in this relationship. Following the cognitive theory of stress and coping and social identity theory, we suggest that the contribution of minority group identification to well-being is at least partly mediated by beliefs about what one can do both individually and in conjunction with other ingroup members to effectively respond to group-based disadvantage.

The Coping Process: Coping Options

According to Lazarus and Folkman's (1980, 1984) cognitive theory of stress and coping, coping is a cognitive and behavioral effort to manage or reduce demands that are appraised as taxing or exceeding individuals' resources. From this theoretical perspective, coping is viewed as having two major functions: the management of the problem that is causing the distress (i.e. problem-focused coping) and the regulation of emotions or distress caused by the stressor (i.e. emotion-focused coping; Folkman, 1984). Before an individual can attempt to reduce or manage stress, he or she must first engage in a process of cognitive appraisal. If a stressor is evaluated as

stressful—threatening or harmful to the self (primary appraisal)—various coping options are evaluated (secondary appraisal). Appraisals of coping options are beliefs about what can be done to cope effectively and can differ according to the major functions of coping (i.e. emotion-focused or problem-focused; see Lazarus, 1991; Zohar & Dayan, 1999). It is only after an individual has assessed coping options that are relevant to the stressor that he or she begins to implement cognitive or behavioral strategies that constitute the coping response (Folkman, 1984).

The Importance of Group Membership

Existing literature on the cognitive appraisal process tends to focus on the individual and his or her appraisals of their individual circumstances and coping options. In contrast to prior theorising on coping, social identity and self-categorisation theories (Tajfel & Turner, 1979; Turner, Oakes, Haslam, & McGarty, 1994) suggest that the cognitive appraisal process can be affected by people's *group memberships* (Haslam, 2004; Verkuyten & Nekuee, 2001; see also, Slavin, Rainer, McCreary, & Gowda, 1991). Consistent with this view, Haslam and Reicher (2006) argued that a sense of shared social identification can reduce the degree to which a potential stressor is evaluated as self-threatening (primary appraisal). For example, in a study by Haslam, Jetten, O'Brien, and Jacobs (2004) participants preparing for a mental arithmetic task were exposed to a message in which the task was described either as stressful or as challenging. When informed by a person said to be an ingroup member that the task was stressful, participants experienced the testing situation as more stressful than they did when the same person told them it would be challenging. However, when the message was said to be given by an outgroup member the effect for message type was not observed. This suggests that the primary appraisal process can be influenced by the appraisals of other ingroup members.

A sense of shared group membership might also influence appraisals of options for coping (secondary appraisal). Racial group identification could be a resource that gives individuals the sense of self-efficacy they need to cope with stressors even when acting on their own. Highly identified individuals are particularly prone to self-stereotyping—they are likely to see themselves in group stereotypical terms (Turner, Hogg, Oakes, Reicher, & Wetherell, 1987). Therefore if a highly identified individual believes their group is strong and able to effectively cope with the disadvantage that they face then those same beliefs about the group might be applied to the self. This may lead to the appraisal of *individual-level coping options* which can either be emotion-focused or problem-focused. Supporting these ideas, strong feelings of affiliation with one's culture and religion are predictive of individuals' beliefs that they can cope with stressors (see Park & Folkman, 1997).

Along related lines, a sense of shared group membership might increase the likelihood that racial minorities believe that they can effectively seek out and receive social support from fellow ingroup members (for related ideas see Constantine, Donnelly, & Myers, 2002; Haslam, O'Brien, Jetten, Vormedal, & Penna, 2005). Shared social identities are a basis for trust; members of the same social group are assumed to share a similar social perspective and are generally more trusted in comparison to outgroup members (see Haslam & Ellemers, 2005; Voci, 2006). Perceiving that one can receive social support from others is generally associated with positive well-being outcomes (e.g. Bradley, Schwartz, & Kaslow, 2005; Schulz, Tompkins, Wood, & Decker, 1987; Wong, Yoo, & Stewart, 2007). However, specifically believing that one can receive support from fellow ingroup members who face the same disadvantage may be particularly important in ameliorating the negative psychological consequences associated with disadvantage (see Gaudet & Clément, 2005). Among Black American adolescents, the importance of one's racial group membership is associated with the endorsement of intragroup coping strategies (e.g. the use of family and community-based resources) to cope with stressful situations (Constantine et al., 2002). Additionally, Haslam et al. (2005) found that among bomb disposal experts, the relationship between work group identification and work-related stress was mediated by perceptions of social support provided by co-workers. Therefore a sense of shared group identification might lead to the appraisal of *intragroup-level coping options*—or beliefs about one's ability to seek out and successfully receive social support from members of one's disadvantaged ingroup in an effort to cope with the stress associated with disadvantage. The types of social support that an individual believes they can receive can be problem-focused (i.e. being provided with information or concrete aid) or emotion-focused (i.e. being provided with a sense of acceptance/self-worth or contact with others; Carver, Scheier, & Weintraub, 1989).

Moving Beyond the Individual when Appraising Stressors

According to self-categorisation theory, people do not always define themselves as individuals (i.e. "I"); often they define themselves as members of a collective (i.e. "we"; Turner et al., 1987). Because racism is an intergroup phenomenon that is generally appraised as a threat to oneself as well as one's fellow group members (primary appraisal), the appraisal of options for coping with racism (secondary appraisal) might not only occur at individual and intragroup levels of identity but also at an intergroup level of identity (also see, Smith, 1985). Furthermore, the appraisal of such a stressor at an intergroup level of identity might have consequences for

well-being. Existing research on coping among minority groups has yet to examine the appraisal of *intergroup-level coping options*—or beliefs about how one's group as a whole can respond to the disadvantage they face.

This study moves beyond focusing on the individual self when studying the stress and coping process by assuming that coping options may function at an intergroup level. We argue that for racial minorities racial group identification may serve as a coping resource that can lead to the appraisal of adaptive intergroup coping options that include beliefs that one's group can better its position in the social hierarchy relative to relevant outgroups (problem-focused) or reframing the negative beliefs that society often associates with their group (emotion-focused). These two types of coping options are consistent with the two group protection strategies proposed by social identity theory: social competition and social creativity, respectively (Tajfel & Turner, 1979). According to SIT, group identification increases the likelihood of both social competition and social creativity strategies, but social competition will only emerge to the degree that status relations are perceived to be illegitimate and unstable. Although these two strategies for group identity protection can be used independently, they can also function in a complementary fashion. For example, during the Civil Rights Movement in the United States many Black Americans engaged in collective protests while simultaneously championing phrases like "Black is beautiful".

Individuals who identify with their disadvantaged group are more likely to think and act in ways that promote their group's interests or maintain positive distinctiveness in comparison to relevant outgroups (Tajfel, 1978). Social psychological research has shown that for lower-status groups, higher identification with the ingroup increases the likelihood that individuals will engage in collective action (social competition) and adopt beliefs that enhance the positive identity of the ingroup (social creativity) (Jackson, Sullivan, Harnish, & Hodge, 1996; Reicher, 1996; Simon, Loewy, Sturmer, Weber, Freytag, Habig, Kampmeier, & Spahlinger, 1998). Moreover, a sense of shared social identity among members of disadvantaged groups has been shown to foster collective efficacy and to encourage individuals to work on behalf of their group, which in turn is associated with better psychological adjustment (Haslam & Reicher, 2006). We argue that beliefs about one's group effectively working together to change their lower status as well as beliefs about collectively reframing the negative societal beliefs that are associated with their group could have beneficial effects for well-being.

OVERVIEW OF THE CURRENT STUDY

Our investigation is rooted in the theoretical integration of the social identity approach and Lazarus and Folkman's (1980, 1984) cognitive theory

of stress and coping. We expand on previous research that suggests that a sense of shared social identity helps protect disadvantaged groups from the aversive psychological consequences associated with low status (e.g. Schmitt, Spears, & Branscombe, 2003). As outlined above, we argue that appraisals of individual, intragroup, and intergroup options are likely to be related to group identification and psychological well-being for members of disadvantaged groups. More specifically, we suggest that appraisals of these option types may mediate the relationship between group identification and well-being.

To this end, the present study tested the ability of group identification to foster appraisals of coping options operating at different levels of identity (individual, intragroup, and intergroup) and varying by coping function (problem-focused and emotion-focused) that in turn predict psychological well-being. We examined these relationships using Black Americans—a group that continues to face discrimination in a variety of contexts, making them an appropriate social group for this investigation. Additionally, group identification among Black Americans has been linked with psychological well-being in past research (e.g. Branscombe et al., 1999; Postmes & Branscombe, 2002).

First, in line with social identity theory (Tajfel, 1978) and the rejection-identification model (Branscombe et al., 1999), we expected participants who are more identified with their racial group to report greater psychological well-being. Second, because we assume that group identification can predict beliefs that one can use individual, intragroup, and intergroup responses to cope with racism (Haslam & Reicher, 2006; Jackson et al., 1996), we tested the extent to which group identification predicted each of the six coping option types. Third, we examined each coping option type as a predictor of well-being, and as a potential mediator of the expected relationship between group identification and psychological well-being.

METHOD

Participants

Data were collected in the mid-western United States. The initial sample consisted of 123 self-identified Black Americans. Data from three participants were removed before any of the analyses were conducted. One participant was an extreme outlier on the racial identification variable (4 standard deviations below the next lowest score); the other two excluded participants did not complete the coping option measures. The final sample consisted of 120 self-identified Black Americans (66 women, 54 men). Participants in this study ranged in age from 18 to 73 ($M = 24.22$,

$SD = 8.49$).¹ As for the educational level of the participants, 3.3 per cent did not complete high school, 13.3 per cent indicated that their highest level of education was high school, 62.5 per cent were either attending college at the time of the study or had previously attended college, but had not finished their degree, 14.2 per cent had completed an undergraduate university degree, and 6.7 per cent had completed a graduate degree. Thus, our sample has more formal education than Black Americans and Americans more generally.

Procedure and Measures

Participants provided informed consent and completed a questionnaire containing the measures outlined below. The data were collected by Black American research assistants at the University of Kansas and Purdue University. These research assistants approached individuals on campus, through clubs and organisations, and through informal social networks, and asked them to volunteer their time to complete the questionnaire.

For all the scales in the questionnaire, composite scores for the construct being measured were calculated by averaging scores across the individual items. The group identification and coping option measures used response scales ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). Psychological well-being measures used response scales from 1 (*not at all true of me*) to 7 (*very true of me*).

Racial Group Identification. Black American racial identification was measured using nine items (e.g. “My race is an important part of who I am” and “I feel a strong attachment to my racial group”) adapted from Phinney (1992) and Branscombe et al. (1999) ($\alpha = .84$).

Coping Options. Participants responded to four items (see Appendix) for each of the six coping option types based on level of identity and coping function: (1) individual problem-focused options ($\alpha = .66$), (2) individual emotion-focused options ($\alpha = .72$), (3) intragroup problem-focused options ($\alpha = .75$), (4) intragroup emotion-focused options ($\alpha = .73$), (5) intergroup problem-focused options ($\alpha = .88$), and (6) intergroup emotion-focused options ($\alpha = .85$).

¹ Five of the 120 participants failed to indicate their age. However, these participants completed all other measures contained within the questionnaires. In order to make use of the information these participants provided for all of the analyses we entered the age of each of these participants as the mean for age for the remainder of the sample ($M = 24.22$, $SD = 8.49$). The mean and standard deviation reported for age in Table 1 include the five participants that had their age substituted for the mean of age for the remainder of the sample.

We submitted all the coping option items to an exploratory factor analysis using Varimax rotation. This indicated that one of the individual problem-focused items ("I alter my behavior around Whites to reduce the chance that I might be discriminated against") loaded on a factor by itself (.87, other item loadings < .43). As a result, this item was not used in constructing the individual problem-focused measure.

The three remaining individual problem-focused items loaded on one factor (.56 to .77, other item loadings < .30). All of the individual emotion-focused items loaded on one factor (.46 to .80, other item loadings < .30). The eight intragroup items loaded on one factor (.51 to .82, other item loadings < .25). The intergroup emotion-focused items loaded on one factor (.78 to .85, other item loadings < .26). All of the intergroup problem-focused items loaded on the final factor (.66 to .90, other item loadings < .34). This analysis suggests that we were successful at creating distinct measures of coping at different levels of identity. However, we were only successful at creating empirically distinct measures of emotion- and problem-focused coping for the individual and intergroup appraisals—the intragroup emotion-focused items and the intragroup problem-focused items loaded on one factor. Because recent research suggests that that emotion- and problem-focused coping may be differentially related to psychological well-being (see Wong et al., 2007), we opted to keep these intragroup appraisals as two distinct measures.²

Psychological Well-Being. Psychological well-being was assessed using two measures: (1) a single-item global self-esteem measure, "I have high self-esteem" (Robins, Hendin, & Trzesniewski, 2001) that has been found to correlate more than .90 with the Rosenberg Self-Esteem Inventory (1979), and (2) four items taken from Diener, Emmons, Larsen, and Griffin's (1985) Satisfaction with Life Scale ($\alpha = .86$) (e.g. "In general, I am quite satisfied with my life as a whole").

RESULTS

Means and intercorrelations between racial group identification, appraisals of coping options, measures of psychological well-being, participant age, gender, and education are presented in Table 1. Because prior research suggests that person variables such as age, gender, and education can influence coping processes (see Ebata & Moos, 1994; Finkelstein, Kubzansky, Capitman, & Goodman, 2007), and because they correlated with some of our dependent measures, we controlled for these variables in all of our analyses. Analyses without these variables, however, produced the same

² Creating a single intragroup coping option produced a similar pattern of results.

TABLE 1
Intercorrelations, Means, and Standard Deviations for Measures

Variable	1	2	3	4	5	6	7	8	9	10	11	12
1. Racial ID	—											
2. Individual PFCO	.20*	—										
3. Individual EFCO	.36**	.23*	—									
4. Intragroup PFCO	.54**	.16	.17	—								
5. Intragroup EFCO	.51**	.08	.21*	.73**	—							
6. Intergroup PFCO	.25**	.37**	.47*	.19*	.24**	—						
7. Intergroup EFCO	.39**	.28**	.32**	.36**	.39**	.33**	—					
8. Self-Esteem	.20*	.20*	.38**	.02	.09	.40**	.24**	—				
9. Life Satisfaction	.32**	.23*	.40**	.14	.14	.39**	.33**	.73**	—			
10. Gender	−.04	.24**	−.12*	.06	.07	−.07	−.05	−.26**	−.13	—		
11. Age	.00	.11	.25**	.29**	−.22*	.02	.09	−.01	−.04	−.14	—	
12. Education	.07	−.23*	−.14	−.03	.00	.32**	−.10	.02	.05	.08	.04	—
Mean	6.24	4.15	5.52	5.74	5.97	5.26	5.66	6.47	5.99	.55	24.21	3.08
SD	.75	1.63	1.20	1.14	1.00	1.52	1.32	1.02	.99	.50	8.13	.82

Note: PFCO = Problem-Focused Coping Options and EFCO = Emotion-Focused Coping Options. * $p < .05$; ** $p < .01$. Gender coded 0 = Male and 1 = Female. Education coded 1 = Attended High School, 2 = Completed High School, 3 = Attend or Attended College, 4 = Completed University Degree and 5 = Completed Graduate Degree.

pattern of results. In addition to the correlations, we ran a series of regressions to assess relationships between racial group identification, the types of coping options, and the two indicators of psychological well-being. First, we tested whether racial identification predicted self-esteem and life satisfaction. Then using multiple regression analyses we examined whether racial group identification predicted each of the types of coping options. Next, we examined whether the appraisals predicted self-esteem and life satisfaction after controlling for racial group identification. Finally, we conducted Sobel tests (1982) for mediation to determine the coping options that mediate the relationship between racial group identification and both indicators of psychological well-being.

Racial Group Identification and Psychological Well-Being

As shown in Table 1, racial group identification was significantly related to both self-esteem and life satisfaction. Controlling for demographics, the two indicators of psychological well-being—self-esteem and life satisfaction—were regressed on racial identification. Consistent with previous investigations with Black Americans (Branscombe et al., 1999; Postmes & Branscombe, 2002), racial group identification was positively related to self-esteem, $t(115) = 2.13$, $p = .04$, and life satisfaction, $t(115) = 3.56$, $p < .001$.

Racial Group Identification and Coping Options

Next we assessed the relationship between racial group identification and the six coping options. The zero-order correlations presented in Table 1 show that racial group identification was positively related to each of the options. We ran six separate regressions to see if racial group identification would positively predict each of the coping options while controlling for the demographic covariates. The results of these regressions replicate what was found for the zero-order correlations. Participants who were more identified with their racial group appraised each of the coping option types as a viable response to racism (see Table 2). These findings suggest that group identification may affect the secondary appraisal process for members of disadvantaged groups (see also Slavin et al., 1991).

Coping Options and Psychological Well-Being

We examined whether endorsement of the six coping option types predicted self-esteem and life satisfaction using two separate hierarchical regression analyses (see Table 3). To compare the direct and indirect effect of racial identification on well-being and to test the hypothesis that appraisals of coping options would predict well-being above and beyond racial

TABLE 2
Multiple Regressions of Demographic Variables and Racial Group Identification Predicting Coping Options

<i>Variables</i>	<i>(1) Individual PFCO β</i>	<i>(2) Individual EFCO β</i>	<i>(3) Intragroup PFCO β</i>	<i>(4) Intragroup EFCO β</i>	<i>(5) Intergroup PFCO β</i>	<i>(6) Intergroup EFCO β</i>
Gender	-.20*	-.06	.05	.06	-.03	-.01
Age	.09	.25**	-.28***	-.21**	.04	.09
Education	-.24**	-.17*	-.06	-.03	-.34***	-.13
Racial ID	.22*	.37***	.55***	.52***	.27**	.40***
R^2	.16**	.23***	.38***	.32***	.18***	.18***

Note: PFCO = Problem-Focused Coping Options and EFCO = Emotion-Focused Coping Options. * $p < .05$; ** $p < .01$; *** $p < .001$.

TABLE 3
Hierarchical Regressions of Demographic Covariates, Racial Group Identification,
and Coping Options Predicting Self-Esteem and Life Satisfaction

<i>Variables</i>	<i>Self-Esteem</i>		<i>Life Satisfaction</i>	
	<i>Block 1</i>	<i>Block 2</i>	<i>Block 1</i>	<i>Block 2</i>
Gender	-.26**	-.22*	-.13	-.08
Age	-.05	-.19*	-.05	-.20*
Education	.03	.18*	-.04	.20*
Racial ID	.19*	.07	.31**	.17
Individual PFCO	—	.03	—	.06
Individual EFCO	—	.25*	—	.25*
Intragroup PFCO	—	-.20	—	-.09
Intragroup EFCO	—	-.01	—	-.12
Intergroup PFCO	—	.30**	—	.26*
Intergroup EFCO	—	.13	—	.20*
Total R^2	.11*	.32***	.12**	.33***

Note: PFCO = Problem-Focused Coping Options and EFCO = Emotion-Focused Coping Options.

* $p < .05$; ** $p < .01$; *** $p < .001$. Dashes indicate that the variable was not entered into the model.

identification alone, we entered the demographic covariates and racial group identification in the first block, and we entered the six option types in the second block for both regressions.³ For self-esteem, the endorsement of coping options explained a significant increase in the variance, R^2 change

³ Age and education were not significant predictors of well-being when they were entered in block 1 of the hierarchical regressions; however, when the coping options were entered in block 2, age and education became significant predictors, such that being younger and being more educated predicted psychological well-being. These patterns suggest that one or more types of coping options are acting as suppressor variables—suppressing the direct effects of age and education. The zero-order correlations indicated that individual emotion-focused options had the strongest relationship with age whereas intergroup problem-focused options had the strongest relationship with education. We first tested whether individual emotion-focused coping options mediated a positive indirect effect of age on both indicators of psychological well-being. Individual emotion-focused options were found to significantly mediate a positive relationship between age and self-esteem and life satisfaction, $z = 1.94$, $p = .05$; $z = 1.94$, $p = .05$. Individual emotion-focused options suppressed the direct effect of age, such that older individuals endorsed individual emotion-focused options more, which in turn strengthened subjective well-being. We then tested whether intergroup problem-focused options mediated a negative indirect effect of education on psychological well-being. The intergroup problem-focused options mediated a negative relationship between education and self-esteem, $z = -2.40$, $p = .02$, as well as a negative relationship between education and life satisfaction, $z = -2.17$, $p = .03$. Intergroup problem-focused options suppressed the direct positive effect of education, such that individuals with more education endorsed intergroup problem-focused options less, thus lowering subjective well-being. Although these suppressor effects are interesting, we acknowledge that the robustness of suppressor effects may be a product of sampling fluctuations or measurement error (see Shrout & Bolger, 2002).

= .21, $p < .001$. When all coping option types were entered in the second block, racial group identification no longer predicted self-esteem, $t(109) = 0.67$, $p = .50$. Individual emotion-focused options, $t(109) = 2.53$, $p = .01$, and the intergroup problem-focused options, $t(109) = 3.01$, $p = .003$, were significant positive predictors of self-esteem. None of the other option types were significant predictors of self-esteem.

For the hierarchical regression with life satisfaction as the dependent variable, the coping options explained a significant increase in the variance, R^2 change = .21, $p < .001$. With the coping options entered in the regression model, racial group identification no longer predicted life satisfaction, $t(109) = 1.64$, $p = .11$. Individual emotion-focused options, $t(109) = 2.54$, $p = .01$, intergroup problem-focused options, $t(109) = 2.60$, $p = .01$, and intergroup emotion-focused options, $t(109) = 2.14$, $p = .04$, were positive significant predictors of life satisfaction. Individual problem-focused options and both intragroup option types were not significant predictors of life satisfaction.

Mediational Analyses

Sobel tests (1982) were conducted to test whether the coping options that significantly predicted self-esteem and life satisfaction mediated the relationship between racial group identification and each measure of psychological well-being.⁴ Individual emotion-focused options, $z = 2.21$, $p = .03$, and intergroup problem-focused options, $z = 2.18$, $p = .03$, were significant mediators of the relationship between racial group identification and self-esteem. For the relationship between racial group identification and life satisfaction, individual emotion-focused options, $z = 2.22$, $p = .03$, intergroup problem-focused options, $z = 2.00$, $p = .05$, and intergroup emotion-focused options, $z = 1.94$, $p = .05$, were significant mediators.⁵ These findings are consistent with our idea that the relationship between group identification and psychological well-being is partly accounted for by the capacity for group identification to increase a person's sense that they and their group can effectively cope with disadvantage.

⁴ We also used Preacher and Hayes' (2008) bootstrapping technique for multiple mediator models. It is a more powerful test of mediation than the Sobel test; however, it provided the same pattern of results.

⁵ Sobel tests were conducted for all six types of coping options serving as mediators between racial identity and both indicators of psychological well-being (self-esteem and life satisfaction). When entered as mediators between group identification and self-esteem, intragroup problem-focused coping, $z = -1.51$, $p = .13$, and intergroup emotion-focused coping, $z = 1.31$, $p = .19$, were close to significance. All other coping options when entered as mediators between group identification and the two indicators of psychological well-being were clearly non-significant, $ps > .32$.

DISCUSSION

The results of this study add to growing literature confirming the key role of group identification in the coping process. Specifically, it supports research which has demonstrated (1) that group identification is related to the cognitive appraisal process that occurs when confronted with a potential stressor and (2) that group identification can protect individuals from the negative effects of potential stressors (see Branscombe et al., 1999; Haslam et al., 2004; Haslam et al., 2005; Haslam & Reicher, 2006; Postmes & Branscombe, 2002). Furthermore, in line with Lazarus and Folkman's (1984) cognitive theory of stress and coping, results suggest that the psychological consequences of stressful circumstances are highly dependent on individuals' appraisals of how they can respond to stressors. We found that racial group identification was related to higher self-esteem and greater life satisfaction, and was predictive of all six types of coping options. More importantly, the study's results provide support for the idea that appraisals of what can be done to cope with group-based disadvantage explain the relationship between racial group identification and positive psychological well-being.

The pattern of results involving the intergroup options are consistent with social identity theory and self-categorisation models of stress, which suggest that social identities that are psychologically relevant to a given stressor can be a lens through which the appraisal process occurs (Haslam, 2004; Haslam et al., 2005; Haslam & Reicher, 2006). Envisioning one's racial group collectively coping with group-based disadvantage was positively related to racial group identification, self-esteem, and life satisfaction. Mediation analyses showed that intergroup problem-focused options were significant mediators between racial group identification and both indicators of well-being. Intergroup emotion-focused options mediated the relationship between racial group identification and life satisfaction. It is interesting that the two option types consistent with the two group-based protection strategies proposed by social identity theory (i.e. social creativity and social competition; Tajfel, 1978) served as mediators of the relationship between racial group identification and indicators of psychological well-being. This supports some of SIT's key propositions, namely: (1) that individuals who identify with their group are more likely to think in ways that promote their group's interests, (2) that group-based protection strategies are ways for members of disadvantaged groups to cope with the disadvantage they face. These findings are also consistent with theoretical positions in clinical and health psychology, which emphasise the importance of collective efficacy and group memberships for the appraisal of stressors in an individual's life (Bandura, 1998; Slavin et al., 1991; Smith, 1985).

In line with previous studies, perceiving that one can rely on social support from ingroup members was highly correlated with group identification (e.g. Constantine et al., 2002; Haslam et al., 2005, Study 2). This finding is consistent with a social identity-based approach to stress and coping that suggests that individuals who are highly identified with their social group are more likely to perceive that they can seek out and receive social support to cope with stressors (Haslam, 2004). What is surprising is that neither of the intragroup option types was related to self-esteem or life satisfaction. Clinical and social psychological research has demonstrated that perceiving that one can receive effective social support from members of one's social network (i.e. friends and family) or others more generally is related to lower depressive symptoms, lower anxiety, high self-esteem, and greater life satisfaction (e.g. Bradley et al., 2005; Schulz et al., 1987; Wong et al., 2007; for exceptions see Boyce, Schaeter, & Uitti, 1985; Vitaliano, Russo, Carr, Maiuro, & Becker, 1985).

This lack of a relationship between intragroup options and well-being could potentially stem from the way in which intragroup options were measured. Our measures examined perceptions of the availability of social support from members of the ingroup (i.e. other Blacks), while most research into stress and coping typically measures the degree to which individuals seek and receive support from others such as friends, family or colleagues (e.g. Fleishman & Fogel, 1994). Perhaps people construe support from ingroup members on an individual level, and thus do not experience support from ingroup members as ingroup support per se. In that sense, our items might not reflect how people actually think about ingroup social support. That said, the few studies that have examined the well-being consequences of ingroup support have tended to find a significant positive relationship between the two constructs (Gaudet & Clément, 2005; Haslam et al., 2005). Given the lack of existing research on intragroup social support and well-being, future research is needed before any conclusions can be drawn with certainty. In particular, future research might distinguish between the consequences of appraising whether support is available, actually seeking social support, and receiving social support. It may be that appraisals of support availability are less predictive of well-being than successfully seeking and receiving support. Furthermore, high levels of distress may encourage seeking social support, and thus the consequences of social support cannot be adequately assessed without controlling for individual differences in people's (primary) appraisals of threat (Fleishman & Fogel, 1994).

On an individual level, appraisals of emotion-focused coping options were positively related to psychological well-being; they were also a significant mediator between racial group identification and self-esteem and life satisfaction. Believing that one can positively reframe the negative

thoughts and feelings associated with disadvantage might be adaptive. This is consistent with clinical research which has demonstrated that the endorsement of positive beliefs is related to better mental health outcomes when dealing with chronic stressors (e.g. being HIV positive; see Fleishman & Fogel, 1994).

Appraisals of individual problem-focused options on the other hand were not related to self-esteem or life satisfaction when controlling for other appraisal types, and were not a significant mediator of the relationship between racial group identification and well-being. One possible explanation for not finding support for mediation is that group-based disadvantage is a pervasive stressor that implicates oneself along with one's group members so that it would be difficult for individuals to envision themselves effectively mitigating group-based disadvantage on their own, regardless of how highly identified they are with their social group. The relative futility of addressing group-based disadvantage as an individual may also explain our participants' weak endorsement of these option types. Another plausible explanation is that the individual problem-focused options we included not only involved acknowledging and preparing for situations where Blacks might face racism but they also involved altering one's relationship with the stressor. While acknowledging the existence of a stressor as well as preparing for the occurrence of a stressor are an integral part of problem-focused coping, problem-focused strategies can involve confronting the stressor (i.e. challenging racist events) as well as trying to change one's relationship with the stressor (see Vitaliano et al., 1985). Future studies could include individual problem-focused options that involve confronting and challenging racism as well as changing one's relationship to it, as these different problem-focused options might have different relationships with group identification (e.g. Wakefield & Hudley, 2005) and psychological well-being.

Limitations and Future Directions

This study provides evidence that appraisals of coping options—particularly intergroup ones—mediate the relationship between minority group identification and well-being. However, there are a number of ways in which future research can expand on our study and address its limitations. For instance, to more directly assess the causal effects of group identification and coping options on well-being, future studies might employ longitudinal or experimental (e.g. manipulating group identification or perceived opportunities for coping) designs. Also, we examined appraisals of coping options and not actual coping behavior. Future research should examine whether envisioning what can be done actually translates into the enactment of coping strategies and if perceived options for coping have an effect on well-being independent of behavior. Another potential future research

direction might involve examining the interrelationships between different types of coping options; for instance, do appraisals that one's group can cope with discrimination affect appraisals of individual-level coping?

There is also the possibility that the phenomenology of the processes investigated in our study might depend on the social context particular to the disadvantaged group in question. For example, recent research among the mentally ill suggests that while group identification can buffer individuals from the adverse effects of stigma through social support, the direct effect of identification on well-being is actually negative, suggesting that identification with a severely stigmatised group may not always be positive (Crabtree, Haslam, Postmes, & Haslam, 2008). Group perceptions of the social context may also influence the endorsement of coping option types. For example, single people (i.e. individuals not in a relationship) who are economically disadvantaged compared to couples may be less likely than racial minorities to consider using group-based strategies (i.e. intergroup options) because it is possible to leave their group by finding a partner (i.e. permeable group boundaries). Singles might also be considerably less likely to consider using intergroup problem-focused coping (i.e. social competition) compared to intergroup emotion-focused coping (i.e. social creativity) because perceptions of their disadvantage relative to other social groups like racial minorities might be seen as more legitimate (Morris, Sinclair, & DePaulo, 2005).

Future research might also be strengthened by refining the measurement of appraisals of coping options. In hindsight, our measures of coping options were not completely parallel at the three levels of identity. For example, in comparison to the intragroup and intergroup problem-focused options the individual problem-focused items focused on altering one's relationship with racism (reducing exposure) rather than confronting it. This raises the possibility that something more than the level of identity and coping function (emotion vs. problem) might account for the differing relationships with well-being. Because we used Lazarus and Folkman's (1984) cognitive theory of stress and coping we made a concerted effort to measure coping options in terms of their primary distinction of coping categories: problem-focused coping and emotion-focused coping. Over the years the distinction between coping categories has been broadened and refined considerably by a number of researchers (for a detailed review see Skinner, Edge, Altman, & Sherwood, 2003). Perhaps future investigations can include a broader taxonomy of coping categories. Additionally, future research could create more distinct measures of coping options. In particular, we did not obtain distinct intragroup emotion-focused and intragroup problem-focused factors—both option types loaded on a single factor (but see Wong et al., 2007). Finally, including a broader range of well-being outcomes (e.g. anxiety, depression) and coping options types would be useful.

Conclusion

This investigation extends prior research that has examined the relationship between group identification and psychological well-being among disadvantaged social groups by explicating the processes by which group identification can promote well-being. Specifically, believing that one has viable options for coping with group-based disadvantage seems, at least in part, to account for the relationship between minority group identification and well-being. We offer evidence that intergroup coping options are an important part of this coping process for members of minority groups. On this basis, it is clear that our understanding of how people cope with disadvantage will benefit from considering appraisals of what one's group can do to respond to disadvantage and not just what members of minority groups can do individually.

REFERENCES

- Bandura, A. (1998). Health promotion from the perspective of social cognitive theory. *Psychology & Health, 13*, 623–649.
- Boyce, W.T., Schaeter, C., & Uitti, C. (1985). Permanence and change: Psychosocial factors in the outcome of adolescent pregnancy. *Social Science & Medicine, 21*, 1279–1287.
- Bradley, R., Schwartz, A.C., & Kaslow, N.J. (2005). Posttraumatic stress disorder symptoms among low-income, African American women with a history of intimate partner violence and suicidal behaviors: Self-esteem, social support, and religious coping. *Journal of Traumatic Stress, 18*, 685–696.
- Branscombe, N.R. (1998). Thinking about one's gender group's privileges or disadvantages: Consequences for well-being in women and men. *British Journal of Social Psychology, 37*, 167–184.
- Branscombe, N.R., Schmitt, M.T., & Harvey, R.D. (1999). Perceiving pervasive discrimination among African-Americans: Implications for group identification and well-being. *Journal of Personality and Social Psychology, 77*, 135–149.
- Carver, C.S., Scheier, M.F., & Weintraub, J.K. (1989). Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology, 56*, 267–283.
- Constantine, M.G., Donnelly, P.C., & Myers, L.J. (2002). Collective self-esteem and Africultural coping styles in African American adolescents. *Journal of Black Studies, 32*, 698–710.
- Crabtree, J.W., Haslam, S.A., Postmes, T., & Haslam, C. (2008). Mental health support groups, stigma and self-esteem: Positive and negative implications of group identification. Unpublished Manuscript. University of Exeter.
- Crocker, J., & Major, B. (1989). Social stigma and self-esteem: The self-protective properties of stigma. *Psychological Review, 96*, 608–630.
- Diener, E., Emmons, R.A., Larsen, R.J., & Griffin, S. (1985). The Satisfaction With Life Scale. *Journal of Personality Assessment, 49*, 71–75.

- Ebata, A.T., & Moos, R.H. (1994). Personal, situational, and contextual correlates of coping in adolescence. *Journal of Research on Adolescence*, 4, 99–125.
- Feagin, J.R. (1991). The continuing significance of race: Anti-Black discrimination in public places. *American Sociological Review*, 56, 101–116.
- Feagin, J.R. (1992). The continuing significance of racism: Discrimination against Black students in White colleges. *Journal of Black Studies*, 22, 546–578.
- Finkelstein, D.M., Kubzansky, L.D., Capitman, J., & Goodman, E. (2007). Socio-economic differences in adolescent stress: The role of psychological resources. *Journal of Adolescent Health*, 40, 127–134.
- Fleishman, J.A., & Fogel, B. (1994). Coping and depressive symptoms among people with AIDS. *Health Psychology*, 13, 156–169.
- Folkman, S. (1984). Personal control and stress and coping processes: A theoretical analysis. *Journal of Personality and Social Psychology*, 46, 839–852.
- Folkman, S., & Lazarus, R.S. (1980). An analysis of coping in a middle-aged community sample. *Journal of Health and Social Behavior*, 21, 219–239.
- Gaudet, S., & Clément, R. (2005). Identity maintenance and loss: Concurrent processes among the Fransaskois. *Canadian Journal of Behavioural Science*, 37, 110–122.
- Gaudet, S., Clément, R., & Deuzeman, K. (2005). Daily hassles, ethnic identity and psychological adjustment among Lebanese-Canadians. *International Journal of Psychology*, 40, 157–168.
- Haslam, S.A. (2004). *Psychology in organizations: The identity approach* (2nd edn.). London: Sage.
- Haslam, S.A., & Ellemers, N. (2005). Social identity in industrial and organizational psychology: Concepts, controversies, and contributions. In G.P. Hodgkinson (Ed.), *International review of industrial and organizational psychology* (Vol. 20, pp. 39–118). Chichester: Wiley.
- Haslam, S.A., Jetten, J., O'Brien, A., & Jacobs, E. (2004). Social identity, social influence, and reactions to potentially stressful tasks: Support for the self-categorization model of stress. *Stress and Health*, 20, 3–9.
- Haslam, S.A., O'Brien, A., Jetten, J., Vormedal, K., & Penna, S. (2005). Taking the strain: Social identity, social support, and the experience of stress. *British Journal of Social Psychology*, 44, 355–370.
- Haslam, S.A., & Reicher, S. (2006). Stressing the group: Social identity and the unfolding dynamics of responses to stress. *Journal of Applied Psychology*, 91, 1037–1052.
- Haslam, S.A., Ryan, M.K., Postmes, T., Spears, R., Jetten, J., & Webley, P. (2006). Sticking to our guns: Social identity as a basis for the maintenance of commitment to faltering organizational projects. *Journal of Organizational Behavior*, 27, 607–628.
- Jackson, L.A., Sullivan, L.A., Harnish, R., & Hodge, C.N. (1996). Achieving positive social identity: Social mobility, social creativity, and permeability of group boundaries. *Journal of Personality and Social Psychology*, 20, 241–254.
- Klonoff, E.A., Landrine, H., & Ullman, J.B. (1999). Racial discrimination and psychiatric symptoms among Blacks. *Cultural Diversity & Ethnic Minority Psychology*, 5, 329–339.
- Landrine, H., & Klonoff, E.A. (1996). The schedule of racist events: A measure of

- racial discrimination and a study of its negative physical and mental health consequences. *Journal of Black Psychology*, 22, 144–168.
- Lazarus, R. (1991). *Emotion and adaptation*. New York: Oxford University Press.
- Lazarus, R.S., & Folkman, S. (1984). *Stress, appraisal, and coping*. New York: Springer.
- Major, B., McCoy, S.K., Kaiser, C.R., & Quinton, W.J. (2003). Prejudice and self-esteem: A transactional model. In W. Stroebe & M. Hewstone (Eds.), *European review of social psychology* (Vol. 14, pp. 77–104). Hove: Psychology Press/Taylor & Francis.
- Major, B., & O'Brien, L.T. (2005). The social psychology of stigma. *Annual Review of Psychology*, 56, 393–421.
- Miller, C.T., & Kaiser, C.R. (2001). A theoretical perspective on coping with stigma. *Journal of Social Issues*, 57, 73–92.
- Morris, W.L., Sinclair, S., & DePaulo, B.M. (2005). No shelter for singles: The perceived legitimacy of marital status discrimination. *Group Processes & Intergroup Relations*, 10, 457–470.
- Noh, S., & Kaspar, V. (2003). Perceived discrimination and depression: Moderating effects of coping, acculturation, and ethnic support. *American Journal of Public Health*, 93, 232–238.
- Park, C.L., & Folkman, S. (1997). Meaning in the context of stress and coping. *Review of General Psychology*, 1, 115–144.
- Phinney, J.S. (1990). Ethnic identity in adolescents and adults: Review of research. *Psychological Bulletin*, 108, 499–514.
- Phinney, J.S. (1992). The Multigroup Ethnic Identity Measure: A new scale for use with diverse groups. *Journal of Adolescent Research*, 7, 156–176.
- Postmes, T., & Branscombe, N.R. (2002). Influence of long-term racial environment composition on subjective well-being in African Americans. *Journal of Personality and Social Psychology*, 83, 735–751.
- Preacher, K.J., & Hayes, A.F. (2008). Asymptotic and resampling strategies for assessing and comparing indirect effects in multiple mediator models. *Behavior Research Methods*, 40, 879–891.
- Reicher, S.D. (1996). Social identity and social change: Rethinking the context of social psychology. In P. Robinson (Ed.), *Social groups and identities: Developing the legacy of Henry Tajfel* (pp. 317–336). Oxford: Butterworth-Heinemann.
- Robbins, R.W., Hendin, H.M., & Trzesniewski, K.H. (2001). Measuring global self-esteem: Construct validation of a single-item measure and the Rosenberg Self-Esteem Scale. *Personality and Social Psychology Bulletin*, 27, 151–161.
- Romero, A.J., & Roberts, R.E. (2003). The impact of multiple dimensions of ethnic identity on discrimination and adolescents' self-esteem. *Journal of Applied Social Psychology*, 33, 2288–2305.
- Rosenberg, M. (1979). *Conceiving the self*. New York: Basic Books.
- Schmitt, M.T., & Branscombe, N.R. (2002). The meaning and consequences of perceived discrimination in disadvantaged and privileged social groups. In W. Stroebe & M. Hewstone (Eds.), *European review of social psychology* (Vol. 12, pp. 167–199). Chichester: Wiley.
- Schmitt, M.T., Branscombe, N.R., & Postmes, T. (2003). Women's emotional responses to the pervasiveness of gender discrimination. *European Journal of Social Psychology*, 33, 297–312.

- Schmitt, M.T., Spears, R., & Branscombe, N.R. (2003). Constructing a minority group identity out of shared rejection: The case of international students. *European Journal of Social Psychology*, 33, 1–12.
- Schulz, R., Tompkins, C.A., Wood, D., & Decker, S. (1987). The social psychology of caregiving: Physical and psychological costs of providing support to the disabled. *Journal of Applied Social Psychology*, 17, 401–428.
- Sellers, R.M., Caldwell, C.H., Schmeelk-Cone, K.H., & Zimmerman, M.A. (2003). Racial identity, racial discrimination, and psychological distress among African-American young adults. *Journal of Health and Social Behavior*, 43, 302–317.
- Shrout, P.E., & Bolger, N. (2002). Mediation in experimental and nonexperimental studies: New procedures and recommendations. *Psychological Methods*, 7, 422–445.
- Sigelman, L., & Welch, S. (1991). *Black Americans' views of racial inequality: The dream deferred*. New York: Cambridge University Press.
- Simon, B., Loewy, M., Sturmer, S., Weber, U., Freytag, P., Habig, C., Kampmeier, C., & Spahlinger, P. (1998). Collective identification and social movement participation. *Journal of Personality and Social Psychology*, 74(3), 646–658.
- Skinner, E.A., Edge, K., Altman, J., & Sherwood, H. (2003). Searching for the structure of coping: A review and critique of category systems for classifying ways of coping. *Psychological Bulletin*, 129, 216–269.
- Slavin, L.A., Rainer, K.L., McCreary, M.L., & Gowda, K.K. (1991). Toward a multicultural model of the stress process. *Journal of Counseling & Development*, 70, 156–163.
- Smith, E.M.J. (1985). Ethnic minorities: Life stress, social support, and mental health issues. *The Counseling Psychologist*, 13, 537–579.
- Sobel, M.E. (1982). Asymptotic intervals for indirect effects in structural equations models. In S. Leinhardt (Ed.), *Sociological methodology 1982* (pp. 290–312). San Francisco, CA: Jossey-Bass.
- Swim, J.K., Hyers, L.L., Cohen, L.L., Fitzgerald, J.C., & Bylsma, W.H. (2003). African American college students' experiences with everyday racism: Characteristics of and responses to these incidents. *Journal of Black Psychology*, 29, 38–67.
- Tajfel, H. (1978). *The social psychology of minorities*. London: Minority Rights Group.
- Tajfel, H., & Turner, J.C. (1979). An integrative theory of intergroup conflict. In W.G. Austin & S. Worchel (Eds.), *The social psychology of intergroup relations* (pp. 33–47). Monterey, CA: Brooks/Cole.
- Turner, J.C., Hogg, M.A., Oakes, P.J., Reicher S.D., & Wetherell, M.S. (1987). *Rediscovering the social group: A self-categorization theory*. Oxford; New York: Blackwell.
- Turner, J.C., Oakes, P.J., Haslam, S.A., & McGarty, C.A. (1994). Self and collective: Cognition and social context. *Personality and Social Psychology Bulletin*, 20, 454–463.
- Verkuyten, M., & Nekuee, S. (2001). Self-esteem, discrimination, and coping among refugees: The moderating role of self-categorization. *Journal of Applied Social Psychology*, 31, 1058–1075.

- Vitaliano, P.P., Russo, J., Carr, J.E., Maiuro, R.D., & Becker, J. (1985). The Ways of Coping Checklist: Revision and psychometric properties. *Multivariate Behavioral Research*, 20, 3–26.
- Voci, A. (2006). The link between identification and in-group favouritism: Effects of threat to social identity and trust-related emotions. *British Journal of Social Psychology*, 45, 265–284.
- Wakefield, W.D., & Hudley, C. (2005). African American male adolescents' preferences in responding to racial discrimination: Effects of ethnic identity and situational influences. *Adolescence*, 40, 237–256.
- Walsh, J.J., & McGrath, F.P. (2000). Identity, coping style, and health behavior among first generation Irish immigrants in England. *Psychology & Health*, 15, 467–482.
- Williams, D.R., & Williams-Morris, R. (2000). Racism and mental health: The African American experience. *Ethnicity & Health*, 5, 243–268.
- Wong, S.T., Yoo, G.J., & Stewart, A.L. (2007). An empirical evaluation of social support and psychological well-being in older Chinese and Korean immigrants. *Ethnicity & Health*, 12, 43–67.
- Zohar, D., & Dayan, I. (1999). Must coping options be severely limited during stressful events: Testing the interaction between primary and secondary appraisals. *Anxiety, Stress & Coping*, 12, 191–216.

APPENDIX

Coping Options Items

Individual Emotion-Focused Coping Options

I handle my own emotional responses when I encounter discrimination.
 When I encounter racism, I don't let it get to me.
 I control whether discrimination affects me emotionally or not.
 I don't let racists affect how I feel about myself.

Individual Problem-Focused Coping Options

I generally avoid situations where I might be discriminated against.
 Much of the time, I control whether I encounter racial discrimination.
 I avoid interacting with Whites who I know would not accept me because of my race.

Intragroup Emotion-Focused Coping Options

Talking with other Blacks can help me to feel better about encounters with racial prejudice.
 I can get emotional support from other Blacks by discussing discriminatory experiences.
 When I feel discriminated against, other Blacks will listen to my concerns.
 Other Blacks would give me emotional support if I ever challenged discrimination.

Intragroup Problem-Focused Coping Options

Other Blacks help me by warning me about situations where I might face racial discrimination.

I can turn to other Blacks for advice about handling discrimination.

I can trust other Blacks to give me good advice about coping with discrimination.

If I encountered racism, other Blacks would help me to challenge it.

Intergroup Emotion-Focused Coping Options

When encountering discrimination, Blacks generally don't let it get them down.

Blacks know they don't need acceptance by White society to feel good about themselves as a group.

Blacks know they don't need to meet "White standards" to feel good about themselves as a group.

Blacks control how much they let Whites' stereotypes affect them.

Intergroup Problem-Focused Coping Options

By working together, Blacks change discriminatory practices.

By working together, Blacks improve the economic standing of their group.

By working together as a group, Blacks help to reduce racial inequality.

By working together, Blacks help make White prejudice unacceptable.