

**Does racial and/or ethnic identity serve to mitigate the internalized racism-induced
psychological distress in Asian Americans**

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Abstract

This literature review explores whether racial and/or ethnic identity (REI) mitigates psychological distress caused by internalized racism among Asian Americans. Internalized racism (IR) is a process in which individuals from racial minority groups adopt negative stereotypes and societal beliefs about one's racial group. Asian Americans uniquely internalize stereotypes such as the Model Minority Myth and the perpetual foreigner stereotype, exacerbating inter- and intra-racial divisions. IR has been linked to negative mental health outcomes in Asian Americans, including decreased collective and self-esteem, depressive symptoms, somatic symptoms, etc. While REI has been shown to buffer the harm to the mental health of external racism in certain contexts, its protective role in internalized racism-induced distress remains understudied, especially among Asian Americans. Two hypotheses are proposed for REI's role in the relationship between IR and psychological distress. The review pointed out the difficulties in investigating this topic and provided future research directions.

Keywords: Asian American, internalized racism, mental health, racial and/or ethnic identity

Does racial and/or ethnic identity serve to mitigate the internalized racism-induced psychological distress in Asian Americans

Asian Americans have long been racialized as other, both devalued other and idealized other (Godon-Decoteau et al., 2024). One of the most prominent stereotypes of “devalued other” is the perpetual foreigner stereotype, which states that Asian Americans can never fully assimilate into the so-called “American culture” or be “real” Americans. The pervasive stereotype of “idealized other” is the model minority myth, which devalues the efforts of Asian Americans and ignores the needs of Asian Americans who have high poverty and low education. Asian Americans themselves tend to internalize both devaluing and seemingly idealized positive stereotypes. When Asian Americans internalize devaluing stereotypes like the perpetual foreigner stereotype, they tend to have a feeling of inferiority for their culture and try to distance themselves from it; when internalizing the model minority myth, they fall into the trap that creates division with other minority groups like African Americans (Godon-Decoteau et al., 2024). Prior literature has suggested that internalized racism is detrimental and deleterious to Asian Americans’ mental health (Speight, 2007), and ethnic and/or racial identity might serve as a protective factor to mitigate the harm of internalized racism on Asian Americans’ mental health (Willis et al., 2021). However, little research has investigated the role of racial and ethnic identity in the relationship between internalized racism and induced psychological distress at the same time. Therefore, in this literature review, I will integrate studies from both topics to demonstrate whether racial and ethnic identity can only buffer the psychological distress caused by internalized racism in Asian Americans under certain contexts.

Defining Internalized Racism

Internalized racism refers to a form of racism that occurs when individuals from racial minority groups adopt negative societal beliefs and stereotypes about themselves in order to endorse the dominant White culture in the United States. This results in self-loathing, contempt for one's own race and ethnic identity, self-devaluation, and self-hatred (Chopra, 2021; Speight, 2007). Contemporary racism tends to take on a more covert and subtle form, many of which appear in our daily encounters with social media and in interpersonal communications with White people and sometimes even within the racial minority group. The manifestation of internalized racism in racial minorities, in turn, is in covert and subtle forms. Therefore, it is more challenging to identify internalized racism. As racial minorities internalize the values, norms, and beliefs of the dominant group, the dominant group has the power not only to define what it means to be "normal" but also to disparage, ignore, and suppress the culture of the minorities (Speight, 2007). Prior research has suggested that internalized racism is highly associated with various conditions of psychological distress, including decreased self-esteem, anxiety, and major depressive disorder (Gale et al., 2020).

Internalized Racism in Asian Americans and Its Harm

Internalized racism is pervasive among Asian Americans, and it is unique compared with other racial minority groups. Many Asian Americans tend to internalize stereotypes about themselves, whether they are positive or not, which is a significant part of internalized racism by definition (Hwang, 2021). Therefore, stereotypes of Asian Americans directly reinforce their internalized racism.

Internalized Racism leads to inter- and intra-racial othering

Hwang (2021) proposed that the historical development of the prominent stereotypes (i.e., model minority and perpetual foreigner stereotypes) led to two types of othering, “oppressive othering” and “defensive othering.” Oppressive othering is the concept that racial minorities are intellectually and morally inferior, which has been used to distance Whites from minorities. Defensive othering refers to the competition between oppressed groups, preventing them from solidarity and denigrating their own groups (Hwang, 2021). Thus, internalized racism in Asian Americans creates divisions both inter-racially and intra-racially.

Internalized Racism and Mental Health

As mentioned above, studies have found that internalized racism (IR) is detrimental to Asian Americans’ mental health outcomes. Choi et al. (2017) developed and evaluated the Internalized Racism in Asian American Scale (IRAAS). The study asked 655 Asian Americans with diverse backgrounds in terms of age, ethnicity, education, and socioeconomic status about their levels of internalized racism, depressive symptoms, and self-esteem levels. The authors found that higher levels of IR were significantly predictive of depressive symptoms. They also found a negative correlation between IR and collective self-esteem, meaning that higher levels of IR could predict lower levels of collective self-esteem among Asian Americans.

David (2008) focused on Filipino Americans’ internalized racism. Due to the historical context, Filipino Americans’ internalized racism is usually manifested as Colonial Mentality (CM; David & Okazaki, 2006). In the study, the researcher asked Filipino Americans about their CM using the Colonial Mentality Scale (Davis & Okazaki, 2006), collective self-esteem, and

psychological distress. The researcher found that CM is a significant predictor of depressive symptoms in Filipino Americans. The earlier research obtained similar results that Filipino Americans who do not endorse CM had significantly higher self-esteem scores and lower depression scores than those who endorse CM.

Recent research conducted during the COVID-19 pandemic provided mixed findings on this relation. Liu et al. (2022) examined whether direct experiences of COVID-19 racism and exposure to COVID-19 racism led to negative mental health outcomes. 565 Asian Americans completed an online survey in June 2020 asking about COVID-related life changes, mental health outcomes, COVID-specific racism, and internalized racism. Results indicated that internalized racism exacerbated the effect of somatic symptoms for first-generation Asian Americans. For 1.5-generation and U.S.-born Asian Americans, internalized racism reduced the strength of the effect of both direct and indirect racism on psychological distress, which is inconsistent with previous research. The authors reasoned that because 1.5-generation and U.S.-born Asian Americans have more affiliation with the dominant white culture and have endorsed Whiteness, they denied that they were targeted by racial stereotypes. By doing so, internalized racism could buffer its negative impact on mental health (Liu et al., 2022).

Overall, existing literature has reported that internalized racism could have various negative mental health outcomes in Asian Americans. Although Liu et al. (2022) found mixed results in individuals of different generational statuses, they pointed out that internalized racism is both adaptive and harmful. The finding that decreased self-esteem and collective self-esteem correlated with higher internalized racism levels was prominent in this field of research. This

result is in line with the definition of internalized racism, “individual inculcation of the racist stereotypes, values, images, and ideologies perpetuated by the White dominant society about one’s racial group, leading to feelings of self-doubt, disgust, and disrespect for one’s race and/or oneself” (Pyke, 2010). The process of internalized racism results in not only distancing from one’s racial group but also denigrating of one's own culture, which leads to lowered self-esteem on both personal and group levels. Other mental health outcomes discussed in the literature include depressive symptoms, somatic symptoms, and suicidal ideation (Choi et al., 2017; David & Okazaki, 2006; David, 2008; Keum et al., 2022; Liu et al., 2022). However, the impact of internalized racism on Asian Americans’ mental health still lacks research and needs more attention because of theorized harms and empirical evidence.

The studies reviewed above provided clinical implications for internalized racism in Asian Americans, which include introducing culturally sensitive clinical practices and raising awareness of practitioners’ bias and racism (David & Okazaki, 2006; Chopra, 2021). However, extant literature about the relationship between internalized racism and psychological distress in Asian Americans generally does not mention and investigate potential buffers and protective factors for internalized racism-induced psychological distress. Therefore, I will discuss the role of racial and ethnic identity in this relationship in the following sections.

Defining Race and Ethnicity

Both race and ethnicity are social constructs. In other words, neither concept is innate or biological. Specifically, race is an ideology that categorizes people into distinct groups. The categorization is usually based on physical appearance, which might include skin color and facial

features. Because of the nature of this concept, people easily discriminate against individuals of other racial groups based on their physical appearance. Therefore, race can be used to allocate power and oppress other people. It is important to note that race can be both ascribed and claimed. Asian American is an example of race in the United States.

On the other hand, ethnicity refers to common cultural traits that distinguish people from one group to another. Ethnic groups are formed when a group of people share cultural traits such as language, geographic location or origin, religion, traditions, values, etc. Unlike race, ethnicity focuses on culture instead of physical appearance. Therefore, ethnic identity is more nuanced than racial identity because it is fluid and unfixed. Moreover, ethnicity is usually claimed instead of ascribed by others (Smedley & Smedley, 2005). For example, what it means to be a Chinese American might shift over time under different social contexts. Although there are distinctions between race and ethnicity, they are highly related and are usually studied as a larger construct when it comes to identity. Therefore, racial and/or ethnic identity will be used in the following discussion.

Based on the definition of race and ethnicity provided above, racial and ethnic identity is, thus, defined as a sense of belonging toward a racial or ethnic group (Wakefield & Hudley, 2007). When understanding racial and ethnic identity from a perspective of Social Identity Theory (Tajfel & Turner, 1979), the more individuals identify with their racial and ethnic groups, the more positive they feel about their groups. As a result, researchers hypothesize that racial and/or ethnic identity can serve as a buffer in the face of discrimination because that identity can counterbalance the harm and distress induced by the discrimination (Yip et al., 2008). Yi et al.

(2008) also acknowledge that REI might exacerbate the negative effect of discrimination because individuals who have a stronger REI might attribute ambiguous situations to discrimination and thus influence their mental health.

Does racial and/or ethnic identity buffer the harm caused by internalized racism in Asian Americans?

Prior research studied whether racial and/or ethnic identity (REI) buffers psychological distress caused by internalized racism in African Americans found mixed results (Lee & Ahn, 2013). Specifically, some aspects of REI can serve as protective factors for internalized racism, like public regard, which refers to whether African Americans believe positive views from others about their own racial group (Willis et al., 2021), while other aspects, like private regard or stronger identification with African Americans, are indirectly associated with psychological distress (Lee & Ahn, 2013). Some but not many studies have investigated the relationship between REI and mental health outcomes in Asian Americans. However, there is a huge dearth of studies that examined specifically the effect of REI on the psychological harm caused by internalized racism. Therefore, I will review studies that investigate whether REI can serve as a buffer for mental health in Asian Americans and try to make inferences about its effect on internalized racism's harm.

Surprisingly, very few studies have found the protective role of REI in the harm and distress caused by discrimination. Choi et al. (2016) explored the moderating effect of ethnic identity on the relationship between racial microaggressions and depressive symptoms in Asian Americans. In their study, ethnic identity was examined in two themes: exploration (i.e., learning

the culture of their ethnic group) and commitment (i.e., attachment, affinity, and/or affiliation to their ethnic group). They found that racial microaggressions can predict depressive symptoms, and ethnic identity is a protective factor against negative mental health outcomes of racial microaggressions (Choi et al., 2016). However, the authors did not elaborate on the results of the themes of the ethnic identity variable measured in the study. This raises the question of whether exploring one's REI would predict different results of racial microaggression-induced psychological distress than a commitment to one's REI.

More studies revealed mixed results on the effect of REI in buffering negative mental health outcomes from discrimination. For example, Huynh et al. (2014) examined both ethnic and national group identifications as moderators of the relationship between discrimination and psychological distress. They found that individuals who strongly identified with both their ethnic and national groups demonstrated the weakest relationship between discrimination and distress. In contrast, individuals who had weak ethnic identification with any level of national identification demonstrated a significantly stronger relationship between discrimination and distress (Huynh et al., 2014). The researchers suggested that individuals with dual identification have more resources from both groups when they encounter a discriminatory situation. The other research published in the same year focused on the buffering role of ethnic identity for Asian American adolescents (Stein et al., 2014). The researchers found that ethnic belonging was related only concurrently to self-esteem and was unrelated to depressive symptoms. Using a similar model of measuring ethnic identity in Choi et al. (2016), Stein et al. (2014) found that ethnic exploration was positively related to self-esteem and negatively to depressive symptoms

longitudinally, suggesting the beneficial role of taking actions in strengthening the buffer effect of REI in against racism. Moreover, Asian American adolescents with a stronger ethnic belonging have greater self-esteem when facing economic difficulties than adolescents with a weaker ethnic identity. Again, this buffering role is only present concurrently, not longitudinally. However, adolescent Asian Americans with stronger ethnic belonging and economic stress predicted a higher risk of developing depressive symptoms in the long term. Therefore, Stein et al. (2014) underscored the importance of age when examining the buffering role in the relationship between discrimination and other stressors and mental health outcomes. In fact, Yip et al. (2008) found that individuals between 41 and 50 years of age who had a stronger ethnic identity were less likely to report psychological distress when encountering discrimination. The researchers suggested that this age effect may be because identity becomes more stable as individuals age. Additionally, individuals entering middle age can cope with stress and emotions more effectively when encountering a negative situation.

There are also studies that found an exacerbating role of REI in the relationship between discrimination and negative mental health outcomes. Similar to one of the findings in Yip et al. (2008) that immigrants with a stronger ethnic identity were not protected from the negative effect of discrimination on mental health, Choi et al., 2020 found that immigrants with higher REI were more likely to experience higher psychological distress when they face discrimination, displaying an exacerbating effect of REI. In line with the exacerbating hypothesis (Yip et al., 2008), the researchers argued that stronger REI might result in stronger negative feelings of racial discrimination.

Taken together, the literature on the role of REI in the relationship between racism and psychological distress has come to mixed results. One study found a protective effect of REI but did not run further exploratory analyses on the ethnic identity variables. More studies found that REI only serves as a protective factor for psychological distress induced by racism under certain contexts. Specifically, exploration (i.e., actively exploring the culture of one's ethnic group), but not a sense of belonging, could predict a more positive mental health outcome when encountering racism. During adolescence, REI does not serve as a protective factor. While for people in their middle age, REI could serve as a protective factor. Moreover, dual identification with the ethnic group and the heritage nation also predicts positive mental health outcomes when facing discrimination. As pointed out earlier in the section, however, all of the literature that studies the role of REI focused on external sources of racism, including direct racial discrimination and racial microaggression. There is no literature in Asian American psychology that directly investigates whether REI is a protective factor in internalized racism-induced psychological distress.

Discussion

This literature review integrates studies in two major areas in the realm of Asian American Psychology and tries to extend the current understanding of the role of REI in the relationship between internalized racism and its harm to Asian Americans' mental health. That is, whether REI serves as a protective factor for internalized racism-induced psychological distress. Generally speaking, scholars have come to the census that internalized racism is detrimental to Asian Americans' mental health, including inter- and intra-racial othering, which is manifested

through internalizing stereotypes about Asian Americans, such as the Model Minority Myth and the perpetual foreigner stereotype (Hwang, 2021). A bulk of research has shown that internalized racism in Asian Americans leads to psychological distress like depressive symptoms, low collective and self-esteem, somatic symptoms, etc. (Choi et al., 2017; David, 2008; Keum et al., 2022). One study found that higher levels of acculturation can buffer internalized racism-induced psychological distress by denying being targeted with racial stereotypes (Liu et al., 2022). Most research regarding internalized racism indicated its harm to mental health; some discussed clinical implications, but none of them mentioned any potential protective factors to mitigate this harm.

Few research has found that in African Americans, REI could serve as a protective factor for internalized racism only under certain contexts, like the outgroup's positive perception of their own racial group (Willis et al., 2021). In Asian American psychology, to my knowledge, there is not yet any empirical study that directly investigates whether REI can buffer internalized racism-induced psychological distress. Some research studied the REI's role in the relationship between direct racism or racial microaggression and mental health outcomes. Similar to the results that investigated the African American population, REI can mitigate racism-induced psychological distress under certain contexts. Below, I will propose two hypotheses that might explain the role of REI in the relationship between internalized racism and psychological distress.

Exacerbating Effect of REI

This first hypothesis proposes that REI would exacerbate the internalized racism-induced

psychological distress in Asian Americans. When REI is one of the core components of one's identity, people tend to be aware of discrimination targeting one's racial/ethnic group. Empirical evidence has suggested that highly identified racial minority individuals were more responsive to covert racism (Operario & Fiske, 2001). Moreover, because "self-devaluation and contempt for one's own REI" is a crucial part of the definition of internalized racism (Chopra, 2021), a strong REI would exacerbate this feeling of inferiority. Prior research has shown that highly identified individuals react more negatively to ethnic and racial discrimination (Operario & Fiske, 2001). Different from an external source of racism, even if it is a microaggression, internalized racism could elicit a worse mental health outcome because it adds a layer of self-loathing. Therefore, in this case, REI is a mediator that explains the relationship between internalized racism and psychological distress (see Appendix for an illustration).

Protective Effect of REI

Alternatively, one could also argue that REI could be a mechanism that buffers Asian Americans from negative mental health outcomes. As introduced in the Defining Race and Ethnic section, this protective effect hypothesis could be understood under the framework of the Social Identity Theory (Tajfel & Turner, 1979). According to Tajfel and Turner's Social Identity Theory, the more an individual identifies with their racial/ethnic group, the more positive perception they would hold for their ingroup. As a result, they are more willing to explore the culture of the racial/ethnic group they belong to. With a positive perception and affinity for the racial/ethnic group, individuals develop a sense of pride for their REI. Therefore, they will not react negatively even when encountering racism. In terms of internalized racism, the sense of

pride for one's REI would buffer the negative mental health outcomes resulting from internalized racism, hence making the REI a moderating variable in the relationship between internalized racism and psychological distress (See Appendix 2 for an illustration).

Challenges, Future Directions, and Conclusion

Based on the literature reviewed in this paper, we see that whether REI could buffer the harm to mental health from discrimination is debated. The first reason that makes this topic hard to study is that racial and ethnic identity are usually combined into one overarching variable, and more importantly, ethnic identity is much more fluid than one's racial identity (Smedley & Smedley, 2005), making it more difficult to quantify and hard to measure longitudinally. Moreover, since Asian Americans are a diverse minority population, individuals vary by generational status, which results in different levels of acculturation. With different levels of acculturation, individuals also vary by different levels of REI. What makes it challenging to determine the role of REI in internalized racism-induced psychological distress is that the level of acculturation does not correspond to the strength of REI. It is also relevant to whether people are familiar with concepts like internalized racism. For example, in Liu et al. (2022), 1.5-generation and U.S.-born Asian American participants did not perceive themselves as the target of racial stereotypes, in which case internalizing the stereotypes without being familiar with the concept.

With all that being said, future studies should first directly investigate whether REI could buffer internalized racism-induced psychological distress in Asian Americans and under what conditions it is most effective. As prior studies have identified several contexts in which the REI

is found to be protective, future studies should also replicate similar models (i.e., exploration versus commitment in ethnic identity variable) and compare different age cohorts (i.e., adolescents versus adults in middle age). In addition, future research should also acknowledge the diversity of the Asian American population and investigate variables that might be relevant, including but not limited to disaggregating ethnic groups within Asian Americans, gender identity, education levels, prior racism experiences, and initial levels of psychological distress (Willis et al., 2021).

Internalized racism and REI are critical topics in the field of Asian American psychology because they explore a potential risk factor for psychological distress and its potential protective factor for Asian Americans. Surprisingly, little to no research has studied these two constructs together. Therefore, integrating these studies helps us better understand what is helpful for confronting internalized racism in Asian Americans.

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Appendix

Figure 1

REI as the mediator between Internalized Racism and Psychological Distress

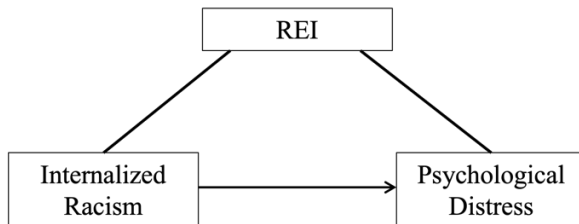


Figure 2

REI as the moderator between Internalized Racism and Psychological Distress

