

Perceptions of the African American Experience (PAAX): A New Measure of Adaptive Identities Among African American Men and Women

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Differential treatment based on race impacts the adoption of prosocial or maladaptive behaviors and attitudes of African Americans, which in turn influences their perceived wellbeing. In essence, the African American experience is shaped by intrapersonal, interpersonal, and institutional social determinants. As such the nature of the African American experience is predicated on the identity formulated and the associated lifestyle adopted by African Americans. To empirically verify this proposition, the newly developed Perceptions of African American Experience (PAAX) scale was tested. The PAAX includes 2 maladaptive and two adaptive subscales that define 4 identities among African American men and women. The maladaptive identities, Depreciated and Vulnerable coping styles, are theoretically connected to risk, unhealthy social determinants and anti-social

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outcomes. The adaptive identities, Transcendent and Integrated coping styles, involve resiliency characteristics resulting in both healthy and prosocial outcomes. It was hypothesized that the 4 PAAX subscales would show acceptable psychometric properties for internal consistency and validity, but that the 2 higher order dimensions, Risk and Resilience, would emerge with factor analytic approaches. An item analysis demonstrated it is feasible to maintain subscale integrity while retaining only those items from the 4 hypothesized subscales, which produces acceptable internal consistencies. A higher order confirmatory factor analytic approach was then used. The confirmatory factor analysis supported the hypothesis that for African Americans the 4 adaptive identities load on 2 underlying dimensions, Risk and Resilience. Implications for the future study of the PAAX scale among clinical populations as well as with other racially diverse groups are highlighted.

The United States has historically imposed and presently commits an excess of cultural insensitivities, structural inequalities, and social injustices against its African American citizens (Coates, 2014; Feagin, 2010). Given this, African Americans have differential experiences not common to those of other racial and ethnic groups (Bell, 2006; Factor, Williams, & Kawachi, 2013; Themba-Nixon, 2001). This differential treatment has been captured by Wilson, Foster, Anderson, and Mance (2009), who review countless research studies indicating that African Americans living in oppressive societies may be at an increased risk of “experiencing psychological symptoms” (p. 102). Along similar lines, Bryant (2011) highlighted the association between internalized racism and the tendency toward violence among youth. In addition, in South Africa, the history of apartheid and the perpetuation of social injustices, deprivation, and poverty was accompanied by poor mental health adjustment and an increase in criminal behavior (Langa, 2007). In contrast to the experiences of the typical impoverished poor White American, African Americans encounter a host of challenges due to race-based differences on practically every front and quality of life indicator (Briggs & McBeath, 2010; Williams & Collins, 2001). Thus, the plethora of intrapersonal, interpersonal, and institutional social determinants shape the nature of the African American experience and their adaptive responses (Anderson, 1999; Briggs, Kothari, Briggs, Bank, & DeGruy, *in press*; Briggs, Banks, & Briggs, 2014; Bell, 2004; Briggs & Paulson, 1996; Chestang, 1972; Factor et al., 2013; Ogbu, 1978).

In the current article we posit that the extent to which African Americans in the United States either (a) resiliently adapt and rise above the myriad of social structural and interpersonal adverse experiences they encounter or (b) succumb to the myriad of structural barriers and disproportionate challenges by experiencing poor adjustment and engaging in risky behavioral practices, depends on the extent to which they possess a resilient adaptive identity and coping

lifestyle, which shapes the behavioral code they follow as a coping mechanism (Briggs, Kothari, Briggs, Bank, & DeGruy, *in press*; DeGruy, Kjellstrand, Briggs, & Brennan, 2012; Leary, Brennan, & Briggs, 2005). Through the current study, we empirically test this proposition.

STRUCTURAL BARRIERS AND PROTECTIVE FACTORS INFLUENCING IDENTITY ADAPTATION

For several decades the rate of incarcerated and community supervised African American men and women has been dramatically increasing in the United States. The Bureau of Justice Statistics estimates that one in three African American men will experience some form of state or federal incarceration in their lifetime (Bonczar, 2003). Though African Americans comprise only 11–12% of the total U.S. population, they proportionately surpass any other racial group in the United States in rates of incarceration. Forty-two percent of all incarcerated men and 45% of incarcerated women are African American (Young, Reviere, & Ackah, 2004). Excluding Idaho, this overrepresentation of African American adults in the corrections system exists within every state in the nation, with juvenile arrests paralleling this pattern (Pope & Feyerherm, 1995). Iguchi, Bell, Ramchand, and Fain (2005) suggested that the rate of incarceration among African American males (adults and juveniles) coupled with the increasing nature of these rates over time are due in part to structural forces and felony drug prosecutions and are exemplars of the disproportionately high frequency of experiences of African American males in the American criminal justice system. Ultimately, a felony conviction all but guarantees an individual's ineligibility to use resources based in public policy arenas, thereby ensuring disproportionately lower involvement with in political, economic, educational, and health care sectors (Iguchi et al., 2005).

In addition to disparities of criminal justice involvement, African Americans—particularly women and youth—experience other inequities. It is well established that there is a heightened risk for African American women and youth to experience trauma as compared to their White counterparts (Briggs & Bank, 2007; Hampton & Gullota, 2006). African American women are more likely to experience depression at a rate 42% higher than White women (Belle & Doucet, 2003; Hobfoll, Johnson, Ennis, & Jackson, 2003; D. R. Williams, Takeuchi, & Adair, 1992). Also, African American women are more likely to have a primary care provider that does not inquire about or provide clinical services for depression (O'Malley, Forrest, & Miranda, 2003), are less likely to be detected for mental illness and/or referred by providers for psychiatric treatment (Hu, Kline, Huang, & Ziedonis, 2006), are more likely to experience mental health issues differently than White women (Carter & Parks, 1996), and are more likely to encounter discrimination, which is a predictor negative mental health

outcomes (Schulz et al., 2006; Gee, Ryan, Laflamme, & Holt, 2006; Caughy, O'Campo, & Muntaner, 2004).

Moreover, African American women suffer from high rates of HIV/STD exposure and infection, consisting of more than 60% of all diagnosed women (Durr, 2005; Gilbert & Goddard, 2007), and are documented to have more than 60% of all unwanted pregnancies (Wolfe, 2003). HIV/STD transmission and illness among African Americans, namely women, have not been met with adequate treatment or response. HIV/STD transmission is not well understood in terms of disease linkages with other risks and traumatic outcomes (P. B. Williams, Ekundayo, Udezulu, & Omishakin, 2003) though transmission of HIV/STDs to women has been found to occur primarily through unprotected sex (70%) and IV drug use (30%; Vaughn, 2004). In addition, African American women are more likely to die from all cancer types, suffer from obesity, diabetes, heart diseases, domestic violence, and rape than women from any other ethnic group (American Cancer Association, 2003; Hampton & Gullota, 2006; Scott, 2001; Wechsberg, Lam, Zule, & Bobashev, 2004).

Although African Americans have become a major focus of research with attention centered on a host of social, psychological, economical, medical, and political issues that exact a toll on their lives (e.g., Leary et al., 2005; Smiley, 2006), the methods by which members of this group tend to cope with and react to these life changing issues is beginning to receive attention in the literature. Corneille, Aschcraft, and Belgrave (2005) and others (Brody et al., 2012; Diallo et al., 2010; DiClemente, Wingood, Rose, Sales, & Crosby, 2009) have suggested attending to sociocultural behaviors when designing HIV/STD preventive interventions for African American young women (Beatty, Jones, & Doctor, 2005). The totality of stressors described raises questions as to how African Americans deal with these pressures as well as the disproportionately poor health outcomes they encounter. African American male youth with a heightened experience of internalized racism tend to participate in violence (Bryant, 2011).

In South Africa, the rise in the youth crime rate was perpetuated by institutional racism and political violence, access to guns, destabilized neighborhoods, unemployment, poverty, and childhood trauma (Langa, 2007, p. 1). Crime and other expressions of aggression function as a coping mechanism by youth offenders in South Africa to handle trauma symptoms, social marginalization, and economic deprivation (Langa, 2007). Leary et al. (2005) and DeGruy, Kjellstrand, Briggs, and Brennan (2012) believe the same holds true for incarcerated African American male youth in the United States. They provided evidence that the lack of the protective factor of racial respect from their families, peers, and society was associated with witnessing and participating in violence by incarcerated African American youth. They also showed that nonincarcerated resilient African American male youth were more likely to experience racial socialization and racial respect from peers, family, and society, which consequently buffers and protects them from

participation in criminal behavior such as youth violence. *Racial respect* is defined as a socio cultural armor of racial pride, self respect, and prosocial integrity, which serves to shield African Americans from adopting maladaptive identities and participating in risky behavioral practices and lifestyles (Briggs, Kothari, Briggs, Bank, & DeGruy, *in press*).

In a related study, racial respect among adult African American men and women was shown to inhibit (a) relationships with family and peers with corrections and drug abuse histories, (b) the adoption of maladaptive identity, and (c) participation in risky behavioral practices such as corrections involvement, domestic violence, and risky sex (Briggs, Kothari, Briggs, Bank, & DeGruy, *in press*). The lack of racial respect among adult African American men and women was associated with maladaptive identities as well as anti-social outcomes such as personal, peer, and family history of corrections involvement, domestic violence, and risky sex (Briggs, Kothari, Briggs, Bank, & DeGruy, *in press*). Racial respect is tied to the sustainability of prosocial and school engagement for ethnically diverse high school students from African American, Latino, and Asian American cultural backgrounds (Huo, Binning, Molina, & Funge, 2010).

THEORIES OF AFRICAN AMERICAN COPING STYLES

Few specific sociocultural models have been advanced to explain adaptive identities and their association with the social determinants of healthy or unhealthy lifestyles among African Americans. Leon Chestang (1972), while at the University of Chicago introduced early theory regarding African American coping styles in the 1960s and 1970s. Chestang's (1972) ideas are grounded in his observations of African Americans who responded to racial hostility and inequality through criminal behavior and a disregard for the law and standards of morality (maladaptive coping). Alternatively, African Americans responded to racial affronts through participation in the life of the church community, which provides security, social, political, economic, religious resources and protection (adaptive coping).

More than 30 years ago, using a sociocultural theoretical perspective, Ogbu (1978) documented the nature of the relationship between African Americans and the United States. Ogbu's work suggests that relations are strained as a result of the history of forced incorporation of this group into the United States. African Americans share a common history of social and economic challenges; however, variations among African American adaptive identities have pointed to a wide range of coping mechanisms that function in difficult contexts (Miller, 2007).

While mainstream theories have largely disregarded the role of culture in identity development, alternative theories of African American identity take into account the role of oppression and the uniqueness of cultural

experiences (Gaines & Reed, 1994, 1995; Sellers, Smith, Shelton, Rowley, & Chavous, 1998). One such theory is Cross's (1971, 1991) proposed model of Black racial identity development (Nigrescence), or self-actualization in which a person progresses from a stage of self-view where "Blackness" is viewed in a degrading way, to one where individuals are secure in their Blackness. This stage theory has been operationalized through the Racial Identity Attitude Scale (Parham & Helms, 1981) which was validated using data from college students.

Another model of racial identity is the Multidimensional Model of Racial Identity. This model identifies four dimensions of racial identity for African Americans: racial salience, the centrality of the identity, the regard in which the person holds the group associated with the identity, and the ideology associated with the identity (Sellers et al., 1998). The Multidimensional Inventory of Black Identity, used to operationalize the model, has been validated using data from college students.

Ogbu (1978) and Chestang (1972) suggested that African Americans develop adaptive identities, associated lifestyles, and coping mechanisms as responses to injurious or traumatic experiences. Thus, we infer in the current article that coping responses fall within two distinct categories of sociocultural adaptive identities that coincide with either risk or resilience. In the latter, resilience may take on both a risk-free transcendental personality as proposed by Chestang (1972) and a risk-exposure personality—as suggested here—that may or may not engage in risky behavioral practices as a way of coping. Anderson (1998a, b, c, d) and Rich (2005) have contributed to a perspective that expands upon Chestang's (1972) earlier formulations about the African American experience and supports the existence of a clinically indigent maladaptive identity.

Other theories have also been suggestive of an additional facet of sociocultural adaptive identities. This additional identity describes people who are characterized as clinically indigent or clinically vulnerable (Anderson, 1998a, b, c, d), who are likely to be depressed, and who require psychological services, though they are unlikely to access services in African American communities. Prior to Anderson's (1998a, b, c, d) body of work, no data existed to validate sociocultural adaptive identity formations as coping responses to risk related experiences. Anderson and colleagues worked with substance abusing, depressed African American women who were very susceptible. This group is representative of the additional vulnerable adaptive identity. Along similar lines, Factor et al. (2013) showed that African Americans who reported feeling a high degree of social alienation and discrimination tended to endorse higher levels of social resistance. Subsequently, those who reported high levels of social resistance tended to report high levels of risky behavioral practices compared to their White counterparts who did not experience these same associations.

In this article, we aim to advance a sociocultural explanation of adaptive identities and their associated lifestyles and coping strategies among African

Americans. Although racial socialization may have a moderating effect on poverty, stress, and mental health functioning, current inventories do not consider or examine the intersection of inner city and middle class value systems. Thus, there is a need to measure culturally specific adaptive identities that endorse the normalization of cumulative risk exposure of inner-city life. One goal in developing the Perceptions of the African American Experience Scale (PAAX) has been to explicitly capture the negative aspects of inner-city street life that shape identity. Views on the African American experience include culturally specific aspects of resiliency (Stokes, Murray, Peacock, & Kaiser, 1994), middle-class aspirations (McCurtis, Witherspoon, & Speight, 2009), and religion (Snowden, 2001) as chief among protective factors for African Americans. Therefore, a second goal in the development of the PAAX has been to capture these protective aspects of African American experience.

HYPOTHESES

The purpose of this study has been to develop and test a scale of African American experience and adaptive identities—PAAX—using self-reports from men and women regarding their perceptions of how best to survive and succeed in today's American majority culture. In this study, we seek to understand whether, from a sociocultural perspective, adaptive identities among African Americans may be empirically framed within a two-dimensional risk-resilience explanatory theory. The nature of this theoretical framework is similar to Chestang's (1972) earlier views of faith versus criminality in African American communities. It is hypothesized that each of the four socio-cultural adaptive identities fall within either a risk-taking/at-risk (depreciated and vulnerable identities) or a resilient frame (transcendent and integrated identities) and will therefore be predictive of antisocial and prosocial behavioral outcomes. It is also expected that depreciated and vulnerable identities will be positively and significantly intercorrelated, as will transcendent and integrated identities. Furthermore, the higher-order risk and resilience dimensions are assumed to be negatively intercorrelated.

METHODS

Building the PAAX Subscales

In the current article, Chestang's theory (1972) has been expanded to allow for the influence of inner-city street culture, a growing Black middle class, diversity in generational value systems, cultural diversity among African American relationships, and the ongoing reality of everyday stressors. Building from prior work (Chestang, 1972; Anderson, 1998a, 1998b, 1998c,

1998d), we have hypothesized that identity formation influences and directs the manner in which African Americans (a) avoid or embrace experiences with adversity and hostility, and (b) manifest a degree of control, power, and ability to handle challenging life experiences. In addition to the vulnerable identity founded in Anderson's (1998a, b, c, d) body of work, there are two adaptive identities described by Chestang (1972), the depreciated (criminal) and transcendent (spiritual/protected). In the current study a fourth identity is recognized, also implied by Chestang's (1972) work: the integrated identity.

Descriptions of the Four Theoretical Adaptive Identities

The four sociocultural adaptive identities fall within either a risk-taking or a resilient frame. The at risk sociocultural adaptive identities include (a) the depreciated individual, who provides the logic, reasoning, and defense for why it is okay to engage in crime and high-risk behaviors, is involved in criminal thinking and behavior and lives an anti-social lifestyle; and (b) the clinically vulnerable and internalized individual, who is characterized by social isolation and depression, and may suffer from other mental health problems. Vulnerable types are unlikely to access mental health services but are likely to be involved with drug abuse and related risks. They internalize racial attributions as a function of perceived personal deficits and their inability to be like others of their race they perceive as acceptable and successful.

Resilient sociocultural adaptive identities include (c) the transcendent and (d) the integrated types. The transcendent character aspires for something other than crime and vice. Those who endorse this identity reframe risk factors as issues to be avoided through church, family involvement, and associating with prosocial peers. Transcendent individuals understand that majority culture racial biases are a function of beliefs that are not anchored in religious faith. Prayer is viewed as a relationship with one's faith and the church community and as a foundation to self-actualize and insulate oneself from racism and hostility.

Those who endorse the integrated identity live within the context of multiple risk factors, including racism, disrespect, and antisocial peer influences. In their neighborhoods, drugs and crime exist as part of their daily reality, but these individuals choose to steer clear of these risks much of the time, having the capacity to self-regulate, self-monitor, and seek protective forces to help support a safe and drug-free lifestyle. The integrated individual is bicultural and their involvement in risky behavioral practices is variable. *Biculturalism* has been described as an individual's active participation in both dominant and own minority culture (Clark, 1991; Valentine, 1971). Integrated individuals tend to adopt antisocial codes of conduct due to peer and neighborhood influences and function well in high-risk African

American neighborhoods and in low crime neighborhoods among resilient peers from African American and majority culture contexts. Thus, integrated individuals may be functional and respected within resilient and risk-taking groups and situations.

Stability and Change Within the Four Adaptive Identities

These sociocultural adaptive identities generate preferred behavioral responses to address stressful situations and characterize a person's identification with either risk or resilience. The depreciated and vulnerable identities produce high frequencies of risky behavior whereas the transcendent and integrative identities lead to high frequencies of prosocial behavior. Those endorsing a risk identity will likely deny behaviors and beliefs associated with either of the resilient identities. Also, with changing life circumstances, contexts, and involvement in interventions, it is conceived that adaptive identities are not fixed or permanent across a lifespan but rather are likely to be dynamic and are assumed to be changeable across life experiences and trajectories.

Individuals may cycle within the risk or resilience dimensions and over time some individuals may even move from risk taking to resilient preferences or vice versa. For example, people who endorse a depreciated identity could over time adopt a set of attitudes and behaviors consistent with the clinically indigent or vulnerable type (characteristics encompassing self-deprecation, self-marginalization, and self-victimization).

Sample

This study used a purposive sample. Participants were recruited from African American communities in Portland, Oregon, St. Louis, Missouri, and Washington, DC. These three cities were selected because of the geographical diversity that comes with northwest coast, midwestern, and east coast lifestyles including different racial relations, challenges, and contrasting economic, political, and social realities of various African American experiences. Care was taken to solicit project participation from inner city, urban, and university areas, as well as economically successful African American neighborhoods in an effort to draw from individuals who might endorse one of the four hypothesized identities. Recruitment took place in barber and beauty shops, college classrooms, carwashes, alcohol and substance abuse recovery group meetings, community recreation centers, baseball games, churches, community mental health centers, and a mixture of residents in depressed neighborhoods with high rates of drug sales and use, prostitution, and homelessness. Recruitment and assessment was conducted individually or in small groups, depending on the venue constraints. Potential participants were approached by one of the data collectors who

said, "We are interested in the opinions of African Americans about their experience in the United States and would like to ask you a few questions. Are you interested in participating in this survey?" Participants self-reported themselves as African American ($n=193$; 70%), Black but not African American ($n=72$; 26%), or multiracial/other ($n=12$; 4%). The data collectors were individuals with high credibility within the neighborhood and community areas surveyed. Care was taken to recruit participants from prosocial and high-risk environments equally.

Notably, all five data collectors were African American and included the first author, community-known social workers, and a veteran in recovery who serves as a role model for individuals seeking sobriety and wanting to leave prostitution. Harold E. Briggs traveled to each city in which data was collected to train data collectors in person. He used the approved Institutional Review Board prepared script to train each data collector. The script included an introduction of the data collector, the purpose of the study, securing confirmation from each potential participant that they and their ancestors were U.S.-born African Americans whose parents and grandparents historical legacy and citizen in the past was classified as Negro, a detailed review of the voluntary consent procedures, obtaining written permission from each participant that included the assurance that their responses will remain anonymous and undetectable. To ensure a common data collection process across data collection sites, Harold E. Briggs and each data collector interchangeably role-played the roles of data collector and participant to ensure accuracy and the implementation of equivalent data collection procedures and practices.

Participants included African American men ($N=161$) and women ($N=117$) living in these three urban and inner city settings. Participant ages ranged between 18–39 for both men and women, with 85% of men and 80% of women in the sample self-identifying as having either religious or spiritual beliefs. Of these men and women, 42% of men and 49% of women identified themselves as Christian, and 34% of men and 34% of women identified themselves as Baptist. Attempts were made when collecting data to sample diverse walks of life within African American communities, from gang members and known criminals to successful college students. The effort to collect a diverse sample was facilitated by the use of local social workers that knew the locale in each of the three cities and had access to a diverse pool of potential participants. Access to each setting for recruitment was established in advance, and data collection was conducted immediately following discussion of the project, answering questions of potential participants, and completion of the informed consent procedures. Recruitment was conducted in groups in most contexts with the exception of barber and beauty shops and carwashes where the same procedures were conducted individually for those who expressed interest in participation.

PAAX Subscales and Item Content

The PAAX measure includes items to assess each of the four adaptive identities, Depreciated (13 items), Vulnerable (10 items), Transcendent (six items), and Integrated (eight items). An initial pool of 72 items generated and judged to be face-valid by the authors and other criminal justice experts were administered to all participants. Items were generated based on the Chestang (1972) and Anderson (1998a, b, c, d) studies with experts in African American culture, theories of corrections involvement, and prosocial versus antisocial behavior in families, schools, and communities all having a role in creating the item pool. From these 72 items, a total of 37 items were selected that worked acceptably well for both men and women. Items that failed to correlate .4 or greater with the subscale item pool for which they were intended were discarded from further consideration. This step was undertaken independently for men and women, and those items that failed the item-total criterion for either gender were also discarded. Thus, the resulting pool of items worked well across all participants and in separate analyses by gender. The internal consistencies ranged in value from .76 to .90 for all subscales (see Table 1). The complete list of items for each subscale is provided in the appendix. It is important to note that the Depreciated and Vulnerable subscales are expected to be significantly and positively inter-correlated and are designed to define a higher-order risk dimension, whereas the Transcendent and Integrated subscales are expected to intercorrelate and define a higher-order resilience dimension.

Note that many items use “street language” that would be recognizable to most adult African Americans whether they use such language or not. In addition, several items are written as “double-barreled” with two components (see the appendix). Such items were intended to carry a single meaning and only those items with acceptable psychometric characteristics—variation similar to other items and significant association with the intended scale—were maintained in the PAAX scale. For example, on the Depreciated subscale, the item, “School is designed to keep me down and I do not need school to be successful” is used. This item correlates well with other Depreciated subscale items and is intended to convey the idea that “I am smarter and more capable than mainstream-oriented Blacks or Whites.”

Measures of High-Risk and Antisocial Outcomes

Five high-risk outcomes were examined concurrently with the completion of the PAAX scale. These five self-report outcomes include the degree of

TABLE 1 PAAX Subscale Internal Consistencies (α)

	Depreciated	Vulnerable	Transcendent	Integrated
Men	.90	.87	.78	.79
Women	.90	.87	.76	.79

corrections involvement for self, family members, and friends, domestic violence, and risky sexual practices. Means, standard deviations, distributional characteristics, and scoring procedures are provided for each outcome.

Corrections involvement for the respondent was assessed using two dichotomous items for current or prior convictions, and current and prior time spent in jail or prison. These two items were summed creating values that ranged from 0 to 2, with a 2 indicating a greater involvement: for women, $M = .66$, $SD = .90$, and for men, $M = .54$, $SD = .81$. The correlation between the two items used for this scale was .90 for women, .79 for men, and .85 overall; 63.2% of women and 66.3% of men reported no self-involvement with corrections.

Corrections involvement in the respondent's family was assessed by eight yes/no questions about various family members' convictions, and whether or not they spent time in jail or prison. Again these items were summed and values ranged from 0 to 8, with an 8 indicating that all relatives (mother, father, grandparents, and siblings) had been convicted and had also served time in jail or prison: for women, $M = 1.71$, $SD = 1.92$, and for men, $M = 1.52$, $SD = 2.02$. The alpha for the family corrections involvement scale was .78 for women, .83 for men, and .81 for the overall sample; 44.4% of women and 49.4% of men reported no involvement among their family members.

Corrections involvement for the respondent's friends was also assessed using four yes/no statements.

Regarding those you consider close friends (PLEASE MARK ALL THAT APPLY) (1). I have a good friend who has served time in jail or prison. (2). I have a good friend who has been ordered by the court to participate in a special program (i.e., mandatory community service, anger management, etc.), (3). I have a good friend who has been ordered by the court to residential programs (such as drug and alcohol treatment, or due to committing a crime), and (4). I spend time with friends who sometime break the law.

Agreement with the four statements presented reflects greater corrections involvement by the respondent's friends: for women, $M = 1.57$, $SD = 1.63$, and for men, $M = 1.9$, $SD = 1.55$. The alpha for the friends involvement scale was .85 for women, .79 for men, and .82 for the overall sample; 39.3% of women and 26.7% of men reported no corrections involvement for their friends. However, 23.9% of women and 26.1% of men agreed with all four statements about their friends' corrections involvement. Thus, more than 60% of all women and nearly 75% of all men who participated reported at least some corrections history for their friends.

Friend involvement in domestic violence was assessed by one dichotomous, yes/no item. The respondent either agreed or disagreed with the statement, "I have a good friend who is beat up by their boyfriend and does

not report it.” The majority of both men and women denied their friends’ involvement with domestic violence: 30.8% of women agreed with the statement of friend’s domestic violence involvement as compared to 15.5% of men.

Risky sexual behavior was also assessed. Men and women completed the same single item, “If I try to use a condom, my romantic partner will not have sex with me” on a 7-point scale: for women, $M = 2.36$, $SD = 1.75$, and for men, $M = 2.11$, $SD = 1.54$, with higher values indicating a stronger endorsement for risky sexual behaviors. Women also completed an additional item, “I am too scared to ask my partner to use a condom.” The two items were summed for women to create a 14-point scale with higher numbers indicating a higher degree of risk in respondents’ sexual behavior. These two items were significantly correlated ($r = .54$, $p < .001$). For the two-item scale for women, $M = 4.69$, $SD = 3.15$, and 46.5% had a score of 2 indicating a relatively weak report of risky sexual behavior. A second peak at 8 (16.7%) indicates that many women may have reported the center response of 4 for each risky sexual practice item. For men, 56.7% reported a weak endorsement for risky sex indicating that this was almost never true for them whereas 11.5% of men chose to respond, a score of 4 at the midpoint of the scale indicating neither true nor untrue.

Measures of Prosocial Outcomes

Six prosocial outcomes were assessed by participants’ self-reports, including educational level, school success, work quality, current work status, spirituality, and friendships with positive friends (i.e., affirming, nurturing, and socially supportive and individuals within the church community).

Educational level was assessed by one item with a 7-point scale for highest level of schooling completed. Possible responses ranged from 1 (*8th grade or less*) to 7 (*postgraduate*). For women, $M = 3.66$, $SD = 1.15$, and for men, $M = 4.1$, $SD = 1.22$, and overall $M = 3.92$, $SD = 1.21$. For men, 47.5% were currently enrolled or completed some college as compared to 42.7% of women. Moreover, 8.1% of men and 14.5% of women only reported completing some high school or less.

The capacity to work successfully in school was assessed by a single three-point item ranging from 1 ‘finds/found school difficult’ to ‘is/was successful,’ with higher numbers indicating greater success. The majority of women and men reported that they are or were successful in school: for women, $M = 2.38$, $SD = .80$, and for men, $M = 2.50$, $SD = .70$, with 41.9% of women reporting school difficulties or just getting by as compared to 38.2% of men.

Work quality and current work status were also assessed. Work quality was measured using a single item (i.e., “I generally do a good job and am

appreciated for my work”). Sixty-four percent of women and 74% of men agreed with the positive statement about the quality of their work. To assess current work status a six-point scale ranging from 1 (unemployed) to 6 (employed full time) was used. For women, $M=4.16$, $SD=2.15$, and for men, $M=4.15$, $SD=2.21$, with 30.5% of men and 27.8% of women reporting being unemployed and 50.0% of men and 46.1% of women reporting being employed full time.

Spirituality was assessed with three items. The questions reflected the importance of religious and spiritual beliefs, the frequency with which the respondent was involved with religious and spiritual practices, and the presence and importance of a mentor through church activities. These separate items were summed, producing a scale ranging from 0 to 9 with 0 indicating denial of religious or spiritual beliefs and 9 indicating the strongest agreement with each item. For women, $M=5.19$, $SD=1.72$, and for men, $M=4.45$, $SD=1.93$. The distribution for men and women on this scale is strikingly similar with a wide range of responses including many who reported no religious or spiritual beliefs (19.7% for women and 16.1% for men) and many reporting relatively high values on the spirituality score. Only 3.1% of men and 5.4% of women, however, reported the highest spirituality scores of 8 or 9. The alpha for this spirituality scale was .76 for men, .82 for women, and .79 overall.

Friendships with prosocial friends were measured by forming a scale using four items. Values ranged from 0 to 4, with 0 indicating no prosocial friends and 4 indicating that the respondent agreed with each statement regarding prosocial friendships. The items included “positive friendships” with a college graduate, with a person in his/her religious community, with a person with a great job, or a person with a professional position. For women, $M=2.17$, $SD=1.50$, and for men, $M=2.63$, $SD=1.44$. The alpha for the positive friends scale was satisfactory with .74 for women, and .76 for men; 13.7% of men and 20.55% of women reported no positive friendships, whereas 39.1% of men and 28.2% of women reported having positive friendships with all four types of individuals.

RESULTS

The analysis strategy for development and testing of the PAAX subscales had three steps. First, based on theoretical expectations of the four adaptive identities, we computed internal consistencies for the four PAAX subscales (presented above), and deleted items with poor psychometric characteristics (e.g., not significantly correlated with other items on the intended subscale). Second, we tested PAAX construct validity using the four PAAX subscales as predictors of high-risk and prosocial outcome variables; these tests used Pearson bivariate correlations. The third step was to conduct a series of

confirmatory factor analyses (CFAs) to test the hypothesis that two dimensions, Risk and Resilience, would provide the best solution. Furthermore, the hypothesized two-factor model was compared to an alternative model that utilized a single coping strategy solution.

Construct Validity for the PAAX Subscales

The four PAAX adaptive identity types as well as the higher order constructs of Risk and Resilience were examined for construct validity. The Risk subscales, Depreciated and Vulnerable, correlated $r = .85$, and the Resilience subscales, Transcendent and Integrated, correlated $r = .76$. The cross dimension PAAX subscale correlations ranged from $r = -.61$ (Integrated with Vulnerable) to $r = -.66$ (Transcendent with Vulnerable), all $p < .001$.

Construct validity coefficients are presented in Table 2 for high-risk outcomes and in Table 3 for prosocial outcomes. Both men and women who identify with Depreciated and Vulnerable adaptive identities have the strongest overall correlations with corrections involvement for self, family, and friends. Of particular interest are the “risky sex” and “domestic violence” outcomes. Women’s identity types are significantly associated with these poor outcomes whereas men’s adaptive identity responses are unrelated to domestic violence outcomes. We wish to underscore that the Depreciated and Vulnerable identity correlations with family members and friends with corrections involvement were greater in all cases for women than for men. These correlations suggest that African American women endorsing the high-risk adaptive identities are highly likely to have family members with histories of corrections involvement and to associate with high-risk peers. Resilient identity endorsers almost uniformly deny all antisocial risk outcomes; however, the correlations are often modest. Findings for prosocial outcomes also indicate consistent correlation patterns for both men and women with few exceptions.

The investigators’ theoretical perspective of two correlated Risk dimension subscales, Depreciated and Vulnerable, and two correlated Resilience dimension subscales, Transcendent and Integrated, was best examined using a CFA approach. As described in the Methods section, the 37 final PAAX items were generated to represent the four subscales. Item selection was based on several factors, including acceptable item-total correlations (greater than .40 within each scale; see Bank & Patterson, 1992), as well as within-gender item-total correlations and alphas that were roughly equivalent. Therefore, the PAAX scale demonstrates acceptable reliability for both men and women, and the CFAs were conducted with the full sample, including all participants. The construct validity coefficients, however, are shown separately for men, women, and the total sample.

TABLE 2 Correlations of the Four Socio-Cultural Identities with Poor/Antisocial, and High-Risk Outcomes

Identity type	Corrections involvement-self			Corrections involvement-family member			Corrections involvement-friends			Domestic violence			Risky sex		
	Men	Wom	All	Men	Wom	All	Men	Wom	All	Men	Wom	All	Men	Wom (1)	Wom (2)
	Depreciated	.50	.51	.50	.36	.41	.37	.34	.49	.40	NS	.38	.21	.18	.33
Vulnerable	.43	.57	.49	.34	.44	.38	.30	.60	.42	NS	.44	.24	.32	.25	.42
Transcendent	-.24	-.38	-.30	-.19	-.23	-.21	NS	-.34	-.18	NS	-.33	-.17	-.29	-.26	-.41
Integrated	-.25	-.36	-.29	-.14a	-.19	-.16	NS	.25	-.14	NS	-.29	-.14	-.35	-.40	-.43

Note: All $p < .05$ unless otherwise noted. ^a $p < .10$.

TABLE 3 Correlations of the Four Socio-Cultural Identities with Positive/Prosocial Outcomes

Identity type	Education			Student success			Work ethic			Work current			Spirituality			Positive friend		
	Men	Wom	All	Men	Wom	All	Men	Wom	All	Men	Wom	All	Men	Wom	All	Men	Wom	All
Depreciated	-.36	-.43	-.36	-.43	-.43	-.48	-.33	-.50	-.39	NS	-.26	-.17	-.36	-.53	-.44	-.37	-.53	-.42
Vulnerable	-.28	-.43	-.34	-.30	-.51	-.39	-.29	-.40	-.34	-.14 ^a	-.32	-.22	-.36	-.39	-.37	-.36	-.51	-.43
Transcendent	.20	.34	.25	.30	.40	.34	.41	.40	.40	NS	.24	.14	.43	.49	.45	.47	.46	.46
Integrated	.25	.20	.22	.27	.41	.33	.39	.27	.33	NS	NS	NS	.34	.45	.39	.44	.43	.42

Note: All $p < .05$ unless otherwise noted. ^a $p < .10$.

CFAs

Each subscale (i.e., Depreciated, Vulnerable, Integrated, and Transcendent) is composed of item clusters that represent the particular subscale. Item clusters are represented in the CFA as means of the items within each cluster (see the appendix for items and clusters). For example, the Depreciated subscale is composed of 13 items that form four separate item clusters: “On the street (I would rather be on the street getting paid than listening to the crap that is taught in school),” “On top (Life is about surviving and getting ahead of the people that are always there to screw me),” “Poverty (Although we seem to get by, I am not sure from day to day how we will survive),” and “Sellouts (I use very opportunity that presents itself for me to hurt or to steal from people who are sell outs).” These four clusters load onto the Depreciated subscale. Similarly, the Vulnerable subscale is also composed of item clusters (i.e., “drugs” and “depressed”), which load onto the Vulnerable construct. The Risk dimension was initially developed by correlating the latent constructs (i.e., Depreciated and Vulnerable) and examining that structure. The Resilience dimension was developed using the same strategy and correlating the Integrated and Transcendent subscales. All item clusters loaded strongly onto the subscales of the Risk and Resilience dimensions. However, the two subscales within each higher order dimension were highly correlated. Models were constructed in Amos 19 separately for each of the PAAX dimensions before combining the two Risk dimensions (Depreciated and Vulnerable) and the two Resilience dimensions (Integrated and Transcendent). In these combined models, one model for Risk and a separate model for Resilience, the one-factor solution provided a better fit for the data than the two factor solution. Therefore, it was decided to examine the dimensions and item clusters for Risk together as a single latent construct and the dimensions and item clusters for Resilience as a second latent construct forming a two-factor, Risk and Resilience, model. Item clusters continued to have strong loadings on these two dimensions, and the Risk and Resilience latent constructs were highly correlated in the overall PAAX Risk and Resilience model (see Figure 1). Although this model precisely reflects the PAAX theoretical framework, the fit indices did not indicate adequate fit with the original structure: $\chi^2(45) = 162.39$, $p < .05$; $\text{CMIN} = \chi^2/df = 3.609$; root mean square residual error of approximation (RMSEA) = .097. Therefore, an additional fitting procedure was used. Specifically, five error covariances correlating five sets of error terms were estimated, and three composite indicators were permitted to cross-load (load on both Risk and Resilience factors). Each of the error co-variances estimated was within the Risk or Resilience construct; none were across the two constructs. All three cross-loadings were low and accounted for small but statistically significant indicator variance (2.5–13%). By contrast, the hypothesized loadings ranged from 31–86% of indicator variance. Furthermore, no model parameters changed substantively from the

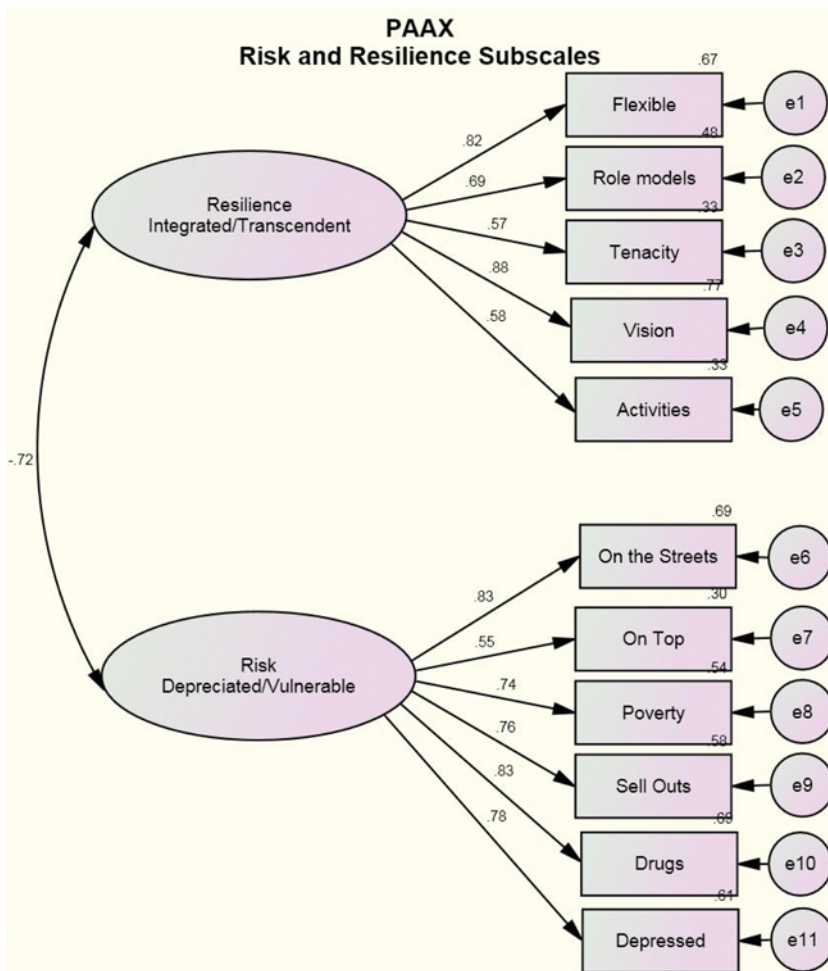


FIGURE 1 Factor structure for the Perceptions of African American Experience scale (PAAX) Risk and Resilience dimensions.

hypothesized model specified in Figure 1, indicating that the five estimated error covariances did not alter the structure of the model. This model achieved satisfactory fit across the three indices: $\chi^2(37) = 50.81, p > .05$; $CMIN = \chi^2/df = 1.373$; $RMSEA = .037$.

Evaluation of Model Fit

A number of standards for evaluating model fit are used in the literature. The most common of these is model χ^2 . However, the χ^2 is very sensitive to sample size, and many investigators prefer other fit statistics such as CMIN (chi-square divided by the number of degrees of freedom in the model: χ^2/df), which is commonly used in the sociology literature; RMSEA denotes

average unexplained variance in the model. We have provided all three of these fit statistics. Acceptable fit is generally agreed to be a χ^2 with $p > .05$ (suggesting the model does not differ significantly from the data), $\text{CMIN} = \chi^2/df < 2$ (the smaller the ratio, the better the fit), and $\text{RMSEA} < .06-.08$ (e.g., see Yung & Bentler, 1996). Using these fit standards, the PAAX Risk and Resilience CFA model approached acceptable fit, and with modification surpasses all three fit cut-offs. With the additional fitting procedure, we allowed error terms to covary as long as these covariances produced no notable changes in any loadings, and we also allowed the three item composites to cross-load with loadings on both Risk and Resilience. Thus, the CFA using these modifications resulted in good model fit with no notable changes in item loadings. Moreover, this model fits significantly and substantially better than a one-factor Risk-Resilience model, which was also tested, $\chi^2(46) = 520.727$, $p < .05$; $\text{CMIN} = \chi^2/df = 11.320$; $\text{RMSEA} = .193$) and found to be unsatisfactory even when the same error covariances were included.

DISCUSSION

This study of African American socio-cultural adaptive identity types documents an effort to apply an empirical test to our modification of Chestang's (1972) theory, and to measure and estimate psychometric and construct validity properties of these adaptive identities based on the perceptions and endorsements of 278 African American men and women. This study examines the Perception of African American Experience (PAAX) 37-item scale and yields useful illustrations of the salience of key socio-cultural item clusters. These illustrations are foundational and embody our hypothesized two-factor model of risk and resilience. The two factors encompasses a hosts of cognitive, moral, sexual, emotional, and interpersonal manifestations of the theorized adaptive identities endorsed by African American men and women in this study.

This study of African American men and women empirically supports the two-factor Risk and Resilience theoretical perspective of understanding African American responses to life experiences in the United States. The four subscales include two that distinguish risk from the two that highlight resilient identities; the Depreciated and Vulnerable subscales that define Risk were not distinguishable from one another in a CFA, and the Integrated and Transcendent subscales that define Resilience were also not statistically distinct in a CFA. The higher-order two-factor model of adaptive identity types, which measures culturally specific types of risk and resilience, was supported by the study findings. These data reflect a commonly held belief that African Americans, in general, and women, in particular, who endorse prosocial and resilient adaptive identities rely on their faith and personal

friends as indigenous coping resources (Briggs, 2004; McBride, 2013; Tatum, 2003). The study findings are also indicative of 21st-century African American young adults who develop resilience by seeking support, mentors, and opportunities for prosocial activities as a focal point for community life. Thus, the community building and local assembly participation aspects of a faith identity may be more critical factors than religiosity per se for modern-day church involvement for African Americans. Transcendent resilient individuals are also more likely to value the quality of their work experiences than African Americans who would endorse an at risk adaptive identity such as the Depreciated type. The latter group has a strong proclivity to sustain antisocial relationships. For them, risky behavioral practices derived from their maladaptive identity may operate as a social resistance coping strategy for addressing their particular African American experience in a similar fashion as it was observed in the study of African Americans by Factor et al. (2013).

Testing the Theory

In this article, a CFA of Risk and Resilience was presented as negatively correlated dimensions and higher order factors in our theoretical model. Defined within a cultural context, Risk is measured with item clusters that are highly intercorrelated on the factor representing the Depreciated and Vulnerable adaptive identities and an overall antisocial coping style. The Depreciated type involves criminal thinking and behavior, whereas the Vulnerable adaptive identity involves self-marginalization, drug use, and depression. We believe that depression is likely to be reactive and cyclic for many Vulnerable and Depreciated endorsing African American men and women. Although these subscales have acceptable internal consistency and construct validity, the findings suggest that investigators might prefer to use the overall Risk score rather than subscale scores for future work.

The Resilience dimension is also a higher order factor that includes Transcendent/Protected and Integrative/Bicultural subscales; these are prosocial adaptive identity types. Transcendent types endorse a venue of protections and prosocial outcomes. Originally, the Transcendent type was defined by Chestang (1972) as a protective mechanism based in a religious identity. Our analysis of the item clusters comprising the Transcendent subscale reflects prosocial and resilient attitudes and behaviors that are not primarily an expression of adaptive identity due to religious belief. Although the investigators did create spiritually based items intended to help define the Transcendent adaptive identity type, only one of those items converged well with the body of items comprising that subscale. For the Integrative adaptive identity, African American men and women adopt the same prosocial objectives endorsed by Transcendent types. However, in contrast to Transcendent types, we have theorized that Integrative types also maintain relationships

with people who endorse risky behavioral practices. Nonetheless, investigators may prefer to use the overall Resilience scale for future work because the Transcendent and Integrated subscales were not statistically distinct in a CFA.

Each of the above-mentioned adaptive identity types formed reliable and valid subscales that were found to be strong and statistically significant predictors of hypothesized outcomes. Note that the items for each item cluster were written to operationally define a specific component of the four hypothesized adaptive identities. Three hypotheses were tested and confirmed: (a) the Depreciated and Vulnerable adaptive identity types measuring Risk were highly intercorrelated with one another forming a single higher-order factor; similarly, the Transcendent and Integrated adaptive identity types were highly inter-correlated and formed a single higher-order factor of Resilience; (b) the higher-order Risk factor was inversely associated with that of Resilience, $r = -.72$ in the CFA, and a Risk-Resilience factor-score correlation of $r = -.49$; and (c) all four subscales were predictive of prosocial and antisocial adult outcomes. In general, the third hypothesis was supported by the data, though the patterns of association are complex and are discussed next.

Predictors of Poor/Antisocial Concurrent Indicators

Men and women who adopted a Risk identity reported significant self, friend, and family involvement with antisocial concurrent outcome indicators (see Table 2). Among those who endorsed a Resilient identity, women tended to have moderate, but significant, negative associations with these same variables; for men's involvement with corrections, however, only reports denying their own difficulties and their family members' difficulties with the law reached statistical significance. It is of interest that those men endorsing Resilient adaptive identities had no significant correlation with friends' corrections involvement. This finding is consistent with theory regarding an integrated adaptive identity, in particular, for individuals avoiding criminal involvement, but who may well have friends across the life spectrum, including those with involvement.

Women who endorsed the risk identities had moderate to strong positive associations with risky sex and domestic violence experiences, while women who endorsed resilient identities reported a strong negative association with risky sex and domestic violence experiences. For men, there were significant findings between adaptive identity and risky sex, but not with domestic violence. These nonsignificant findings for domestic violence for men may be due to lack of suitability of the outcome item, "I have a good friend who gets beat up by her boyfriend, but doesn't report it."

Prediction of Positive/Prosocial Concurrent Outcome Indicators

Resilient identity endorsers reported significant positive associations with education and student success (see Table 3). Conversely, risk-taking

endorsers reported significant negative associations with school-related outcomes.

In the realm of work quality, resilient endorsers reported positive, while risk-takers reported negative associations to work experiences. However, when asked about current employment, there were no significant findings for men, regardless of adaptive identity. This result may well reflect the difficulties African American men in general face in finding employment in the United States. For women, there were significant associations with current job status with the exception of the integrated type (see Table 3). Thus, in contrast to the prediction of negative outcomes, prediction of some of the positive outcomes were not as clearly associated with adaptive identity.

Adaptive identity predictions of spirituality included significant negative (with risk) and significant positive (with resilience) associations; these associations were moderate in magnitude. Similar, though stronger associations were found in relation to having prosocial and successful friends.

Utility of CFA for Evaluating New Measures and Constructs

We believe the CFA testing we have conducted provides a far clearer picture of measure development in terms of item clusters that directly reflect theory than do EFA methods. To this end, we recommend future use of CFA for measure development. In addition, the alternative models we evaluated provided a much poorer fit to the data than did the hypothesized theoretical constructs and models, thus resulting in far greater confidence of construct development at all three levels of the higher order factor models presented. That is, ICFs, the four PAAX subscales, and the Risk and Resilience dimensions are all strongly supported by the entire analytic process, including internal consistency estimates, and CFA testing of the hypothesized PAAX factor structure.

Study Limitations and Future Studies

There are a number of limitations suggesting caution in extending these results to African American adults in general. The sample used was not randomly selected. Through purposive sampling methods, we elicited participation by men and women identifying with different ways of living and coping with stress so as to ensure and that our sample represented a cross section of individuals and lifestyles. Although we used a purposive sampling methodology, it is plausible that a representative sample of African American adults representing a cross section of adaptive identity types would respond in a different manner. Thus, it is currently unknown how the purposive sampling method and survey administration may have affected the PAAX data;

future studies involving the administration of the PAAX instrument should include a process of random selection of respondents, and compare electronic versus paper and pencil as well as group versus individual administration. Another limitation of the current study is the extent to which the race and gender of the data collectors may have impacted the participants. Although all of the data collectors were African American it is possible that gender differences may have influenced participant responses. Future research on PAAX will need to consider matching race and gender of data collectors with same race and gender participants to neutralize these factors as potential triggers of response bias and measurement error. Further study of the PAAX is needed to determine whether it is sensitive to change and whether it is likely to produce reactive response styles. For example, we may expect African Americans to shift their adaptive identity types following participation in a wellness and self-enhancement program of behavioral enrichment and self-efficacy. As a result of participating in such programs, we might expect those initially endorsing risky identities to be more apt to endorse a more resilient style at intervention completion and follow-up. We anticipate the most likely shifts would be from an Integrated to a Transcendent adaptive identity, and from a Depreciated or Vulnerable adaptive identity to a more Integrated identity. Future studies that collect data at multiple time points may be able to address this intervention research hypothesis. Also, the future study of PAAX should examine the extent to which people who endorse Depreciated and Vulnerable maladaptive identities report high levels of social resistance similar to the experiences of African Americans in the earlier mentioned study by Factor et al. (2013).

In addition, this study of African American men and women did not include ethnic Blacks such as Jamaicans, indigenous inhabitants from the continent of Africa, Trinidad, Tobago, White Americans, Latino Americans, or other diverse individuals, and therefore we do not know whether other groups would respond in a manner similar to this sample of African Americans. Given the conceptual and methodological issues that come with lumping all Blacks into one monolithic group as researched by Jackson, Caldwell, and Sellers (2012) care must be taken not to assume the relevance and generalizability of the measure for other ethnic Blacks residing in the United States. It is possible that the PAAX adaptive identities have a more universal utility and would apply to a variety of cultural groups, yet that remains an assumption that requires further research. Thus, we also recommend modification and testing of the PAAX with diverse groups. Finally, future studies will need to correlate the PAAX with other more rigorously studied measures of risk and resilience to demonstrate its relationship to other measures of adaptive identity and coping styles to determine whether the PAAX represents truly unique adaptive and maladaptive identity perspectives for African Americans.

Practice Implications for the PAAX Survey

In its current state the PAAX survey is a research instrument. Yet, the data it yields does have value in the assessment and practice with individuals who endorse the four PAAX identities. Future practice research is needed to verify this observation. For example, the items on the depreciated and vulnerable identity subscales are useful in the assessment of African Americans involved in the criminal justice system. They contain information that has therapeutic value. It could aid practitioners in assessing the unworkable cognitions and behaviors that sustain maladaptive identity and lifestyle. Also, these items aid the practitioner in developing a dialogue with people who endorse criminal and vulnerable identities to achieve a better understanding of the nature and degree of deprivation, victimization and emotional pain, involvement with domestic violence and risky sex practices, self as well as social marginalization and alienation, and lack of social capital present in a client consumers background. It could also be useful in assessing whether or not their coping styles and adaptive identity include key aspects of the social resistance depicted by Factor et al. (2013). The questions that depict the extent to which client consumers endorsing vulnerable and depreciated identities frequent social networks comprised primarily of family and friends with corrections involvement and drug use/abuse histories provides an opportunity to probe with client consumers their motivations for change and recovery and how their current lifestyle contributes to the achievement of their prevention and recovery goals. The subscales attitudes and behaviors that measure prosocial resilient PAAX Transcendental and Integrated identities could be use to trigger the narrative with client consumers involved in the corrections system as to their vision and re-entry/prosocial intervention goals. The items that measure prosocial identities and activities can be used to aid client consumers erect personal change narratives and service plans that facilitate health promoting adaptive identities along with stabilizing lifestyles that encompass healthy relationships with prosocial friends and family members. If the PAAX scale was used more in assessment and planning services to aid people avoid further endorsement of depreciated and vulnerable identities practitioners will be able to appreciate it as an aid to them in achieving a better understanding of the origins, correlates and pathways as well as the key behavioral and cognitive contingencies that need to be used to achieve and sustain positive behavior change.

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APPENDIX

Perceptions of the African American Experience (PAAX) Subscales and Items

DEPRECIATED SUBSCALE

- Life is all about surviving and getting ahead of the people that are always there to screw me.
- People who are sell outs treat me differently.

- Although we seem to get by, I am not sure from day to day how we will survive.
- I would never go to a cop for help because he would rather bust me than help me.
- I would rather be on the street getting paid than listening to the crap that is taught in school.
- School is designed to keep me down and I do not need school to be successful.
- Sometimes I do drugs but mostly I work the streets and take home the profits.
- It does not matter how hard I try, nobody will be there to help me get ahead except my homies.
- Sell outs are people who are Black in skin but White in mind and actions.
- I live in a house that needs the services of pest control for roaches, mice, termites, etc.
- I use every opportunity that presents itself for me to hurt or steal from people who are sell outs.
- People who use religion to cope are just escaping from reality.
- I live in a house that is not considered neat and clean by others who live in nice homes.
- Life is full of fools and most of them have money for the taking.

VULNERABLE SUBSCALE

- Getting high with drugs of alcohol helps me deal with hard times.
- I do not know the right things to say and do with people I want to hang out with.
- I will probably be dead before a lot of people I know.
- I am not a likable person.
- I do not trust anyone, including myself.
- I can make big decisions after I get high.
- I am the reason why people think I am strange.
- I have often disappointed people that were important to me.
- I take drugs because it makes me feel good and I can do it by myself.
- Listening to rap music helps me make decisions.

TRANSCENDENT SUBSCALE

- I do not want to be like the people who are always doing the wrong thing and not making it in school.
- If you work hard enough you can succeed, regardless of the troubles you encounter along the way.

- I have a vision of my life that does not include using drugs and being involved in crime.
- I spend time in extra-curricular activities because they keep me from being bored and running to the mall or street, and hanging around doing nothing.
- I have extra-curricular activities that I engage in because I like them. My heroes are people that have made it on their own, despite the odds.
- I am always around positive people who encourage me to do the right thing.

INTEGRATED SUBSCALE

- I am proud of being Black but I know that I also need to be able to work with White people if I am going to be successful.
- Being Black is tough, but it is not a good excuse for failure.
- I have teachers who like me and spend a lot of time supporting me and my efforts to succeed.
- I have positive role models who keep me from doing the wrong thing.
- I am motivated not to make mistakes or engage in illegal activities.
- I do not have time to get in trouble.
- I have to be flexible and understand my environment to be successful.
- I know Blacks are mistreated in their country but I am confident I will be successful.