Ethnic and Sexist Discrimination Among Women of Color: Exploring the Roles of Cognitive Vulnerabilities of Depression

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ETHNIC AND SEXIST DISCRIMINATION AMONG WOMEN OF COLOR: EXPLORING THE ROLES OF COGNITIVE VULNERABILITIES OF DEPRESSION

by

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ABSTRACT
ETHNIC AND SEXIST DISCRIMINATION AMONG WOMEN OF COLOR: EXPLORING THE ROLES OF COGNITIVE VULNERABILITIES OF DEPRESSION

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Rates of major depressive disorder are consistently twice as high for women of color compared to men across racial/ethnic groups. Some researchers posit that these doubled rates are due to increased life stress, such as ethnic discrimination and sexism. The current study explored the ability of ethnic and sexist discrimination to predict depression among women of color. The current study also sought to better understand underlying cognitive mechanisms, namely hopelessness and self-silencing beliefs, that explain the relationship between discrimination and depression symptoms among women of color. Furthermore, scholars suggest a call to research protective factors that buffer the relationship between discrimination and poor mental health outcomes.

Aims were tested among a sample of college women of color recruited from a predominantly White university and a sample of Latinx women recruited from the community. The first aim supported that ethnic discrimination was a stronger predictor of depression for college women of color, whereas sexist discrimination was a stronger predictor of depression for Latinx women. The second and third aims tested a moderated mediational model where hopelessness and self-silencing beliefs were tested as mediators between discrimination and depression. Moreover, general self-efficacy among college women of color and family pillar beliefs among Latinx women were explored as protective factors between the link of discrimination and cognitive vulnerabilities. The second and third aims were not supported. Theoretical and practical implications were discussed.

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Introduction

Rates of major depressive disorder are consistently twice as high for women of color compared to men across racial/ethnic groups (Alegría et al., 2007; Kessler, Berglund, & Demler, 2005; Williams, Gonzalez, & Neighbors, 2007). Elevated rates of depression may be explained by the increased life stress that women of color encounter, such as ethnic discrimination and sexism (Albert, 2015; Astbury, 2010; Beal 1970). Consistent with this theory, both ethnic (Williams, Neighbors, & Jackson, 2001) and sexist discrimination (Klonoff & Landrine, 1995) independently predict depression symptoms. Limited studies have explored the ability of ethnic and sexist discrimination to simultaneously predict depression in a single study. Therefore, the current study explored the ability of discrimination to predict depression among college women of color at a predominately White institution (PWI) and Latinx[1] women from the community, two understudied groups of women at heightened risk for depression.

It has been proposed that discrimination activates psychological and physiological stress responses, which in turn, predict poor mental health outcomes (Pascoe & Smart Richman, 2009). Despite evidence for this supported pathway, few studies have examined mediating, or explanatory variables between discrimination and depressions symptoms among women of color. Cognitive vulnerabilities, or negative thinking styles that make one susceptible to develop and maintain depression, influence how individuals respond to stressful, negative events, such as discrimination (Alloy, Abramson, & Francis, 1999). The current study further explored the cognitive vulnerabilities of hopelessness and self-silencing beliefs as mediators between discrimination and depression among women of color.

Additionally, scholars suggest a call to research protective factors that mitigate the negative correlates of discrimination (Schmitt, Branscombe, Postmes, & Garcia, 2014). Context often influences the nature of resources and coping strategies that one might use (Noh & Kaspar, 2003). Given that aims of the current study were tested among two unique samples, protective factors relevant to their social contexts were examined: general self-efficacy for college women of color and family pillar beliefs for Latinx women.

The following aims of the current study were tested independently across two samples: college women of color at a predominantly White institution (PWI) and Latinx women from the community. The first aim of the current study explored the ability of ethnic and sexist discrimination to simultaneously predict depression symptoms. The second and third aims of the current study evaluated moderated mediational models, linking discrimination to depression via cognitive vulnerabilities while accounting for protective factors unique to each group of women (see Figures 1-4).

Women of Color: College Women of Color and Latinx Community Women

Else-Quest and Hyde (2016) cited advantages and disadvantages to examining one specific ethnic/racial group of women, in this case, Latinx women. On the one hand, researchers may develop further insight to the lived experiences of that population. On the other hand, examining one specific population of women of color may lessen generalizability and incidentally exclude the experiences of other racial/ethnic groups. The current study balanced both of these considerations by exploring experiences of a racially and ethnically diverse group of college women of color that share the experience of attending a PWI and a group of Latinx women that share a similar ethnic background.

College women of color. The aims of the current study were explored with college women of color. College students are at risk for depression, necessitating additional research attention. To specify, the American College Health Association (2009) conducted a large scale survey study where 80,121 students replied from 106 campuses across the nation. Their findings revealed that approximately 15% of these students received a diagnosis of depression at least one point in their lifetime with one-third of that subset receiving their diagnosis within the past academic year. In addition, almost one-third of respondents indicated that they felt so depressed that it was difficult to function. In a similar study with a sample of over 1400 college students across four campuses, one-half of college students endorsed some type of depression within the past 12-months (Furr, Westefeld, McConnell, & Jenkins, 2001).

Attending college and being between ages 18 and 25 comes with many novel stressors, such as fostering romantic relationships, considering occupational and/or educational trajectories, and developing a more independent worldview from families of origin (Arnett, 2000). In addition, students of color at a PWI must navigate a dominant culture while potentially experiencing ethnic discrimination (Jones, Castellanos, & Cole, 2002). Harper and Hurtado (2007) conducted a qualitative study examining racial climate across five PWIs in the U.S.; students of color acknowledged stress associated with lack of diversity programming, lack of acknowledgement of racial inequities on campus, segregation within institutions, and catering to non-Hispanic White students (e.g., food, cultural events, coursework), among other issues (Harper, & Hurtado, 2007).

Latinx women. The aims of the current study were also tested among Latinx community women for several reasons. First, Latinx individuals constitute 17% of the

U.S. population (U.S. Census, 2016), making them the largest ethnic minority group in the U.S. Furthermore, Latinx persons are projected to constitute nearly one-quarter of the U.S. population by 2065, making them an important group to further investigate (Pew Research Center, 2015). Second, Latinx women also report heightened rates of depression compared to their Latinx male counterparts (Alegría et al., 2007). In fact, one study that evaluated depression across racial and ethnic groups found that Latinx women actually had more severe reports of depression than other racial/ethnic groups (Myers et al., 2002). Third, Latinx women from the community live in an environmental context different from college women of color at a PWI. As an example, college students of color and community samples often vary by age and socioeconomic status. Moreover, community sub-samples endorse different types of racial/ethnic discrimination compared to their college counterparts (Brondolo et al., 2005). In sum, the current study sought to explore discrimination and depression among college women of color and Latinx women.

The Discrimination and Depression Link

College women of color and Latinx women may experience ethnic and sexist discrimination at any point within their lives. Ethnic discrimination refers to unfair treatment due to one's ethnicity (Contrada et al., 2000) and is consistently consistently reported among Asian American (Cheng, Tran, Miyake, & Kim, 2017; Park, Schwartz, Lee, Kim, & Rodriguez, 2013), African American (Chao, Mallinckrodt, & Wei, 2012; O'Hara, Armeli, Scott, Covault, & Tennen, 2015), and Latinx (Hipolito-Delgado, 2016) undergraduate students. A 2-week daily diary study conducted by Swim, Hyers, Cohen, Fitzgerald and Blysma (2003) even found that African American college students experienced 1.24 prejudice events each week at a PWI. When considering Latinx women,

half to three-quarters of several Latinx samples in the U.S. reported experiencing ethnic discrimination during their lifetime in previous studies (Arellano-Morales et al., 2015; Pew Research Center, 2016). Specifically, another study stated that 30% of Latinx individuals experienced everyday discrimination each day (APA, 2016).

Ethnic discrimination maintains a robust link to depression across previous studies. In fact, Williams and colleagues' (2003) were some of the first researchers to aggregate studies on ethnic discrimination and health into a review and state that ethnic discrimination is associated with a diagnosis of major depression. Since this initial review, several meta-analyses continue to find a robust, positive link between ethnic discrimination and depressive symptoms among people of color, such as African Americans (Pieterse, Todd, Neville, & Carter, 2012), Latinx Americans (Lee & Ahn, 2012), and Asian Americans (Lee & Ahn, 2011). This generalized finding is consistently replicated among Latinx (Hope, Velez, Offidani-Bertrand, Keels, & Durkee, 2018; Hwang & Goto, 2009), Asian American (Cheng, Lin, & Cha, 2015; Hwang & Goto, 2009), Pacific Islander (Chen, Szalacha, & Menon, 2014), and African American (Hope et al., 2018) college students. In fact, there was a positive relationship between ethnic discrimination and depression and suicide risk for African American college students that sought mental health services across seven PWIs (Chao et al., 2012). Previous research supports the notion that emerging adults encounter ethnic discrimination as they are adjusting to life at a PWI.

Even among Latinx adolescent girls (Kam & Bámaca-Colbert, 2013), Latinx college women (Sanchez, Smith, & Adams, 2017), and sexual minority Latinx immigrant

women (Cerezo, 2016), ethnic discrimination predicted depression symptoms (Lee & Ahn, 2012; Torres & Ong, 2010; Torres & Taknint, 2015).

College women of color and Latinx women also have the potential of experiencing sexist discrimination, or the unequal treatment and "negative events that happen to women because they are women" (Klonoff & Landrine, 1995, p. 441). Sexism may include day-to-day sexist events (e.g., being ignored, being called sexist names) or institutional sexism (e.g., sexual harassment in the workplace, unequal pay, or unequal treatment in several domains; Klonoff & Landrine, 1995). A major limitation of this body of research is that it often overlooks women of color. To be more specific, Moradi and DeBlaere (2010) noted that only 20% of the studies on sexist experiences considered race or ethnicity. As an exception, for the few studies that included ethnically diverse individuals, nearly all participants across racial/ethnic groups reported sexist events at least one point in their lives (Choi, Bowleg, & Neilands, 2011). In fact, Klonoff and Landrine (1995) surveyed 631 women (36% women of color), and their subset of women of color experienced *more* recent and lifetime sexist events than non-Hispanic White women. In addition, a sample of predominantly non-Hispanic White college women reported experiencing approximately one sexist event each week in a daily diary study (Swim, Hyers, Cohen, & Ferguson, 2001).

When Moradi and DeBlaere (2010) accounted for studies on sexist experiences of Latinx women, there were even more astonishing results: only 1% of the 1,339 articles they reviewed included the terms 'Hispanic,' 'Hispanic American,' 'Latina,' or 'Latin.' As an exception, Klonoff and Landrine (1995) found that Latinx women reported higher recent and lifetime sexist treatment in personal relationships when compared to non-

Hispanic White women. Taken together, the literature suggests that women of color are at heightened risk for experiencing sexist events.

Sexist discrimination is positively coupled with depression symptoms. When considering college women in particular, sexist discrimination predicted psychological distress (Swim et al., 2001). College women that endorsed higher frequencies of sexist events reported elevated depression symptoms compared to college men and college women who reported little to no sexist events (Klonoff, Landrine, & Campbell, 2000).

To summarize, ethnic discrimination and sexist discrimination are independently coupled with depression symptoms for undergraduate persons of color and Latinx community members. However, further research is needed to determine the link between these forms of discrimination and depression for college women of color and Latinx women.

Ethnic and sexist discrimination. Even fewer studies consider how ethnic and sexist discrimination concomitantly predict depression among women of color. The handful of previous studies that recognize racial/ethnic discrimination, sexism, *and* mental health outcomes within a single study were conducted with community samples of African American women. Disparate findings emerged. Within some studies ethnic discrimination was more predictive of psychological distress, which the authors suggested might be due to the long-standing history of race relations within the U.S. This history may cause African American women to attribute discriminatory experiences to their race or ethnicity (Carr, Szymanski, Taha, West, & Kaslow, 2014; Levin, Sinclair, Veniegas, & Taylor, 2002). Conversely, other studies indicated that sexism had a stronger link to psychological distress among African American women. These researchers

offered that sexism might be more prominent because it is likely that African American women experience sexism from non-Hispanic White and African American communities (Moradi & Subich, 2003; Szymanski & Stewart, 2010). The first aim of the current study explored the ability of ethnic discrimination and sexist discrimination to simultaneously predict depressive symptoms within two understudied samples: college women of color and Latinx women. Due to the mixed findings of previous studies, the current study was exploratory by determining whether ethnic or sexist discrimination was a stronger predictor of depression for college women of color and Latinx women.

Cognitive Vulnerabilities

As stated, there is substantial evidence that discriminatory experiences predict depression symptoms for college women of color and Latinx women. Less research has explored underlying mechanisms that explain the link between discrimination and depression, especially for women of color (Pascoe & Smart Richman, 2009). Negative thinking styles make one susceptible to developing and maintaining depression (Alloy, Lipman, & Abramson, 1992). Specifically, someone may encounter a negative and stressful event and interpret it in an unhelpful way due to their negative thinking style, putting them at-risk for depressive disorders (Hankin, Abramson, & Siler, 2001). Hopelessness beliefs, or expecting only negative outcomes in the future that are outside of one's control, consistently mediate stress and depression (Abramson, Metalsky, & Alloy, 1989). Relevant to the current sociopolitical climate of sexual misconduct and harassment, self-silencing beliefs, or the belief that women should silence or suppress their thoughts to maintain significant relationships, has been linked to depression worldwide (Cramer, Gallant, & Langlois, 2005; Jack & Ali, 2010; Jack & Dill, 1992).

Hopelessness and self-silencing beliefs were evaluated as mediators between discrimination and depression in the current study.

Hopelessness. Abramson and colleagues (1989) proposed that one of the primary cognitive vulnerabilities of depression is hopelessness. Specifically, individuals that explain that negative events are long-lasting, never ending, and across situations (i.e., global) and assume that they hold negative self-characteristics are at risk for hopelessness (Alloy et al., 2012). Moreover, negative events likely trigger hopelessness, subsequently leading to depressive symptoms (Abramson et al., 1989; Alloy et al., 2012; Liu, Kleiman, Nestor, & Cheek, 2015).

To briefly review literature on the two samples of interest, a review examined hopelessness measured via the Beck Hopelessness Scale (Beck, Weissman, Lester, & Trexler, 1974) among undergraduate students. Results revealed that hopelessness among U.S. undergraduates is slowly increasing by the decade. Notably, among U.S. undergraduate samples, women consistently reported higher hopelessness than men (Lester, 2013). When considering race/ethnicity, one study found no notable difference for hopelessness among college students of color (Hirsch, Visser, Chang, & Jeglic, 2012).

When considering Latinx women, there is minimal research. In the Youth Risk Behavior Survey in the U.S., Latinx adolescent girls endorsed higher feelings of hopelessness compared to non-Hispanic White and African American adolescents (Center for Disease Control, 2004). In fact, another study found elevated rates of hopelessness (20% met the clinical cut-off) in a sample of Latinx women that were migrant farmworkers (Dueweke, Hurtado & Hovey, 2015). Overall, hopelessness is endorsed among college women of color and Latinx women.

Ethnic discrimination and hopelessness. Many studies support that ethnic discrimination predicts hopelessness among people of color. For example, among African American adolescents (Nyborg, & Curry, 2003), adult African American community members (Odafe, Salami, & Walker, 2017), and Native American adolescents (Jaramillo, Mello, & Worrell, 2016), ethnic discrimination predicted hopelessness. In fact, ethnic discrimination predicted higher hopelessness scores 2-3 years later for college students of color (Polanco-Roman & Miranda, 2013).

When considering research on hopelessness with Latinx individuals, many studies evaluate ethnic discrimination collectively with other life stressors. For example, negative life events were positively correlated to hopelessness for a sample of Latinx emerging adults; however, the authors did not specify if these negative life events included discriminatory- or race-based events (Chang, Sanna, Hirsch, & Jeglic, 2010). Again, Romero, Piña-Watson, and Toomey (2018) found that bicultural stress (i.e., defined in the study as ethnic discrimination, intergenerational conflict, stress due to speaking one language, and pressure to conform to one's cultural group norms) was strongly related to hopelessness. Conversely, a study by Stein, Gonzalez and Huq (2012) found that hopelessness did not affect the relationship between culturally-based stressors (i.e., joint experiences of ethnic discrimination and acculturative stress) and depression among a sample of Latinx adolescents (Stein, Gonzalez, & Huq, 2012). Even with these disparate findings, given that ethnic discriminatory experiences cannot be controlled, predicted, or stopped (Williams & Mohammed, 2009), ethnic discrimination likely predicts hopelessness among college women of color and Latinx women.

Sexism and hopelessness. To the author's knowledge, no studies have previously examined the relationship between sexism and hopelessness for college women of color or Latinx women, making the current study exploratory. There have been a handful of previous studies loosely related to sexism and hopelessness. First, Bergen, Martin, Richardson, Allison, and Roeger (2003) found that childhood sexual abuse predicted hopelessness for a sample of adolescent girls. Research supports that childhood sexual abuse is usually perpetrated by family members, and girls are more often the victims than boys (Alaggia, 2005). In fact, some scholars argue that childhood sexual abuse of girls might be rooted in gender power differences (Crew Soloman, 1992). Second, other research has examined sexual objectification of women, or when one's worth is demeaned to her body's sexual appearance and function (Fredrickson, & Roberts, 1997). Working in a sexually objectifying restaurant environment predicted less organizational power, feelings of power and perceived control for waitresses (Syzmanski & Mikorski, 2017).

Third, literature on other forms of discriminatory stress has been linked to hopelessness. For example, forms of mental health discrimination, or stigma, predicted hopelessness among a sample of individuals with psychosis (Vass et al., 2015). As another example, significantly more hopelessness has been reported among sexual minority youth compared to heterosexual youth (Safren & Heimberg, 1999). In fact, LGBTQ+ status was related to increased hopelessness among a sample of college students (Hirsch, Cohn, Rowe, & Rimmer, 2017). Previous literature seems to support a potential link between various forms of discrimination and hopelessness.

Hopelessness and depression. A previous review supports that hopelessness has a robust link with depression (Liu et al., 2015). Similarly, severity of clinical depression was predicted by hopelessness, such that higher hopelessness led to severe depression among an ethnically diverse sample of women (Myers et al., 2002). As further evidence, college students with hopelessness attributions (internal, stable, and global attributional styles) endorsed greater depression symptoms in a daily diary study (Alloy, Just, & Panzarella, 1997). Even among a diverse sample of college students, hopelessness and depression were strongly, significantly correlated (Hirsch et al., 2012). As an intensified example, hopelessness was a strong predictor of suicidal ideation, a symptom associated with severe depression, among African American college women (Lamis & Lester, 2012).

Likewise, hopelessness and depression are positively linked for Latinx women. For example, hopelessness and depression were strongly correlated regardless of her ethnic identity among Mexican American adolescents (Romero et al., 2018). Moreover, hopelessness towards the future was associated with higher depression for a sample of immigrants from Central America (Hovey, 2000) and migrant worker women from Mexico (Hovey & Magaña, 2003). Taken together, a review of the literature suggests that hopelessness likely predicts depression symptoms for college women of color and Latinx women.

To summarize, hopelessness has been denoted as a mediator between stressful life events and depression symptoms across studies (Alloy et al., 2012) and reviews (Abramson et al., 1989; Liu et al., 2015). The second and third aims of the current study explored whether discrimination and symptoms of depression would be mediated by

hopelessness scores among college women of color and Latinx women. Specifically, experiences of ethnic and sexist discrimination, stressful life experiences for many women of color, would predict hopelessness, which in turn, would predict depression symptoms within the current study.

Silencing the Self. The silencing the self theory of depression, used interchangeably with self-silencing beliefs, seeks to explain higher prevalence rates of depression among women. Specifically, the silencing the self theory of depression describes the cognitive framework that women silence or suppress their thoughts, feelings, and behaviors during stress in order to preserve romantic relationships and avoid conflict. In essence, it suggests that women prioritize others before themselves. This theory has been studied across groups of women, including college women, women who used substances perinatally, and women survivors of interpersonal violence, to name a few (Jack, 1991). Since its initial development, silencing the self theory of depression has been supported across 18 cultures worldwide (Jack & Ali, 2010). Within several studies, African American and non-Hispanic White college women report comparable levels of self-silencing beliefs (Carr, Gilroy, & Sherman, 1996; Shouse, & Nilsson, 2011). In particular, Gratch, Bassett and Attra (1995) sampled over 600 ethnically diverse college students and found that Asian American/Asian college students reported higher silencing the self scores than Latinx, African American, and non-Hispanic White American college students.

Even within the framework of Latin culture, self-silencing to maintain harmony has been named one of the core tenets of marianismo, or Latina gender roles (Castillo, Perez, Castillo, & Ghoshe, 2010). From this lens, self-silencing refers to the belief that an

ideal Latinx woman should suppress her own thoughts and needs in order to minimize confrontation among her relationships, especially with her romantic partner (Arredondo, 2002; Castillo et al., 2010). When self-silencing to maintain harmony is studied among Latinx women, it is anchored in the fact that Latin culture may urge women to prioritize family and harmony in relationships.

Ethnic discrimination and silencing the self. Less research has determined if a link between racial/ethnic discrimination and self-silencing beliefs exists. Jack and Dill (1992) considered in their validation study of the Silencing the Self Scale that a woman's marginalized identity may contribute to higher reported depression symptoms. While these authors were referring to gender inequality, women of color have an additional marginalized status of race/ethnicity, which might be linked to exacerbated self-silencing beliefs.

It is important to note that no studies have examined if there is a relationship between Jack's (1991) silencing the self theory and racial/ethnic discrimination. One experimental study was conducted to determine how African American and Asian American college women respond to racial/ethnic discrimination. African American women were more likely than Asian American women to directly confront a racist remark online. However, both groups of women were equally as likely to indirectly respond to the online racist event, in this case through the distribution of the number of good- or bad-flavored jelly beans (Lee, Soto, & Swim, 2012). To clarify, after an online racist event, participants within the study had the opportunity to distribute good-flavored (e.g., cherry, grape, lime) or bad-flavored jelly beans (e.g., ear-wax, dirt, vomit) to the perpetrator. Both Asian American and African American women gave fewer good-

flavored jelly beans to a perpetrator of a racist comment. In a follow-up study, Asian American college women indicated that on average that they would be more likely to respond indirectly or not respond at all to the online racist event than the sample of African American college women. Moreover, a desire to "keep the peace" mediated this effect for Asian American women.

In a separate study that was qualitative, African American college women reported feeling silenced and marginalized by their peers and superiors across settings because they are women of color (Lewis, Mendenhall, Harwood, & Browne Huntt, 2016). Furthermore, another sample of African American women quantitatively endorsed this theme of feeling silenced and marginalized in response to ethnic and sexist discrimination (Lewis & Neville, 2015). As stated prior, various groups of college women of color have reported comparable, if not higher self-silencing beliefs, than their non-Hispanic White counterparts (Carr et al., 1996; Gratch et al., 1995; Shouse, & Nilsson, 2011). Overall, it seems as though in previous qualitative, quantitative, and experimental studies, ethnic discrimination leads to women of color feeling marginalized or silenced; however, further work is needed to explore self-silencing beliefs among college women of color and Latinx women.

Sexism and silencing the self. Jack (1991) described that women are socialized to perceive others' needs as more important than their own needs. As such, various studies support that even the mere idea of gender inequality may reinforce self-silencing beliefs. As one example, when women were in a situation where they were hyperaware of the possibility of being rejected due to their gender, they were more likely to self-silence (London, Downey, Romero-Canyas, Rattan, & Tyson, 2012). As another example,

women faculty were surveyed at an academic conference. When women perceived the academic conference to have less representation of women, they were more likely to perceive sexism and feel silenced (Bigg, Hawley, & Biernat, 2018). These studies support the notion that even the perception of gender inequality may be enough to induce self-silencing beliefs. Moreover, when women endorse self-silencing beliefs, they are less likely to respond to sexist incidents (Swim, Eyssell, Murdoch, & Ferguson, 2010).

Notably, sexist events are significantly linked to self-silencing beliefs. Experimenters manipulated sexual objectification by having participants believe certain parts of their bodies were being evaluated and/or videotaped. When a woman was videotaped from the neck down, she silenced herself significantly more and talked to men significantly less within the study (Saguy, Quin, Dovidio, & Pratto, 2010). This finding holds true in quantitative, self-report studies. Sexist events predicted self-silencing beliefs among a community sample of primarily non-Hispanic White women (Watson & Grotewiel, 2016) and college women (Hurst & Beesley, 2012). Women that experience sexism may be more likely to adopt the belief that they should silence themselves to avoid confrontation in interpersonal situations (Hurst & Beesley, 2012). Together, the literature supports that sexist discrimination predicts self-silencing beliefs.

Silencing the self and depression. Silencing the self has been linked to depression symptoms in adolescent girls (Little, Welsh, & Darling, & Holmes, 2011), women that are survivors and victims of interpersonal violence (Jack & Dill, 1992), and women with marital conflict (Whifflen & Foot, 2007), to name a few. Studies repeatedly show that silencing the self significantly predicts depression symptoms among college women (Cramer et al., 2005; Jack & Dill, 1992; Page, Stevens, & Galvin, 1996; Schrick,

Sharp, Zvonkovic, & Reifman, 2012). In fact, Hurst and Beesly (2012) found within their study that self-silencing mediated the relationship between sexist discrimination and depression symptoms. However, each of these studies included predominantly women of non-Hispanic White descent.

When examining the literature on women of color, silencing the self predicted depressive symptoms among a community sample of ethnically diverse women from a low socioeconomic background (Grant, Jack, Fitzpatrick & Ernst, 2011). In fact, for every 1-point increase on the Silencing the Self Scale (Jack & Dill, 1992), depression symptoms increase by 3% on average. Notably, within a study conducted by Grant and colleagues (2011), self-silencing was positively correlated with depression symptoms among college women of color. A recent study found evidence that self-silencing predicted depression for African American women recruited from both a community and college setting (Abrams, Hill, & Maxwell, 2018). In like manner, within Latin culture self-silencing predicts psychological distress among Latinx women (Sanchez et al., 2017). Specifically, self-silencing predicted feelings of cynicism and mistrust (Nuñez et al., 2017) and depression symptoms (Kosmicki, 2017) among Latinx women. Thus, the literature supports that self-silencing beliefs are predictive of depression for women of color.

To summarize, Jack's (1991) theory on silencing the self supports that women in marginalized positions of power are more likely to silence themselves. Therefore, in times of stress, such as discrimination, women of color may be more inclined to self-silencing, which in turn, predicts depressive symptoms. As such, the second and third

aims of the current study explored the ability of self-silencing beliefs to mediate ethnic and sexist discrimination and depression.

Protective Factors

It important to consider potential moderating variables that may attenuate the negative outcomes related to discriminatory stress (Schmitt et al., 2014). Less research accounts for protective factors in the face of discrimination (Sanchez et al., 2017; Yoo & Lee, 2005). General self-efficacy and family pillar beliefs were assessed for college women of color and Latinx women, respectively. Different coping factors were examined because previous research suggests that protective factors may vary by culture, social context, and unique personal strengths (Noh & Kaspar, 2003). Therefore, women of color living in two different contexts may have different protective factors.

General self-efficacy and college women of color. Originating from social cognitive theory, self-efficacy refers to one's set of beliefs regarding their ability to use and maintain coping strategies in response to new and/or challenging tasks. In other words, it indicates how one perceives that they will have agency over a situation, which may influence their thoughts, feelings, or behaviors in response to a challenging situation (Scholz, Gutierrez Doña, Sud, & Schwarzer, 2002). *General* self-efficacy is when one holds these beliefs across situations or life areas (cf. Bandura, 1997). General self efficacy is "a personal resource factor with respect to distress such as threat and perception" (Jerusalem & Schwarzer, 1992, p. 199).

General self-efficacy is a pertinent construct to examine among college women of color. College students encounter new stressors that they must learn to navigate, such as transitioning from high school, encountering new academic challenges, possibly leaving

their home, and facing interpersonal and financial stressors (Feld, 2008). Unfortunately, most studies among college students have focused on *academic* self-efficacy, referring to one's perceived ability to overcome *academic* challenges (Huang, 2013; Multon, Brown, & Lent, 1991). Largely, higher academic self-efficacy leads to better academic outcomes, including for college persons of color (Edman, & Brazil, 2009; Yuan, Weiser, & Fischer, 2016).

Given the protective nature of academic self-efficacy for college students, general self-efficacy may encompass coping in response to other stressors beyond academic stress. To specify, those with high general self-efficacy may be more likely to appraise stressors as "challenges" rather than "threats" (Jerusalem & Schwarzer, 1992). Lower levels of general self-efficacy pair with negative emotions, whereas higher general self-efficacy tends to be related to positive emotions (Luszczynska, Scholz, & Schwarzer, 2005); this finding remains true across countries (Luszczynska, Gutierrez-Dona, & Schwarzer, 2005). Moreover, high self-efficacy is associated with lower stress (Morton, Mergler, & Boman, 2014).

Because general self-efficacy is thought to be based on learning from past experiences (Bandura, 1977), general self-efficacy likely alters the link between discrimination and cognitive vulnerabilities of depression, such as hopelessness and self-silencing beliefs. To the author's knowledge, no previous studies have evaluated how general self-efficacy may relate to hopelessness or self-silencing beliefs. However, previous studies pair hope*ful*ness and self-efficacy among college students (Davidson, Feldman, & Margalit, 2012; Feldman, & Kubota, 2015; Gallagher, Marques, & Lopez, 2017). Furthermore, general self-efficacy is consistently related to active coping

strategies, such as planning or trying to change the stressor, and lower passive coping, such as avoiding the stressor (Bandura, 1997; Luszczynska et al., 2005). Even among college students, there is a positive relationship between self-efficacy and proactive coping (Kumar, & Kadhiravan, 2009). Based on the available literature, it appears that general self-efficacy may buffer the relationship between discrimination and cognitive vulnerabilities for college women of color. The second and third aims of the current study accounted for the protective nature of general self-efficacy for the relationship between discrimination and cognitive vulnerabilities for college women of color.

Family pillar beliefs and Latinx community women. Family pillar beliefs, which describes that a Latinx woman should support her family spiritually and emotionally, is another core tenet of marianismo that has been deemed positive (Castillo et al., 2010; Mendez-Luck & Anthony, 2016; Piña-Watson, Castillo, Jung, Ojeda, & Castillo-Reyes, 2014). As an exception, two studies found that family pillar beliefs endorsed by Latinx immigrant women were linked to increased psychological distress (Dillon et al., 2018; Nuñez et al., 2015). However, this opposing finding may have been due to the fact that the women in these studies recently immigrated away from their home and families.

To date, only one study explored family pillar beliefs from the lens of marianismo in relation to ethnic discrimination. Via quantitative self-report study with Latinx college women, ethnic discrimination was positively correlated with family pillar beliefs, meaning that as Latinx women reported more ethnic discriminatory experiences, they endorsed higher importance of family (Sanchez et al., 2017). Sanchez and colleagues (2017) reasoned that as Latinx women experience more ethnic discrimination, they may

increasingly rely on family as a source of social support for coping with ethnic discrimination.

While there is limited research on family pillar beliefs from the context of marianismo with discrimination, previous research supports the general importance of familism within Latinx culture. For instance, family offers social support, which has been shown to boost well-being (Turner, 1981). In fact, social support has ameliorated the negative mental health outcomes from a stressor (Cohen & Wills, 1985), even for Latinx persons in the context of ethnic discrimination (Lee & Ahn, 2012). In another qualitative study, one of the coping strategies that Latinx emerging adults reported was support from family members (Cavazos, Johnson, & Sparrow, 2010).

When examining the literature between family pillar beliefs and cognitive vulnerabilities, namely hopelessness, and self-silencing, there is limited past research. For instance, past studies have found evidence for a positive relationship between familism and hope among Latinx individuals, or that as familism increases, hope increases (Morgan Consoli, Delucio, Noriega, & Llamas, 2015; Vela, Ming-Tsan, Lenz, & Hinojosa, 2015). In one qualitative study, Latinx individuals stated that family largely influenced their change to be more motivated and hopeful for the future (Hanna, & Ortega, 2016).

Similarly, limited studies have found support for a relationship between the family pillar and self-silencing beliefs. In fact, the validation article of the Marianismo Beliefs Scale demonstrated no positive or negative relationship between family pillar beliefs and self-silencing to maintain harmony among Latinx women (Castillo et al., 2010). Though, one qualitative study with Latinx adolescents endorsed feeling silenced

and overlooked at their school. However, when they had support from their family, they had more of an optimistic outlook that their difficulties might be addressed by school administrators (Quiroz, 2001). In fact, one study demonstrated that being strongly attached to a social support network buffered the negative relationship between self-silencing and psychological distress for immigrant Latinx women (Dillon et al., 2018). In sum, the examined literature suggests that family pillar beliefs would buffer the relationship between discrimination and cognitive vulnerabilities for Latinx women, such that if a Latinx women reported higher family pillar beliefs, the connection between discrimination and cognitive vulnerabilities, namely hopelessness and self-silencing, would be lessened. Therefore, second and third aims of the current study accounted for the ability of family pillar beliefs to buffer the relationship between discrimination-cognitive vulnerabilities for Latinx women.

Current Study

Given the entirety of literature reviewed, college women of color (ACHA, 2009) and Latinx women (Myers et al., 2002) are two groups of women at elevated risk for depression. Furthermore, ethnic and sexist discrimination are common stressors endorsed by people of color and women (Swim et al., 2001; Swim et al., 2003). Though, limited research has examined the ability of both ethnic discrimination and sexism to predict depression among *women of color*. Among the limited studies that have examined ethnic discrimination and sexism within a single study, there is mixed evidence whether ethnic (Carr et al., 2014; Levin et al., 2002) or sexist (Moradi & Subich, 2003; Syzmanski & Stewart, 2010) discrimination is the driving predictor of depression symptoms among women of color.

The second and third aims of the current study sought to test a moderated mediational model linking discrimination to depression via cognitive vulnerabilities while accounting for protective factors unique to each sample's lived context. To review, cognitive vulnerabilities have been proposed as underlying mechanisms that link discriminatory stress and depression symptoms. Specifically, it seems as though ethnic and sexist discrimination predict hopelessness and self-silencing beliefs, which in turn, predict depression symptoms (Hurst & Beesley, 2012; Polanco-Roman & Miranda, 2013). Last, previous literature would support that general self-efficacy and family pillar beliefs are protective factors that may moderate the relationship between discriminatory stress and cognitive vulnerabilities (i.e., hopelessness and self-silencing beliefs) among college women of color and Latinx women, respectively. Yet, limited research has examined these pathways among college women of color or Latinx women (Moradi & DeBlaere, 2010).

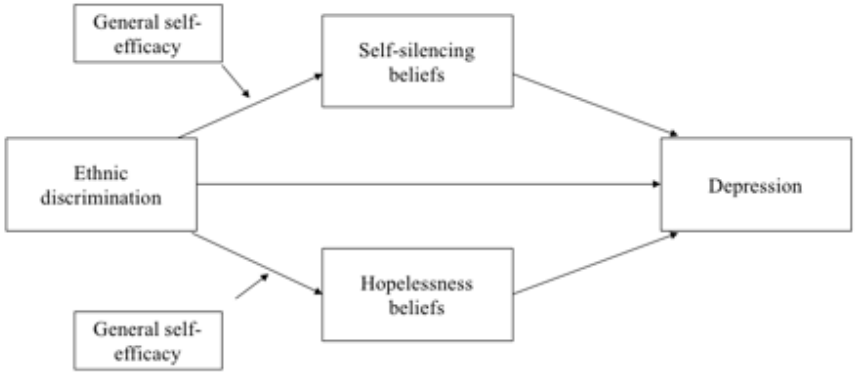
Because discrimination and depression have been shown to vary by income (Lorant et al., 2003), nativity status (Alegría et al., 2007), age (Mirowsky & Ross, 1992), language (Coker et la., 2009), recruitment source (Brondolo et al., 2005) and race/ethnicity (Forrest-Bank & Jenson, 2015; Klonoff & Landrine, 1995; Myers et al., 2002), these variables were added as covariates. The hypotheses of the study were as followed:

Aim 1: To explore the ability of ethnic and sexist discrimination to simultaneously significantly predict depression. Hypothesis 1A and 1B stated that ethnic and sexist discrimination would significantly predict symptoms of depression among college women of color and Latinx women, respectively.

Moreover, previous findings have been mixed with some studies supporting that ethnic discrimination was a stronger predictor of depression, while others demonstrated evidence that sexism was a stronger predictor of depression. The current study was exploratory to determine if ethnic and/or sexist discrimination was more predictive of depression symptoms for college women of color and Latinx women.

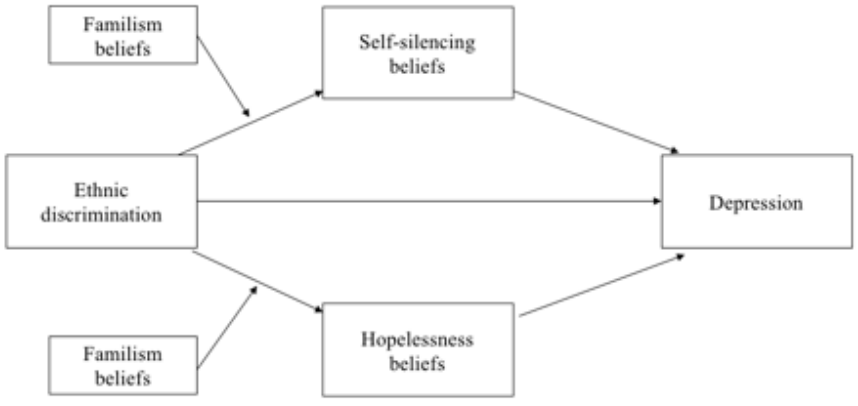
Aim 2: To examine a moderated mediational model, namely linking ethnic discrimination to depression via cognitive vulnerabilities, that is hopelessness and self-silencing beliefs, while accounting for moderating, protective factors (i.e., general self-efficacy for college women of color and family pillar beliefs for Latinx women). Hypothesis 2A stated that hopelessness and self-silencing beliefs would mediate the link between ethnic discrimination and depression symptoms for college women of color, and that general self-efficacy would moderate the indirect links of ethnic discrimination-hopelessness and ethnic discrimination-self-silencing. To further explain, it was expected that high general self-efficacy would buffer the impact of ethnic discriminatory stressors on hopelessness and self-silencing beliefs, while low self-efficacy would exacerbate the relationship between ethnic discrimination on hopelessness and self-silencing beliefs (see Figure 1).

Figure 1. *Hypothesis 2A*



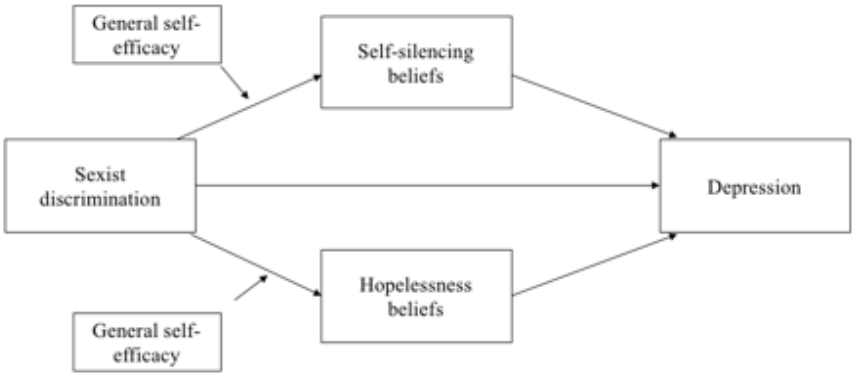
Hypothesis 2B indicated that hopelessness and self-silencing beliefs would mediate ethnic discrimination and depression symptoms for Latinx women, with family pillar beliefs moderating the indirect effect. Specifically, hypothesis 2B stated that family pillar beliefs would buffer the link between ethnic discrimination and hopelessness beliefs and ethnic discrimination and self-silencing beliefs (see Figure 2).

Figure 2. *Hypothesis 2B*



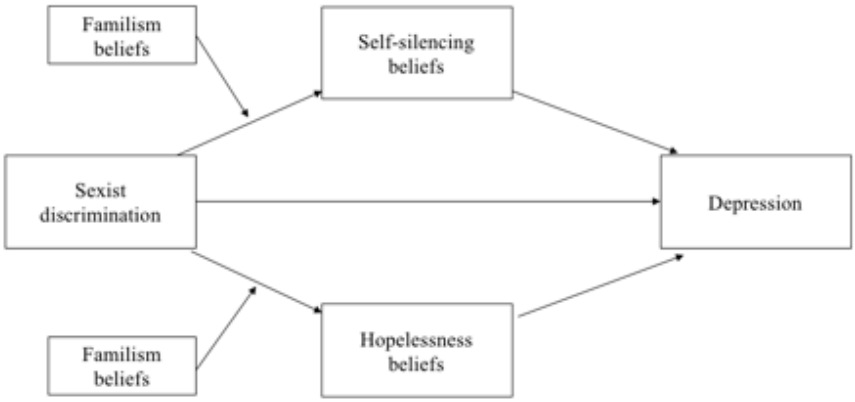
Aim 3: To examine a moderated mediational model that links sexist discrimination to depression via cognitive vulnerabilities, namely hopelessness and self-silencing beliefs, while accounting for moderating variables of the indirect effect (i.e., general self-efficacy for college women of color and family pillar beliefs for Latinx community women). Hypothesis 3A stated that hopelessness and self-silencing beliefs would mediate the link between sexist discrimination and depression symptoms for college women of color, and that general self-efficacy would moderate the indirect links of sexist discrimination-hopelessness and sexist discrimination-self-silencing. To further explain, it was expected that high general self-efficacy would buffer the impact of sexist discriminatory stressors on hopelessness and self-silencing beliefs, while low self-efficacy would exacerbate the relationship between sexist discriminatory stressors on hopelessness and self-silencing beliefs (see Figure 3).

Figure 3. *Hypothesis 3A*



It is hypothesized for 3B that hopelessness and self-silencing beliefs would mediate sexist discrimination and depression symptoms for Latinx women with family pillar beliefs moderating the indirect effect. Specifically, hypothesis 3B stated that family pillar beliefs would buffer the link between sexist discrimination and hopelessness beliefs and sexist discrimination and self-silencing beliefs (see Figure 4).

Figure 4. *Hypothesis 3B*.



Method

Participants and Sampling

College women of color. One hundred and twenty-eight women of color over the age of 18 were recruited from a psychology subject pool at a medium-sized Jesuit institution in the Midwest. The average age was 19.16 (*SD* = 1.37, range: 18-25). Just under half of the women identified as Latinx/Hispanic (*n* = 61). The remainder of the participants identified as Asian/Pacific Islander (*n* = 34, 27%), African American/Black (*n* = 24, 19%), or another ethnicity (i.e., Middle Eastern, Native American, *n* = 9, 5%). Most of the sample was born in the U.S. (*n* = 105, 85%). About half of the sample (*n* = 59, 47%) identified coming from a higher income household (i.e., $50,000+ per year). The remainder of the sample reported an annual household income between $20,000 to $49,999 per year (*n* = 48, 38%) followed by less than $20,000 per year (*n* = 16, 13%).

Latinx women. Secondary data analysis of 247 Latinx women (M_{age}: 36.26[12.59], range: 18-72) was used. Most of the women identified as Mexican heritage (*n* = 173) followed by Puerto Rican (*n* = 33) and Central/South American (*n* = 26) heritages. Approximately 38% identified as foreign-born (*n* = 93) and 62% as U.S.-born (*n* = 152). On average, the sample indicated living in the U.S. for an average of 31 years. One hundred and ninety-nine (81%) completed the survey in English, while 48 (19%) completed it in Spanish. Most women reported an annual household income between $20,000 and $49,000 (*n* = 112, 45%), followed by $50,000 or more (*n* = 91, 37%) and less than $20,000 (*n* = 39, 16%). Approximately 60% of the sample (*n* = 147) was

recruited from local festivals and 40% (n = 100) was recruited from Amazon Mechanical Turk.

Measures

Demographic form. All participants completed a demographic form that asks for their age, gender, racial/ethnic background, nativity status, and household income.

Ethnic discrimination. The Brief-Perceived Ethnic Discrimination Questionnaire (B-PEDQ; Brondolo et al., 2005) is a 17-item questionnaire available in English and Spanish that asks how often one has experienced ethnic discrimination in their lifetime. All participants completed this measure. It was developed to evaluate ethnic discriminatory experiences of individuals from various racial/ethnic backgrounds. Notably, it was validated with college students and a community sample of Latinx individuals (Brondolo et al., 2005). A sample item includes "Because of your race/ethnicity, how often have you been treated unfairly by coworkers or classmates?" Participants indicate how often this has occurred on a Likert scale where 1 is *Never* and 5 is *Very often.* A mean of the overall score is calculated using all items, where scores range from 0 to 5. Higher scores indicate higher lifetime prevalence of ethnic discrimination. In the development of the scale, Brondolo and colleagues (2005) reported a Cronbach's α of .87. When this scale was used with a large, diverse community sample of U.S. Latinx persons it had a Cronbach's α of .88 (Arellano-Morales et al., 2015). For the current study, Cronbach's α was .92 for the college women of color. Cronbach's α was .92 and .91 for English and Spanish, respectively, in the Latinx sample.

Sexist discrimination. All participants completed the Schedule of Sexist Events - Recent (SSE-R; Klonoff & Landrine, 1995), a 20-item measure. The first 19-items

inquire about one-year prevalence of sexist discrimination. A sample item includes, "How many times have you been treated unfairly by teachers or professors because you are a woman?" Participants indicate how frequently this event has occurred in the past year on a Likert scale of 1 *Never* to 6 *All of the time (more than 70% of the time).* The last item asks, "How different would your life be now if you HAD NOT BEEN treated in a sexist and unfair way" on a scale from 1 *The same as it is now* to 6 *Totally different.* A mean score is calculated from all 20 items that ranges from 1 to 6, where 6 indicates higher rates of sexist events. The scale was developed and validated with diverse college women and women from the community (Klonoff & Landrine, 1995). In fact, the validation study had a Cronbach's α of .90 for the subsample of women of color. This measure has since been used with other diverse college women (DeBlaere & Bertsch, 2013 [Cronbach's α = .94]; Sabik & Tylka, 2006 [Cronbach's α = .91]). Within the current study, Cronbach's α was .92 for the college women of color. Cronbach's α was .95 and .96 for English and Spanish, respectively, in the Latinx sample.

Hopelessness beliefs. All participants completed the Beck Hopelessness Scale (Beck et al., 1974), a 20-item questionnaire that asks about one's attitudes over the past week. The questions target feelings about the future, motivation, and expectations. The items either have a positive or negative connotation, such as "I look forward to the future with hope and enthusiasm" or "My future seems dark to me." Participants rank the statement as "true" or "false." A summary score is calculated that ranges from 9 to 20, where 20 indicates higher hopelessness beliefs. The scale has been used with college students of color (Cronbach's α = 91; Polanco-Romano & Miranda, 2013). The BHS is available in Spanish. In addition, it has been used with a community sample of Latinx

women (Dueweke et al., 2015; [Cronbach's α = .86]). In the current study, Cronbach's α was .78 for college women of color. Cronbach's α was .91 and .77 for English and Spanish, respectively, in the Latinx sample.

Silencing the self beliefs. College women of color completed the Silencing the Self Scale (Jack & Dill, 1992), which is a 31-item measure that assesses beliefs of how to behave within current intimate relationships. If the participant was not currently in an intimate relationship, they were instructed to base their responses on previous intimate relationships. The scale is divided into four subscales that include: a) externalized self perception (e.g., using external standards as a way to evaluate one's self), b) caring as self-sacrifice (e.g., putting the needs of others before one's own), c) silencing the self (e.g., refraining from confrontation to maintain positive relationships), and d) the divided self (e.g., incongruence between behaviors and feelings). A sample item from the scale is, "I don't speak my feelings in an intimate relationship when I know they will cause disagreement." Participants rate how much they endorse this statement on a scale from 1 *Strongly disagree* to 5 *Strongly agree.* A summary score is calculated where scores can range from 31 to 155, with higher scores indicating higher self-silencing beliefs. Hurst and Beesley (2013) used this scale with college women, where 19% identified as women of color (Cronbach's α = .88). In addition, Grant and colleagues (2011) used this scale with a community sample of women of color (Cronbach's α = .90). Cronbach's alpha in the current study was .89.

To assess self-silencing beliefs among Latinx women from the community, the Marianismo Beliefs Scale (MBS; Castillo et al., 2010) was used. The MBS contains 24-items and five subscales, which include: family pillar, virtuousness and chastity,

subordination to others, silencing the self to maintain harmony, and spiritual pillar. The silencing the self to maintain harmony in relationships subscale contains six items that evaluate a Latinx woman's attitudes towards suppressing her thoughts and needs towards others. Some of the items target behavior in intimate relationships, such as "A Latina woman should not discuss birth control" and "A Latina woman should not express her needs to her partner." Other items refer to self-silencing beliefs across all relationships, such as "A Latina woman should feel guilty about telling people what she needs." For the MBS, a participant indicates how much she believes a Latinx woman should uphold this standard on a scale from 1 *Strongly disagree* to 5 *Strongly agree.* A mean score is calculated, where higher scores indicate greater endorsement of self-silencing beliefs. This subscale had a Cronbach's α of .90 when used with a sample of Latinx college women in a previous study (Sanchez et al., 2017). This scale was used instead of the STSS (Jack & Dill, 1992) because the MBS was developed specifically for Latinx women and considers their cultural values and traditions. Additionally, the STSS (Jack & Dill, 1992) is not available in Spanish nor available for translation (Jack, personal communication, 2017). The silencing the self to maintain harmony subscale and STSS demonstrated a moderate, positive correlation (r = .43; Castillo et al., 2010). For comparison purposes of the two scales, sample items from each scale are included in Table 1. In the current study, Cronbach's α was .86 and .89 for English and Spanish, respectively, in the Latinx sample.

Table 1. *Example Items for Comparison from the Silencing the Self Scale (Jack & Dill, 1992) and the Marianismo Beliefs Scale (Castillo et al., 2010).*

The Silencing the Self Scale (Jack & Dill, 1992)
3. Caring means putting the other person's needs in front of my own.
5. I find it is harder to be myself when I am in a close relationship than when I am on my own.
Marianismo Beliefs Scale (Castillo et al., 2010)
17. A Latinx woman should not express her needs to her partner.
18. A Latinx woman should feel guilty about telling people what she needs.

General self-efficacy. College women of color completed the General Self-Efficacy Scale (GSES; Schwarzer & Jerusalem, 1995), a 10-item measure that assesses the level of confidence one has towards overcoming a stressful task. A sample item is, "I can always manage to solve difficult problems if I try hard enough". Participants indicate how true they find the statement on a scale from 1 *Not at all true* to 4 *Exactly true.* A summary score is calculated with scores ranging from 10 to 40, where higher scores indicate higher general self-efficacy. This scale has been used with college students of color at a predominately White institution (Cronbach's α = .88; Blume, Lovato, Thyken, & Denny, 2012). Cronbach's α in the current study was .84.

Family pillar beliefs. Latinx women completed another subscale from the MBS, the family pillar. A sample item includes, "A Latina woman should be a source of strength for her family." The family pillar contains five items. A mean score of these items is tabulated, such that higher scores indicate higher endorsement of beliefs. The Cronbach's α for this subscale with a sample of Latinx college women was .88 (Sanchez et al., 2017). The family pillar subscale has shown a positive, moderate correlation (r = .44; Castillo et al., 2010) with other subscales assessing Latinx familism (i.e., Familism subscale of the Multiphasic Assessment of Cultural Constructs – Short Form; Cuéllar, Arnold, &

González, 1995). In the current study, Cronbach's α was .84 and .88 for English and Spanish, respectively.

Depression symptoms. All participants completed the Brief Center for Epidemiological Scale – Depression (B-CES-D; Kohout, Berkman, Evans, & Cornoni-Huntley, 1993), a shortened version of the CES-D (Radloff, 1977). It is a 10-item self-report measure that asks how often a person has experienced affective, somatic, and interpersonal symptoms of depression within the past week. A sample item includes, "I had trouble keeping my mind on what I was doing." Participants indicate how often this has happened on a scale from 0 *Rarely or none of the time (less than one day)* to 3 *Most or all of the time (5-7 days).* A total sum is calculated that can range from 0 to 30, where higher scores indicate more clinically significant depression. The clinical cut-off score is 10 (Andresen, Carter, Malmgren, & Patrick, 1994). The B-CES-D has been translated into Spanish and used with a U.S. Latinx population where the Cronbach's alpha was .76 (Gryzwacz, Hovey, Seligman, Arcury, & Quandt, 2006). In the current study, Cronbach's α was .77 for the college women of color. Cronbach's α was .84 and .80 for English and Spanish, respectively, in the Latinx women sample.

Procedure

College women of color. Approval from the institute review board of the affiliated institution was obtained. Participants were recruited from the undergraduate psychology subject pool. Trained research assistants facilitated each data collection session, which lasted approximately 60 minutes. Participants arrived and were provided with the goals, benefits, and potential risk of the survey. Participants voluntarily completed the online survey in English and were welcome to discontinue at any time.

Responses were anonymous, and no identifiable information was collected. Participants were compensated with class credit, and each participant was given a referral form with university resources.

Latinx women. Approval from the institute review board of the affiliated institution was obtained. Participants were recruited from cultural events and Mechanical Turk. At cultural events, trained research assistants approached Latinx women and provided them with a brief description of the study, including goals, benefits, potential risks, and confidentiality. Oral consent was provided. Participants voluntarily completed a series of paper-and-pencil questionnaires on-site in English or Spanish. On average, participants spent 30-60 minutes to complete the questionnaire with the option to discontinue at any time. Trained bilingual research assistants were available for questions. Responses were anonymous, and completed surveys were placed into a drop box. Participants were compensated with a $10 gift card and provided with community mental health referrals.

For Mechanical Turk, researchers of the study posted a Human Intelligence Task (HIT) advertising completion of a survey on Latinx cultural experiences in the U.S. If participants were interested in the HIT, they were provided with a link to the survey on Qualtrics. When a participant completed the survey on Qualtrics, they were provided with a randomized code to enter on Mechanical Turk to receive compensation. Once opened, the survey was open for 90 minutes, and participants received $10 for completing the survey. After each worker received their compensation, codes were deleted so that they could not be paired with survey data.

Data Analytic Plan

Previous studies have shown support that levels of reported discrimination and mental health outcomes differ by income (Lorant et al., 2003), nativity status (Alegría et al., 2007), age (Mirowsky & Ross, 1992), language (Coker et la., 2009), recruitment source (Brondolo et al., 2005) and race/ethnicity (Forrest-Bank & Jenson, 2015; Klonoff & Landrine, 1995; Myers et al., 2002). Therefore, independent t-tests and one way analyses of variance (ANOVAs) were conducted to assess mean differences across groups. If differences emerged, these demographic variables were added as covariates for main analyses.

To test hypotheses 1A and 1B, two hierarchical regressions were utilized with depression symptoms as the outcome for college women of color and Latinx women, respectively. The first step of both regressions included demographic variables (income, nativity status, age, and if applicable, survey language, sample source, and race/ethnicity), and step two included both ethnic discrimination and sexist discrimination. Hypothesis 1A and 1B predicted that these two variables would significantly predict depression symptoms.

To test aims 2 and 3, a moderated mediational model was used. Moderated mediational models, or sometimes called conditional indirect effects, posit that a mediational pathway is conditional on a proposed moderator (Hayes, 2013). Instead of using the traditional method of Baron and Kenny (1986), tests of moderated mediation were conducted with PROCESS and the steps provided by Hayes (2013). PROCESS assesses significance of conditional indirect effects by generating an index of moderated mediation with bootstrapping (in this case 1,000 iterations). Bootstrapping is a non-

parametric test that conducts several iterations; its benefits are that it reduces type 1 error and estimates standard errors and confidence intervals. With the calculated index of moderated mediation, significance is determined if the index *does not include 0* (Hayes, 2013). If the index is significant, “two conditional indirect effects estimated at different values of the moderator are significantly different from one another” (Hayes, 2015, p. 2).

Results

Data Screening

College women of color. The main study variables, racial/ethnic discrimination, sexist discrimination, hopelessness, self-silencing beliefs, general self-efficacy, and depression symptoms, were examined to determine accuracy of data entry, missing values, and assumptions of multivariate analyses. Less than 1.6% of scores were missing for each variable. To screen for univariate outliers, summary and mean scores were transformed into *z*-scores with *z*-scores of ±3.29 considered potential univariate outliers. Only six outliers were detected: two for racial/ethnic discrimination, one for sexism, and three for hopelessness. Per the recommendations of Tabachnick and Fidell (2011), outliers were winsorized to the next highest value under the cut-off. To evaluate multivariate outliers, we examined Mahalanobis distance of values from the centroid with Chi Square testing and a *p*-value of .001. The three variables identified as multivariate outliers were removed from the dataset, leaving 125 cases for analysis. To investigate skew and kurtosis, values were divided by their standard errors; values ±3.29 were transformed. Ethnic discrimination, sexism, and hopelessness were significantly skewed, while ethnic discrimination was significantly kurtotic. Consequently, a square root transformation was performed with ethnic discrimination, sexism, and hopelessness. Previous research has demonstrated that racial/ethnic discrimination (Syzmanski, 2012), sexism (Szymanski & Owens, 2009), and hopelessness (Greene, 1981) tend to be skewed. Last, multicollinearity was examined with two-tailed Pearson's correlations to determine

if any correlations exceeded $r = .60$ (Tabachnick & Fidell, 2011), shown in Table 2. No correlations over .55 were detected, suggesting no multicollinearity.

Table 2. *Correlations, Means and Standard Deviations: College Women of Color*

		1.	2.	3.	4.	5.	6.
1.	Ethnic discrimination	--	.55**	-.02	.09	-.07	.35**
2.	Sexist discrimination		--	.05	.15	-.06	.35**
3.	Hopelessness			--	.33**	-.46**	.40**
4.	Self-silencing beliefs				---	-.41**	.34**
5.	General self-efficacy					--	-.33**
6.	Depression symptoms						--
M		1.65	2.04	2.92	80.94	31.70	9.49
SD		.59	.74	2.88	17.36	3.89	4.94

Latinx women. The described screening above was performed with the variables of interest (i.e., ethnic discrimination, sexism, hopelessness, self-silencing to main harmony beliefs, family pillar beliefs, and depression). Within this sample, no more than 3.2% of scores were missing for each variable with the exception of the last item of the SSE (i.e., missing 16.2%). A mean substitution ($M = 2.70$) was conducted to the 36 participants that did not respond to the last item of the SSE. There were five significant univariate outliers (i.e., two for self-silencing and three for hopelessness), which were winsorized to the next highest value (Tabachnick & Fidell, 2011). Only two cases were identified as multivariate outliers, and they were deleted. Ethnic discrimination, sexist discrimination, hopelessness, self-silencing, and depression were significantly kurtotic and skewed. Again, this finding is consistent with previous findings, including for depression symptoms (Radloff, 1977). Hopelessness and self-silencing beliefs were logarithmically transformed whereas ethnic discrimination, sexist discrimination, and depression underwent a square root transformation. As for multicollinearity, other than

ethnic and sexist discrimination (r=.61, p < .01) no two variables correlated over .56. While ethnic and sexist discrimination were highly correlated, they were not combined to one general discrimination variable. Reported correlations are in Table 3.

All main analyses were conducted using untransformed and transformed variables for both datasets. Since no meaningful differences were detected between major findings, results of untransformed data were reported to facilitate interpretation.

Table 3. *Correlations, Means and Standard Deviations: Latinx Women*

	1.	2.	3.	4.	5.	6.
1. Ethnic discrimination	--	.61**	.10	.04	.09	.36**
2. Sexist discrimination		--	.19**	-.15*	-.05	.37**
3. Hopelessness			--	.09	-.01	.53**
4. Self-silencing to maintain harmony beliefs				---	.56**	.06
5. Family pillar beliefs					--	.05
6. Depression symptoms						--
M	1.87	2.19	4.03	1.55	2.49	9.03
SD	.69	.91	4.37	.60	.54	5.90

Note. *p < .05, **p < .01

Preliminary Analyses

College women of color. Table 2 shows correlations, means, and standard deviations of the primary variables within the study. Of note, both the means of depression (M = 9.49, SD = 2.88) and hopelessness (M = 2.92, SD = 2.88) were below clinical cut-offs of 10 (Andresen et al., 1994) and 9 (Beck, Steer, Kovacs, & Garrison, 1985), respectively. Upon further examination, 42% and 8% met the cut off scores of possible clinical-level depression and hopelessness, respectively.

Independent samples t-tests and one-way ANOVAs were used to examine mean differences by nativity status, income, and race for the six primary variables (see Table

4). After independent t-tests, no significant differences were detected between U.S.- and foreign-born college women of color. A one-way ANOVA revealed significant differences across income (i.e., low [less than $20,000], middle [between $20,000 and $50,000], and high [$50,000+]). Post-hoc analyses demonstrated that the middle income group reported significantly more ethnic discrimination than the high income group.

Table 4. *Significant Differences: College Women of Color*

Outcome	Group							
	Low Income		Middle Income		High Income			
	M	*SD*	*M*	*SD*	*M*	*SD*	*F*	*df*
Racial/ethnic discrimination	1.83	.51	1.79[a]	.66[a]	1.51	.55	3.81*	2, 120
	African American/ Black		Asian/Pacific Islander		Latinx/ Hispanic			
	M	*SD*	*M*	*SD*	*M*	*SD*	*F*	*df*
Racial/ethnic discrimination	1.92	.69	1.40[b]	.42[b]	1.73	.61	5.41**	3, 121
Sexism	1.80	.59	1.74	.54	2.31[c]	.82[c]	6.06**	3, 120
Self-silencing	72.12[d]	17.83[d]	85.79	15.82	81.87	17.43	3.18*	3, 121

Note. $*p < .05$, $**p < .01$ indicates significance for the *F* test.
[a.] Middle income group reported significantly higher racial/ethnic discrimination than low income group.
[b.] Asian/Pacific Islander reported significantly less racial/ethnic discrimination than African American/Black and Latinx/Hispanic students.
[c.] Latinx/Hispanic students reported significantly higher sexist experiences than African American/Black and Asian/Pacific Islander students.
[d.] African American/Black students reported significantly lower self-silencing beliefs than Asian/Pacific Islander and Hispanic/Latinx students.

For racial/ethnic group, another one-way ANOVA found significant differences for ethnic discrimination, sexist discrimination, and self-silencing beliefs. Results revealed that African American/Black and Latinx/Hispanic college women reported more ethnic discrimination than college women that identified as Asian American/Pacific

Islander. Furthermore, Latinx/Hispanic college women reported higher sexist events than their African American/Black and Asian American/Pacific Islander counterparts. Last, Asian American/Pacific Islander college women reported higher self-silencing beliefs than African American/Black women undergraduates. Due to the differences, income and race/ethnicity were added as covariates for main analyses.

Latinx women. Table 3 displays the correlations, means and standard deviations of the variables of interest. The mean of depression (M = 9.03, SD = 5.90) and hopelessness (M = 4.03, SD = 4.37) were below the cut-offs of 10 and 9, respectively. Per these standards, 42% and 14.3% were at risk for clinical-level depression and hopelessness, respectively.

Mean differences were assessed with demographic information for the six variables of interest. Nativity status, language of survey, and survey source were assessed with independent samples t-tests (shown in Table 5). U.S.-born Latinx women reported more sexist events than their foreign-born counterparts. Individuals that completed the survey in English reported more sexist events and lower family pillar and self-silencing beliefs than those that completed it in Spanish. Finally, Latinx women that completed the survey on M-Turk reported significantly more sexist events and significantly less self-silencing beliefs than those that completed the survey at community events.

Six ANOVAs were conducted to determine mean differences across income levels for all variables of interest (low [i.e., less than $20,000], middle [i.e., $20,000-$50,000], and high [i.e., over $50,000]). Post-hoc analyses revealed that those in the low income bracket were significantly more depressed and hopeless than those in the middle

and high income brackets. Therefore, nativity status, language of survey, survey source, and income were included as covariates in main analyses.

Table 5. *Significant Differences: Latinx Women*

Outcome	Group					
	U.S.-born		Foreign-born			
	M	*SD*	*M*	*SD*	*t*	*df*
Sexism	2.38	.90	1.85	.82	-4.67**	241
	English Survey		Spanish Survey			
	M	*SD*	*M*	*SD*	*t*	*df*
Sexism	2.31	.90	1.69	.79	4.30**	243
Family Pillar	2.44	.54	2.68	.50	-2.72**	242
Self-silencing	1.48	.57	1.84	.65	-3.74**	242
	Mechanical Turk		Community Event			
	M	*SD*	*M*	*SD*	*t*	*df*
Sexism	2.34	.90	2.08	.90	-2.34*	243
Self-silencing	1.43	.51	1.63	.64	2.78*	236.82

	Low Income		Middle Income		High Income			
	M	*SD*	*M*	*SD*	*M*	*SD*	*F*	*df*
Hopelessness	12.08[a]	6.39[a]	8.97	5.44	7.80	5.95	7.69**	2, 234
Depression	6.21[b]	5.13[b]	4.19	4.73	2.96	3.22	7.13**	2, 235

Note. **p* < .05, ***p* < .01 indicates significance for the *F* test.
[a.] Low income reported higher hopelessness than middle income group.
[b.] Low income reported higher depression than middle income group.

Primary Analyses

Hypothesis 1. The first aim examined the ability of ethnic and sexist discrimination to predict depression symptoms among both samples. Hierarchical regressions were used where step 1 included demographic covariates and step 2 included ethnic and sexist discrimination.

College women of color. Step 1 included age, annual income, and race, which explained 8% of the variance in depression symptoms, $F(3,114) = 3.16$, $p = .03$. Step 2

included ethnic and sexist discrimination, which provided 11% additional variance, *R* square change = .11, *F change* (2, 11) = 7.52, *p* = .001. The entire model explained 19% of the variance, *F*(5, 112) = 5.12, *p* < .001. The effect size of the final model was .23 (Cohen's f^2). Of note, ethnic discrimination was a significant predictor of depression symptoms while sexist discrimination was not. Results are displayed in Table 6.

Table 6. *Hierarchical Regression Analysis for Variables Predicting Depression Symptoms: College Women of Color*

	Model 1			Model 2		
Variable	*B*	*SE B*	*β*	*B*	*SE B*	*β*
Age	.53	.33	.15	.45	.31	.12
Income	-1.54	.67	-.21*	-.80	.67	-.11
Race	.60	.43	.13	.58	.45	.12
Ethnic discrimination				1.95	.96	.23*
Sexist discrimination				1.14	.75	.17
R^2		.08*			.19**	
F for change in R^2		.08*			.11**	

Note. *$p <$ .05, **$p <$ .01

Latinx women. Step 1 included age, annual income, nativity status, language of the survey, and sample source, which explained 8% of the variance in depression symptoms, *F*(5, 218) = 3.51, *p* < .01. At step 2, which added ethnic and sexist discrimination, there was 15% significant additional variance, *R* square change = .147, *F change* (2, 216) = 20.45, *p* < .01. The total model explained 22% of the variance, *F*(7, 216) = 8.80, *p* < .01. The effect size of the final model was Cohen's f^2 = .29. Sexist discrimination was a significant predictor (*p* < .01) of depression symptoms. Of note, ethnic discrimination is approaching significance (*p* < .10). Results are displayed in Table 7.

Table 7. *Hierarchical Regression Analysis for Variables Predicting Depression Symptoms: Latinx Women*

	Model 1			Model 2		
Variable	*B*	*SE B*	*β*	*B*	*SE B*	*β*
Age	-.08	.03	-.16*	-.05	.03	-.11†
Income	-1.82	.57	-.21**	-1.49	.53	-.18**
Nativity status	.41	.93	.03	-.39	.87	-.03
Language	.87	1.30	.05	2.08	1.22	.13†
Source	.12	.88	.01	.32	.81	.03
Ethnic discrimination				1.23	.67	.14†
Sexist discrimination				1.97	.53	.30**
R^2		.08**			.22**	
F for change in R^2		.08**			.15**	

Note. *$p <$ .05, **$p <$ .01, †$p <$ .10

Hypothesis 2.

College women of color. Hypothesis 2A stated that hopelessness and self-silencing beliefs would mediate the link between ethnic discrimination and depression symptoms for college women of color, and that general self-efficacy would moderate the indirect links of ethnic discrimination-hopelessness and ethnic discrimination-self-silencing (see Figure 1). Age, income, and race were included as covariates. Results are displayed in Table 8. Ethnic discrimination was not significantly related to hopelessness or self-silencing beliefs. However, both hopelessness and self-silencing beliefs predicted depression symptoms, with $R^2 = .35$, $F(6,112) = 10.05$, $p < .001$ in the overall model. The interaction of ethnic discrimination x general self-efficacy was not significant in predicting hopelessness or self-silencing beliefs. The indices of moderated mediation for hopelessness and self-silencing beliefs were not significantly different from zero. The effect size of the overall model was Cohen's $f^2 = .53$.

Latinx women. Hypothesis 2B indicated that hopelessness and self-silencing beliefs would mediate ethnic discrimination and depression symptoms for Latinx community women, with family pillar beliefs moderating the indirect effect (see Figure 2). Language, age, nativity status, source of sample, and annual income were included as covariates. As shown in Table 9, ethnic discrimination was not significantly related to hopelessness. Though, hopelessness predicted depression symptoms (overall model R^2 = .41, $F(8, 213) = 18.64$, $p < .01$). The interaction of ethnic discrimination x family pillar was not statistically significant in predicting hopelessness. Furthermore, the index of moderated mediation for the hopelessness pathway did not provide evidence that it was statistically different from zero.

Ethnic discrimination was significantly related to self-silencing beliefs. However, self-silencing beliefs did not predict depression symptoms (overall model $R^2 = .41$, $F(8, 213) = 18.64$, $p < .001$). While the interaction of ethnic discrimination x family pillar was statistically significant in predicting self-silencing beliefs ($B = .17$, $SE\ B = .08$, $p = .05$), the index of moderated mediation did not provide evidence that it was statistically different from zero. The effect size of the model was Cohen's $f^2 = .69$.

Table 8. *Moderated Mediation Analysis for Ethnic Discrimination, Hopelessness, Self-silencing Beliefs, and Depression: College Women of Color*

Variable	*B*	*SE B*	*t*
Mediator - Hopelessness			
Predictor: Ethnic discrimination	-5.99	3.99	-1.50
Mod: Self-efficacy	-.61	.21	-2.97**
Interaction: Ethnic discrimination x self-efficacy	.17	.12	1.38
Outcome - depression			
Mediator: Hopelessness	.59	.14	4.16**
Predictor: Ethnic discrimination	2.86	.71	4.05**
Mediator - Self-silencing			
Predictor: Ethnic discrimination	-19.11	24.99	-.76
Mod: Self-efficacy	-2.73	1.29	-2.11*
Interaction: Ethnic discrimination x self-efficacy	.67	.78	.86
Outcome – depression			
Mediator: Self-silencing	.05	.02	2.18*
Predictor: Ethnic discrimination	2.86	.71	4.05**
	Boot indirect effect/index	Boot SE	95% CI
Index of moderated mediation for hopelessness	.10	.08	-.04 to .28
Index of moderated mediation for self-silencing	.03	.05	-.05 to .17

Note. *$p < .05$, **$p < .01$, †$p < .10$

Table 9. *Moderated Mediation Analysis for Ethnic Discrimination, Hopelessness, Self-silencing Beliefs, and Depression: Latinx Women*

Variable	*B*	*SE B*	*t*
Mediator - Hopelessness			
Predictor: Ethnic discrimination	2.16	1.89	1.14
Mod: Family pillar	.67	1.47	.46
Interaction: Ethnic discrimination x family pillar	-.59	.74	-.79
Outcome - depression			
Mediator: Hopelessness	.69	.07	9.25**
Predictor: Ethnic discrimination	2.26	.46	4.89**
Mediator - Self-silencing			
Predictor: Ethnic discrimination	-.43	.21	-2.01*
Mod: Family pillar	.32	.17	1.90
Interaction: Ethnic discrimination x family pillar	.17	.08	1.97*
Outcome – depression			
Mediator: Self-silencing	.07	.54	.13
Predictor: Ethnic discrimination	2.26	.46	4.89**
	Boot indirect effect/index	Boot SE	95% CI
Index of moderated mediation for hopelessness	-.40	.64	-1.66 to .80
Index of moderated mediation for self-silencing	.01	.12	-.21 to .30

Note. *$p < .05$, **$p < .01$, †$p < .10$

Hypothesis 3.

College women of color. Hypothesis 3A stated that hopelessness and self-silencing beliefs would mediate the link between sexist discrimination and depression symptoms for college women of color, and that general self-efficacy would moderate the indirect links of sexist discrimination-hopelessness and sexist discrimination-self-silencing (see Figure 3). Age, race/ethnicity, and annual income were added as covariates. Results are noted in Table 10. Sexism was not significantly related to hopelessness or self-silencing beliefs. Hopelessness and self-silencing beliefs did predict

depression symptoms (overall model $R^2 = .32$, $F(6, 111) = 8.75$, $p < .001$). The interaction of sexism x general self-efficacy did not predict hopelessness or self-silencing beliefs. The indices of moderated mediation were also not significant for hopelessness or self-silencing beliefs. The effect size of the model was .47 (Cohen's f^2).

Latinx women. It was hypothesized for Hypothesis 3B that hopelessness and self-silencing beliefs would mediate sexist discrimination and depression symptoms for Latinx women, with family pillar beliefs moderating the indirect effect (see Figure 4). Language, age, nativity status, source of survey, and income were included as covariates. As shown in Table 11, sexist discrimination was not significantly related to hopelessness. Though, hopelessness predicted depression symptoms (overall model $R^2 = .42$, $F(8, 216) = 19.75$, $p < .001$). The interaction of sexist discrimination x family pillar was not statistically significant in predicting hopelessness. Furthermore, the index of moderated mediation did not provide evidence that it was statistically different from zero.

Sexist discrimination was not significantly related to self-silencing beliefs. Furthermore, self-silencing beliefs did not predict depression symptoms (overall model $R^2 = .42$, $F(8, 216) = 19.75$, $p < .001$). The interaction of sexist discrimination x family pillar was not statistically significant in predicting self-silencing beliefs. The index of moderated mediation did not provide evidence that it was statistically different from zero. The effect size of the model was Cohen's $f^2 = .72$.

Table 10. *Moderated Mediation Analysis for Sexist Discrimination, Hopelessness, Self-silencing Beliefs, and Depression: College Women of Color.*

Variable	*B*	*SE B*	*t*
Mediator - Hopelessness			
Predictor: Sexist discrimination	4.53	3.08	1.47
Mod: Self-efficacy	-.07	.20	-.34
Interaction: Sexist discrimination x self-efficacy	-.14	.10	-1.43
Outcome - depression			
Mediator: Hopelessness	.55	.15	3.74**
Predictor: Sexist discrimination	1.75	.56	3.10**
Mediator - Self-silencing			
Predictor: Sexist discrimination	-1.56	19.20	-.08
Mod: Self-efficacy	-1.95	1.22	-1.59
Interaction: Sexist discrimination x self-efficacy	.14	.61	.23
Outcome – depression			
Mediator: Self-silencing	.05	.02	2.23*
Predictor: Sexist discrimination	1.75	.56	3.10**
	Boot indirect effect/index	Boot SE	95% CI
Index of moderated mediation for hopelessness	-.01	.04	-.07 to .09
Index of moderated mediation for self-silencing	.08	.07	-.23 to .03

Note. *$p < .05$, **$p < .01$, †$p < .10$

Table 11. *Moderated Mediation Analysis for Sexist Discrimination, Hopelessness, Self-silencing Beliefs, and Depression: Latinx Women*

Variable	*B*	*SE B*	*t*
Mediator - Hopelessness			
Predictor: Sexist discrimination	1.57	1.47	1.06
Mod: Family pillar	.16	1.43	.11
Interaction: Sexist discrimination x family pillar	-.20	.58	-.36
Outcome - depression			
Mediator: Hopelessness	.64	.07	8.63**
Predictor: Sexist discrimination	1.95	.37	5.26**
Mediator - Self-silencing			
Predictor: Sexist discrimination	-.20	.17	-1.19
Mod: Family pillar	.49	.17	2.97**
Interaction: Sexist discrimination x family pillar	.05	.07	.84
Outcome – depression			
Mediator: Self-silencing	.41	.54	.77
Predictor: Sexist discrimination	1.95	.37	5.26**
	Boot indirect effect/index	Boot SE	95% CI
Index of moderated mediation for hopelessness	-.13	.47	-.99 to .93
Index of moderated mediation for self-silencing	.02	.06	-.05 to .26

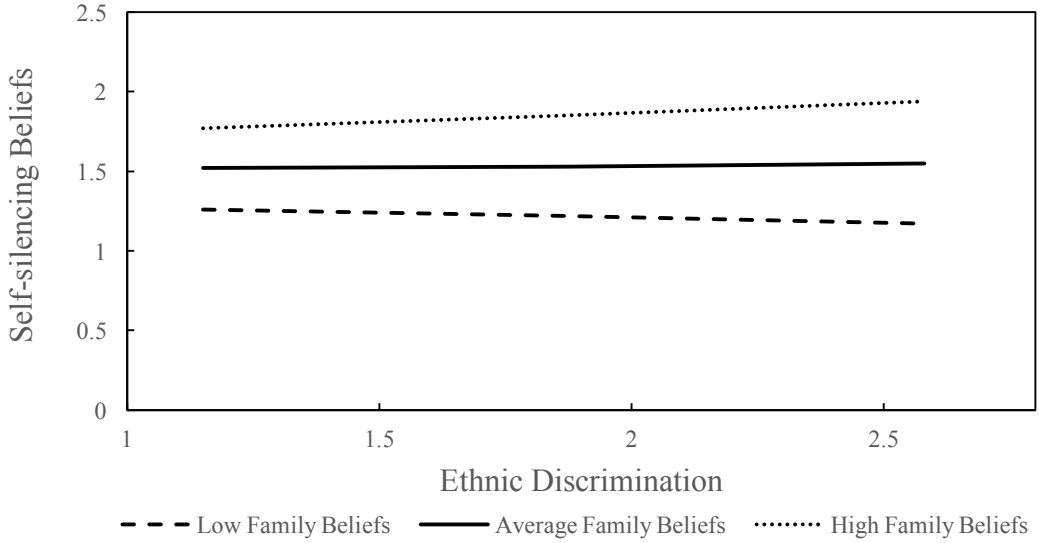
Note. *$p < .05$, **$p < .01$, †$p < .10$

Supplementary Analyses[2]

Latinx women. Given the significant interaction in hypothesis 2B, a simple moderator analysis using bootstrapping of 1,000 samples was conducted to determine if family pillar beliefs moderated the relationship between ethnic discrimination and self-silencing beliefs. Demographic variables of income, language, nativity status, sample source, and age were included as covariates. In the final model, the variables accounted for 36% of the variance of self-silencing beliefs, $F(8, 215) = 15.08$, $p < .001$. Ethnic discrimination ($b = -.43$, $p = .04$), but not family pillar beliefs ($b = .30$, $p = .06$), was a

statistically significant predictor. The interaction term (b = .17, p = .04) was statistically significant, suggesting that family pillar beliefs moderated ethnic discrimination and self-silencing beliefs. The interaction explained an additional 1.2% of variance in depression, $F(1, 215) = 4.21$, p = .04. As shown in Figure 5, the relationship between ethnic discrimination and self-silencing beliefs was stronger for those with low (i.e., -1 *SD* below the mean) and high family pillar beliefs (i.e., +1 *SD* above the mean). Specifically, in the context of high ethnic discrimination, those with low family pillar beliefs endorsed lower self-silencing beliefs whereas those with high family pillar beliefs endorsed higher self-silencing beliefs. None of the slopes were statistically significant (p > .05). In summary, in the context of high racial/ethnic discrimination, endorsing high family pillar beliefs may be a risk factor for higher self-silencing beliefs.

Figure 5. *The Moderating Role of Family Beliefs on Ethnic Discrimination and Self-silencing Beliefs*



Note. The interaction effect of family beliefs and ethnic discrimination on self-silencing beliefs. None of the slopes were statistically significant (p > .05). High family beliefs are defined as +1 *SD* above the mean. Low family beliefs are defined as individuals that were -1 *SD* below the mean.

Because the moderated mediational model was not significant, a parallel multiple mediator model was explored, where hopelessness and self-silencing beliefs mediated discrimination and depression symptoms. Nativity status, income, age, source of sample, and language were entered as covariates. The first analysis tested if ethnic discrimination predicted depression via hopelessness and self-silencing beliefs, and the overall model was significant, $R^2 = .41$, $F(8, 213)$, $p < .01$. Results are shown in Table 12. Contrary to previous literature, ethnic discrimination did not predict hopelessness, $B = .67$, $SE = .42$, $p = .12$, or self-silencing beliefs, $B = .03$, $SE = .06$, $p = 55$. Consistent with previous literature, hopelessness predicted depression, $B = .69$, $SE = .07$, $p < .01$. However, self-silencing beliefs did not predict depression, $B = .07$, $SE = .54$, $p = .13$. A direct effect of ethnic discrimination on depression persisted after controlling for the proposed mediators, hopelessness and self-silencing beliefs, $B = 2.26$, $SE = .46$, $p < .01$. To summarize, hopelessness nor self-silencing beliefs were significant mediators. The total indirect effect of ethnic discrimination on depressive symptoms was not statistically significant ($B = .46$, $SE = .30$, 95% CI [-.11, 1.11]). Neither hopelessness ($B = .46$, $SE = .30$, 95% CI [-.10, 1.11]) or self-silencing beliefs ($B = .002$, $SE = .04$, 95% CI [-.07, .12]) were significant mediators.

Table 12. *Supplementary Analysis: Parallel Mediator Analysis of Ethnic Discrimination with Latinx Women*

	Consequent								
	M_1 – Hopelessness			M_2 – Self-silencing Beliefs			Y – Outcome		
Antecedent	Coeff.	*SE*	*p*	Coeff.	*SE*	*p*	Coeff.	*SE*	*p*
Depression									
Ethnic discrimination	.67	.42	.12	.03	.06	.55	2.26	.46	<.01
Hopelessness	-	-	-	-	-	-	.68	.07	<.01
Self-Silencing beliefs	-	-	-	-	-	-	.07	.54	.13
Constant	2.15	2.65	.42	1.40	.36	<.01	6.07	2.98	.04
	R^2 = .12 $F(6, 215)=4.73$, p < .01			R^2 = .07 $F(6, 215)=2.19$, p=.04			R^2 = .41 $F(8, 213)=18.64$, p<.01		

			95% Confidence Interval	
Indirect Effect	*B*	*SE*	Lower Limit	Upper Limit
Total Indirect Effect	.46	.30	-.11	1.12
Hopelessness	.46	.30	-.10	1.11
Self-silencing beliefs	.002	.04	-.07	.12
Comparison of Indirect Effects				
Self-silencing vs. hopelessness	-.46	.30	-1.12	.09

Next it was determined if hopelessness and self-silencing beliefs mediated sexist discrimination and depression symptoms. Similarly, nativity status, income, age, source of sample, and language were entered as covariates. The overall model was significant, $R^2 = .42$, $F(8, 216) = 19.75$, $p < .001$. As expected, sexism significantly predicted hopelessness, $B = 1.05$, $SE = .33$, $p < .01$. However, sexism did not predict self-silencing beliefs, $B = -.06$, $SE = .05$, $p = .18$. In addition, hopelessness predicted depression, $B =$

.64, *SE* = .07, *p* < .01, but self-silencing beliefs did not, *B* = .41, *SE* = .54, *p* =.44. While there was still a direct effect of sexism on depression after controlling for hopelessness and self-silencing beliefs, it was reduced, *B* = 1.95, *SE* = .37, p < .01. Furthermore, there was statistically significant evidence for a significant indirect effect, *B* = .65, *SE* = .25, 95% CI [.20, 1.21]. More specifically, hopelessness was a significant mediator, *B* = .68, *SE* = .25, 95% CI [.24, 1.23], while self-silencing beliefs was non-significant, *B* = -.03, *SE* = .05, 95% CI [-.18, .03]. Upon further examination, the comparison model indicated that self-silencing was a significantly weaker mediator than hopelessness, *B* = -.70, *SE* = .25, 95% CI [-1.28, -.27]. Results are shown in Table 13.

Table 13. *Supplementary Analyses: Parallel Mediator Analysis of Sexist Discrimination with Latinx Women*

	Consequent								
	M_1 - Hopelessness			M_2 - Self-silencing			Y – Depression		
Antecedent	Coeff.	*SE*	*p*	Coeff.	*SE*	*p*	Coeff.	*SE*	*p*
Sexist discrimination	1.05	.33	<.01	-.06	.05	.18	1.95	.37	<.01
Hopelessness	-	-	-	-	-	-	.64	.07	<.01
Self-silencing	-	-	-	-	-	-	.41	.54	.44
Constant	.37	2.55	.88	1.73	.35	<.01	5.13	2.94	.08
	R^2 = .15 $F(6, 218)$=6.27, *p* = 0.01			R^2 = .07 $F(6, 218)$=2.60, *p*=0.01			R^2 = .42 $F(8, 216)$=19.75, *p*<0.01		

			95% Confidence Interval	
Indirect Effect	*B*	*SE*	Lower Limit	Upper Limit
Total Indirect Effect	.65	.25	.20	1.21
Hopelessness	.68	.25	.24	1.23
Self-silencing beliefs	-.03	.05	-.18	.03
Comparison of Indirect Effects				
Self-silencing vs. hopelessness	-.70	.25	-1.28	-.27

Discussion

The current study explored the relationship between ethnic and sexist discrimination and depression among women of color. The first aim supports that, for undergraduate women of color and Latinx women, ethnic discrimination and sexist discrimination significantly predicted depression symptoms. While empirical evidence supports ethnic and sexist discrimination predict elevated depression symptoms for women of color, minimal studies have examined the underlying mechanisms. Therefore, the second and third aims of the current study tested a moderated mediational model: hopelessness and self-silencing beliefs were examined as mediators between discrimination and depression symptoms. Moreover, the protective nature of general self-efficacy for undergraduate women of color and family pillar beliefs for Latinx women were explored. Unfortunately, the moderated mediational models were not supported for either sample. While many of the findings from the current study were non-significant, there is limited research that applies previously established theoretical models (e.g., hopelessness model of depression) to the experiences of women of color.

Aim 1: Ethnic or Sexist Discrimination as a Stronger Predictor

The first aim of the current study was to explore the ability of ethnic and sexist discrimination to concomitantly predict depression. Moreover, the study explored whether ethnic and/or sexist discrimination predicted depression symptoms for undergraduate women of color and Latinx women. Previous studies have found contradictory findings with some citing ethnic discrimination (Carr et al. 2014) and others finding support for sexist discrimination (Moradi & Subich, 2003; Syzmanski &

Stewart, 2010) as the stronger predictor for depression among women of color. The hypotheses of the current study took an *either/or* approach to the literature, when in fact, the findings of the current study support that both ethnic and sexist discrimination have the potential to be more detrimental to women of color depending on their context.

Identity salience. The theory of identity salience may inform discrepant findings from past studies and the current study. Informed by social identity and ecological theories, identity salience acknowledges that individuals may have multiple relevant identities, such as being a woman and a person of color. Moreover, identity salience theory recognizes that the relevance of one identity over another is dynamic and likely influenced by social context (Morris, 2013; Yakushko, Davidson, & Williams, 2009). In fact, Sanders Thompson (1999) conducted a study among African American individuals and found that variables relative to an individual's social context (i.e., racial socialization and relationships with other African American persons), but not ethnic discrimination, was predictive of ethnic identity salience. For the current study, one tentative explanation for the findings might be that ethnic discrimination was more relevant to undergraduate women of color because of their lived experiences at a PWI, whereas sexist discrimination was more salient for Latinx women due to their status in their community.

Consistent with previous findings (Carr et al., 2014; Levin et al., 2002), ethnic discrimination was a stronger predictor of depression symptoms compared to sexist discrimination among college women of color at a PWI. Women currently outnumber men at 4-year undergraduate institutions. In addition, women complete their degrees at higher rates than men across racial/ethnic groups (U.S. Department of Education National Center for Educational Statistics [U.S. DENCES], 2017). While women are the majority

in these undergraduate settings, non-Hispanic White students continue to exceed undergraduate students of color in terms of enrollment status and degree completion at 4-year postsecondary institutions (U.S. DENCES, 2017). Not only are undergraduate students of color outranked among their peers, but a majority of full-time faculty at undergraduate institutions are of non-Hispanic White descent. Specifically, it was estimated that 76% of all faculty at 4-year postsecondary institutions were of non-Hispanic White descent (U.S. DENCES, 2018). While identity may vary across contexts, it might be that interactions that women of color have at a PWI make their ethnic identity more salient, influencing their appraisal of discriminatory experiences (Douglass, Wang, & Yip, 2016).

On the other hand, also consistent with previous findings (Moradi & Subich, 2003; Szymanski & Stewart, 2010), sexist discrimination was a stronger predictor of depression symptoms than ethnic discrimination for Latinx women recruited from the community. Sexist discrimination may be more prominent for women of color when they experience it from the mainstream, non-Hispanic White community *and* their heritage community (Syzmanski & Stewart, 2010). To support this statement, Klonoff and Landrine (1995) found that Latinx and Asian American women were more likely to report recent and lifetime sexist treatment in personal relationships with men and family members than non-Hispanic White women.

Within Latinx culture, gender stereotypes persist where Latinx women might be more likely to be socialized as subordinate to others, especially within their close relationships (Castillo et al., 2010). Scholars have also found support that patriarchal beliefs persist within U.S. and Latin American countries. In fact, there has been support

to demonstrate that high levels of hostile and benevolent sexist attitudes exist among Latinx individuals in Cuba, Chile, Colombia (Glick et al., 2000) and the U.S. (Bermúdez, Sharp, & Taniguchi, 2015). Thus, Latinx women in the U.S. may be living in a context where they experience sexism from both mainstream U.S. and heritage cultures. In sum, a theoretical implication of the current study might be to consider the interplay between an individual's context and the salience of their identity when examining discriminatory experiences.

Aims 2 and 3: Non-significant Moderated Mediational Models

The second and third aims of the current study evaluated a moderated mediational model, linking discrimination to depression via cognitive vulnerabilities (i.e., hopelessness and self-silencing beliefs) while accounting for general self-efficacy for college women of color and family pillar beliefs for Latinx women. Typically, bootstrapping with 1,000 iterations on samples comparable in size to previous research demonstrates higher power than other mediational analyses (Fritz & MacKinnon, 2007; Schoemann, Boulton, & Short, 2017). Furthermore, each effect size for the overall model was Cohen's $f^2 = .49$ or higher. The analyses likely had adequate power and medium to large effect sizes, yet found no significant results. In addition, moderated mediational models test a conditional indirect effect (Hayes, 2012). The current findings may have been non-significant because they were conditional on the moderators proposed. Again, it might be that previously supported literature has examined samples of persons of color (e.g., with ethnic discrimination and hopelessness) or non-Hispanic White women (e.g., with sexist discrimination and self-silencing beliefs), but never considered how these

theoretical constructs may differ for the unique experiences of women of color. More specifically, this rationale is denoted below.

Hopelessness as a mediator. Consistent with previous literature, the current study found that hopelessness predicted depression among college women of color and Latinx women (Liu et al., 2015). However, the findings of the current study differed from previous research because there was no evidence for hopelessness as a mediator between ethnic discrimination and depression. One tentative hypothesis for why hopelessness did not mediate ethnic discrimination and depression among college women of color or Latinx women is that ethnic discrimination may not be appraised as a *global* stressor for these women. The hopelessness theory of depression was proposed over the assumption that individuals with hopelessness tendencies appraise stressors as stable, global and internal (Alloy, Abramson, Metalsky, & Hartlage, 1988). To explain, Stein and colleagues (2012) suggest that the hopelessness theory of depression may be more applicable to stressors that can be appraised as global, or universal, stressors than culturally-specific stressors. Within a study conducted by Stein and colleagues (2012), they found that hopelessness did not mediate culturally-based stressors, in this case defined as stress due to acculturation and ethnic discrimination, and depression among Latinx adolescents (Stein et al., 2012). However, hopelessness did mediate culturally-universal stressors, defined as financial strain and parent-child conflict, and depression for these Latinx adolescents.

Moreover, to the author's knowledge, all previous research that has found a link between ethnic discrimination and hopelessness in the past has emerged from samples that included all genders (Chang et al., 2010; Romero et al., 2018). It might be that

hopelessness has a different relationship for women of color. Notably, one study found that hopelessness attributions had a different relationship to stress and depression depending on an individual's reported sex. Specifically, in a study by Stone, Gibb and Coles (2010), hopelessness was a risk factor that moderated the relationship between stress and depression for college men, but not college women.

Supplementary analyses of a parallel mediator analysis were also performed in the current study, with support that hopelessness mediated sexist discrimination and depression among the Latinx sample. To the author's knowledge, this is the first study to find support that hopelessness mediates sexist discrimination and depression symptoms. It is interesting to note that hopelessness mediated sexist discrimination and depression, but not ethnic discrimination and depression among Latinx women. Similar to previous rationale outlined by Stein and colleagues' (2012), it might be that sexist discrimination is a more "universal," or global, stressor for this particular sample of Latinx women. In fact, the results of Aim 1 support that sexist discrimination was more salient, or possibly even a more global stressor, for Latinx women because it was a stronger predictor of depression than ethnic discrimination. Similarly, previous research tentatively suggests a *global* aspect of sexist discrimination for Latinx women due to their higher experiences of sexism from family members and close male friends (Klonoff & Landrine, 1995).

Theoretically, the current study also shows that while various forms of discrimination (e.g., racism, sexism, etc.) have overlapping similarities, the underlying mechanisms through which discrimination relates to poor mental health outcomes may be different depending on the *type of discrimination* and *race/ethnicity* of the individual. In this case, hopelessness was a mediator for Latinx women, but not college women of

color. Furthermore, the indirect effect of hopelessness only occurred for sexist discrimination, but not ethnic discrimination, for Latinx women.

Self-silencing as a mediator. Consistent with previous research self-silencing beliefs predicted depression among college women of color (Grant et al., 2011; Abrams et al., 2018). However, self-silencing beliefs did not predict depression among Latinx women. This varied finding may be attributed to measurement differences in self-silencing beliefs between college women of color and Latinx women (further discussed in limitations section). Alternatively, self-silencing beliefs may be more normalized in the culture of Latinx gender roles.

Inconsistent with the hypothesis, self-silencing was not a significant mediator in the moderated mediational models or supplementary mediational models within the current study. An explanation for these unexpected findings might be due to cohort effects within the current sociopolitical context. All data was collected in 2017 through early 2019. Recent social movements, such as the #MeToo movement, #TimesUp, and the testimony of Dr. Christine Blasey Ford, to name a few, may be encouraging women to speak out against inequities and racial and sexual harassment. These recent social movements may be breaking the links between unfair treatment and self-silencing beliefs for women in the U.S. As an example, the Pew Research Center (2018) demonstrated that between 2017 and 2018 the #MeToo hashtag was used approximately 19 million times on Twitter alone. The #MeToo movement has encouraged women to challenge the notion of self-silencing by sharing their experiences of sexual harassment, sexual assault, and sexism (O'Neil, Sojo, Fileborn, Scovelle, & Milner, 2018). As a result, it is possible that there has been increased attention to the detrimental effects of self-silencing beliefs

among women. While it may be too early to tell, the theoretical framework of the self-silencing theory of depression may alter with the current sociopolitical context in the U.S. (c.f., Gill & Orgad, 2018). More of this idea is discussed in the theoretical implications section.

General self-efficacy and college women of color. Contrary to the reviewed literature, the current study did not find support that general self-efficacy moderated the discrimination-hopelessness or discrimination-self silencing links for college women of color. In fact, even correlational analyses of the current study did not support any relationship between ethnic or sexist discrimination and general self-efficacy. This lack of relationship is surprising given that many other studies have found an inverse relationship between ethnic discrimination and general self-efficacy among Latinx individuals (Lee & Ahn, 2011) and African American adolescents (Alliman-Brissett & Turner, 2010), to name a few.

However, one previous study had similar results with the current findings: general self-efficacy did *not* moderate racial/ethnic discrimination and distress for African American undergraduate students in a study by Lightsey and Barnes (2007). It might be that general self-efficacy is more relevant in response to general life stress. To explain, previous studies support that general self-efficacy ameliorates the link between general life stressors and depressive symptoms among undergraduate students from the U.S. (Lightsey, 1997) and Guam (Lightsey & Christopher, 1997). Some scholars even critique that self-efficacy "typifies masculinity," specifically "agentic and individualistic" tendencies (Lindley, 2006, p. 144), perhaps making it a less ideal construct to examine among women.

Even though general self-efficacy has been touted as largely protective against general life stressors, it might be that there are other specific sub-types of self-efficacy more relevant to both women of color and their discriminatory stressors. Oftentimes, the utility of a coping strategy, such as self-efficacy, is dependent on the match among the stressor, context, and individual (Lazarus, 1993). *Bicultural* self-efficacy or *career decision* self-efficacy might have been better matches for discriminatory stressors among women of color at a PWI. *Bicultural* self-efficacy refers to an individuals perceived ability to successfully navigate between the demands of their mainstream and heritage culture and has been linked with positive mental health outcomes (David, Okazaki, & Saw, 2009). Alternatively, since the study examined college women of color engaging in studies at a PWI, *career decision* self-efficacy, or a woman's perceived confidence in pursuing her desired career, may have been a more appropriate choice (Betz, Klein, & Taylor, 1996). Career decision self-efficacy has thought to be particularly relevant among women due to their experiences of sexism (Betz & Hackett 1981). In fact, studies have revealed that reported sexist events predicted lower levels of career decision self-efficacy (Shin & Lee, 2018). In total, *general* self-efficacy may have less relevance in the context of racial/ethnic and sexist discrimination for college women of color.

Family pillar beliefs and Latinx women. In the overall moderated mediational model of the current study, family pillar beliefs did not moderate the indirect effect of hopelessness and self-silencing through discrimination and depression symptoms for Latinx women. However, supplementary moderator analyses were significant, such that family pillar beliefs moderated the relationship between ethnic discrimination and self-silencing beliefs. Contrary to the hypothesis, family pillar actually served as a risk factor

in this link. Specifically, those with high family pillar beliefs reported higher self-silencing beliefs in the context of higher reports of ethnic discrimination.

Another survey study performed by Sanchez and colleagues (2017) found that high family beliefs of marianismo had a positive, significant correlation with ethnic discrimination. Holding high family beliefs in the context of ethnic discrimination may be a risk factor for higher self-silencing beliefs because the tenets of marianismo may pressure Latinx women to self-sacrifice their own thoughts and feelings for the sake of their family (Mendez-Luck & Anthony, 2016; Stevens, 1973). In the current sample, if women held higher beliefs that they should be a strong pillar for their family, they were more likely to self-silence, perhaps to be less of a burden to their family. As an example, in a qualitative study Mexican American girls described that they felt socialized to not comment on the pain related to experiencing racist and sexist events in order to avoid making a scene, especially with family members (Denner & Dunbar, 2004). It might be that Latinx women feel an obligation towards their family. Specifically, Lanier and DeMarco (2015) note that women of color from with lower financial resources may be more likely to silence their own needs in order to allocate financial as well as emotional support to loved ones before themselves.

Depending on the context, previous studies support that in certain situations, familism may be protective for Latinx individuals (e.g., Lee & Ahn, 2012), whereas in other situations, it is a risk factor. Again, it might be that the type of coping strategy, in this case using family as support, may be dependent on the match between the stressor, the individual, and the coping strategy (Lazarus, 2003). The finding of the current study

may encourage researchers and mental health workers to better understand the nuances of family dynamics in the context of mental health among Latinx women.

Theoretical Implications

Updating models. First, the current study urges future researches to acknowledge that previously established theories may not apply to the experiences of women of color. The current study found no support that hopelessness and self-silencing beliefs were consistent underlying mediators, which might suggest that these models may need updating for the experiences of women of color. As an example, Hankin and Abramson (2001) modified the *cognitive vulnerability stress model of depression* to the *cognitive vulnerability transactional model of depression* to explain why girls start experiencing doubled rates of depression during adolescence. To explain, they modified the theory to include cognitive vulnerabilities widely endorsed by women, such as rumination and dissatisfaction with their physical appearance. In addition, they integrated developmental considerations, including genetics and adverse childhood events.

With the information from the current study, researchers may expand the generic *cognitive vulnerability stress model of depression* for women of color. The current study found support that underlying cognitive vulnerabilities of discrimination and depression may depend on the *type* of discrimination and *race/ethnicity* of the woman. As evidence from supplementary analyses within the current study, the hopelessness theory of depression was supported in that hopelessness mediated sexist discrimination and depression for Latinx women, but not for college women of color. Furthermore, hopelessness did not mediate ethnic discrimination and depression for either group of

women. In sum, future studies may consider that pathways evaluated may be dependent on the type of stressor and the context of the individual.

Self-silencing in the current sociopolitical climate. One of the most surprising findings from the current study was that self-silencing beliefs did not mediate discrimination and depression among women of color. The current study may provide support for a changing construct of the self-silencing theory of depression in the current U.S. sociopolitical climate. While there have been many figures and social movements encouraging women to come forward on issues of sexual harassment and sexism, the #MeToo movement has received the most empirical attention and academic commentary. Gill and Orgad (2018) describe the #MeToo movement as having the potential to change "organizational, legal, policy, and cultural changes," mostly due its spread on social media (p. 1319).

Social media may be a factor in breaking the link between unfair treatment and self-silencing beliefs. One of the two samples in the current study was college women of color. Trends show that young adults in the U.S. between the ages of 18 and 24 are likely to use social media, with some apps being used by up to 70% or more of that age group (Pew Research, 2019). In fact, one study conducted by Manikonda, Beigi, Liu and Kambhampati (2018) conducted a comparative analysis of tweets that included the #MeToo hashtag on Twitter. They found that on average, users were more likely to re-post and favorite a #MeToo post than posts without the #MeToo hashtag. With further topic analysis, the strongest themes that emerged among the #MeToo posts were strength and action against sexual harassment. Taken together, it is possible that women of color in the current study were exposed to this movement during data collection. Future studies

may consider how content from the #MeToo movement might be experimentally manipulated to affect self-silencing beliefs. As another idea, researchers may consider longitudinally examining self-silencing beliefs in conjuncture with exposure to social movements.

Alternatively, the current findings may be a call for future researchers to update the self-silencing theory of depression for women of color by including additional constructs. As one example, Abrams and colleagues (2019) found that self-silencing beliefs mediated the relationship between *Strong Black Woman* identity and depression among a sample of African American college women and women from the community in the U.S. Future studies may consider a serial mediator model, which includes womanist identity and self-silencing beliefs as serial mediators between discrimination and depression.

As another example, Watson and Grotewiel (2018) recently examined *commitment to social change* in connection with self-silencing beliefs. With their large sample of predominantly non-Hispanic White women, they found that sexist events predicted self-silencing beliefs only for women with low levels of commitment to social change. Average and high levels of commitment to change (relative to the rest of the sample) buffered the link between sexist discrimination and self-silencing beliefs. Again, it might be that future models incorporate commitment to change given the recent sociopolitical movements calling for collective action.

The findings of the current study may provide evidence for an upcoming cultural shift influencing the silencing the self theory of depression. A recent review demonstrates that self-silencing beliefs has been linked to many poor physical and mental health

outcomes for women, including depression, eating disorders, chronic illness (e.g., premenstrual dysphoric syndrome, AIDS, and chronic fatigue syndrome, etc.), necessitating further research work on how to better understand and ultimately challenge these beliefs (Maji & Dixit, 2019). With the new cultural shift, there may be additional factors at play, such as exposure to social movements, woman of color identity, or commitment to change, to name a few, that may have the ability to mediate or buffer self-silencing beliefs and negative outcomes.

Integrating intersectionality. Last, on a broader level the current study attempted to address the intersectional experiences of women of color by including both experiences of ethnic and sexist discrimination. Intersectionality is becoming increasingly popular in psychological science; yet, there is little to no consensus on how to integrate gender and ethnicity into a single study for intersectional research (Bowleg 2008; Shields, 2008). Moreover, this study examined two understudied samples: college women of color at a PWI and Latinx women. As Else-Quest and Hyde (2016) note, it is important to weigh the advantages and disadvantages of examining one specific ethnic group versus a more homogenous group.

The current study used a double jeopardy approach, which states that women of color experience additive psychological burden from experiences of ethnic discrimination due to their race/ethnicity and sexist discrimination due to being a woman. It assumes that experiences of ethnic and sexist discrimination are independent and simultaneous (Beal, 1970). The current study added support that both ethnic and sexist discrimination have the potential to be more salient to women of color based on their context. While the double jeopardy approach has several disadvantages (c.f., Lewis & Grzanka, 2016), it has

been acknowledged as an appropriate starting place (Bowleg, 2008; Shields, 2008). With the foundational results from the current study, future researchers may expound upon the current findings with an interactionist or intersectionality approach among college women of color and Latinx women (Lewis & Grzanka, 2016). As one example of an intersectionality approach, researchers may assess for ethgender discrimination, or experience discrimination due to one's integrated identity of being a woman of color (Essed, 1991).

Practical Implications

Racism and sexist discrimination continue to exist in the U.S., especially with the current sociopolitical climate (Bock, Byrd-Craven & Burkley, 2017; Quillian, Pager, Hexel & Midboen, 2017). Because ethnic and sexist discrimination are linked to increased psychological distress and the racial/ethnic minority population in the U.S. continues to grow, it is important for clinicians to be informed of underlying mechanisms between discrimination and psychological distress to better inform interventions for women of color.

Informing cognitive therapy. Cognitive therapy is an efficacious treatment of depression, where the primary goal of treatment is to monitor and challenge unhelpful thinking patterns and beliefs and ultimately replace them with more adaptive responses (Beck, 2011; Chambless & Hollon, 1998; Society of Clinical Psychology, 2012). The current study found evidence that hopelessness mediates sexist discrimination and depression among Latinx women; therefore, hopelessness towards the future may be an important treatment target to integrate into cognitive therapy of depression for women of color. Furthermore, when examining each moderated mediational model more closely,

hopelessness consistently predicted depression symptoms in both samples. Consistent with this idea, research has demonstrated that when cognitive therapy is culturally adapted, effectiveness of the therapy increases (Sue, Zane, Nagayama, Hall, & Berger, 2009). To implement this finding, clinicians may include in their initial evaluations and interviews with women of color to assess for experiences of sexist discrimination and subsequent reactions to it.

The current study also found no support that self-silencing beliefs mediate discrimination and depression. As a result, researchers and clinicians may consider assessing for other negative thinking styles that may mediate the link between discrimination and depression. As an example, one study found that dichotomous thinking, or all or nothing thinking, mediated the link between discrimination and body mass index for community members (Antoniu, Bongers, & Jansen, 2017). Another study found that ruminative thinking styles mediated the relationship between depressive thinking and alcohol misuse among college students (Bravo et al., 2018). In addition, the results from the current study urges researchers and clinicians to be aware that different underlying cognitive beliefs may be present depending on the type of discrimination and population examined.

Applying cultural sensitivity to familism. Contrary to the proposed hypothesis, family pillar beliefs put Latinx women at risk for higher self-silencing beliefs in the context of high discrimination. Previous research has largely cited familism as a protective factor for Latinx individuals in the context of ethnic discrimination (Lee & Ahn, 2012). The current finding may urge clinicians to take a nuanced approach when exploring family dynamics in Latinx populations and consider that familism may have

adaptive and maladaptive facets. For example, Marin, Sabogal, Otero-Sabogal, Marin, and Perez-Stable (1987) described Latinx familism to include family obligations, perceived support, and family member role models. It might be that *family obligations*, or attitudes about family, tends to be maladaptive for Latinx women while *perceived support* tends to be adaptive.

Despite family pillar initially being denoted as a *positive* aspect of marianismo (Piña-Watson et al., 2014), recent research assessing samples of immigrant Latinx women suggests otherwise. Two studies found support that endorsing the family pillar was actually linked to increased psychological stress among Latinx immigrant women. Specifically, Latinx women might feel burdened by the high priority of family demands (Dillon et al., 2018; Nuñez et al., 2018). Therefore, in the face of stress, such as discrimination, Latinx women may be more likely to sacrifice their own needs and silence themselves for the better of the family. In fact, it is known that the Latinx community has lower rates of help-seeking behaviors in response to mental health care compared to their non-Hispanic White counterparts (Cabassa, Zayas, & Hansen, 2006).

An adaptive component of familism may be perceived support, or assessing the strength of relationships with family. As an example, Dillon and colleagues (2018) found that reporting strong attachment to one's social network was linked to less psychological distress for Latinx women. Moreover, strength of attachment to one's social network moderated the relationship between self-silencing beliefs and psychological distress for Latinx women, such that low attachment was a risk factor whereas high attachment was a protective factor. As another example, Villatoro, Morales, and Mays (2014) found that when a Latinx individual had close friends and family in their life that thought the

individual would benefit from mental health services, the individual was more likely to seek out services.

A few practical implications may come from the current finding. First, it might be that clinicians assess for multiple components of familism, such as Marin and colleagues' (1987) components, including family obligations, perceived support, and role models. Second, if Latinx women do endorse high family obligations, that is, believing that they are to put their family first, clinicians may need to empathize with their perceived cultural demands and integrate attitudes towards help-seeking behaviors into treatment (Abrams et al., 2018). Clinicians may consider using behavioral experiments or other cognitive techniques to explore the idea of asking for help from social networks. Third, if Latinx women are not likely seek out traditional mental health services due to high family obligation beliefs, clinicians and practitioners may consider integrating psychological services into more readily accessible places for Latinx women, such as churches, community centers, primary care clinics, etc. (Cabassa et al., 2006; Villatoro et al., 2014).

Limitations

The current study had several limitations. First, the obtained samples are not generalizable to the entire population due to convenience sampling. The undergraduate women of color were collected from a moderately sized Jesuit institution in the Midwest. Furthermore, the undergraduate women of color consisted of several race/ethnicities. Previous studies have shown that women from different racial/ethnic backgrounds may differ on the type of ethnic and sexist discrimination that they report (e.g., Forrest-Bank & Jenson, 2015; Klonoff & Landrine, 1995). Future studies may consider replicating analyses with one specific racial and ethnic group. Moreover, the Latinx women were

collected from both cultural events in a Midwestern city and Mechanical Turk, suggesting that the Latinx women in the current study are not a generalizable representation of Latinx women across the U.S. (U.S. Census, 2016).

A second limitation was that self-report measures were utilized within the current study. Participants may be biased in their responses. Specifically, it might be that participants were unable to recall past experiences of discrimination. A daily diary methodology allows for increased accuracy of discriminatory events and reaction to the event (Burrow & Ong, 2010). In addition, undergraduate women of color completed the Silencing the Self Scale (Jack & Dill, 1992), whereas the Latinx women completed the Silencing the Self to Maintain Harmony Subscale of the MBS (Castillo et al., 2010). While both scales assess self-silencing beliefs in familial and intimate relationships, they were separately created and validated. However, the STSS (Jack & Dill, 1992) is not available in Spanish or for translation (Jack, personal communication, 2017), which would have limited data collection for the Latinx sample. Another limitation included that college women of color completed the Silencing the Self Scale, which assessed behaviors in current and previous *intimate* relationships. It is possible that, developmentally, college women of color may have not encountered intimate relationships at this point in their lives, which may have limited their responses to the Silencing the Self Scale (Jack & Dill, 1992).

As a third limitation, the current study assumed that ethnic and sexist discrimination are two stressors that act independently and simultaneously (Beal, 1970). One of the primary limitations of this assumption is that some scholars argue that this approach is simplistic. Women of color may be unable to discern if a discriminatory

event was due to their race/ethnicity, gender, or both (Bowleg, 2008; Shields, 2008). For example, the first aim of the study had inconsistent findings, such that ethnic discrimination was more predictive of depression for undergraduate women of color, whereas sexist discrimination was more relevant for Latinx women. While identity salience is one potential explanation, it might be that varied findings existed due to measurement error. It might be that women of color experience ethgender discrimination.

Future Directions

First, future studies should consider examining additional protective and/or risk factors aside from general self-efficacy and family pillar beliefs among women of color. As an example, racial/ethnic identity has been shown to be protective in the context of ethnic discrimination for Latinx immigrants (Cobb et al., 2018). Alternatively, other studies have shown that holding a womanist identity is also protective against discrimination among employed women of color (Velez, Cox, Polihronakis, & Moradi, 2018).

Second, women of color experience other forms of discrimination as well, such as heterosexism, classism, and so forth. Future studies may consider including other forms of discriminatory stress. As one example, Matthews, Li, Arandra, Torres, Vargas, and Conrad (2014) quantitatively accounted for discriminatory experiences due to ethnicity, sexual orientation, and gender identity among Latinx sexual minority women. Moreover, when considering undergraduate students in particular, classism has been shown to decrease one's sense of belonging and be linked with increased intentions of discontinuing education (Day Langhout, Drake, & Rosselli, 2009).

Third, the current study measured ethnic and sexist discrimination separately. As stated, it might be that women of color experience ethgender discrimination (Essed, 1991). While there are limited measures available that quantify experiences of ethgender discrimination, the Gender Racial Microaggression Scale (Keum et al., 2018; Lewis & Neville, 2015) has two versions that account for unique discriminatory experiences of African American or Asian American women.

Fourth, future studies may consider using focus groups or interviews to better understand the discriminatory experiences of women of color. Interviews may allow researchers to examine privilege and oppression within broader society. Moreover, this methodology would help researchers identify coping strategies that participants report using (Shorter-Gooden, 2004).

Conclusion

In summary, the present study furthers research on discriminatory experiences among women of color. The study supports that context, including one's environment, type of discrimination, population, and sociopolitical climate, is very relevant when studying women of color. Researchers may also consider the match of a protective factor with a stressor (Lazarus, 2003). In this case, ethnic discrimination was a stronger predictor of depression for college women of color, whereas sexist discrimination was a stronger predictor for Latinx women. Future studies should continue to better understand the experiences of women of color in the U.S.

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FOOTNOTES

[1] Latinx is a gender-neutral term for individuals of Hispanic and Latin descent.

[2]Supplementary analyses were also conducted for the college women of color. Specifically, a parallel mediation analysis was conducted to explore whether ethnic discrimination predicted depression symptoms via hopelessness and self-silencing beliefs. Hopelessness (b = .08, 95% CI [-.82, 1.04] nor self-silencing (b = .02, 95% CI [-.40, .61] were not significant mediators. Similarly, parallel mediation analysis revealed that hopelessness (b = .14, 95% CI [-.59, .93] nor self-silencing beliefs (b = .03, 95% CI [-.41, .39] mediated sexist discrimination and depression. Four simple moderation analyses were conducted to evaluate if general self-efficacy moderated discrimination and cognitive vulnerabilities. General self-efficacy did not moderate the following links: ethnic discrimination-hopelessness (interaction b = .13, p = .33), ethnic discrimination-self silencing (interaction b = 1.23, p = .14), sexist discrimination-hopelessness (interaction b = .09, p = .43), and sexist discrimination-self silencing (interaction b = .49, p = .46).