Gendered Racism, Psychological Distress, and Coping Styles of African American Women

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This study explores the relationship of the accumulative effect of gendered racism, the discrimination felt by African American women, on psychological distress. The study also explores whether coping serves as a mediating variable between gendered racism and psychological distress. Over 300 African American women participated in the study and were administered the Symptoms Checklist 90, a revised version of the Schedule of Sexist Events, and the Africultural Coping Styles Inventory. A positive significant relationship between global psychological distress was found with experiences of gendered racism. Regression analyses suggest some degree of partial mediation on the relationship between gendered racism and global psychological distress via cognitive–emotional coping styles, but no mediating effects with spiritual-centered, collective, and ritual-centered coping. Suggestions for future research and implications are discussed.

Keywords: racism, psychological distress, coping, African-American women

African American women experience various forms of oppression, including a specific form, gendered racism. Essed (1991) coined the term, "gendered racism" to describe how sexism and racism "narrowly intertwine and combine under certain conditions into one, hybrid phenomenon" (p. 31). For Essed, the oppression African American women experience is structured by racist perceptions of gender roles. Gendered racism suggests that African American women are subject to unique forms of oppression due to their simultaneous "Blackness" and "femaleness." For some African American women, the experiences of being both a woman and an African American cannot be easily separated, and they may perceive discrimination due to being an African American woman in combination.

Although women in general experience sexism and harassment, the confluence of racist attitudes can lead to a different and perhaps more harmful form of sexism for Black women (Jones & Shorter-Gooden, 2003). African American women obviously experience some forms of racism that are similar to those experienced by African American men, and some forms of sexism that are similar to those experienced by White women. However, they also experience gendered racism that is unique to their particular social identities as African American and women. Because individuals are multidimensional, possessing various social identities, gendered racism provides the opportunity for a more complex understanding of experiences with oppression. The notion of gendered racism applies to men and women of all racial/ethnic minority groups. Gendered racism is demonstrated through societal stereotypic images of men and women of color. Thus, African American men are stereotypically viewed as criminals and absent fathers. Latino women are stereotypically viewed as hypersexual and promiscuous. Asian women are stereotyped as exotic and submissive. African American women are stereotyped as Mammy-figures, promiscuous, and emasculating.

Experiences of oppression of African American women have traditionally been defined in three ways. The first, the "double jeopardy" approach, holds that women experience distress due to the accumulative experience of both racism and sexism. Thus, African American women have not one, but two "strikes against them" due to their race and sex. St. Jean and Feagin (1998) explain that African American women experience the "'double-jeopardy'" condition of having to deal with both racism and sexism but also the commonplace condition of unique combinations of the two . . . . This real-world blending often makes it difficult to know the separate contributions of each element in particular situations that involve both racial and gender barriers to social mobility and personal achievement" (p. 16). Research in this area often tests the separate experiences of racism and sexism in women's lives as if they are independent processes or hold one variable, race or gender, as a constant in examining psychological distress related to the other. For example, Klonoff and Landrine (1995) found that women of color had more psychological distress from lifetime sexist events than White women in the study. Klonoff, Landrine, and Ullman (1999) found that the combination of being a woman,

having greater stress, and facing greater racial discrimination predicted increased psychiatric symptoms for African American women. The "double jeopardy" approach has limitations because it treats each area of oppression as equal, does not adequately address social inequalities, and artificially establishes a "hierarchy of difference" around areas of oppression (Anderson & Collins, 2004). The double jeopardy approach is often researched because it does not "confound" variables that may occur by attempting to combine racism and sexism in a unique form (Reid & Comas-Diaz, 1990).

The second approach to the definition and study of racism and sexism in African American women is the interactional effect of the experiences on distress. This premise holds that racism and sexism interact in a unique way. For instance, Moradi and Subich (2003) sought to examine the interactional effects of racism and sexism on the psychological functioning of African American women. Women were surveyed to determine whether the interaction of racism and sexism contributed more to variance in psychological symptoms than the unique effect of each independently. They found that although racism and sexism were strongly correlated to each other and psychological symptoms, only sexism contributed uniquely to psychological distress. The authors concluded that racism and sexism have an additive or multiplicative effect for African American women. The interactional approach provides a more complex view of African American women but still tends to fragment and parcel their experience into a female one and an African American one.

The third way to view the experiences of African American women relies on an intersectional perspective. "Fundamentally, race, class, and gender are intersecting categories of experience that affect all aspects of human life: thus, they simultaneously structure the experiences of all people in this society. At any moment, race, class, or gender may feel more salient or meaningful in a given person's life, but they are overlapping and cumulative in their effect on people's experience" (Anderson & Collins, 2004, p. 7). This suggests a more holistic approach to understanding the unique experiences of African American women, one that looks at race and sex simultaneously.

Three important studies have explored the intersection of race and sex for African American women. Essed (1991) in her seminal research examined the experiences of Black women in the United States and the Netherlands. Women reported a wide variety of oppressive experiences, which included discrimination, harassment, and being disrespected. They reported being discriminated against in the workplace, in educational settings, and by service providers who often assumed criminal behavior in the women or ignored them. Forms of harassment included petty harassment (e.g., being picked on, lied about, having complaints made against them), and sexual harassment. African American women in the study reported being distressed from exposure to negative media images, patronizing attitudes from others, and rudeness. They also were exposed to oppressive jokes and talks.

Jones and Shorter-Gooden (2003) found similar experiences in a large national study of African American women, the purpose of which was to understand qualitatively how African American women experience racism and sexism simultaneously. Women reported dealing with pervasive stereotypes, including the expectation to placate and serve others, the inferiority of African American women, and sexual promiscuity. Women in the workplace experienced most of the discrimination. The women reported being discriminated against by store employees, and being mistreated by law enforcement. It should be noted that the women found it difficult to distinguish whether discrimination occurred due to race, sex, or a combination.

King (2005) examined cognitive attributions of African American women to determine the relationship between acts of discrimination and stress. Women were asked to determine whether the act was seen as a result of ethnic, gender, or "*ethgender*" discrimination. King defined "ethgender" as the unique intersection of the statuses of race and gender. She found that if women perceived the acts as negative (either ethnic or ethgender discrimination), and if the women attributed importance to the acts, that more stress was experienced. King notes that stress was not experienced when acts were perceived as only sexist, possibly as the women did not perceive sexist experiences as separate from racism. King concluded that the experiences of sexism may be so intertwined that it is impossible or irrelevant to separate sexism from racism. This study suggests that ethgender or gendered racism as a construct is experienced separately from racism and sexism, and that stress is associated with this unique experience.

Gendered racism is a unique form of oppression that occurs because of the intersection of race and gender. Gendered racism occurs from perceptions, stereotypes, or images of specific groups. One author had the experience of riding on a hotel elevator early in the morning on her way to work when a White male, also a hotel guest, turned to her saying, "You work here, what time does the breakfast start?" The man's apparently racist (and classist) views of gender roles permitted him to readily view the author as one of the service workers in the hotel. One explanation for this incident is gendered racism, as the man's blended race-gender stereotype was activated. It is doubtful that the event would have occurred in the same manner for an African American male or a White female. Radio talk show host Don Imus' recent comments regarding African American women on the Rutgers University basketball team were not simply racist or sexist in nature, but reflected gendered racism because he denigrated both their race and their sex simultaneously.

The experience of gendered racism has not received much attention in the literature. One reason for the dearth of research in this area comes from difficulties in research methodology. To assess the influence of the interactive effect of racism and sexism, each construct would have to be measured separately. For instance, Reid and Comas-Diaz (1990) argue that only one variable is studied in order to clearly interpret findings. This methodology does not take into account, however, the key conceptual feature of gendered racism, that is, the simultaneous blending of racial and gender influences. Research that attempts to capture racism and sexism separately and then test for interaction effects would miss the unique blended phenomenon that occurs in gendered racism. Due to multiple social identities, a focus on either sexism experiences or racism experiences of African American women would be incomplete, not adequately capturing gendered racism. More research is needed on the experience of gendered racism in African American women. The first objective of this study is to attempt to quantitatively assess gendered racism experiences of African American women.

Racism, Stress, and Coping

The second goal of the study was to assess whether coping styles, particularly Africultural coping, served as a mediator between experiences of gendered racism and psychological distress. The effects of gendered racism need to be explored in relationship to coping strategies, particularly as stressful situations may lead to culturally specific coping styles (Utsey, Adams, & Bolden, 2000a). African Americans' coping strategies seek to find a balance between physical, metaphysical, collective, spiritual, and psychological realms (Utsey et al., 2000). Research has found that African American unique coping processes include a reliance on the family and the community, cooperation, a belief in hard work, achievement, and responsibility, and religious beliefs and rituals, including prayer (Daly, Jennings, Beckett, & Leashore, 1995; Utsey et al., 2000).

Research has examined the relationship between coping styles and experiences of oppression. Feagin and Sikes (1994) found that African Americans use a variety of coping strategies for racism including using a defensive shield, overachieving or being overly successful, praying and using positive thinking, having the ability to laugh at situations, and relying on social support. Plummer and Slane (1996) showed that Black Americans engaged in less active coping efforts in racially stressful situations because these situations tended to restrict the coping options available leaving this population searching for alternate ways to manage racism.

Previous research has found that African American women in particular use a variety of coping mechanisms to mediate discriminatory distress. Krieger (1990) found that Black women were more likely to keep quiet and accept discrimination than White women. African American women are also more likely to use avoidance than problem solving and seeking social support, and avoidance is negatively related to self-esteem and life satisfaction (Utsey, Ponterotto, Reynolds, & Cancelli, 2000b). Thompson (1996) found that avoidance symptoms increased with time and reduced the level of intrusiveness experienced by racism. One study found that the vividness of images of racism and the level of Afrocentrism predicted affective responses of African American women (Jones, Harrell, Morris-Prather, Thomas, & Omowale, 1996). Shorter-Gooden (2004) found in a qualitative study examining reactions to and coping with racism and sexism that women rely on inner resources, including spirituality, using examples from ancestors, and a sense of valuing the self. The women in the study also used external resources, including social support. African American women lessened the influence of racism and sexism by altering speech and conduct with others, avoiding negative situations, or being assertive.

Experiences of gendered racism should evoke a type of coping style or response from individuals. If gendered racism is related to psychological distress, then a relationship may exist between gendered racism, coping, and psychological distress. According to Frazier, Tix, and Barron (2004) "a mediator is the mechanism through which a predictor influences an outcome variable." (p. 116). If gendered racism elicits coping, and coping influences the amount of psychological distress experienced, then the relationship between gendered racism and global distress can be explained by coping styles.

This study seeks to explore the intersection of race and sex by examining the relationship between the effects of gendered racism on psychological distress. The study also explores whether coping style serves as a mediating variable between gendered racism and distress. Two specific research questions were investigated: (1) Do African American women experience gendered racism? (2) Does the gendered racism experienced by African American women relate to psychological distress, and if so, does coping style serve as a mediating factor between gendered racism and psychological distress? It was hypothesized that women would report a variety of experiences of gendered racism, that gendered racism would be positively related to psychological distress, and that Africultural coping styles would mediate between experiences and psychological distress.

Method

Participants

The sample in this study was part of a larger study examining the role of oppression on functioning and identity of African American women. An a priori power analysis (Cohen, 1988) was conducted on to determine an appropriate sample size. A minimum of 200 participants was needed based on the larger study with 25 variables, a medium effect size of .12, and a power of .80. (For this study with six variables, a minimum of 112 participants were needed.) Demographic information was collected from the participants as categorical data due to the need to scan in data for the larger project. There were 344 African American women who participated in this portion of the study. Because the data are categorical, a weighted mean age of the participants was calculated using the frequencies within each age range, and was found to be 38.82. Twelve percent of the women were between 18 and 21, 25% were between 22 and 30, 25% were between 31 and 40, 28% were between 41 and 50, and 16% 51 and older. The majority of the women were employed full-time (65%), 18% reported part-time employment, and 17% were unemployed or retired. Fourteen percent of participants reported household incomes between $0–14,999, 20% between $15,000–29,999, 35% between $30,000–49,999, 16% between $50,000–69,999, and 14% reported incomes of $70,000 or more. Most participants had some college experience, with 22% reporting college experience, 35% completed college degrees, and 18% with graduate degrees.

Measures

Symptom checklist 90 (SCL-90–R). The SCL-90-R was used to assess psychological problems and symptoms of psychopathology. The self-report inventory has 90 items which reflect nine primary symptoms dimensions. There are three Global Indices: Global Severity Index (GSI), a single indicator of psychological distress; the positive Symptoms Distress Index; and the Positive Symptom Total. Participants select symptoms experienced. The GSI is designed to measure overall psychological distress. It is the mean score of the valid item responses for the nine clinical symptoms subscales plus seven additional items that are not factored into the subscales. The SCL-90 is a well-researched instrument, with nearly 1,000 empirical studies demonstrating its reliability, validity and utility. Reliability coefficients from a variety of studies were satisfactory, with test-retest reliabilities of .80 and .90 for one-week lapse, and .68 to .83 for 10 weeks of elapsed

Table 1
Mean Scores and Reliability Coefficients for Measures

Scale	M	SD	Score ranges	Reliability coefficients
Gendered racism (RSSE)	45.10	17.26	2–106	.93
Global severity index	.71	.63	.02–3.24	.98
Cognitive–emotional	22.23	6.33	2–40	.83
Collective	18.89	6.03	2–41	.74
Ritual-centered	4.65	2.43	1–12	.74
Spiritual-centered	21.02	6.33	6–32	.83

Note. RSSE = Revised Schedule of Sexist Events.

time. Mean scores and reliability coefficients for this sample can be found in Table 1. There are many studies that support the use of the SCL-90 with African American population (cf., Bowen-Reid & Harrell, 2002; Compton & Kaslow, 2005; Lundy, Gottheil, Serota, & Weinstein, 1995; Nnadi, Better, Tate, Herning, & Cadet, 2002). Ayalon and Young (2005) reported a Cronbach's alpha of .97 in group of Black community college students in a study of racial group differences in help seeking.

Africultural coping styles inventory (ACSI). (Utsey et al., 2000a) was used to assess culture-specific spiritually based coping strategies of African Americans. The ASCI is a 30-item scale with four subscales that was developed to assess particular coping styles of African Americans. Cognitive/emotional debriefing includes items that reflect ways of coping with stressors from the environment such as avoiding thinking about the issue or thinking of other things (e.g., "tried to forget about the situation", "tried to convince myself that it wasn't that bad"). Spiritual-centered coping items focus on universal sense of spirituality and the relationship with the Creator (e.g., "prayed that things would work themselves out", "went to church (or other religious meeting) to get help from the group"). Collective coping items reflect the Africultural value of the importance of the group and family, including social support (e.g., "got a group of family or friends together to help with the problem," "shared your feelings with a friend or family member"). Ritual-centered coping includes rituals and practices that honor ancestors, deities, and celebrate events (e.g., "lit a candle for strength or guidance in dealing with the problem," "used a cross or other object for its special powers in dealing with the problem"). Participants were directed to recall a stressful event that occurred within the recent past (one week) and then to indicate the extent to which particular coping strategies were used. Items are measured on a four-point scale (0 = *did not use* to 3 = *used a great deal*). Higher scores indicate more use of the particular coping strategy. Adequate reliability coefficients have been found for the subscales, from .76 to .82. The ASCI was found to be related to other coping instruments, including the Ways of Coping Questionnaire. Utsey et al. (2000) assert that the ACSI is a measure of the culture-specific coping behaviors used by African Americans in stressful situations and that it is grounded in an African-centered epistemological framework. Utsey et al. (2004) examined the structural invariance of scores on the ASCI across three separate samples of persons of African descent and found that the ACSI had limited utility beyond

African American populations. Mean scores and reliability coefficients for this study are found in Table 1.

Schedule of sexist events–revised (RSSE; Klonoff & Landrine, 1995). Participants were also given a revised form of the RSSE to assess experiences with gendered racism and reactions to it. The measure was selected and revised for this study because it included forms of discrimination previously reported by African American women in qualitative studies (Essed, 1991; Jones & Shorter-Gooden, 2003). The scale was revised to read "*Black* woman" instead of "woman" in the items. Sample items include: How many times have you been treated unfairly by your employer, boss or supervisors because you are a *Black woman*? How many times have you been treated unfairly by your neighbors because you are a *Black woman*? How many times have people made inappropriate or unwanted sexual advances to you because you are a *Black woman*? Items were scored on a six-point scale (1 = *never* to 6 = *almost all of the time*), and respondents were asked to indicate experiences across their lifetime. Higher scores indicate more experiences of discrimination. The reliability coefficient for the revised scale was .93, similar to .92 found for the original measure.

Procedures

Participants were recruited through the health fair section of a large exposition geared toward African American women in a large urban Midwestern city in the spring of 2003 over a 2-day weekend period. The investigators rented booth space that allowed participants to complete the surveys on site. Participants were told about the purpose of the study when they approached the booth for information. Students and research assistants also distributed flyers to expo attendees at the entrance. Finally, participants were referred by other participants who had completed the study and wanted family or friends to also participate. Participants were compensated $15 for their participation in the study.

Results

The first research question was to assess whether African American women have experiences perceived as gendered racism as assessed by the RSSE. (Table 2 summarizes the findings from RSSE). Interpersonal situations seemed to reflect the greatest amount of gendered racism for many of the women in the study. The majority of women reported experiences of discrimination with service professionals, including waiters and sales clerks, at least once in awhile in their lifetime (91.3%). Similarly, women reported experiencing gendered racism from employers and supervisors (69.9%), from coworkers or fellow students (70.8%), from teachers or professors (75.5%), from helping professionals (72.5%), and from strangers (90%) at least once in awhile across their lifetimes. Many women experienced sexual harassment (71.8%), jokes about African American women (85%), or have been called a derogatory name (76%). About 85% of the women felt that they were disrespected as Black women. Finally, women in the sample reported that experiences with gendered racism led to behavioral and emotional reactions. Most women reported feeling the need to become angry (83.5%), the need to tell someone off (78.3%), or take drastic steps, such as filing grievances or lawsuits or leaving situations (51.8%) at least once in awhile in their lifetime.

Table 2
Percentages for the Revised Schedule of Sexist Events

Items	Never	Once in a while	Sometimes	A lot of the time	Most of the time	Almost most of time	Total at least once
1. Teachers	24.6	31.9	26.8	9.5	5.4	1.9	75.5
2. Employer	30.1	23.0	14.1	21.2	7.1	4.5	69.9
3. Colleagues	29.2	27.3	23.7	11.0	5.2	3.6	70.8
4. Service	8.7	27.2	29.8	21.7	6.8	5.8	91.3
5. Strangers	10.0	38.6	30.9	11.6	5.8	3.2	90.0
6. Helping	27.5	36.1	20.0	9.5	4.6	2.3	72.5
7. Neighbors	53.5	22.3	14.5	6.6	2.2	.9	46.5
8. Significant	57.5	17.6	15.4	6.3	1.6	1.6	42.5
9. Work	39.7	23.4	17.3	9.0	5.4	5.1	60.3
10. Family	78.8	10.0	4.8	2.6	1.6	2.3	21.2
11. Sex	28.2	27.6	22.1	11.9	7.7	2.6	71.8
12. Respect	14.8	38.1	27.1	10.0	6.5	3.5	85.2
13. Tell off	21.7	28.7	23.2	13.7	8.9	3.8	78.3
14. Angry	16.5	30.3	24.5	16.1	7.4	5.2	83.7
15. Lawsuit	48.2	29.4	11.8	5.4	2.9	2.2	51.8
16. Names	24.0	38.7	19.2	12.5	3.5	2.2	76.0
17. Fights	43.4	33.8	13.5	4.5	2.9	1.9	56.6
18. Harmed	57.0	24.9	9.4	5.5	2.3	1.0	43.0
19. Jokes	15.0	35.8	22.8	17.6	4.9	3.9	85.0

The second research question was to explore the relationship between the accumulative experiences of gendered racism and psychological distress, and to determine if the Africentric coping styles served as mediating factors between experiences of gendered racism and global psychological distress. Table 3 lists Pearson correlation coefficients between the RSSE total gendered racism score, the GSI, and coping styles. A significant positive relationship was found between the total RSSE (gendered racism) and the GSI (psychological distress). According to Baron and Kenny (1986) a mediator may partially or completely account for the relationship between a predictor and dependent or outcome variable. In this study, it was assumed that Africentric coping styles influenced the relationship between gendered racism and psychological distress (See Figure 1). Following the model outlined by Frazier and colleagues, a series of three sets of regression analyses were conducted (see Table 4). In the first analysis, the outcome variable (GSI) is regressed on predictor variable (RSSE). A significant relationship was found, $F(1, 324) = 48.97$, $\beta = .36$, $p < .01$. This result confirms an independent relationship between RSSE and the global severity index, with RSSE accounting for

13% of the variance in the global severity index. In the second set of analyses, the mediator (ASCI), was regressed on the predictor variable (RSSE). Four separate regression analyses were conducted using the four coping styles as the dependent variables and gendered racism as the independent variable. Significant relationships were found for cognitive/emotional debriefing coping, $F(1, 323) = 13.56$, $\beta = .20$, $p < .01$, and for ritual-centered coping, $F(1, 3223) = 7.05$, $\beta = .15$, $p < .01$. The third set of analysis regressed the dependent variable, global severity index, on both the independent variable, gendered racism, and on the mediator, Africentric coping, specifically cognitive-emotive and ritual-centered coping. Regression analyses for spiritual centered and collective coping were not included given the nonsignificance of their bivariate correlations with the RSSE. Results suggest that gendered racism and cognitive-emotional debriefing account for 19% of the variance ($F(3,322) = 25.06$, $p < .01$). Perfect mediation occurs when the level of significance is eliminated for the independent or the predictor variable and the dependent variable. Partial mediation occurred as the effects of gendered racism was reduced but not eliminated. To test the significance of the mediated effect, a follow-up test was conducted as outlined by Frazier and colleagues. (The test yields a *z* score by using the standard error term developed by Baron and Kenney [1986]). A separate regression with cognitive–emotional debriefing was conducted to determine the appropriate error terms and regression coefficients. The *z* score = 2.96, $p < .01$, suggesting a significant mediation effect with cognitive–emotional debriefing coping.

Table 3
Correlations Between Revised Schedule of Sexist Events (RSSE) and Symptoms Checklist Subscales

	GSI	Cog	Coll	Rit	Spir
RSSE	.363*	.201*	.088	.146*	.085
GSI		.283*	.076	.155*	.064
Cog			.576*	.418*	.572*
Coll				.374*	.685*
Rit					.146*

Note. GSI = Global Severity Index; Cog = cognitive–emotional debriefing coping; Coll = collective coping; Rit = ritual-centered coping; Spir = spiritual-centered coping.
* $p < .01$.

Mediation test

Gendered racism ⟶ Africentric coping ⟶ Global distress
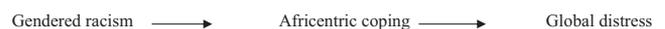
Figure 1. Mediation test.

Table 4
Regression Analyses to Test for Coping as a Mediator

Equation and criterion		Predictor	$F(df)$	β	SE B	β	R^2	ES
Equation 1	Effects of RSSE on GSI	RSSE	48.97	.01	.002.	.36*	.13*	.15
Equation 2	Effects of RSSE on coping	Cogemot	13.56 (1,323)	.081	.022	.20*	.04*	.04
		Ritual	7.05 (1,323)	.020	.008	.15*	.02*	.02
Equation 3	Effects of of RSSE and coping on GSI	Cogemot	15.14 (2,322)	.03	.13	.27*	.09	.10
		Ritual		.01	.015	.04		
		RSSE	25.06 (3,322)	.01	.002	.33*	.19*	.23

Note. ES = effect size; RSSE = Revised Schedule of Sexist Events; GSI = Global Severity Index; Cogemot = cognitive–emotional debriefing.
* $p < .05$.

Discussion

The study suggests that gendered racism has a pervasive effect on the psychological distress of African American women, even in the presence of coping mechanisms, a finding that is supported by previous research. The participants in this study reported a variety of experiences with gendered racism. The most prevalent forms of gendered racism occurred within the context of interpersonal settings and relationships. The majority of women reported occasional experiences of gendered racism from service professionals, including waiters/waitresses, and sales clerks. It is not unusual for African American women to be apparently profiled as shoplifters and to be followed around in stores (Essed, 1991; Jones & Shorter-Gooden, 2003). Many African American women are ignored by clerks or bypassed when waiting in lines. The majority of participants also reported being treated unfairly by strangers. Work and employment settings also were reported to be oppressive for the women in the study. Experiences of gendered racism with employers, supervisors, and coworkers were reported, along with experiences at work. Participants also reported being sexually harassed, being called names, and hearing jokes related to being a Black woman. Overall, results suggest that it is quite common for African American women to experience and recognize some form of gendered racism.

The second research question explored the relationship between gendered racism and psychological distress. In this study, a correlation analysis suggests a positive significant relationship between gendered racism and global psychological distress, suggesting that experiences of discrimination are associated with significant psychological distress, consistent with prior research.

The third research question investigated whether Africentric coping styles serve as mediating variables between gendered racism and global psychological distress. The relation of gendered racism on psychological distress is partially mediated by an avoidant coping style, namely cognitive–emotional debriefing. The cognitive–emotional coping partially influences the relationship between gendered racism and psychological distress. Because the mediation is partial, gendered racism has some direct effect on distress beyond coping mechanisms. The cognitive-emotional debriefing style includes efforts to manage environmental stressors, such as attempting to forget the situation or minimize the negativity of the situation, or engaging in distracting activities. This subscale has been found to be related to detachment, an externalization or denial of issues, or a minimization of the severity of the concern in other measures of coping (Utsey et al., 2000). Some components of the cognitive-emotional debriefing may be seen as a more passive attempt to cope with stressors, like avoiding thinking about the experience. Previous research has supported the finding that African American women are also more likely to use avoidance than active problem-solving strategies or seeking social support (Utsey et al., 2000). Avoidance has been found to be negatively related to self-esteem and life satisfaction (Utsey et al., 2000). Avoiding the issue may temporarily minimize the pain for women, who may find themselves more upset when confronted with similar circumstances. African American women are often socialized to be strong, so a coping style of avoiding or minimizing experiences may help to keep the façade of strength and competence. The findings of the current study contrast with the Thompson (1996) study, which found that avoidance symptoms increased with time and reduced the level of intrusiveness experienced by racism, providing a buffer from the intensity of racism. Thus, avoidant coping styles of African American women, like cognitive-emotional debriefing, appear to be a bit of a conundrum in the literature currently.

However, and more importantly, the mediation effect suggests that gendered racism may be related to a coping style which is associated with heightened distress. Thus, the coping style employed was not effective. One possible explanation is that because African American women may perceive incidents of gendered racism as uncontrollable (i.e., there is nothing they can do to change these), they do not use a more active approach-oriented style to cope. Rather, African American women may be accustomed to relying on a coping strategy designed to manage emotions and distress. Thus, the more gendered racism a person experiences the more distress she experiences and the more she is going to engage in cognitive-emotional debriefing coping to manage the negative emotions and distress associated with these incidents.

Stressful situations for African Americans often lead to the culturally specific coping styles of reliance on the extended family and community, and spirituality and religious beliefs. A surprising finding in this study is that only cognitive–emotional debriefing coping served as a mediating variable, while spiritual-centered, ritual-centered, and collective coping styles did not. Experiences of gendered racism were related to ineffective coping and were associated with more psychological distress. More positive or active culturally specific coping styles were not found to be mediators between gendered racism and psychological distress. This suggests that the psychological distress that these African American women experience was not influenced by spiritual-

centered, ritual-centered, and collective coping styles. It could be that the reliance on emotional debriefing (an avoidant style) obviated the use of the more active styles of coping.

Implications

The findings of this investigation of gendered racism have implications for psychologists' preventative and remedial work with African American women. It is critical to understand and acknowledge that being both African American and female in a society that values neither presents unique challenges. The construct of gendered racism may prove a useful medium to comprehend the negative experiences owing to one's race and gender. Psychologists conducting group or individual counseling with African American women should listen carefully for complaints about mistreatment based on race and sex and validate clients' experiences. Particularly because an African American woman might minimize the effects of gendered racist incidents (and not readily discuss them) through the use of cognitive–emotional debriefing, clinicians might inquire directly about clients' experiences with gendered racism. It will also be important to help clients generate a variety of ways to cope with the pain associated with gendered racism.

In terms of educational and preventative interventions, it would be helpful to provide workshops to allow African American women of all ages to discuss their experiences with gendered racism and promote a range of effective coping strategies. Specifically, psychologists might consider aiding African American women to access their own spiritual and religious resources in order to cope with gendered racism as these have been found to be successful strategies for other concerns (Utsey et al., 2000a). These educational presentations could be offered through churches, community organizations or agencies, and social clubs. Generally, the aim of these remedial and educational interventions is to enhance African American women's ability to resist and cope effectively with the deleterious effects of gendered racism on psychological distress.

Finally, psychologists should continue their antiracism, antisexism work by confronting instances of gendered racism that they might encounter. Being allied against gendered racism will ultimately help to prevent it in the first place thus, eliminating the need for coping with it.

Limitations and Future Directions

This exploratory study sought to understand the relationship between experiences of gendered racism and psychological symptoms, and to determine if coping served as a mediator. The major limitation of the study is the manner of the self-report of the experiences and the scales used. Although most women could identify experiences of oppression based on being a Black woman, future studies may want to consider a more sensitive instrument of gendered racism. Although the item stems stated "Black woman" attempting to cue participants to gendered racism, it cannot be certain participants actually responded in that manner. There is a critical conceptual and measurement issue to be considered. Perhaps there is no such thing as "sexism" untainted by race or "racism" untainted by sex. Current measures of racism may really be assessing "raced sexism." Respondents to quantitative surveys may not parcel their various experiences with discrimination the

way that researchers have assumed (Moradi & Subich, 2003). The participants in one study that quantitatively assessed gendered racism versus racism and sexism had difficulty separating sexism from racism (King, 2005). In qualitative studies, women have also reported more experiences that combined identity status of gender and race (Essed, 1991; Jones & Shorter-Gooden, 2003).

Second, while the coping instrument focused on coping styles preferred by African Americans, the instructions cue women to list a stressor recently experienced. The instrument did not specifically assess coping styles used for dealing with gendered racism in particular. It may be that full mediation did not occur or spiritual, ritual-centered, or collective coping style did not serve as mediators because we did not tap into coping specific to a gendered racism experience.

Another limitation stems from the self-selection of the group. This sample consisted of mostly well-educated, full-time workers, in the middle- or upper-class level. The women were also predominantly from the Midwest, and women in different regions of the country may have other experiences of gendered racism. Therefore, generalizing these results to other African American women should be done with caution.

Future research should continue to explore the nature and pervasiveness of gendered racism, the impact on psychological functioning and identity development, and its mediating and moderating variables. Qualitative studies, including focus groups or interviews, are needed to more richly capture the complexity of gendered racism. Future research should examine whether African American women perceive their experiences from the lens of race, gender, and the intersection of the two, along with their perception of meaning attributed to the experiences (Essed, 1991; 2005). It also is important to better understand coping styles and strategies of African American women particularly those related to experiences of oppression. Future research should explore the various ways that African American women cope with the gendered racism experienced to aid them in resisting the deleterious effects of racism on mental health.

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