LETTERS

PERCEIVED DISCRIMINATION AND **RACIAL/ETHNIC DISPARITIES IN** YOUTH PROBLEM BEHAVIORS

I read with interest the article on the association between perceived discrimination and racial disparities in problem behaviors among youths,¹ and I commend the authors for exploring the effects of discrimination on the mental and physical health of minority preadolescents.

The authors state that the questions used to measure discrimination were based on those originally described by Greene et al.,2 which separately measured the discrimination from adults and the discrimination from peers. I ask the authors why they decided to group all sources of discrimination in their measurements, and if this grouping has implications on their findings.

The authors suggest a role of discrimination on problem behaviors of Blacks and Latinos that is irrespective of socioeconomic status, and I ask the authors their views on the extent to which perceived discrimination results from socioeconomic disparity and should therefore not be considered in isolation.

In addition, the authors state that developing interventions for Black and Latino youths to acknowledge the existence of racial discrimination may help to reduce mental and physical

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health problems. Considering that the authors' own research suggests that Blacks and Latinos are already familiar with the existence of racial discrimination, I wonder whether such interventions may be more beneficial if targeted toward White youths.

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References

- 1. Bogart LM, Elliott MN, Kanouse DE, et al. Association between perceived discrimination and racial/ethnic disparities in problem behaviors among preadolescent vouths. Am J Public Health. 2013;103(6):e1-e8.
- Greene ML, Way N, Kerstin P. Trajectories of perceived adult and peer discrimination among Black, Latino, and Asian American adolescents: patterns and psychological correlates. Dev Psychol. 2006;42(2):218-236.

BOGART ET AL. RESPOND

We appreciate the opportunity to respond to Nathan's insightful questions and to elucidate several aspects of our research. Nathan asks about the implications of grouping together all discrimination sources. As she notes, Greene et al. suggest that discrimination source plays a role in health outcomes, with peer discrimination more highly related to mental health than adult discrimination. However, the *Healthy* Passages fifth-grade survey did not ask separate questions about discrimination by adults and discrimination by peers. Measuring and analyzing the distinct effects of different discrimination sources on health disparities in this age group would be an important contribution to the field.

Nathan also asks the extent to which perceived discrimination results from socioeconomic status (SES) disparities. We controlled for SES and still found robust effects. It may also be useful to jointly examine effects of SES- and

race-based discrimination. Some research has done so; one study found that SES-related discrimination had significant effects on mental health whereas racial discrimination did not,² and two studies found similar effects on physical and mental health for the two discrimination types.^{3,4} Additional studies are needed among youths to further examine the effects of multiple forms of discrimination.

Finally, we would like to clarify our study's implications for intervention. We believe that there is potential benefit from structural-level interventions (e.g., policies to decrease racial residential segregation and improve resources in lower-SES communities; school programs to encourage reporting of discrimination) and individual-level interventions for all racial/ ethnic groups. Therapeutic interventions for Black and Latino youths could help to validate their experiences by acknowledging the extent of societal discrimination in their lives and the toll it takes and could foster adaptive coping responses to the stress of discrimination (such as support-seeking). For Whites, individual-level interventions could focus first on raising awareness about the harmful effects of discrimination and the ways in which stigma unconsciously influences behaviors (even among individuals who do not see themselves as prejudiced)⁵ and second on employing social-psychological stigma-reduction strategies such as facilitating positive contact among racial/ethnic groups via anti-discrimination school policies.⁶ A comprehensive strategy of intervening at both the individual and community levels and addressing the experiences and behaviors of both perceivers and targets offers a promising approach for reducing discrimination.

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Note. The conclusions of this letter are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

References

- Greene ML, Way N, Pahl K. Trajectories of perceived adult and peer discrimination among Black, Latino, and Asian American adolescents: patterns and psychological correlates. *Dev Psychol.* 2006;42(2):218–236.
- 2. Gamarel KE, Reisner SL, Parsons JT, Golub SA. Association between socioeconomic position discrimination and psychological distress: findings from a community-based sample of gay and bisexual men in New York City. *Am J Public Health*. 2012;102(11):2094–2101.
- 3. Bird ST, Bogart LM. Perceived race-based and socioeconomic status (SES)-based discrimination in interactions with health care providers. *Ethn Dis.* 2001; 11(3):554–563.
- 4. Bird ST, Bogart LM, Delahanty DL. Health-related correlates of perceived discrimination in HIV care. *AIDS Patient Care STDS*. 2004;18(1):19–26.
- 5. Dovidio JF, Penner LA, Albrecht TL, Norton WE, Gaertner SL, Shelton JN. Disparities and distrust: the implications of psychological processes for understanding racial disparities in health and health care. *Soc Sci Med.* 2008;67(3):478–486.
- Pettigrew TF, Tropp LR. A meta-analytic test of intergroup contact theory. J Pers Soc Psychol. 2006; 90(5):751–783.