

Perceived Racism and Coping among Latino Immigrant Men

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Background

- Studies show that perceived racism is associated increased risk of unhealthy cancer-related behaviors, such as tobacco and alcohol use, among Latinos.
- Theory and empirical search among African-Americans suggests that coping resources can mediate the harmful effects of perceived racism on health.
- Coping resources refer to factors that can hinder, prevent or buffer the appraisal of stress and its outcomes.
- Few studies have examined the relationship between perceived racism and coping among Latinos.

Study Objective

Assess the relationship between perceived racism and coping among the growing Latino immigrant population in North Carolina.

Research Design & Methods

- Secondary data analysis of baseline data collected from 274 Latino immigrant men that participated in the *Men as Navigators (MAN) for Health and Hombres Manteniendo Bienestar y Relaciones Saludables (HoMBReS)* lay health advisor intervention study in central North Carolina.
- Participants were recruited at community events and from soccer leagues operated by and for Latino men.
- Baseline surveys were self-administered between the summers of 2005 and 2006. All surveys were completed in Spanish.
- Coping resources measured included coping type (active cognitive, active behavioral and avoidant coping) and sense of mastery.
- Perceived racism measures included the CDC BRFSS Reactions to Race module (perceptions of racism in US, observed racism, unfair racial treatment at work/health care), as well as a measure of different types of perceived racism (discrimination based language, legal status, race/ethnicity).
- Univariate and bivariate analyses were conducted to describe the study sample characteristics and patterns of coping and perceived racism.
- Linear regression models were used to assess the relationships between perceived racism and coping variables.
- For significant associations, additional models were estimated controlling for income and acculturation (which were both significantly associated with both perceived racism and coping).

RESULTS

Table 1. Sociodemographic Characteristics and Coping in the Study Sample

	Number	Percent	Mean (SD)
Age (years)			29.3 (7.8)
18 - 24	77	28.6%	
25 - 29	77	28.6%	
30 - 34	53	19.7%	
35+	62	23.0%	
Marital Status			
Single	90	33.1%	
Married or living as married	182	66.9%	
Household size			4.5 (1.8)
Education			
Less than High School/GED	165	60.9%	
High School/GED or greater	106	39.1%	
Income			
Less than \$10,000	46	17.2%	
\$10,000 - \$16,000	72	27.0%	
\$16,001 - \$22,000	60	22.5%	
\$22,001 - \$28,000	43	16.1%	
\$28,001 or more	46	17.2%	
Country of Origin			
Mexico	192	70.0%	
Other country	77	28.0%	
Years living in the U.S.			8.0 (7.0)
Level of acculturation (range 1 - 5)			1.8 (0.7)
Coping			
Active cognitive coping (range 6 - 18)			12.3 (2.7)
Active behavioral coping (range 7 - 21)			15.0 (3.2)
Avoidant coping (range 7 - 21)			10.2 (2.5)
Sense of mastery (range 1 - 5)			2.2 (0.8)

Figure A. To what extent do you think racism is a problem in the U.S. today?

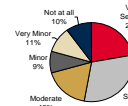


Figure B. How often do you notice other people being treated unfairly based on their race/ethnicity?

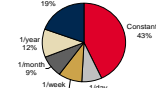
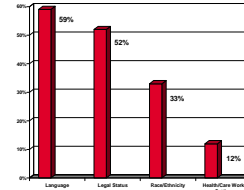


Figure C. Frequency of Discrimination by Type and Setting (%)



- Active cognitive coping: *I would try to see the positive side*
- Active behavioral coping: *I would take some positive action*
- Avoidant coping: *I would keep my feelings to myself*
- Sense of mastery: *What happens in the future mostly depends on me*

MODELS

Table 2. Associations between Perceived Racism and Coping (n=270)

	Active Cognitive Coping		Active Behavioral Coping		Avoidant Coping		Sense of Mastery	
	B	SE	B	SE	B	SE	B	SE
	Racial/ethnic discrimination	0.26	0.35	0.44	0.40	0.54	0.34 *	0.15
Language discrimination	0.09	0.33	-0.08	0.38	-0.01	0.32	0.14	0.07 *
Legal status discrimination	0.14	0.33	0.37	0.38	-0.11	0.32	-0.02	0.07
Racism is a problem in the US	0.32	0.10 **	0.23	0.11 *	0.10	0.10	0.03	0.02
Unfair racial treatment at work or health care	-0.49	0.50	-0.45	0.59	1.97	0.47 ***	0.40	0.10 ***
Observing racism towards others	0.27	0.08 **	0.24	0.10 *	0.02	0.08	-0.04	0.02 *

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

Table 3. Adjusted models for Perceived Racism and Coping (n=270)

	Avoidant Coping		Sense of Mastery	
	B	SE	B	SE
Racial/ethnic discrimination	0.54	0.34 *	0.15	0.07 *
Language discrimination			0.10	0.07
Unfair racial treatment at work or health care	1.99	0.47 ***	0.37	0.10 ***
Observing racism towards others			-0.03	0.02
	Active Cognitive		Active Behavioral	
	B	SE	B	SE
Racism is a problem in the US	0.27	0.10 **	0.23	0.11 *
Observing racism towards others	0.22	0.08 **	0.19	0.10

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

Models adjusted for income and acculturation

Key Findings

- Characteristics of the sample were that the most men were in their 20s - 30s, married, low income, had less than a high school education, had been in the U.S. less than ten years and had low levels of acculturation.
- Average coping scores were in the middle of the range for all coping types.
- A majority (52%) of the men in perceived racism to be a serious or very serious problem in the U.S.
- A large percentage of the men had experienced discrimination themselves or observed unfair treatment towards others.
- In models adjusted for income and acculturation
 - Racial/ethnic discrimination and experiencing unfair treatment in work or health care settings was associated with avoidant coping and a higher sense of mastery
 - Thinking racism is a problem in the US was associated with both active cognitive and active behavioral coping
 - Observing racism towards others was associated with avoidant coping.

Conclusions

- Latino immigrant men may utilize different types of coping when experiencing different types of perceived racism.
- More external perceptions of racism (in US/towards others) were associated with active coping types, while more internal perceptions of racism (towards self) were associated with avoidant coping.
- More research is needed to understand how Latino men cope with perceived racism and whether this influences their health and health behaviors.

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