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Religion and Spirituality as a Coping Mechanism for Racial Microaggressions: A Literature Review

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RELIGION AND SPIRITUALITY AS A COPING MECHANISM FOR RACIAL
MICROAGGRESSIONS: A LITERATURE REVIEW

By

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Presented to the Faculty of the Graduate School of

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Master of Arts

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MICROAGGRESSION: A LITERATURE REVIEW

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ABSTRACT

Racial discrimination is still very prevalent in the United States. People of color continue to face racism despite efforts to eradicate it. Sometimes it comes in a more subtle form known as a microaggression which can be an everyday occurrence for many people (Lewis & Neville, 2015). This is a unique stressor in that it targets an aspect of an individual that cannot be changed, and it requires the individual to decide to either confront their offender or handle it in a different manner. The goal of this paper is to perform a literature review to investigate if African Americans use religion and/or spirituality to cope with everyday microaggressions. For a study to be reviewed it had to include African Americans, discuss racial discrimination, and discuss religion and/or spirituality as a coping mechanism. The exclusionary factors were as follows: participants were under the age of 18 and the article did not include a study with participants. It is predicted that African Americans rely on their religion and/or spirituality to help cope with racial microaggressions.

Keywords: religion, spirituality, racial discrimination, coping

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CHAPTER I

Introduction

It is common in the United States for people of color to experience racial discrimination in their everyday life (Holder et al., 2015). Over time discrimination has become more obscure and often the perpetrator is unaware that an offense has been made. These racial slights, known as microaggressions, have been found to impact health and the overall well-being of people of color (Torino, 2017; Williams & Lewis, 2019). Racial microaggression is a term created by psychiatrist Chester Pierce to describe the subtle yet racially motivated words or actions that people of color encounter daily (Williams, 2020). Sue and colleagues (2007) expanded on this idea and defined it as the “brief and commonplace daily verbal, behavioral, and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative racial slights and insults to the target person or group” (Sue, Capodilupo, Torino, et al., 2007, p. 273). Racial microaggressions are inadvertent in nature; however, they reveal implicit bias within an individual which may be a symptom of a larger issue. These slights communicate inferiority to an individual and send a message that the recipient of the offense does not fit in with the majority.

There have been several incidents that have occurred in the past few years that demonstrate microaggressive behavior. Several schools have

punished African American students for hairstyles such as hair extensions, dreadlocks, and the use of durags, with school administration stating the hair is in violation of the school dress code (Joseph-Salisbury & Connelly, 2018). At universities, students of color often encounter racial microaggressions in the form of racial jokes and comments, segregated areas which are often labeled “predominately White” or “predominately African American” (or some other minority group), or they receive unequal treatment through policies, housing or from staff (Harwood et al., 2012). In the healthcare setting, microaggressions may influence the decision made by the medical professional based on their view toward a particular group of people. For example, many pregnant African American women have reported feeling disrespected, experiencing stressful interactions and that their healthcare provider was not meeting her needs (McLemore et al., 2018).

Many times, in the workplace, women of color are questioned about their judgment in their area of expertise or are asked to provide more evidence of competence than others (Turner & Gonzalez, 2011). Ten African American women in corporate management positions were asked about their experience with discrimination in their workplace. Each participant stated that they encountered these racial microaggressions in the form of environmental factors such as being chosen for their position specifically for diversity purposes or “tokenism” in which the participant was often given attention to demonstrate that

the company values diversity. Another example of microaggressions that these participants experienced was stereotyping. Often the competence of these women was questioned, and they commonly felt intellectually inferior. Other instances included feeling invisible, being excluded and the assumption that all African Americans shared the same experiences and views (Holder et al., 2015). In general, apart from Asian men and women and male Pacific Islanders, people of color earn less money than non-Hispanic Whites with both African American men and women earning less than any other race (Gender Pay Gap, 2021). These microinsults and microinvalidations are just a few examples of everyday microaggressions experienced by people of color.

Although collectively, people of color experience racial discrimination, studies often indicate that African Americans report more microaggressive behaviors than any other minority groups (Keith et al., 2017). Though African Americans are more likely to report being discriminated against than other ethnic groups (Boutwell et al., 2017), this may vary based on the importance of their identification with their ethnicity. Research has found that African Americans that highly identify with their race reported experiencing more racial discrimination (Sellers et al., 2003). Ethnic identity is a measure of the salience of race to an individual and can serve as a protective measure against discrimination because a connectedness to one's group serves as a buffer against negative stereotypes and perceptions (Wong et al., 2003). Ethnic identity is also correlated with

positive psychological well-being in that, those who strongly identify with their ethnic group display less signs of depression, higher self-esteem, and job competence (Kerpelman et al., 2008). In contrast, lower ethnic identity could make one susceptible to the psychological burden that many feel when encountering racial discrimination (Woo et al., 2019).

When an individual encounters such situations, he or she is likely to question if such treatment is race-based or the result of another characteristic. Internalized racism is a term used to describe an individual who rejects him-or herself and others of the same ethnicity because of the racism and oppression experienced by a member or members of a majority group. He or she accepts the negative racial messages conveyed to them by those who make racist remarks. In contrast, external racism includes the discrimination, prejudice, or violence of others (Bailey et al., 2011). Both internalized racism and racist events are predictors of psychological distress (Szymanski & Obiri, 2011). Psychological distress can then manifest into physiological symptoms such as a rise in temperature (Oka, 2015), an increased risk for hypertension (Hu et al., 2015), insulin resistance (Li et al., 2013) or it could lead to an inability to be physically active (Stults-Kolehmainen et al., 2015). As such, it is likely that stress that is caused by experiencing frequent microaggressions could eventually lead to a decrease in physiological well-being.

Racial Discrimination and Psychological and Physiological Well-Being

Racial discrimination has not only been found to have implications for physical safety but has also been associated with having a significant impact on an individual's psychological and physiological well-being. It is a different stressor in comparison to generic, everyday stressors such as losing an item or getting stuck in traffic because racism is degrading and attacks a part of a person that cannot be changed (i.e., their skin color) (Landrine & Klonoff, 1996). Racial discrimination has been found to increase psychological stress responses such as anxiety, anger, depression, and fear (Nadal et al., 2014; Soto et al., 2011). Prelow et al. (2006) found that racial discrimination had a positive correlation with depressive symptoms and a negative correlation with life satisfaction. In addition to the psychological effects, microaggressions may have a physiological impact. In one study, African Americans who reported racial discrimination were more likely to have more carotid plaque which increases the risk of heart disease (Troxel et al., 2003) which may lead to a heart attack or even heart failure. Perceived discrimination has also led some to have issues with hypertension (Dolezsar et al., 2014).

The term "stress" was first coined by Hans Selye in 1936 and he defined it as, "the non-specific response of the body to any demand for change (What is Stress, 2017, para. 1)." In recent decades this definition appears to have shifted to what an individual experiences when he or she is "unable to cope with

demands because of a lack of resources (e.g., time, money, or social support)” (Ng et al., 2009). There are various stressors that people of any race experience including work, family, finances, and many other stressors. There are additional stressors that appear to be higher in the African American community than other races in America including stress-related health disparities and racial discrimination.

It is not uncommon for individuals to feel that they cannot express their concerns in fear of retribution. In this instance, when an individual is faced with microaggressive behavior he or she must cope with the stress in a different way. The physiological and psychological effects of stress may be mitigated by the effective use of coping strategies. There is ample research on coping mechanisms for stress; however, there is less research on the coping mechanisms used by African Americans regarding racial microaggressions.

Coping Mechanisms

A coping mechanism is a strategy an individual uses when faced with a stressful situation to help alleviate the negative effects of stress. There are several strategies that an individual can rely on to help reduce stress. Humor has been found to reduce stress and negative affective responses as well as lower physiological arousal (Abel, 2002). Optimism has also been found to be a moderator to stress and was found to be negatively correlated with depression and positively correlated with perceived social support (Applebaum et al., 2014).

John Henryism is a term used to describe an active coping mechanism in which people actively work to cope with prolonged psychosocial stress (James, 1994). Carver et al. (1989) developed the COPE inventory which measures how an individual responds when confronted with a stressful situation. These strategies include positive reinterpretation and growth, mental disengagement, focus on and venting of emotions, use of instrumental social support, active coping, denial, humor, behavioral disengagement, restraint, use of emotional social support, substance use, acceptance, suppression of competing activities, planning and religious coping (Litman, 2006).

There is a great deal of research that shows the effectiveness of religious coping for individuals who choose this approach. Religious coping was found to have a significant impact on health outcomes among ill, elderly patients. For patients who participated in positive religious coping (e.g., seeking spiritual support and benevolent religious reappraisal) there was improvement in their overall health. In addition, those who engaged in negative religious coping (e.g., punishing God reappraisal and interpersonal religious discontent) showed a decline in health (Pargament et al., 2004). Religious coping is also used by people who suffer from posttraumatic stress disorder (PTSD) and depression. A study with Pakistani earthquake survivors revealed that individuals who engaged in negative religious coping had more symptoms of PTSD and experienced more negative emotions (Feder et al., 2013). Religion is one coping mechanism that is

often used by African Americans to help manage difficult situations (Chatters et al., 2008).

African Americans, Religion, and Spirituality

Religion is a belief system that has been found to help African Americans, particularly African American women, to overcome adversity (Ward & Heidrich, 2009). Religion and religious institutions have played a significant role in the lives of African Americans for over a century. The African American Church has been a driving force in providing education, engaging in social justice issues, and providing health care services to the church and community (Taylor & Chatters, 2010). Many turn to prayer, their spiritual beliefs, or their relationship with God to cope with discrimination (Shorten-Gooden, 2004). According to a 2015 study conducted by the Pew Research Center, almost 80% of minorities surveyed identified with a religious group (Religion in America, 2015). These groups included both Christian and non-Christian faiths. Of the non-White Christian groups, an estimated 15.9 million individuals claimed to attend historically African American Protestant churches. This was significantly higher than any other group for both Christian and non-Christian faiths. In another study conducted by the Pew Research Center (Religion in America, 2014), roughly eight in ten African Americans self-identify as Christian, as do 77% of Latinos and seven in ten Caucasians (Maschi, 2018). In addition, many African American Americans

believe that opposing racism is essential to being Christian (Mohamed et al., 2021).

Although relying on family and community, having a belief in perseverance and achievement, and anger suppression (Brondolo et al., 2009; Daly et al., 1995) have been identified as effective strategies, one long-lasting, culture-related means of coping by African Americans with heightened environmental stress is religiosity and/or spirituality (Thomas et al., 2008). Religion is viewed as a means of connection with individuals who share a common belief system and spirituality is viewed as a means to connect with a deity. Religious coping has been found to be beneficial for those individuals who are experiencing a stressful situation that surpasses their resources (Pargament & Raiya, 2007). An individual that perceives microaggressions as out of their control may seek help from those around them or a Higher Power.

Several studies indicate that African Americans report experiencing racial discrimination more than other minority groups; therefore, this study will focus specifically on the affective responses of African Americans (Brown, 2019; Douds & Houts, 2020; Robert Wood Johnson Foundation, 2017). In addition, religious coping is a strategy used by many African Americans and this study will explore the reliance on religion and spirituality in regard to the stress produced from racial microaggressions. Given that the results of this more recent survey indicate noteworthy within-group variance in both religiosity and spirituality, and

that younger African Americans are less frequently asserting religious affiliation (Religion in America, 2014), a study of the traditional use and effectiveness of religiosity and spirituality as means of coping with the African American experience in this country is warranted.

Statement of the Problem

Racial discrimination is a major issue in the United States that has persisted for centuries, making it a systematic issue (Feagin & Bennefield, 2014). As such, that makes it difficult to completely eradicate. While it is widely known that religion and spirituality play an important role in most African Americans lives, little research has examined how religion and spirituality influences behavioral response to racial microaggression. The purpose of this study was to examine the following research questions:

1. To what degree do African American's demographics (gender, age, education-level), ethnic identity, and reports of racial microaggression explain the variance in psychological well-being?
2. To what degree do religiosity and spirituality moderate the influence of demographics (age, gender, education-level), ethnic identity, and reported racial microaggression on African American's psychological well-being?

Hypotheses

1. It is hypothesized that ethnic identity, high reports of racial microaggression and education level will have a negative correlation with psychological well-being in African Americans.
2. Religiosity and spirituality are also hypothesized to mediate the psychological effects of racial microaggressions towards African Americans.

Definition of Terms

Microaggression

Subtle and commonplace daily verbal, behavioral, environmental insults and indignities, whether intentional or unintentional, that have the potential to bring psychological harm on the targeted person or group (Sue, Capodilupo, Torino, et al., 2007; Sue, Capodilupo, & Holder, 2008).

Microassaults

“Explicit behaviors intending to hurt a person of color such as name calling, avoidance, and discrimination” (Hernandez et al., 2010, p. 203).

Microinsults

“Actions (verbal, nonverbal, or environmental) that convey insensitivity, are rude or directly demeans a person’s racial identity or heritage” (Sue, Capodilupo, & Holder, 2008, p.331)

Microinvalidation

“Communications that exclude, negate, or nullify the psychological thoughts, feelings, or experiential reality of a person of color” (Sue, 2007, p. 73).

Religiosity

“The degree to which individuals adhere to the prescribed beliefs and practices of an organized religion” (Mattis, 2002, p. 310).

Spirituality

“An individual’s beliefs in the sacred and transcendent nature of life, and the manifestation of these beliefs in a sense of connectedness with others (e.g., humans, spirits, and God), and in the quest for goodness” (Mattis, 2002, p. 310).

Positive Religious Coping

“A sense of connectedness with a transcendent force, a secure relationship with a caring God, and a belief that life has a greater benevolent meaning” (Pargament et al., 2011, p. 58).

Negative Religious Coping

Signs of spiritual tension, conflict and struggle with God and others, as manifested by negative reappraisals of God’s powers (e.g., feeling abandoned or punished by God), demonic reappraisals (i.e., feeling the devil is involved in the stressor), spiritual questioning and doubting, and interpersonal religious discontent (Pargament et al., 2011, p. 58).

CHAPTER II

Literature Review

Microaggressions

Racial microaggressions are experienced in everyday life and, for some individuals, they encounter them daily. Discrimination is experienced at both the interpersonal and institutional level (Karlsen & Nazroo, 2002). In a study that compared the discriminatory experiences by African Americans in the UK and U. S., 80% of the U. S. participants had reported experiencing racial discrimination at one point in their life in contrast to one third of the UK participants. This indicates that racial issues continue to persist at high rates within the United States and the reporting of an incident demonstrates that the event had an impact on the individual to a marked degree. Microaggressions are often experienced in the workplace (Nadal et al., 2014; Sue, Capodilupo, & Holder, 2008) as well as at schools and universities (Huber & Solorzano, 2014). Students of color often encounter racial microaggressions in the form of racial jokes and comments, segregated areas which are often labeled “predominately White” or “predominately African American” (or some other minority group), or they receive unequal treatment through policies, housing, and staffing (Harwood et al., 2012). In addition, if a racial microaggression is perceived, it appears to create a reaction that expends energy in the areas of cognition, emotion, and behavioral

expression (Sue, Capodilupo, & Holder, 2008). This reaction to a racial offense may have implications on psychological well-being.

Reported Responses to Racial Microaggressions

Although collectively, people of color experience racial discrimination, studies often indicate that African Americans report more microaggressive behaviors than any other minority groups (Keith et al., 2017). In a study conducted by Sue, Capodilupo, Torino, et al. (2007), participants were asked about their reaction to perceived discrimination. These researchers examined how African American participants perceived, reacted to, and interpreted experiences of microaggressions and the consequences that resulted from the incident. The participant's interpretation of the offences provided insight into what each incident meant to the participant. When reporting reactions to perceived microaggression, the participants expressed feelings of invalidation, a lack of belonging to a particular group or society as a whole and feelings of distrust from others. As a result, individuals reported a sense of powerlessness due to not knowing how to handle the situation. In this study, the researchers also discussed four dilemmas that may occur when an individual experiences microaggressive behavior. One dilemma is a clash of realities in which Caucasians and African Americans may interpret a situation differently. Another dilemma is expressing bias unintentionally. Unbeknownst to the offender, there

may be an underlying racial bias that influences how he or she acts towards another. The third dilemma happens when the offender believes that minimum harm is caused, and that the recipient of the offense is perceived to be overly sensitive. Lastly, there is a dilemma in knowing how to respond. First, the person had to determine whether a microaggression had occurred. Second, the person had to decide how to respond. If nothing is said, then it could lead to downplaying the incident or harboring negative emotions. However, responding in anger or merely confronting the perpetrator could make the individual appear overly sensitive or angry (Sue, Capodilupo, Torino, et al., 2007).

Sue, Nadal, et al. (2008) conducted a focus group to discover what microaggressive encounters those individuals experienced. They found six common themes of the microaggressive comments between the two groups: assumption of intellectual inferiority, second-class citizenship, a belief that the individual had committed a crime, assumption of inferior status, assumption that all African Americans share the same experience and the assumption of Caucasian cultural values or communication styles. In addition, this race-related stress had a lasting psychological impact in which the participants had feelings of anger, frustration and/or confusion concerning the event.

Microaggressions, Physiological and Psychological Well-Being

The perception of racial microaggressions has been found to have a negative impact on health outcomes (Karlsen & Nazroo, 2002) including a stroke, heart attack and cancer (Sawyer et al., 2012). It may lead to sleep disturbance, headaches, and an elevated heart rate (Smith, 2004). These effects are often the result of race-related stress created by the perception of microaggressions. In addition, data from the National Survey of American Life revealed that older African American females reported higher levels of depressive symptoms than older African American males (Seaton et al., 2010). Harrell's research (2000) suggests that there are a minimum of six types of racism-related stress experienced by many African Americans. These types are racism-related life events, vicarious racism experiences, daily racism, microstressors, chronic-contextual stress, collective experiences of racism, and the transgenerational transmission of group traumas. Stress caused by racism can occur from daily experiences in the form of microaggressions, observations or hearing reports of race-related incidents, or from environmental structures (e.g., social constructs, unequal distribution of resources, institutional racism, and so forth).

Clark et al. (1999) studied the psychological, physiological, and social effects of perceived racism for African Americans. They sought to discover these differences as a way to understand inter-and intragroup differences which could

have several important implications. First, if a perceived racial event causes stress, it may explain intergroup differences on health outcomes. Another aspect that may impact health outcomes are different experiences of discrimination as well as different coping mechanisms amongst African Americans. Third, if it is determined that racism is a contributing factor to negative health outcomes of African Americans then strategies for prevention and interventions could be tailored to this specific group of people. What is interesting about the study is that it is based on an individual's perception of his or her external environment. The very thought of experiencing discrimination may lead to psychological distress depending on the magnitude and/or frequency of the discriminatory acts. Overtime the stress responses may begin to impact the individual physiologically impacting their overall well-being.

Smith et al. (2011) conducted a study that explored the relationship between level of education, racial microaggressions, societal problems and mundane environmental stress in African American males. The researchers found that educational attainment was positively correlated with every day, environmental stress. That is, an African American man with a higher level of education is likely to have a job that has predominately Caucasian workers and as such, they encounter more racial microaggressions. They also found that, for college graduates, both racial microaggressions and societal issues contributed to 40% of mundane environmental stress. In another study, Smith et al. (2007)

explored the psychosocial experiences of African American males that attended one of five universities. They suggest that African American males that attend college at a historically Caucasian institution encounter racial microaggressions that often lead to stress. Over time this stress takes a physiological and psychological toll that impacts the individual's health. Interviews with these 36 African American males revealed that they had experienced psychological stress from racial microaggressions. Many of them also stated that they were determined to overcome such obstacles. While this study did not explore methods used by the participants to overcome psychological stress, it demonstrates a need for coping strategies to mitigate race-related stress. For some individuals, verbalizing an offense to another individual has aided in stress reduction.

A study conducted by Krieger and Sidney (1996) found that African Americans who reported challenging unfair treatment had lower blood pressure than those who did not challenge discrimination. In addition, approximately 90% of participants reported talking to someone about their experience with unfair treatment. This again demonstrates a need to release the tension or stress caused by the event. This finding also suggests that the adoption of religiosity or spirituality may have a positive impact for some individuals.

Religion and Spirituality

There is a body of research that demonstrates the use of religion and spirituality to cope with stressful situations (King & Furrow, 2004; Muireann, 2011). Researchers have studied the reliance of religion and spirituality regarding life-threatening situations such as cancer (Breitbart et al., 2004) and HIV/AIDS (Cotton et al., 2006). There is also research that suggests that individuals who experience chronic pain are less likely to rely on religious or spiritual coping (Rippentrop et al., 2005). This implies that the long-term negative effects of racial microaggressions may impact an individual's religious or spiritual beliefs and practices. In these cases, the individual is more likely to feel abandoned by God, may become less forgiving of others and lack support from a religious community. The perception of racial microaggressions influences an individual's reaction and the level of severity is likely to determine the reliance on religious or spiritual beliefs if an individual identifies as religious or spiritual.

Religion and religious institutions have played a significant role in the lives of African Americans for over a century. The African American Church has been a driving force in providing education, engaging in social justice issues, and providing health care services to the church and community (Taylor & Chatters, 2010). In addition, African American churches and religious leaders have historically paved the way for socio-political mobilization when it comes to

seeking justice for African Americans (Mattis et al., 2004). For example, Martin Luther King, Jr. was both a reverend and activist and his words and actions were heavily influenced by the Bible and his Christian faith. According to the 2009 Pew Research Center's "A Religious Portrait of African-Americans" analysis, 53% of African Americans attend religious services at least once a week, 76% pray daily and 88% are certain that God exists (Pew Research Center, 2009). For many African Americans, religiosity and spirituality are core components in their life so much so that it influences how experiences are internalized and conceptualized (Wood & Hilton, 2012). Significant situations, such as discrimination, are likely to be examined through a spiritual lens in which the individual seeks to understand the offense and how to handle it. This is especially true when it comes to racial microaggressions that are experienced frequently as they inadvertently attack a person's character and/or identity.

Where a spiritual or religious person would turn to a deity, a sacred book or someone within their religious community for comfort and guidance, non-religious/spiritual people must cope in a different way. Some of these individuals have reported relying on substances such as alcohol (Boynton et al., 2014), tobacco use (Agunwamba et al., 2017), marijuana and other drugs (Assari et al., 2019; Carliner, 2016). Other effective coping strategies include anger expression (Park et al., 2018), talking to others (i.e., social support) or trying to do something about it (Linnabery et al., 2014; Polanco-Roman et al., 2016). Mattis et al. (2004)

found that men between the ages of 17-40 who reported experiencing stress from everyday racism were more likely to join political/social justice organizations. Also in this study, it was discovered that church involvement was a predictor for volunteerism but not for involvement in a political/social organization. Subjective religion (i.e., reporting that religion is important in one's life) was a greater predictor for membership in the political/social organization than institutional religion (i.e., participating in the practices of organized religion). It is possible that those who state religion is important in their lives but do not regularly attend church, may engage in more secular activities and therefore are more likely to be introduced to organizations that fight for political and social justice.

Post and Weddington (2000) explored the correlation between African American physicians and stress as well as how these physicians coped with work-related stress (Post & Weddington, 2000). Many of the participants indicated that racism was a main source of stress as it created a hostile environment and increased the need to prove that they were capable. Among the stated coping mechanisms by participants, spirituality and church were common coping strategies used to help manage the effects of discrimination. In another study, researchers investigated if African Americans used different coping strategies for different situations or the same coping mechanisms for every circumstance. What they found was that out of the 14 coping strategies that are a

part of the Brief COPE (Carver, 1997), half of them were used for dispositional coping (i.e., behavior that effects a person's emotional or functional reaction to a stressor). Interestingly, there were two coping strategies that were used significantly more for race-related situations: religion and venting. Like other studies mentioned before, this varied between genders with African American women more likely to rely on religion to help deal with the stress brought on by racism (Brown et al., 2011). Szymanski and Obiri (2011) reported that racist events and internalized racism were positively correlated with the use of both positive and negative religious coping. Experiences with racial events led to both positive and negative coping indicating a greater need for coping mechanisms to help manage external stressors. On the contrary, internal racism only led to negative religious coping but not positive religious coping. This aligns with the concept of negative religious coping in which the individual is likely to feel guilty and blame his-or herself for what occurred.

Religious and Spiritual Coping and Its Outcomes

Individuals who rely on negative religious coping are likely to blame God for circumstances and situations as well as have a negative outlook on life. As a result, it may lead to a decrease in psychological well-being. On the contrary, positive religious coping has been found to have a positive impact on mental health. Gerber et al. (2011) explored the effectiveness of religious coping to help

individuals who suffered from posttraumatic stress disorder (PTSD). What they found was that those who relied mostly on positive religious coping made more posttraumatic growth than those who engaged in negative religious coping. In addition, individuals who used negative religious coping to manage their PTSD showed continual symptoms of PTSD. In another study, individuals with psychosis have been found to engage in religious coping mechanisms (Rosmarin et al., 2013). Those who engaged in negative religious coping had greater symptoms of suicidality, depression, and anxiety; however, there was no effect on psychosis symptoms. In contrast, individuals who engaged in positive religious coping had less symptoms of depression and anxiety and were reported to have greater psychological well-being. Like negative religious coping, positive coping did not decrease psychosis symptoms. This study demonstrated that positive religious coping may impact psychological well-being as well as symptoms of depression and anxiety.

Religious coping is also utilized in several different circumstances. When working through various difficult situations such as health issues, poverty or racism, African Americans often report that prayer and other religious resources are how they cope with such stressors. Religion and spirituality are a well-documented coping mechanism for African Americans. Church institutions and communities provide individuals with social support, including people who share a similar worldview (George et al., 2002). The National Survey of African

American Americans found that nine out of ten participants stated that private prayer or asking someone to pray for them was their most frequent coping mechanism (Chatters et al., 2008). In a qualitative study, Mattis (2002) discovered eight underlying themes that explained the importance of prayer to these women. Some of these themes included confronting and accepting reality, challenging, and exceeding limitations and providing a guideline for behavior. VanderWeele et al. (2017) found that individuals who frequently attend religious services lived in a lower SES neighborhood, were less likely to be depressed, had lower perceived stress, and relied on their religion as a coping mechanism. Individuals who attend religious services may have a lower perception of racial microaggressions and if race-related discrimination is experienced, it is likely that religious coping will be utilized.

According to the Pew Research Center (2018), 79% of African Americans identify as Christian, 18% are unaffiliated, 2% identify as Muslim and 1% identify with other faiths (Masci, 2018). As such, the remainder of this review will focus on the Christian faith; however, it should be noted that each major religion acknowledges transgressions, the desire for peace and practices such as meditation, prayer, rituals, along with others, to help an individual understand and navigate through life. One component of the Christian religion is the acknowledgment of sin and the opportunity to receive forgiveness from God, and consequently being compelled to forgive others as a result.

According to the Bible, sin is a transgression of the law of God and rebellion against God. Therefore, the perception of racial microaggression (i.e., a wrongdoing) is likely to create a physiological/psychological response in the individual who was the recipient of the offense. The individual must then decide how to handle the stress. Those who are religious/spiritual are predicted to behave in accordance with their religion or deity. Krause and Ellison (2003) conducted a study to determine the relationship between various types of forgiveness and psychological well-being. The results showed that individuals who forgave others without requiring restitution had a higher level of psychological well-being (Krause & Ellison, 2003). Moreover, individuals who felt that they were forgiven by God were twice as likely to believe that others should be forgiven unconditionally. Therefore, African and American who believe he or she is forgiven by God is likely to forgive their offender without requiring that person to perform an act of contribution. It can then be predicted that this person will also have a more passive affective response when a perceived microaggression occurs because of a willingness to forgive wrongdoings. In the Bible, Jesus says, "Father, forgive them, for they know not what they do, (*English Standard Version Bible*, 2001, Luke 23:43)." Therefore, if an individual were to be like Jesus Christ, he or she would extend the same grace to his or her offender.

It is common that a relationship with God, or a higher power, influences how an individual interacts with others. Lewis et al. (2007) conducted a focus-

group to study how African Americans defined spirituality as well as what it looks like as it relates to God and people. One distinction between spirituality and religion is the display of unconditional love or acts of altruism. It was mentioned that perhaps the definition of spirituality was born out of experiences of oppression in which the individual would show love and kindness despite ill treatment. This is likely true for that group of participants but could not be generalized to all African Americans.

Though research has shown that religion can be, and is used, as a coping mechanism, little research has focused on how religious coping is used for race-related stressors reported by African American populations. This study will explore the impact of religion and spirituality on behavioral response from African Americans who experience race related microaggressions in their daily life. The purpose of this study is to examine the following research questions:

1. To what degree do African American's demographics (gender, age, education-level), ethnic identity, and reports of racial microaggression explain the variance in psychological well-being?
2. To what degree do religiosity and spirituality moderate the influence of demographics (age, gender, education-level), ethnic identity, and reported racial microaggression on African American's psychological well-being?

CHAPTER III

Method

For this structured literature review, articles were found using the following databases: PsychINFO, ERIC, and Scopus. The keywords used to search the articles were 'African American AND coping AND discrimination.' This search was conducted on August 7, 2021 and generated 185 articles. All articles were placed in a Microsoft Excel spreadsheet which included the title, author(s) name(s), publication date, the source title, DOI and document type. The spreadsheet was used as an aid for the review of the literature to help answer the research questions. For an article to meet the eligibility criteria, the study had to include African Americans, discuss racial discrimination and religion and/or spirituality as a coping mechanism. Articles were excluded if participants were under the age of 18, was not peer reviewed or if it was a meta-analysis instead of quantitative research.

First, 14 duplicate articles were removed. For the remaining articles, the abstracts were read, and 105 articles were eliminated if the criteria were not met. From there, the remaining articles (n = 66) were read in full and eliminated if they did not meet the criteria stated above. This process yielded 25 articles that met full criteria. With each article, the information was analyzed and used to determine if there was variance in psychological well-being when comparing

demographics, ethnic identity, and reports of racial microaggressions. The articles were also reviewed to determine if there is data to support religiosity and spirituality as an effective coping strategy for the stress because of perceived racial microaggressions.

Procedural Integrity and Inter-Scorer Agreement

Keyton et al. (2004, as cited in Aravindan and Vivekanandan, 2017) defined inter-rater reliability as the degree in which the method used to collect data is used in a consistent manner. That is, the procedure used to find the articles in this structured literature review should be able to be replicated repeatedly and produce the same results. To assess the procedural integrity of the articles used in this review, an independent review rater was utilized. This independent review rater was a fifth-year Stephen F. Austin State University graduate student in the Master of Arts School Psychology program. The rater was sent a list of the full-text articles that were reviewed (n=66) and was asked to try to find 13 of the articles (20% of the articles). The formula to determine inter-scorer agreement is as follows: the total articles in agreement divided by articles in agreement plus articles in disagreement and that total is then multiplied by 100. Thus, the agreement rate between the two raters was 92%.

CHAPTER IV

Results

One hundred and eighty-five articles were screened and a total of 160 were eliminated based on their relevance to the research questions and demographic. Duplicate studies were also eliminated. In total, 25 articles were analyzed in this study. Of these articles, many of them explored different facets of racial discrimination, psychological well-being, religion, and spirituality. The articles were placed in a chart which was used to organize the articles' information into the following categories: demographic information, type of research study, measures used and the results of each study.

Demographics

All but one of the articles found included a sample size of at least 100 participants with the exception being 26 members who were a part of a focus group. These studies also included individuals over the age of 18 and typically had mixed genders and amounts of completed education. Smith et al. (2008) sought to determine if there was a connection between coping responses and racism and if this connection could be used to predict psychological distress. The participants in this study attended an undergraduate introductory psychology

course and were around the age of 20. As a part of the study, the researchers asked the participants to self-report various coping strategies that they employed and when ordered from most endorsed to least, religious coping was the fourth most relied on out of the nine coping strategies addressed. The researchers found that psychological distress brought on by discrimination was mitigated by individuals seeking social support. The type of social support was not specified (i.e., church support, friends, or family) nor was religious coping explored in this study. In contrast, Brown and Tylka (2011) found that religious and spiritual practices alone did not mitigate the effects of stress caused by racial microaggressions for African American students between the ages of 18-34. However, racial socialization messages including messages appreciating African American culture were found to be a helpful buffer (Brown & Tylka, 2011).

Krause (2004) explored the relationship between religion and life satisfaction among older African Americans. The sample included African Americans over the age of 66 years with 36% of participants being men. The number of years of completed education was a controlled measure. Krause found that churchgoers find emotional support in church members and reported greater life satisfaction if they believed that religion helped them face racial injustice. In another study, researchers conducted a similar study that examined the role the church plays in the lives of elderly African Americans when faced with racial discrimination (Nguyen, 2018). When comparing lifetime generalized

anxiety disorder (GAD), frequency of contact with church members and everyday discrimination, the data indicates that older African Americans with a low frequency of contact with a church member who reported more discriminatory experiences were at a greater risk for lifetime GAD. No association was found for those who reported experiencing discrimination and lifetime GAD with high levels of closeness with church members (Nguyen, 2018). The effectiveness of church support when dealing with discrimination and psychiatric orders (i.e., panic disorder, social phobia, agoraphobia without panic, generalized anxiety disorder, major depressive disorder, dysthymia, and various bipolar disorders) was also explored. In a sample size of 837 adults over the age of 55 (60% women), researchers found that relationships with church members was an effective coping mechanism for racial discrimination. There was also a decrease in mood disorder symptoms (Nguyen et al., 2021).

There were also studies that were gender specific and studied the effectiveness of religious and/or spiritual coping strategies used by African American men and women. In a study conducted by Hudson et al. (2016), they studied stressors experienced by African American men that may impact their health as well as inquired about their coping strategies. Data was collected from 26 African American males through a focus group. Three main themes were found during the data analysis: perception of discrimination, perceptions of structural racism and coping mechanisms. Discrimination was reported to be

experienced in a variety of different settings including structural racism (e.g., school systems and neighborhoods). Participants also reported that they relied on a variety of different coping mechanisms, one being religion and spirituality. It was not reported how many participants found this to be a positive coping mechanism. Odom and Vernon-Geagans (2010) sought to discover if racial discrimination was a predictor of depression in African American mothers with young children and if church-based social support was a moderator for stress. There was a total of 444 African American women who lived in a low income, rural area in North Carolina. After controlling for demographic variables, they found that optimism and church support reduced symptoms of depression in these women.

Sullivan et al. (2021) examined gender differences in reaction to and types of coping mechanisms used when dealing with discrimination. They found that African American women were less willing to accept discrimination as a way of life and were more likely to become angry, pray or talk to someone about the event or situation in comparison to African American men. Many African American men choose to accept discrimination while many African American women become angry, pray, talk to someone, or do something about it. While this study did not explicitly state the word 'microaggressions,' it measured minor day-to-day incidents of discrimination in which the participant reported being treated unfairly and attributed it to their race. In contrast to the previous study,

Thomas et al. (2008) found that, although African American women report racism experienced specifically by African American women (i.e., gendered racism), spiritual-centered and ritual-centered coping mechanisms were not found to mitigate stress for the women in this study. The youngest age represented in this study was 18 and there were women over the age of 51 (eldest member unspecified in study). There was also a wide range of incomes and various educational backgrounds.

Lewis-Coles and Contantine (2006) looked at which type of racism-related stress implored a certain coping mechanism. They found that institutional racism was associated with higher use of cognitive/emotional debriefing (i.e., adaptive reaction to manage perceived environmental stress), spiritual-centered coping, and collective coping (i.e., coping strategies that rely on group-centered activities) in African American women. Men were more likely to rely on collective coping strategies when they experienced racism-related stress. The sample included African American adults in the northeastern part of the United States. The ages ranged from 18 and older and there were varying education levels and socioeconomic statuses.

Greer (2011) looked at the relationships between coping mechanisms, individual race-related stress, and mental health. In this study, ritual-centered coping mechanisms were associated with higher levels of anxiety. One

explanation for this was the idea that spiritual and religious coping requires one to relinquish control and trust in a deity and therefore, this surrender may cause some to become more stressed. This sample included African American women at a predominately White university in the Southeastern region of U.S. ages 18-46 that were employed either part or full time. The year the student was in college was also measured but not reported.

In studies that included both men and women, the women were always the more dominate gender in the sample. Many studies found that African American women often relied on religion and spirituality to help mitigate the effects of racial discrimination (Lewis-Coles & Constantine, 2006; Sullivan et al., 2021; Tete al., 2019).

Ethnic Identity

Out of the 25 articles reviewed, only one study measured ethnic identity. It was measured using the Sociocultural Scale which has seven questions used to measure racial pride. Utsey et al. (2008) wanted to determine if cultural, sociofamilial and/or psychological resources decreased psychological distress caused by race-related stress. The sample population included individuals between the ages of 18 to 26 who had household incomes that ranged from below \$20000 and above \$80000, and self-identified as African American (n = 215). The researchers found that reports of race-related events were a greater

predictor of psychological distress than other stressful life events. Those with high reports of racism and high reports of religiosity experienced more psychological distress. High religiosity was coupled with high racial pride and was thought to be in correlation with one another due to the likelihood that someone with high racial pride is likely to have increased perception of facing discriminatory acts. As such, high reports of racial discrimination would increase the need for coping mechanisms, one of which is turning to religious practices. No correlation was found between income, race-related events, and psychological distress. The other articles reviewed appeared to have a singular question in which participants self-reported the race they most identified with no further exploration. For example, Hayward and Krause (2015) used a single item to ask participants how close they felt to particular groups (i.e., race, religious Blacks, and a specific religious congregation). A correlation was not established between racial identification and religious coping strategies and psychological well-being was not measured in this study.

Racial Microaggression

Few studies explicitly stated the term 'microaggression' or similar terms (i.e., microassaults or microinvalidations) however, many described racial discrimination experienced daily in places such as the workplace or school (Lunyera et al., 2018; Simons et al., 2019; Sullivan et al., 2021). Studies often

relied on one of the following scales: Schedule of Racist Events, General Ethnic Discrimination Scale, Daily life Experience scale, Race-Related Stress (brief), or Experiences of Racism Scale. A few studies asked participants questions created by the researchers of the study. In all the studies, African American participants indicated feeling stress from experiencing racial discrimination.

Psychological Well-Being

While all studies mentioned the implications racial discrimination has on psychological well-being, few relied on valid and reliable measures. Some questions to measure well-being were created by the researcher(s) while others merely provided references to studies conducted by other researchers. Scales that were used to measure psychological well-being included the Cook-Medley Hostility scale, Spielberger Trait Anger scale, Satisfaction with Life scale, the Brief Symptom Inventory, Symptoms Checklist, and Brief-COPE. In addition, some studies measure well-being based on health or substance use. Simons et al. (2019) sought to determine if there was a relationship between racial discrimination, religious involvement, and inflammation (Simons et al., 2019). Their study relied on the Family and Community Health Study (FACHS) which is a longitudinal study that studies different aspects that relate to African American parents and children dynamics. In this study religiosity was measured using a five-item scale. They controlled for several factors that have been linked to health

including gender, education, age, weekly income, work status, relationship status, health insurance, whether the participant smoked a cigarette or consumed alcohol within the past year, and diet. The study did not differentiate between friends and religiosity therefore there is a weak association between religiosity and decreased inflammation. In addition, racial discrimination was included with adverse social experiences and not the sole independent factor measured to determine if religiosity mitigated the effects of inflammation. Lunyera (2018) also measured spiritual coping strategies by determining if there was a correlation between risk factors for chronic kidney disease, perceived daily and lifetime discrimination and reliance on spirituality as a coping mechanism. Participants were taken from a sample of 5,301 from the Jackson Heart Study. These participants were Black Americans ages 21-94 in the tricounty Jackson, Mississippi metropolitan area and had to have at least one of the following risk factors for chronic kidney disease (CKD): hypertension, diabetes, a history of cardiovascular disease and a high body mass index. They were selected using probability-based and random sampling and baseline data was collected between 2000-2004. There were also two follow-ups between 2005-2008 and 2009-2013. The goal of the study was to determine if 12 different psychosocial factors (which included perceived daily and lifetime discrimination, social support, and spirituality) impacted the prevalence of CKD. Psychosocial factors, which

included relying on spirituality as a coping mechanism, did not appear to affect the prevalence of CKD.

Also, along these lines, in exploring the relationship between racial discrimination, religious coping and hypertension, researchers found that lifetime discrimination was associated with higher rates of hypertension. In addition, religious coping (both positive and negative) seemed to indirectly increase high blood pressure diagnoses because of greater perceptions of discrimination. By this study examining health outcomes based on discrimination, it demonstrated the toll racial discrimination takes on mental health which then has physical implications. It also had results that indicated that religious coping may not be an effective tool; however, the researchers believed a higher perception of discrimination had a greater effect than reliance on religious or spirituals beliefs to help cope with the stress.

Another way that researchers measured stress levels is through substance use. Horton and Loukas (2013) conducted a study in which they sought to discover if religious coping mitigated discrimination as measured by tobacco use. The study compared outcomes between Caucasians, African Americans and Mexican Americans and the sample included 984 technical/vocational students with a mean age of 25. They found that positive religious coping decreased the likelihood of tobacco use for White students while

negative religious coping increased the likelihood for tobacco use for both Whites and Blacks. Interestingly, for African Americans who engaged in positive religious coping, the likelihood of cigarette/tobacco use appeared to increase along with perceived discrimination.

Racial discrimination has been found to increase alcohol-related problems with African Americans. For individuals who seldom relied on religious coping, racial discrimination appeared to indirectly effect their alcohol consumption (Lee et al., 2020). That is, alcohol consumption was greater for those who rarely, or never, relied on religious beliefs as a coping mechanism when dealing with racial discrimination. Lee et al. (2020) conducted a study to determine if religion had any mitigating effects on alcohol use. In this study they found that for those who engaged in low religious coping, racial discrimination indirectly impacted the physical consequence of alcohol use caused by the psychological distress.

When religious and spiritual coping is controlled, life satisfaction has been found to be low and reported stress is high (Vilani et al., 2019). Studies vary on the effects of religious and/or spiritual coping strategies.

Religion and Spirituality

Religious and spiritual coping was measured in several different ways and certain articles focused on certain aspects of the two. The following scales were utilized in the articles that were reviewed: Brief RCOPE, Daily Spiritual

Experience Scale, Africultural Coping Systems Inventory – Racism Modified Version and Sociocultural Scale. Other options included using a Likert scale or asking questions that pertained to the articles research question(s). Out of the 11 studies that explicitly examined the relationship between psychological/physiological effects of racial discrimination and religion and/or spirituality as a coping mechanism, 5 of the studies utilized a scale with high validity and reliability. Of the 25 articles reviewed for this paper, one did not measure religious or spiritual coping mechanisms but merely stated that they are used. Eleven of the 24 articles focused on religious coping only, one measured spiritual coping and the remainder included measures for both religious and spiritual coping.

Hayward and Krause (2015) conducted a study to determine if certain aspects of religiosity were used as coping mechanisms for racial discrimination. Their study not only included African Americans but Caribbean Blacks as well. For the purpose of this review, only the data regarding African Americans will be discussed. Of the 2032 African Americans included in the study, 1696 reported that they attended religious services. The data showed that the more regularly an individual attended a service, the more likely they were to pray as a way of coping with discrimination. Also, those who watched religious media content were more likely to rely on prayer as a coping mechanism. Interestingly, those who were considered highly religious and spent a significant amount of time

praying were least likely to take steps to stop discrimination. On the contrary, spirituality, including prayer, led many to take steps to prevent discrimination.

Current research has found the dispositional forgiveness plays an important role for several individuals seeking to cope with interpersonal transgressions. Brooks et al. (2020) conducted a study to determine if dispositional forgiveness, which goes beyond intrinsic religiosity, was a moderating factor for depression as it relates to perceived discrimination. The study sample included 101 African American adults who were a mean age of 21. They found that dispositional forgiveness did in fact moderate perceived racial discrimination and symptoms of depression more than intrinsic religion.

Church attendance is a well-known aspect of religion. Ellison et al. (2008) conducted a study which explored the impact of church attendance and social support on the perception of racial discrimination. The data used came from the National Survey of Black Americans (NSBA) panel study. Data was collected in waves from 1979 to 1992. The initial sample size was 2,107 and ended with 645. This study focused on aspects of religiosity and spirituality and found that regular church attendance and reliance on aspects of religiosity in daily living mitigated the effects of racial discrimination. However, social support did not have a significant impact. Of note, a limitation mentioned in the study is that there was only one question that measured the perception of racial discrimination and

therefore it cannot be determined that the reported psychological stress experienced is the result of racial discrimination.

In another study conducted by Ellison et al. (2017) the effectiveness of religious involvement when experiencing major acts of discrimination was explored. This includes discrimination regarding housing, employment, and other major instances as they relate to unfair treatment on account of race. In this study, data was used from the Vanderbilt University's Nashville Stress and Health Study in which a probability sample of non-Hispanic Black and White individuals ages 22-69 were used. The results only included the data reported by African Americans (n=627). The data was used to measure depression experienced in the past month, major discrimination, and religious involvement. Socio-demographic information was also considered. Religious involvement was measured using a singular question which measured frequency of church attendance and a few associations were made. The first was that past-month depression was negatively correlated with life satisfaction. Second, religious social support was the only form of religious involvement that mitigated the effects of discrimination and mental health.

McCleary-Gaddy and Miller (2019) conducted a study to determine if negative or positive religious coping mitigated the effects of perceived racial discrimination and psychological distress. They found that negative religious

coping (e.g., negative religious reappraisals) significantly mediated emotional responses to perceived discrimination while positive religious coping had no impact. Psychological distress was measured by reported expression of the participants emotions.

CHAPTER V

Discussion

Through a structured review of the literature, it was discovered that in some cases, African Americans do rely on religion and/or spirituality to mitigate the effects of racial discrimination. In other cases, it has not been found to have a significant impact. Most studies control for the effects of demographic information; therefore, making it difficult to determine what variance each factors cause. Two studies were found to have used specific age groups which may explain to some degree the role religion and/or spirituality plays. A study conducted by Lee et al. (2020) examined the relationship between racial discrimination, psychological distress, and alcohol consumption among emerging adults. He also investigated if religious coping was used as a protective measure which would lead to a decrease in the consumption of alcohol. Findings from the study suggest that those who endorse high religious coping also report higher levels of psychological stress. It is likely that those who implore religious coping strategies frequently may also experience a high level of stress.

Two other studies examined the relationship between racial discrimination and religious coping strategies with individuals over the age of 55. Both studies found that the emotional/social support provided by members of the church

helped to manage the stress experiences by everyday stressors (Krause, 2004; Utsey et al., 2008). Many of the studies indicated that women, more than men, utilize religious coping strategies to manage race-related stress (Brookes et al., 2021; Ellison et al., 2008; Hayward & Krause, 2015; Lewis-Coles & Constantine, 2006; Sullivan et al., 2021; Thomas et al., 2008; Tete et al., 2019).

Although there are several valid and reliable scales that can be used to measure ethnic identity (e.g., Multigroup Ethnic Identity Measure, Ethnic Identity Scale, Cross Ethnic-Racial Identity Scale, and others), many researchers have not added this as a component to their studies. Perhaps it is to avoid creating a lengthy questionnaire as doing a full scale would create more questions in comparison to simply asking participants to self-identify with an ethnicity. Despite the additional questions it is helpful to understand the connection one has to their ethnicity as this can impact the perception of racial microaggressions as well as better explain the variance in race-related stress. Strong ethnic ties have been found to be a protective factor for many African Americans (Woo et al., 2019).

There is data to support that reliance on religious and/or spiritual practices can help mitigate effects of race-related factors. There are many factors that contribute to the effectiveness of these strategies such as age, gender, and level of religious and spiritual involvement. There is limited research that discusses the effectiveness of spirituality as a coping mechanism, separate religiosity. More

research in this area will help decipher what strategies individuals are using and what appears to be effective for a specific group of people. It would also be beneficial to explore the degree to which African Americans identify with their ethnicity and/or culture. Establishing this relationship will add another layer of understanding to the complexity of the factors contributing to race-related stress and its impact on individuals.

Limitations

There are a few limitations to this review. The first is the limited number of resources that explicitly state microaggressive behaviors. Although the term has been used for many decades (Williams et al., 2020), as was discovered in this structured literature review, it does not appear that there is much research on its relationship with religious and spiritual coping. As such, it is difficult to measure the effects of subtle, daily, race-related events when it is often measured using more blatant forms of inequality. For example, Ellison et al. (2017) explored the relationship between religious involvement and major discrimination such as unfair treatment in labor markets and with housing. This study was able to establish a positive relationship between major discrimination and depression, a negative relationship between discrimination and life satisfaction and it demonstrated that religious social support could help buffer the effects of discrimination. However, it did not explore the relationship of more subtle

discriminatory acts. Another example is Teteh and colleagues (2019) which relied on participants' self-report of unfair treatment during his or her lifetime. They were asked questions regarding unfair treatment with housing, discouragement from teacher or advisor on continuing education, being denied a bank loan or not being hired for a job. While no mitigating effects were found in this study, data showed that religious coping was indirectly associated with increased reports of perceived discrimination.

Another limiting factor is the lack of data that could be used to compare the effectiveness of religious and spiritual coping regarding stress from microaggressive behaviors for different age groups. Many of the studies included students from universities (Brown & Tylka, 2011; Franklin, 2019; Geer, 2011; Utsey et al., 2008) which either created a narrow window (e.g., ages 18-30) or a broad spectrum (e.g., 22-69). Despite having data for young adults, age was often a controlled variable; therefore, it led to the inability to examine age as a factor for psychological well-being. However, studies conducted by Krause in 2004 as well as Nguyen and colleagues in 2018 and 2021, included participants exclusively over the age of 50 which provided insight to coping strategies used amongst the older generation. Long-term psychological well-being could be measured with this group whereas younger participants provide a more momentary indication of well-being. Many studies use a wide range of ages, and it is important to recognize that there may be generational/cultural differences

that contribute to the variation in data. Along with these generational and cultural differences are most likely different perceptions of different forms of discrimination.

Lastly, the results of these finding may be impacted by bias. Given that women are more likely to rely on religion and spirituality to cope with stressors, many of the studies have majority women in their sample; thus, providing significant data that supports the hypothesis that it is an effective coping mechanism.

Future Studies

There are several factors that impact the perception of racial discrimination. One major factor is racial and ethnic identity. Lee and Ahn (2013) examined the relationship between racial identity, ethnic identity, racial socialization, and discrimination. Discrimination and/or psychological distress was tied to either racial identity, ethnic identity, or racial socialization. This implies that the level of connectedness an African American has towards his or her race or culture impacts their perception of discriminatory acts as well as any psychological stress that may occur (Lee & Ahn, 2013). As such, ethnic identity contributes to variance in psychological well-being. This supports the results from Utsey et al. (2008)'s study in which high reports of racism was correlated with high reports of religiosity and more psychological distress. The researchers hypothesized that

the increased psychological distress despite high religiosity was due to high racial pride which likely leads to increased perceptions of racism. This may also have implications for effective coping mechanisms as religion and spirituality alone may not help those with high ethnic and/or racial identity.

Another factor that impacts racism-related reports is level of completed education. Dyke et al. (2017) found a correlation between higher education and discrimination amongst African Americans. That is, African Americans with a college degree reported high incidents of discrimination than individuals with a lower education (ranges from no education to some college). This study shows that the level of education one has also impacts reports of discrimination. This also has implications on studies that use populations solely from universities.

There are also many studies that use microaggressions and racial discrimination interchangeably. While racial microaggressions are a form of discrimination, there is a need to study the effects of these more subtle acts. As of March 2022, the House passed the CROWN Act which would ban discrimination based on cultural hairstyles. This law demonstrates that microaggressive behaviors continue to effect African Americans today and have just as significant an impact as the more transparent forms of discrimination.

Conclusion

While the research did not support that religious and/or spiritual coping mechanisms are effective coping mechanisms for mitigating stress caused by racial microaggressions, it did demonstrate their effectiveness for racial discrimination in general. There is evidence that both men and women rely on their religious or spiritual beliefs to help buffer racism-related psychological distress (Krause, 2004; Odom & Vernon-Geagans, 2010; Sullivan et al., 2021). There is also evidence that religiosity and spirituality increase psychological well-being with African Americans over the age of 50 who report frequent race-related events (Krause, 2004; Nguyen et al., 2018; Nguyen et al., 2021). There is not substantial data to indicate a relationship between religiosity/spirituality, ethnic identity, and psychological well-being. Nor is there enough data to establish a relationship between religiosity/spirituality, reported racial microaggression and psychological well-being. There are many factors that impact reports of microaggressive encounters which should be considered in future studies. Studies should also measure the salience of religion/spirituality as well as racial/ethnic identity when seeking to measure psychological well-being as it related to racial microaggressions.

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