

Discrimination, Stress, and Depressive Symptoms in the Context of Interracial
Relationships: Evidence from the National Longitudinal Study of Adolescent to Adult Health

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Abstract

Interracial relationships have grown in the last 50 years. Couple-level minority stress theory asserts that individuals in interracial relationships become vulnerable to stressors because their relationship itself is stigmatized, leading to poorer mental health. We test this assertion using Add Health. We conducted ordinary least square regressions to test the association between being in an interracial relationship at Wave IV with depressive symptoms, as well as mediating variables of discrimination, isolation, and perceived stress. Individuals in interracial relationships reported elevated discrimination, isolation, perceived stress, and depressive symptoms. In the mediation model, the association between depressive symptoms and interracial relationship membership was no longer significant after the inclusion of discrimination, isolation, and perceived stress. Our preliminary evidence suggests that a potential mechanism underlying the association between being in an interracial relationship and depressive symptoms may be through an increased experience of stress due to being in a marginalized relationship.

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In the 50 years since anti-miscegenation laws were deemed unconstitutional in the United States, the rates of interracial marriage has more than quintupled from approximately 3% in 1970 to just over 17% in 2015 (Pew Research Center, 2016), and about 18% of cohabiting unions are interracial unions (Pew Research Center, 2017). Interracial relationships may have implications for adult health and well-being; interracial relationships have been tied to increased depression in adolescence (Tillman & Miller, 2017) and increased smoking in adulthood for some groups (Bratter, Campbell, & Saint Onge, 2017). Using data from the National Longitudinal Study of Adolescent to Adult Health, we examine whether being in an interracial relationship is associated increased depressive symptoms, discrimination, isolation, and perceived stress. We also test the role of discrimination, isolation, and perceived stress as potential mediators of the association between interracial relationships and depressive symptoms.

Minority stress theory argues that the unique stressors experienced by individuals in marginalized groups negatively impact health and well-being (Lick, Durso, & Johnson, 2013). Even if an individual is not a member of a marginalized group, their partner's experiences of marginalization have been theorized to be associated with both their own, and their partner's health. Extending the couple-level minority stress framework from gender and sexual minorities to racial minorities (LeBlanc, Frost & Wight, 2015), we assert that once individuals enter interracial relationships, they become vulnerable to unique stressors because their relationship itself is stigmatized. Indeed, there has been a shift to more positive attitudes toward interracial unions, (Todd et al, 1992; Herman & Campbell, 2012) but many individuals report they would not be in one themselves. Social stress theory (Dohrenwend, 2000; Pearlin, 1999) suggests that these social stressors can be damaging to mental health. Social isolation has detrimental effects on both physical and emotional health (Holt-Lunstad, Smith, & Layton, 2010; Thorsteinsson & James, 1999). Discrimination is associated with poor health outcomes, especially with regards to mental health (Williams, Neighbors & Jackson, 2003). Being in an interracial relationship may exacerbate stress, social isolation, and discrimination, and in turn, mental health problems.

Methods

Data for the current study come from the National Longitudinal Study of Adolescent to Adult Health (Add Health). Add Health, initiated in 1994, is a nationally representative study that followed American youth from grades 7-12 into adulthood. Data were collected in four waves (1995, 1996, 2001-02, and 2008). At Wave IV, participant's ages ranged from 25-34. The current study utilized data from Waves I and IV. Only participants who reported being in a current relationship at Wave IV, and did not report Other race at Wave I, were included in these analyses. Respondents who reported more than one current partner at Wave IV were also dropped.

Variables

Race was collected at Wave I and was coded as White, Black, Hispanic, Asian, and American Indian. Partner race was collected at Wave IV for current partners and was coded as White, Black, Hispanic, Asian, American Indian, and other race. For both indicators, Hispanic was coded for those respondents who reported any Hispanic ethnicity regardless of how they reported their racial identity. Relationship type at Wave IV was coded as marriage, cohabiting, or dating, and all relationships were current. Highest level of education at Wave IV was coded as less than high school, high school degree or equivalent, some college, Bachelor's degree, post-

graduate education. Age at Wave IV was coded in years. Same-gender was coded as 1 if the respondent reported gender at Wave I was not the same as the gender they reported for their current partner at Wave IV. Public assistance at Wave I was coded as whether or not the household received public assistance as reported by either the adolescent or the primary caregiver. Family structure at Wave I was coded based on adolescent and maternal reports, and we coded as two biological/adoptive parents, single parent/guardian, and step-parent. Foreign born at Wave I was coded if the adolescent reported being born outside the US.

Outcome and Mediators. Depressive symptoms was measured with a subscale of the CES-D depression scale, whereby respondents indicated if they experienced a series of symptoms related to depressive symptoms in the last two weeks. Response options were 0 (never / rarely), 1 (sometimes), 2 (a lot of the time), and 3 (most or all of the time). The 10 items were summed for an overall score ($\alpha = .84$). Perceived Stress was a measured using a brief version of Cohen et al. (1994) perceived stress scale. Respondents indicated how unpredictable or uncontrollable they found their lives in the past month. Response options included 0 (never / rarely), 1 (sometimes), 2 (a lot of the time), and 3 (most or all of the time). The four items were summed ($\alpha = .72$). Isolation was measured with one item: "How often do you feel isolated from others?" with response options of 0 (never / rarely), 1 (sometimes), 2 (a lot of the time), and 3 (most or all of the time). Discrimination was a one item measure that asked respondents to indicate: "In your day-to-day life, how often do you feel you have been treated with less respect or courtesy than other people?" Response options included 0 (never), 1 (rarely), 2 (sometimes), and 3 (often).

Preliminary Analysis

Twenty percent of our sample reported being in an interracial relationship. Respondents were about 50% White, 20% Black, 16% Hispanic, and the remainder were Asian and Native American. A majority of the sample was married (60%) or cohabiting (27%). About 10% of our sample was in a same-gender relationship. See Table 1 for complete descriptive statistics.

We conducted ordinary least square regressions to test the association between being in an interracial relationship with our outcome of depressive symptoms, as well as our mediating variables of discrimination, isolation, and perceived stress (see Table 2). Individuals in interracial relationships at Wave IV reported elevated discrimination, isolation, perceived stress, and depressive symptoms even after controlling for respondent's own race. Next we tested our mediation model. After the inclusion of discrimination, isolation, and perceived stress, the previously significant association between depressive symptoms and interracial relationship membership was no longer significant. Thus, our preliminary evidence suggests that a potential mechanism underlying the association between interracial relationship membership and depressive symptoms is through an increased experience of discrimination, isolation, and stress due to being a member of a marginalized relationship.

Planned Future Analyses

We next plan to examine whether the association between interracial relationships and discrimination, isolation, perceived stress, and depressive symptoms are moderated by the type of relationship the respondent is in, including dating, cohabiting, married, and same-gender. Thus far, our results seem to support the couple-level minority stress framework.

Table 1.

Outcome Scores and Descriptive Statistics of the Analytic Sample

	<i>M (SD) or %</i>
Depressive symptoms	10.45(2.62)
Discrimination	.95(.81)
Isolation	.91(.91)
Perceived Stress	4.65(2.92)
Interracial Relationship	20.20
Respondent Race	
White	54.09
Black	20.31
Asian	6.5
Native American	3.34
Latino	16.01
Relationship Status (Married excluded)	58.93
Cohabiting	26.90
Dating	21.23
Female	46.55
Same-sex relationship	9.96
Age at Wave 4	
Education at Wave 4	14.80
Less than high school	7.20
Some college	44.42
College graduate	21.02
Bachelors Plus	12.56
Family on public assistance at Wave 1	9.44
Family Structure at Wave 1 (two biological/adopted parents)	55.25
Single/other	30.98
Step-family	13.77
Foreign-born	7.84

Note. Percent reported for dichotomous variables

Table 2.

Ordinary Least Squares Regression Results for Discrimination, Isolation, Perceived Stress, and Depressive Symptoms, and Mediation Model for Depressive Symptoms

	Discrimination		Isolation		Perceived Stress		Depressive Symptoms		Depressive Symptoms	
	Coef.	SE	Coef.	SE	Coef.	SE	Coef.	SE	Coef.	SE
Interracial Relationship	0.11 **	0.02	0.13 ***	0.02	0.20 **	0.08	0.35 **	0.12	-0.02	0.09
Discrimination	-		-		-		-		0.68 ***	0.04
Isolation	-		-		-		-		0.89 ***	0.04
Perceived stress	-		-		-		-		0.85 ***	0.01
Respondent Race (White excluded)										
Black	0.04 **	0.02	-0.02	0.02	0.26 **	0.08	0.47 ***	0.12	0.24 **	0.09
Asian	-0.05	0.04	-0.06	0.04	0.31 **	0.13	0.62 **	0.21	0.44 **	0.15
Native American	0.02	0.05	0.10 **	0.05	0.49 **	0.16	0.65 *	0.25	0.13	0.18
Hispanic	-0.09	0.02	0.03	0.03	-0.18	0.09	-0.04	0.13	0.31 **	0.1
Relationship Status (Married excluded)										
Cohabiting	0.08 ***	0.02	0.08 **	0.02	0.38 ***	0.07	0.51 ***	0.11	0.06	0.08
Dating	0.06 **	0.02	0.17 ***	0.03	0.40 ***	0.09	0.71 ***	0.14	0.17	0.1
Female	-0.02	0.02	0.09 **	0.02	0.65 ***	0.06	1.21 ***	0.09	0.59 ***	0.07
Same-gender relationship	0.01	0.03	0.17 ***	0.03	0.63 ***	0.10	1.01 ***	0.15	0.35 **	0.11
Age at Wave 4	0.00	0.00	0.01	0.01	0.02	0.02	0.05	0.03	0.03	0.02
Education at Wave 4										
Less than high school	0.12 ***	0.02	0.10 **	0.04	0.77 **	0.13	1.21 ***	0.2	0.39 **	0.14
Some college	0.00	0.03	0.02	0.03	-0.34	0.08	-0.67 ***	0.13	-0.4 ***	0.09
College graduate	-0.11	0.03	0.01	0.03	-1.12	0.10	-1.8 ***	0.15	-0.78 ***	0.11
Post graduate	-0.14	0.03	0.01	0.03	-1.28	0.11	-1.86 ***	0.17	-0.68 ***	0.13
Public assistance	0.04 *	0.03	0.10 **	0.03	0.12 *	0.10	0.53 **	0.16	0.32 **	0.11
Family Structure (two biological/adopted parents)										
Single/other	0.02	0.02	.005	0.02	0.17 *	0.07	0.28 **	0.11	0.08	0.08
Step-family	0.02	0.02	0.06 *	0.03	0.14 *	0.08	0.21	0.13	0.02	0.1
Foreign-born	-0.05	0.03	-0.02	0.04	0.00	0.12	0.25	0.19	0.3 *	0.14

<i>n</i>	10156	10154	10157	10157	10154
F	10.66 ***	11.31 ***	37.50 ***	40.74 ***	494.43 ***
<i>R</i> ²	0.02	0.02	0.06	0.07	0.51

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

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