The Effect of Racial Socialization on Parental Stress in a sample of African American Parents.

Within all families, the task of parenting is highly complex. Parents are charged with the responsibility of shaping their children in a way that promotes success and helps them to function in society. The approach to this duty may vary based on the ethnicity and culture of the family. For African American parents, for example, this involves cultivating strong kinship bonds, strong work orientation, adaptability of family roles, strong achievement orientation, and strong religious orientation (Hill, 1972). The duties of parenting may be further multiplied when they must be performed within very demanding situations and with limited personal and physical resources. This may be the case for some African American families who tend to be at the lowest levels of social stratification (Marger, 2003) and continue to experience significant disparities in the areas of health, education, and wealth (Williams & Collins, 2004). Along with the enormous financial responsibilities that it takes to nurture a child, African American families may also be subject to race-related challenges that further complicate child rearing. These challenges may place supplementary demands on African American parents and potentially trigger additional parental stress.

According to Pierce’s (1975) Mundane Extreme Environmental Stress (MEES) theory, African Americans “live in an environment where racism and subtle oppression are ubiquitous, constant, continuing, and mundane as opposed to an occasional misfortune” (Peters & Massey, 1983 p 195). This goes beyond family stress theories such as Hill's ABCX Model of Family Stress (Hill, 1958) and McCubbin and Patterson’s (1981) Double ABCX Model, that focus on the regenerative power of families in the face of sudden and unexpected adversity and suggest that African American families are pervasively limited, as their needs
are unimportant to the concerns of most Americans. A study conducted in 1995 (Blendon et al.) forecasted this bleak outlook. Results indicated that 46% of African American participants predicted that race related issues would not be solved in their children’s lifetimes. This was further confirmed after an article published in 2008 (Utsey, Ponterotto, & Porter) asserted that racism was “still going strong,” (p.339). Given this expectation of discrimination, African Americans must cope with the racism they experience and prepare their children for these encounters as well. In an effort to combat the effect of imminent racism, some African American parents have sought to racially socialize their children so they may survive and prosper in a society that devalues “Blackness”.

Racial socialization has been referred to as “the developmental processes by which children acquire the behaviors, perceptions, values, and attitudes of an ethnic group, and come to see themselves and others as members of the group” (Rotheram & Phinney, 1987, p 11.). Peters (1985) described racial socialization as the promotion of psychological and physical health through child-rearing, in a society where dark skin and/or African features may lead to discrimination and racism which can in turn lead to detrimental outcomes for African Americans. Studies have found that African American parents characteristically engage in racial socialization practices as a part of their parenting repertoire (Barr & Neville, 2008; Lee, 2008; BarrCaughey, O-Campo, Randolph, and Nickerson, 2002; ) A growing body of literature suggests that doing this leads to better socio-emotional, behavioral, and academic (Hughes, et al., 2009) outcomes for children, such as ethnic identity development and well-being (Hughes, 2003); positive self concepts (Constantine and Blackmon, 2002), and the resilience to cope with prejudice and discrimination (Barnes, 1980; Branch & Newcombe, 1986; Spencer, 1983).
It has been established in the literature as well as in the media, that racism and acts of violence due to racism is somewhat commonplace in America. Given this, African American parents must accept the probability of their child experiencing such inequalities as their contact with other racial groups increases, and prepare their children as best they can. The recommended preparation involves racial socialization. A study conducted by Thornton et al. (1990) found that in two out of three households, parents reported using racial socialization messages with their children. According to the National Vital Statistics report in 2009, 666,481 babies were born to African American parents in the United States in 2006; Thorton’s (1990) findings and the statistical figure suggest that the need for racial socialization is great.

Within the racial socialization literature, it has been determined that racially socializing one’s children has positive effects for those children, however, there is some ambiguity regarding the way it is best done. This disconnect between the clear need to racially socialize African American children, and the somewhat vague understanding of how, may cause parents to feel helpless. Parental feelings of helplessness may have a negative impact on the child, as Osofsky (2002) found that a child’s sense of well-being may be impacted when the feelings of this sort based on an inability to protect the child from violence is communicated. Therefore, regardless of how well intended the parents may be, ineffectively racially socializing their children will not provide the support needed to buffer the effects of potential racism. Although racist acts cannot be predicted nor avoided, parents can likely prevent their children’s effects by racially socializing them. If this is done appropriately, and parents feel secure in their preparation it will likely buffer the effects of racism their children feel, which may impact their level of parental stress.
Researchers agree that racial socialization has been shown to have positive effects on the children who receive it. However, no literature exists that examines the parental effects of racially socializing one’s children. Therefore, this project proposes to 1) examine whether there is a correlation between racial socialization and parental stress in African American parents and to 2) determine whether being exposed to a racial socialization intervention significantly reduces parental stress from pre-test to post-test as compared to the control and comparison groups.

**REVIEW OF LITERATURE**

**Parental Stress**

Parental stress has been referred to as the tension parents feel in fulfilling their parenting functions. It has been known to lead to aversive psychological and physiological reactions arising from attempts to adapt to the demands of parenthood (Abidin, 1995; Taylor, 2007). Parental stress arises when parents’ expectations about the resources needed to meet the demands of parenting are not matched by available resources (Goldstein, 1995). It is influenced primarily by whom it is that has primary care responsibility for child rearing, and has implications for parent mental health, child behavior and functioning, and family relations.

According to Lazarus and Folkman's (1984) stress-coping model, stress is defined as individuals' cognitive evaluation of stress associated with an event or an ongoing situation and individuals' appraisals of specific external and internal resources affecting their coping ability. Parental stress is suggested to be qualitatively different from stress in other distinct domains (Creasey & Reese, 1996). Abidin (1995) conceptualized that parental stress stems from three sets of factors: those inherent in the child, those inherent in the parent, and those related to the parent–child interaction.
Moreover, according to the contextual model of stress, researchers must examine stressors embedded within a specific context, including factors related to the child, the family, and the specific tasks and demands that must be mastered for successful functioning (Quittner & DiGirolamo, 1998). Thus, another important aspect in the context of parental stress is the impact of day-to-day childrearing experiences (Crnic & Low, 2002). Parental stress is both an antecedent and consequence of many influences in everyday life. For example, parent or child illness, disability, and psychiatric disorders affect the stress that parents experience, and consequently parental stress may affect parent and child adjustment.

**Parental stress and parent outcomes.** It has been suggested that stress associated with the parenting role is distinct from stress arising from other roles and experiences, as parental stress more strongly affects parenting behavior and children’s development (Deater-Deckard, 2004). For example, parental stress has been associated with parents’ self-perceived competence in the parenting role, feelings of social isolation and emotional closeness to their infants, physical health, feelings of restriction within the parenting roles, and depression (Cain & Combs-Orme, 2005).

In a recent study of fathers, researchers found that intense parental stress resulted in less warmth and less adaptive parenting skills to control their children. That same study purported that higher parental stress was related to lower confidence in the paternal role (Masciadrelli & Milardo, 2008). A related dimension of parental stress identified by Abidin (1995) is role restriction, which involves feelings of anger and frustration due to an inability to maintain self-identity. Parents who experience high levels of role restriction tend to exhibit inconsistent parenting and discipline (Abidin, 1995).
In addition to parental stress impacting their competence and satisfaction as parents (Podolski & Nigg, 2001), there are also consequences that have implications for parental health. This is exemplified by studies which revealed that the parental stress resulting from experiences with a child with Attention Deficit Hyperactivity Disorder (ADHD) has led parents to mood and anxiety disorders (Swensen et al, 2003), financial burden (Swensen et al, 2003), and increased alcohol consumption (Chronis et al, 2003; and Pelham and Lang, 1999). In a more recent study, mothers of children with sleep disturbances as a result of autism also reported very high levels of stress. It was found that sleep problems in children with intellectual disabilities adversely influenced their parents’ sleep thereby increasing stress (Hoffman et al, 2008).

Studies have also found that parental stress affects the parents as well as their children. For example, Kazdin and Whitley (2003) found that parental stress influences parent disciplinary practices, which directly promotes and escalates aggressive and oppositional child behavior. That is, parental stress appears to increase parent irritability and attention towards deviant behavior as well as negatively influencing increased deviant behavior.

**Parental stress and child outcomes.** The importance of addressing parental stress and its causes is highlighted by studies connecting parental stress to parents' management and understanding of their child's medical conditions, to parent–child interaction, to subsequent development, and even to potential for child abuse. For example, in a sample of hospitalized youth with feeding problems and mental retardation, parental stress has been linked to difficulty understanding the child's health care needs. (Garro, Thurman, Kerwin, & Ducette, 2005). Onufruk, Saylor, Taylor, Eyberg, and Boyce (1995) demonstrated that parental stress
was linked to less responsive parenting, less effective use of directives, and subsequent poor development in high-risk premature infants. Parental stress has also been associated with higher risk for child maltreatment among children with developmental impairments than children without special needs (Herrenkohl & Russo, 2001). A study of a 19-year whole population birth cohort found that children with conduct disorders and moderate to severe learning difficulties were at highest risk for suspected and confirmed neglect, and physical, sexual, and emotional abuse (Spencer et al., 2005). Other researchers have also found that an increase in behavior problems can influence parental stress thereby increasing the risk of maltreatment especially in intellectually challenged youth (Verdugo, Bermejo, & Fuertes, 1995). Similarly, Sullivan and Knutson (1998) found that 64% of 2,209 child abuse cases involved children with special needs.

Parental stress disrupts effective parenting practices and ineffective parenting further exacerbates childhood aggression (Levac et al., 2008). Parents’ distress is heightened by childhood behavior problems (Sameroff, 1995), which results in children exhibiting more frequent and severe behavior problems (Sameroff, 1995; Patterson, 1988). Children who have coercive and rejecting relationships with their parents are more likely to be aggressive and have increase conduct problems (Didden, et al., 2002). Parent stress has also been shown to contribute to child sleep problems, as highly stressed parents are unable to provide the consistency needed to train or maintain needed bedtime limits (Ferber, 1986; Sweeney et al., 2003). According to Osofsky (2002), parental feelings of helplessness and frustration with their inability to protect their children may be communicated to the child and further damage the child’s sense of well-being. This may be particularly true of African American parents.
who at times may certainly need to protect their children from the hurts of society because of race.

**Parental Stress in African American Families.** Although most stressors (i.e., health care, education, discipline, and finances) are universal to parents, as they may influence the parents’ ability to care give and in turn the child’s ability to thrive, African American parents have a unique and additional task to add to the already difficult mix. They must face the inevitability that their children will be subjected to racism. Though it is unlikely that racist encounters will occur as early as infancy, the likelihood will increase as the child encounters life outside of the home, in response to the developmental demands of daycare, grade school, and social activities.

Throughout history, African Americans’ cultural experiences have been punctured with racism and unequal treatment. It has been documented as early as the days of slavery when countless men and women risked life and limb escaping their plantations to reconnect with their families. Although slavery was abolished more than 140 years ago, the fight for equality has continued to be pursued for centuries. Several occurrences in the last decade however, have stifled the progress. For example, 12 years ago, with the dragging death of James Byrd in Jasper, Texas, the 1999 murder of Amadou Diallo, who as a result of racial profiling was struck 19 times after police officers fired 41 rounds at him, and 23 year-old Sean Bell who was killed in 2006 hours before his wedding after 50 rounds of police ammunition were fired into his car for being suspected of gun possession although no gun was found. A study in 2002, (Taylor & Turner) found that African American high school students reported higher levels of stress and more frequent exposure to discrimination. These findings may shed light on the 2007 controversy that took place in Jena, Louisiana. This
involved six African American high school students being charged with attempted murder when they retaliated against European American classmates who brandished a gun and tied nooses from a tree. During that same year a noose was found at the University of Maryland, and another at Columbia University. And already in 2010, two more nooses have been found, one at University of San Diego and the other at Western Connecticut.

Parental stress seems to have insidious effects on family functioning. African American women with moderate to high levels of parental stress have been associated with clinically significant maternal mental health symptoms, less effective parenting behaviors, and children's emotional and behavioral problems. Additionally, the children of these mothers reported the highest levels of depressive symptoms, suggesting that the children were in fact, harder to manage because of their own levels of distress rather than simply being perceived as more difficult (Hughes & Huth-Bocks, 2007).

Based on the recent racially motivated atrocities and a history of mistreatment and discrimination, African American parents have an extra burden that goes beyond the daily hassles of being a parent which serves as a subsequent stressor. They must prepare their children for the possibility of discrimination based on their race, by racially socializing them. This additional task involves communicating behaviors and messages to enhance their sense of racial identity, partially in preparation for their own imminent racist encounters (Fischer & Shaw, 1999). To date, there has been no research conducted exploring the relationship between parental stress and racial socialization. However, based on the literature available regarding the concepts individually, it stands to reason that there may indeed be a link.

Bowen-Reid & Harrell (2002) found that encounters seen as racist or deemed stressful “positively correlated with somatic complaints (i.e., headaches, chest pains, nausea,
etc.), negative affect (depression, anxiety, hostility, psychoticism, obsessive-compulsive, paranoia), and overall psychological distress (p.20).” Given these deleterious effects, the fact that racist discrimination is inevitable, and the possibility that their children will be subjected to some of these effects if faced with racist encounters, African Americans’ parental stress may be impacted, as it would be remiss not to discuss the issue of race with their children. Not only must it be discussed, but research has shown that being racially socialized may moderate some of the effects of the racist encounters (Demo & Hughes, 1990; O’Conner et al., 2000; Stevenson, 1995). This places pressure on African American parents thereby affecting parental stress because it is an additional task that must be completed. Further, if racial socialization is not done appropriately or effectively, the child is left unprepared for racist encounters. The resulting negative toll on the children may be substantial, which in turn may alter African American parents’ levels of parental stress.

**Racial Socialization**

More than 20 years ago, researchers first suggested that an integral and obvious element of parenting for ethnic minority families is communicating to one’s children about ethnicity and race. Shortly after this revelation, the first articles on this topic described parents’ concerns about their children encountering racism and their subsequent focus of promoting self-esteem, instilling racial pride, and preparing children for bias (Peters & Massey, 1983; Richardson, 1981; Spencer, 1983; Tatum, 1987). The next direction of this literature focused on the socialization processes, practices, and consequences for children and adolescents among various ethnic minority groups.

Various research has examined the content of racial socialization messages, four of which are most common. These include cultural socialization, preparation for bias, promotion of mistrust, and egalitarianism and silence about race.
Cultural socialization. This parental practice involves teaching children about their racial or ethnic heritage, promoting cultural customs and traditions, and promoting children’s cultural, racial, and ethnic pride, either consciously or implicitly (Boykin & Toms, 1985; Hughes, Bachman, Ruble & Fuligni, 2006; Hughes & Chen, 1999; Thornton et al., 1990; Umana-Taylor & Fine, 2004). This idea is similar conceptually with other well-established social science constructs such as enculturation, and it has been central to researchers’ thoughts regarding parental influences on children’s ethnic and racial identity formation (Bowman & Howard, 1985; Hughes & Chen, 1997; Knight, Bernal, Cota, et al., 1993; Knight, Bernal, Garza, 1993; Ou & McAdoo, 1993; Sanders Thompson, 1994; Spencer, 1983; Stevenson, 1994; Thornton et al., 1990).

African American families reported utilizing cultural socialization with their children between 33% (Marshall, 1995) and 80% or more (Caughy, O’Campo, Randolph, & Nickerson, 2002; Coard, Wallace, Stevenson, & Brotman, 2004; Hughes, 2003; Hughes & Chen, 1997; Hughes & Johnson, 2001). Studies have shown that promoting pride, cultural knowledge, and cultural traditions are among the first things parents mention when asked open-ended questions about ethnic-racial socialization. For example, roughly 40% of a nationally representative sample of African American adults who participated in the National Survey of Black Americans (NSBA; Jackson & Gurrin, 1997) mentioned themes related to racial pride and heritage in response to open-ended questions about their ethnic-racial socialization practices (Demo & Hughes, 1990; Thornton et al., 1990), as did 23% of the NSBA youth sample (Bowman & Howard, 1985). One in 6 African American adults in Sanders Thompson’s, (1994) study mentioned messages about cultural pride when asked to
reflect retrospectively on messages about race that they had received in their families of origin.

**Preparation for Bias.** In addition to promoting the African American culture to their children, another common tactic used by African American parents’ that has been emphasized as a critical component of ethnic-racial socialization is to provide their children with the awareness of discrimination and prepare them to cope with it (Hughes et. al., 2006; Hughes & Chen, 1999). Few studies of ethnic-racial socialization have included measures pertaining to preparation for bias. However, qualitative studies often identify discussions about discrimination as a theme that emerges in parents’ narratives as well (Tatum, 1987; Urciuoli, 1996; Ward, 1991).

Overall, studies suggest that few parents spontaneously mention discussions with their children about discrimination in response to open-ended questions about socialization. It is unclear whether this is because preparation for bias is less salient to parents than are other ethnic-racial socialization themes or because interviews about it with relative strangers are too uncomfortable to discuss. In the NSBA, 8% of parents and 13% of youths mentioned messages to children about racial barriers in response to questions about what parents taught about being Black (Bowman & Howard, 1985; Thornton et al., 1990). Preparation for bias is more prevalent among African American parents in studies comparing them with parents from other ethnic and racial backgrounds. As Ward (1991) observed, preparation for bias among African American families may be part of a set of indigenous child-rearing strategies, transmitted intergenerationally, that emanate from shared knowledge regarding historical experiences of oppression.
Promotion of mistrust. This refers to practices that emphasize the need for wariness and distrust in interracial interactions (Hughes et al., Hughes & Chen, 1999). Mistrust may be communicated in parents’ cautions or warnings to children about other racial groups or in their teachings about barriers to success. Hughes and colleagues have argued that, conceptually and empirically, messages that promote caution and wariness about other groups can be differentiated from preparation for bias messages in that they contain no advice for coping with or managing discrimination (Hughes & Chen, 1997; Hughes & Johnson, 2001).

Themes related to promotion of mistrust rarely emerge in response to open-ended questions, and parents rarely endorse items assessing promotion of mistrust in survey-based studies. For example, fewer than 3% of NSBA participants mentioned that they instructed their children to maintain social distance from European Americans as a strategy for ethnic-racial socialization (Thornton et al., 1990). However, themes of mistrust have emerged in numerous qualitative studies, which suggests that a subset of parents transmit these types of messages to their children. In Coard et al.’s (2004) intensive interviews with African American parents, messages that taught defensive racial procedures and emphasized social distance and mistrust emerged for roughly one-third of the sample. In Hughes and DuMont’s (1993) focus groups with African American parents, discussions about encouraging children’s vigilance in interactions with White peers and adults, and about the need to maintain social distance and skepticism in relationships with them, emerged in every group. Whereas, a more recent study (Lee, 2008) found that parents were less likely to utilize the promotion of mistrust strategies despite having been taught that themselves.
**Egalitarianism and Silence About Race.** Many parents either openly encourage their children to value individual qualities rather than racial group membership or avoid any mention of race in discussions with their children (Spencer, 1983). The term *mainstream socialization* was coined by Boykin and Toms (1985) to refer to strategies of this sort, because rather than orienting youths toward their native culture or toward their minority status, youth are oriented toward developing skills and characteristics needed to thrive in settings that are part of the mainstream, or dominant, culture. These types of ethnic-racial socialization strategies have also been referred to as egalitarianism and silence about race.

Studies have suggested that egalitarianism is significant to parents and prevalent across multiple ethnic groups. In individual and focus-group interviews, many African American parents have said that emphasizing hard work, virtue, self-acceptance, and equality is the primary ethnic-racial socialization strategy that they use (Demo & Hughes, 1990; Hughes & DuMont, 1993; Marshall, 1995; Thornton et al., 1990). In qualitative studies using binary survey questions to assess egalitarianism, more than two-thirds of parents from multiple ethnic groups (including African American, White, and Latino) report egalitarianism (Hughes & Chen, 1999; Phinney & Chavira, 1995).

Silence about race has not typically been examined as an explicit dimension of ethnic-racial socialization, although failure to mention racial issues also communicates race-related values and perspectives to children. As a result, estimating silence about race has been somewhat difficult. When estimates of silence about race are based on an inverse of the percentage of parents who report other ethnic-racial socialization strategies, the percentage is small (i.e., Caughy et al., 2002; Frabutt et al., 2002; Hughes & Chen, 1999). However, when parents are asked open-ended questions about the strategies they use, a significant minority
Racial Socialization as related to African American Outcomes

Racial socialization has primarily been examined with regard to youth outcomes, however the literature is somewhat limited. The range of outcomes however, has included, ethnic identity, self-esteem, coping with prejudice and discrimination, academic outcomes, and psychosocial outcomes.

Ethnic identity. In early studies conducted among African American families, several factors have been associated with children’s more Afrocentric and less Eurocentric racial attitudes. For example, parents’ own racial attitudes (Branch and Newcombe, 1986); the values they place on teaching children about history, civil rights, and discrimination (Spencer, 1983); and worldviews combining a system-blame orientation, support for collective action, and involvement in the community (Barnes, 1980). These have all been assessed through the use of projective techniques. In more recent work, Marshall (1995) found that African American parents who reported more ethnic-racial socialization had children who were more likely to express racial identity views characterized by W.E. Cross’s (1991) encounter stage, characterized by questioning allegiance to the dominant culture’s worldview. Cultural socialization has been associated with identity exploration, more advanced stages of identity development, more positive group attitudes, and more group-oriented ethnic behaviors among African American adolescents and adults (Demo & Hughes, 1990; O’Conner et al., 2000; Stevenson, 1995). Preparation for bias has also been associated with youths’ identity development. For example, adolescents who believe more strongly in
the importance of teaching about racism are more likely than their counterparts to exhibit more advanced stages of ethic-racial identity development (Stevenson, 1995).

**Self-esteem.** Constantine and Blackmon (2002), found that preparation for bias and cultural socialization were associated with higher family self-esteem, cultural socialization was associated with higher peer self-esteem, and mainstream socialization was associated with lower school self esteem. The positive association between cultural socialization and peer esteem suggests that cultural socialization may facilitate youth academic competence and confidence in interacting with their like aged peers.

**Coping with Prejudice and Discrimination.** Cultural socialization has been found to strengthen youths’ resilience in the face of discrimination through its influences on self-esteem and ethnic identity (Barnes, 1980; Branch & Newcombe, 1986; Spencer, 1983). In a 1994 study, of 41 parent-child dyads in middle-class African American families, Johnson, found that parents’ preferences for how children should cope with discrimination were associated with children’s actual coping behaviors. For instance, children whose parents believed children should respond proactively to racial situations (engaging the person, asserting oneself, or getting parental help) were least likely to use passive coping strategies or strategies that indicated internalized racism. Adolescents whose parents communicate with them about discrimination (preparation for bias) have also been found to demonstrate more effective strategies for coping with it. For example, when asked about ways they would cope with hypothetical situations involving discrimination, these adolescents were more likely to describe proactive strategies such as seeking support and using direct problem-solving strategies (Phinney & Chavira, 1995; Scott, 2003), and they were less likely to describe ineffective coping strategies such as engaging in verbal banter (Phinney & Chavira, 1995)
**Academic Outcomes.** Racial socialization has been found to be a significant positive predictor of academic adjustment. Therefore, receiving these messages while growing up contributes to being able to experience positive aspects of academic adjustment (Anglin & Wade, 2007). A positive ethnic identity and high self-esteem have been positively associated with youths’ academic orientations and outcomes (Chavous et al., 2003; Wigfield & Eccles, 1994). In addition, certain types of messages, such as preparation for bias, may lessen adolescents’ vulnerability to stereotype-types about their groups’ intellectual capabilities, which in turn influence performance and achievement (Mendoza-Denton, Downy, Purdie, Davis, & Pietrzak, 2002; Steele & Aronson, 1998). In the three-generation NSBA study, youths who were taught about racial barriers reported higher grades in school than did youths who were taught nothing about race (Bowman & Howard, 1985).

**Psychosocial outcomes.** Cultural socialization was associated with fewer total behavior problems and fewer internalizing and externalizing behavior problems among African American boys, and marginally among African American girls (Caughy et al., 2002). In a study by Steven et al. (1997) girls with higher global racial socialization scores reported less frequent sad mood and less hopelessness. In a study of Asian and Black adolescents who expected that others would discriminate against them reported more depressive symptoms and greater conflict with their parents than those who did not express such expectations (Rumbaut, 1994).

**Statement of the problem**

Racial socialization has been referred to as the responsibility African American parents have to raise well-adjusted children in a society where being Black has negative consequences and connotations (Peters, 1981) and where racism will likely continue to
plague the lives of African Americans. Though racial socialization has been identified as a mechanism that lessens the effects of racist experiences, not utilizing this may come at a cost. For example, African Americans who reported low levels of racial socialization experiences, were associated with poorer overall mental health, this effect was attenuated for those with high levels of racial socialization (Fischer & Shaw, 1999).

There has been an increase in scholarly interest with regard to racial socialization due to a phenomenon that has been referred to as the “browning of America.” According to the US Census Bureau (2004), by 2035, children of color are projected to make up 50% of the US population. Therefore researchers, academicians, and parents need to know about the processes that enable children to navigate situations characterized by high racial, ethnic, and cultural diversity. However, a review of the racial socialization literature revealed the lack of a clear operational definition of the construct. Some scholars suggest promoting cultural pride (Bynum, Burton, & Best, 2007) others purport cultural, physical, and sociopolitical identity (Sanders-Thompson, 1994) yet others contend the themes should be related to racism preparation, racial pride, racial equality, and racial achievement (Coard et al., 2004).

Regardless of the method, racial socialization has been shown to improve child outcomes and this pressure to teach it places enormous responsibility on the part of the parents. Given the importance of these teachings, the uncertainty of how they may be best accomplished, and the belief that they will need to be utilized more often, racial socialization needs to be examined with regard to its effect on African Americans’ parental stress. Therefore this project seeks to examine the effect of racially socializing ones’ children has on the African American parents’ well-being, specifically, with regard to parental stress.

Hypotheses
1. African American parents beliefs about racially socializing their children, will account for a significant portion of variance in parental stress after controlling for mood.
2. A racial socialization intervention would significantly reduce parental stress from pre-test to post-test as compared to the control and comparison groups.

Method

Participants
Participants were 159 African American mothers who have primary custody of at least one child aged 5 to 10 living in the Maryland, Virginia, and Washington, DC area. According to established guidelines governing behavioral science research (Cohen, Cohen, West, & Aiken, 2003), in order to detect a medium effect size ($f^2 = .15$) based on a power level of .80, and alpha of .05, and the number of predictor variables, a sufficient sample size was 159 (roughly 53 per condition).

Procedure
One hundred fifty-nine self-identified African American mothers were solicited via email from several social and civic organizations. One hundred percent were African American females, with ages ranging from 34-46 and at least one child between the ages of 5 and 10. Their reported educational levels were as follows: High school diploma (2%), Some college (4%), College degree (28%), Some graduate school (12%), and a Graduate degree (55%). The participants’ income levels were reported as: $25,000-$34,999 (2%), $35,000-$44,999 (8%), $45,000-$59,999 (13%), Greater than $60,000 (77%). The investigator recruited participants by contacting the leadership and asking that an email by sent to all members who met the study criteria and encouraging them to tell others who may be interested in participating. To be considered for participation mothers had to be at least 18 years of age and demonstrate adequate proficiency in the English language by having the ability to read at an 8th grade level. The participants were asked to read and sign an informed consent.
consent form explaining that participation is completely voluntary, and they may discontinue at any time without penalty. The participants were also told that three $50 gift certificates were being raffled off at the end of the study for those individuals who have completed all study procedures. Once the participant agreed to take part in the study via consent form, the researcher emailed the web link to Survey Monkey to compete the study measures, which took approximately 45 minutes to complete.

Participants were randomly assigned to one of three groups: the control group (A), the experimental group (B), and the comparison group (C), group assignment determined specific study procedures (see Figure 1). As a new participant was identified, they were assigned a number of 1, 2 or 3. This pattern repeated for every three participants. Those who were given a 1 were assigned to the control group, an assignment of 2 signified the experimental group, and 3 identified a comparison group participant. Once the participants were assigned, those assigned to the control group (A) received a demographic questionnaire which included information regarding the mother’s age, ethnicity, highest level of completed education, approximate annual household income, marital status, and child’s age; the Parental Stress Index-Short-Form (PSI-SF, Abidin, 1995) which measured parental stress; the Profile of Mood States which measured affect; and the Scale of Racial Socialization-Parent Version (SORS-P) which measured parents’ level of racial socialization. Once these were administered, the participant read a parenting lesson on psychosocial development. After the lesson, they were given a non-race related vignette that involved their child and told to spend 5 minutes writing how they would explain to their child what happened. This was followed by a second administration of the Parental Stress Index, the Profile of Mood States, and the Scale of Racial Socialization-Parent-version (SORS-P).
Participants assigned to the experimental group (B) received the demographic questionnaire, the Parental Stress Index-Short Form (PSI-SF, Abidin, 1995), the Profile of Mood States, and the Scale of Racial Socialization-Parent Version (SOR-S-P). Once these were administered, they read a parenting lesson on racial socialization. After the lesson, they were given a racially-motivated vignette that involved their child and told to spend 5 minutes writing how they would explain to their child what happened. This was followed by a second administration of the Parental Stress Index, the Profile of Mood States, and the Scale of Racial Socialization-Parent-version (SOR-P). The measures were re-administered to determine whether the participants’ mood and level of parental stress has been moderated by the intervention.

Participants assigned to the comparison group (C) received the demographic questionnaire, the Parental Stress Index-Short Form (PSI-SF, Abidin, 1995), the Profile of Mood States, and the Scale of Racial Socialization-Parent Version (SOR-P). Once these were completed, they read a parenting lesson psychosocial development. After the lesson they were given the racially-motivated vignette that involved their child and told to spend 5 minutes writing how they would explain to their child what happened. This was followed by a second administration of the Parental Stress Index, the Profile of Mood States, and the Scale of Racial Socialization-Parent-version (SOR-P). The measures will be re-administered to determine whether there has been in a change in the participants’ mood or level of parental stress.
Figure 1. Study procedures according to group assignment

**Measures**

**Demographics:** Maternal demographics were assessed, specifically, mother’s age, ethnicity, level of education, household income, and marital status. In addition, information regarding the child, such as the child’s age, grade (if applicable), an estimate of the school ethnicity demographics, and social activities along with ethnic demographics. (See Appendix A).

**Parental Stress.** Parental stress was measured by the Parenting Stress Index-Short Form (PSI-SF) (Abidin, 1995), a 36-item parent questionnaire derived directly from a factor analysis of the full-length Parenting Stress Index (PSI). This assesses stress in the parent-child relationship for children between the ages of 1 and 12. The questionnaire consists of
statements rated on a five-point Likert-scale (ranging from strongly disagree to strongly agree). Parents are asked to respond to items such as “Since having a child, I feel that I am almost never able to do things that I like to do.” The PSI-SF was chosen because it is a widespread assessment tool that does not require presence of a clinician for its administration, and it can be completed quickly.

The instrument produces a total score (total stress), as well as scores for three subscales: parental distress (PD), which measure distress related to the parenting role; parent-child dysfunctional interaction (P-CDI), which focuses on disappointment in the alienation from the parent-child bond; and difficult child (DC), which assesses the child’s difficult behaviors. The score range of each subscale is 12 -60. The items within each of the three subscales are summed to quantify total stress; higher scores indicate higher levels of parenting stress, signaling risk for dysfunctional parenting behaviors or behavior problems in the child.

The PSI-SF is a reliable and valid assessment tool (Abindin, 1995). The alpha reliability coefficients are 0.87, 0.80, and 0.85 for the PD, P-CDI, and DC subscales, respectively, and 0.91 for the 36-item total stress score. The test-retest reliability values for a six-month retest interval are 0.85, 0.68, and 0.78 for the PD, P-CDI, and DC subscales, respectively, and 0.84 for the thirty-six-item total stress score. Recent studies have demonstrated the PSI-SF’s concurrent validity with measures such as the Brief Symptom Index, the Symptom-Checklist-90-Revised’s Global Severity Index, the Conflict Tactics Scale, the Eyberg Child Behavior Inventory, and observation of sensitive parenting and positive child behavior using the Qualitative Ratings of Parent-Child Interactions (Haskett et al., 2006; Reitman, Currier, & Stickle, 2002). Additional support for the PSI-SF’s validity is
provided by a correlation (0.94) between the full-length PSI total stress score and the PSI-SF total stress score, as the full-length PSI has an extensive body of research supporting its validity for assessment in subject areas such as attachment, childhood behavioral problems, child and parent psychological adjustment, and at-risk families (Abindin, 1995). (See Appendix B). Cronbach’s alpha for the current sample was .91.

**Mood states.** Affective mood states was be measured by the Profile of Mood States-Brief (POMS-B, McNair, Lorr, & Droppleman, 1971, 1992). The POMS-B is a self-report questionnaire developed to assess transient, fluctuating affective mood states. It is the only authorized brief version of the POMS, which measures six mood or affective states, including tension-anxiety, depression-dejection, anger-hostility, vigor-activity, fatigue-inertia and confusion-bewilderment. It was developed in 1989 because of a demand for a shorter form for medical specialties where physically ill patients. The POMS-B is a 30-item form that takes five minutes to complete. It has five items for each of the six POMS factors The selected items had the highest mean factor loadings in the six studies used in the development of the POMS is a reliable and valid measure of subjective mood states that has been used extensively in a wide variety of studies. The internal consistency reliabilities on all of the indices range from .84 to .95. The test-retest reliabilities for the six factors range from .65 to .74. The respondents must endorse the extent to which they are experiencing any of the listed feelings on a scale from 0 (*Not at all*) to 4 (*Extremely*). (See Appendix C). Cronbach’s alpha for the current sample was .85.

**Racial Socialization.** Racial socialization was be measured by the Scales of Racial Socialization-Parent Version (SORS-P, Stevenson, 2004) is a 45-item self-report measure designed to assess views of racial socialization parenting practices. Participants rate their
agreement with items such as “Teaching children about Black History will help them to survive a hostile world” on a 5-point Likert-type scale ranging from 1 (strongly disagree) to 5 (strongly agree). Means across items are calculated, with higher scores reflecting greater racial socialization beliefs. Reliability and validity information is not yet available (See Appendix D). Cronbach’s alpha for the current sample was .75.

**Hypothesis Testing**

**Hypothesis 1.** African American parents’ beliefs about racially socializing their children will account for a significant portion of variance in parental stress, after controlling for mood.

*Analysis of Hypothesis 1.* A hierarchical multiple linear regression was conducted to determine whether racial socialization beliefs predict parental stress after controlling for mood.

**Hypothesis 2.** A racial socialization intervention would significantly reduce parental stress from pre-test to post-test as compared to the control and comparison groups.

*Analysis of Hypothesis 2.* A preliminary MANOVA was run to determine if there was a significant difference between groups’ baseline levels of mood and racial socialization beliefs. Ran a (2 X 3) Time (pre-test and post-test) X Group Assignment (intervention, comparison group, control) mixed design ANCOVA, with baseline scores on mood disturbance and racial socialization beliefs as covariates and parental stress as the dependent variable.

**Results**

This study investigated the effect of racial socialization on parental stress in African American parents. This chapter includes a presentation of descriptive statistics and
quantitative results from a hierarchical multiple regression, and a (2 X 3) mixed design ANCOVA. All statistical analyses were applied to the dependent variable, parental stress, as measured by the PSI. In the hierarchical multiple regression, the predictor variables were racial socialization as measured by the SORS-P, and mood, which was measured by the POMS-B. Bivariate correlations were run and the results indicated that baseline measures of mood and racial socialization beliefs were not correlated, \( r = -.03, p = .68 \). Also, based on examination of a scatterplot of the residuals, assumptions of linearity and homoscedasticity were met. Multivariate outliers were assessed using Mahalanobis’ Distance, and no multivariate outliers were found.

In the ANCOVA, the predictor variables included a) time as the with-in subjects independent variable, b) group assignment as the between-subjects variable, and c) baseline scores of racial socialization beliefs and mood were included as covariates. Multivariate outliers were assessed using Mahalanobis’ Distance, and no multivariate outliers were found. There was an absence of multicollinearity and singularity for the covariates, and after running the bivariate correlations, it was found that baseline measures of mood and racial socialization beliefs were not correlated, \( r = -.03, p = .68 \).

Means and standard deviations for all variables are reported in Table 1. The data were first checked for normality, missing data, and outliers. There were no cases of missing data, and skewness and kurtosis was examined for all variables. Racial socialization scores as measured by the SORS-P, and parental stress, as measured by the PSI, were normally distributed. The POMS-B, which measured mood disturbance, showed slight deviations in normality (i.e., skewness or kurtosis statistics slightly above one). Therefore, three values on each scale were transformed to match the highest or lowest value in the range of normal
distribution. All outliers however, fell within the range of expected values, and thus are thought to represent true responses. The range and deviations were not large enough to require transformation. As such, they were retained in subsequent analyses.

**Descriptives**
Tables 1-4 summarize demographic characteristics for the entire sample by group assignment. Table 5 presents the means and standard deviations for all measures at pre-test and post-test.

Table 1

*Mothers age by group assignment*

<table>
<thead>
<tr>
<th>Mother’s Age</th>
<th>Group A</th>
<th>Group B</th>
<th>Group C</th>
</tr>
</thead>
<tbody>
<tr>
<td>34</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>35</td>
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<td>3</td>
<td>4</td>
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<td>37</td>
<td>7</td>
<td>6</td>
<td>4</td>
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<td>38</td>
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<td>39</td>
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<td>1</td>
<td>0</td>
</tr>
<tr>
<td>46</td>
<td>1</td>
<td>0</td>
<td>0</td>
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</tbody>
</table>

Table 2

*Child’s age by group assignment*

<table>
<thead>
<tr>
<th>Child’s Age</th>
<th>Group A</th>
<th>Group B</th>
<th>Group C</th>
</tr>
</thead>
<tbody>
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<td>12</td>
<td>9</td>
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<tr>
<td>7</td>
<td>8</td>
<td>6</td>
<td>0</td>
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<tr>
<td>8</td>
<td>13</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td>9</td>
<td>3</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>10</td>
<td>13</td>
<td>10</td>
<td>11</td>
</tr>
</tbody>
</table>
Table 3

_Mother's educational level by group assignment_

<table>
<thead>
<tr>
<th>Level of Education</th>
<th>Group A</th>
<th>Group B</th>
<th>Group C</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School Diploma</td>
<td>0</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Some College</td>
<td>0</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>College Degree</td>
<td>15</td>
<td>19</td>
<td>10</td>
</tr>
<tr>
<td>Some Graduate School</td>
<td>6</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Graduate Degree</td>
<td>32</td>
<td>25</td>
<td>30</td>
</tr>
</tbody>
</table>

Table 4

_Annual income by group assignment_

<table>
<thead>
<tr>
<th>Annual Income</th>
<th>Group A</th>
<th>Group B</th>
<th>Group C</th>
</tr>
</thead>
<tbody>
<tr>
<td>$25,000- $34,999</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>$35,000- $44,999</td>
<td>3</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>$45,000- $59,999</td>
<td>6</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>$60,000+</td>
<td>41</td>
<td>38</td>
<td>43</td>
</tr>
</tbody>
</table>

Table 5

_Means and Standard Deviations of PSI, POMS, SORS-P at Pre-test and Post-Test_

<table>
<thead>
<tr>
<th>Variable</th>
<th>Pre-test</th>
<th>Post-test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Range</td>
<td>M</td>
</tr>
<tr>
<td>Parental Stress</td>
<td>38 - 100</td>
<td>63.10</td>
</tr>
<tr>
<td>Mood</td>
<td>-14 - 62</td>
<td>6.52</td>
</tr>
<tr>
<td>Racial Socialization</td>
<td>141 - 198</td>
<td>173.00</td>
</tr>
</tbody>
</table>

**Hypothesis 1**

The first hypothesis stated that African American parents beliefs about racially socializing their children, as measured by the SORS-P, would account for a significant portion of variance in parental stress (as measured by the PSI) after controlling for mood (as
measured by the POMS).

A hierarchical multiple linear regression was conducted to determine whether racial socialization beliefs predict parental stress after controlling for mood (Table 3). At step 1, total mood disturbance (POMS-B) was entered to control for the relationship between mood and parental stress (PSI-SF). The results of this analyses revealed that mood significantly predicted parental stress $F(1, 157) = 91.54, p < .001, R^2 = .37$. At step 2, racial socialization was added to the model to determine if it accounted for a significant proportion of the variance in parental stress over and above mood. When racial socialization was added at step 2, it was found that racial socialization beliefs accounted for an additional significant proportion of the variance in parental stress. $\Delta R^2 = .05, F(1, 156) = 12.50, p < .001$.

Therefore, Hypothesis 1 was supported.

Table 6

| Summary of Hierarchical Multiple Regression Analysis for Variables Predicting Parental Stress ($N = 159$) |
|-------------------------------------------------|------------------|-------------------|
| $B$ | $SE$ | $\beta$ |
| **Step 1** | | |
| Mood | .56 | .06 | .61*** |
| **Step 2** | | |
| Mood | .55 | .06 | .60*** |
| Racial Socialization | -.26 | .07 | -.22*** |

Note. Step 1, $R^2 = .37, F(1, 157) = 91.54**. Step 2, $\Delta R^2 = .05, F(2, 156) = 55.37**. * p < .05. ** p < .01. *** p < .001.

Hypothesis 2

It was also hypothesized that a racial socialization intervention would significantly reduce parental stress from pre-test to post-test as compared to the control and comparison groups.

A preliminary MANOVA was run to determine if there was a significant difference
between groups’ baseline levels of mood and racial socialization beliefs. There was a multivariate main effect for group assignment on baseline measures of mood and racial socialization beliefs, Pillai’s trace $F = (4, 312) = 5.80, p < .001$. At the univariate level, there was a significant main effect for group assignment on baseline mood, $F(2, 156) = 5.32, p = .006$. There was also a univariate main effect for group assignment at baseline on racial socialization beliefs, $F(2, 156) = 6.47, p = .006$. Therefore, baseline measures of mood and racial socialization beliefs were included as covariates in the main analysis.

Hypothesis 2 was tested by running a (2 X 3) Time (pre-test and post-test) X Group Assignment (intervention, comparison group, control) mixed design ANCOVA, with baseline scores on mood disturbance and racial socialization beliefs as covariates and parental stress as the dependent variable. Thus, particular attention is paid to the interaction effect between time and group assignment, to determine whether changes in parental stress from pre-test to post-test differed between the intervention group and the comparison and control groups. However, all main effects and interaction effects are reported.

There was a significant main effect for time on parental stress. Specifically, parental stress scores decreased from pre-test to post-test across all conditions and holding the covariates constant, $F(1,154) = 6.76, p = .01$. There was no interaction effect between the covariate baseline mood and time on parental stress, $F(1, 154) = 2.35, p = .13$. This suggests that changes in parental stress from pre-test to post-test did not depend on baseline mood scores. There was a significant interaction between and the covariate baseline racial socialization beliefs and time on parental stress, $F(1,154) = 8.97, p = .003$. This illustrated that changes in parental stress from pre-test to post-test depended on parents’ baseline racial socialization belief scores.
To test Hypothesis 2, a significant interaction effect was found between time and group assignment on parental stress, $F(2, 154) = 9.41, p < .001$. As predicted, changes in parental stress from pre-test to post-test depended on the group assignment. The means of each group’s score on parental stress at pre-test and post-test are found in Table 4.

Hypothesis 2 was supported.

Table 7

*Means and Standard Errors of Parental Stress at Pre-test and Post-Test Differentiated by Intervention Group Assignment*

<table>
<thead>
<tr>
<th></th>
<th>Pre-test</th>
<th>Post-test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$M$</td>
<td>$SE$</td>
</tr>
<tr>
<td>Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Control Group</td>
<td>59.16</td>
<td>1.55</td>
</tr>
<tr>
<td>Intervention Group</td>
<td>65.19</td>
<td>1.58</td>
</tr>
<tr>
<td>Comparison Group</td>
<td>64.91</td>
<td>1.57</td>
</tr>
</tbody>
</table>

**Discussion**

The primary goal of this study was to explore the effect of racial socialization on parental stress in African American parents. Specifically, the investigator was interested in whether racial socialization accounts for a significant proportion of the variance in scores on parental stress after controlling for mood. Also under examination was whether a racial socialization intervention would significantly reduce parental stress from pre-test to post-test as compared to the control and comparison groups. This was done by randomly selecting 159 participants in to one of three test groups (control, experimental, and comparison) and then administering a measure of racial socialization (SORS-P); Parental stress (PSI), and affective mood state (POMS-B) to get pretest scores. Based on their group assignment, the subjects were then provided one of two parenting lessons (psychosocial or racial
socialization), a vignette for which to respond (ether racially motivated or non-racially motivated), and then a second administration of the SORS-P, PSI, and POMS-B to secure posttest scores.

The findings of this research project support both hypotheses. Racial socialization does account for a significant proportion of the variance in parental stress while controlling for mood in African American mothers. That is to say, as beliefs about racial socialization increase, parental stress seems to decrease. Additionally, a significant interaction was found effect between time and group assignment on parental stress. Specifically, changes in parental stress from pre-test to post-test did in fact depend on the group assignment.

To the best of our knowledge, this study is the first to examine the relationship between racial socialization and parental stress, which in and of itself is significant because it explores an area that appears to be unchartered. However, what laid the foundation for this work was the separate literatures on racial socialization and parental stress. The results of this study suggest that high racial socialization beliefs may lead to lower parental stress. This may be explained quite simply. It is possible that in spite of having to face racist encounters, some African Americans actually have coping mechanisms that buffer the effects of those racist experiences. A study in 2008 (Utsey, Ponterotto, & Porter) found just that, African American parents in the face of crises relied heavily on additional group resources and spirituality. The mothers in this sample were well-educated, and did not represent African Americans with lower socioeconomic status, so it is also possible they had more advanced resources from which to pull based on that alone. Additionally, some mothers with the financial means seek to expand their children’s academic and extracurricular activities,
acknowledge the high likelihood their children will encounter others who are ethnically
diverse, and perhaps have recognize preparation is necessary.

Conversely, these findings could allow one to assume that low racial socialization
beliefs lead to an increase in parental stress. This is in line with previous literature, which has
asserted that low levels of racial socialization experiences is associated with poorer mental
health (Fischer and Shaw, 1999). This seems critical given the impact of that high levels of
parental stress has been found to have in African Americans, such as poor health practices in
adults (Taylor, et al., 2007); and negative socioemotional and behavioral outcomes for
children (Hudson, 2007).

Additionally the results of this study suggest that in contrast to the control
comparison groups, having a racial socialization intervention led to a decrease in parental
stress scores. It is believed that having this “real-life” scenario added richness to the results,
and that it may have been effective because the intervention provided the parents with
information and tools to navigate the problem.

**Strengths and Limitations**

Confidence in the results of this study is enhanced by a number of strengths of its
method and design. Foremost among these was the use of between-groups design, which
allowed the researcher to examination whether having a racial socialization intervention
increased racial socialization beliefs, and/or parental stress. Second, the sample consisted
entirely of African American women between the ages of 34 and 46, with at least one child
between the ages of 5 and 10. Thus, the results of the study are unlikely to be confounded
with effects associated with varying demographics with regard to children and age. The
rationale for selecting African American mothers with these particular demographics was in
due in part to McCreary, et al (2006), which reported that female caregivers are more likely than their younger counterparts or men to teach their children about race.

Third, while prior studies have explored the types of messages used to racially socialize, and examine the effects of racial socialization on those receiving the messages, the current study sought to determine if there are effects for those with the duty of relaying those messages, specifically in terms of parental stress.

Despite these strengths, a number of features of the current work are also limitations. It is important to note that there were baseline differences between the groups on parental stress, which may have impacted the results. The compensation offered for participation may have nullified the volunteer effect, which suggests that “true” volunteers volunteer because they are more educated and actually interest in the research, and therefore need no compensation (Gall, Borg, & Gall, 1996). Another limitation was that each scale was a self-report measure. When assessing variables that are related to parenting, self-report measures may encourage socially desirable responses. Therefore, participants may have been inclined to report a more positive parent-child relationship than may actually exist. Another limitation may be the fact that all study materials were completed online. Although, this method is more efficient and has the potential to access participants worldwide, it is also possible that interviewing the participants in person could have had a greater impact on the results.

Clinical Implications and Future Directions

These findings also have clinical ramifications that seem important to address. In a study looking at mothers’ parenting stress and the relationship to their health seeking behaviors, Golden (2007) found that African American mothers did not seek help unless their child’s problems felt difficult to manage on their own or if they felt their child was being
treated badly by others. Given that racist transgressions occur at the hands of others, mothers would likely feel that her child was being mistreated, and possibly seek professional assistance. Therefore, it is seems crucial that mental health providers be prepared for effects associated with racism to be a presenting concern, as well have an understanding of the unique dynamics present in African American families.

Given this is the first study of its kind; it is critical that other researchers attempt to replicate these findings. The women in the study were primarily recruited from Delta Sigma Theta Sorority, Incorporated, which is an international, non-profit organization founded in 1913 for college-educated African American women. This organization and its more than 200,000 members have a commitment to racial and cultural development. It seems that it would also be important to repeat this study using a sample of African American parents with less resources and who identify with lower socioeconomic status. It is also recommended that future researchers add a scale of racial identity and consider the mother’s stage of her own racial identity, as it is possible that could impact the results.
List of References


Swensen, A.R., Birnbaum, H.G., Secnik, K., Marynchenko, M., Greenberg, P., and


