

**SELECTION INTO INTERRACIAL RELATIONSHIPS AND PSYCHOLOGICAL WELL-BEING
AMONG WHITE WOMEN**

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Abstract

This study uses data from Waves 1 and 3 of the National Longitudinal Study of Adolescent Health (N=1,841) to examine the following questions: 1) Do white women with lower levels of psychological well-being select into interracial relationships with black, Asian, or Hispanic partners? 2) Net of any selection processes, do interracial relationships with either black, Asian, or Hispanic partners have a negative effect on respondent psychological well-being? We find that white women with current black partners have less life satisfaction and more depressive symptoms than white women who are currently and have always been in same-race relationships. In addition, white women who are currently in same-race relationships but who have dated black men in the past have less life satisfaction than white women who are currently and have always been in same-race relationships.

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As interracial relationships become more prevalent in society, research is increasingly examining the effects of involvement in interracial relationships on individual mental health and well-being. Recent cross-sectional research on interracial relationships and mental health and well-being has suggested that some types of interracial relationships are detrimental to psychological well-being, whereas others are not, and suggests that the effects of interracial relationships on mental health vary by race/ethnicity and by gender. For example, Bratter and Eschbach (2006) find that some, but not all, individuals in interracial marriages experience higher rates of distress than their same-race marriage counterparts. Having a partner of a different race/ethnicity increases the risk of depression for “Native American men, white women, and for Hispanic men and women married to non-white spouses” (p. 1025). In addition, people whose different race-ethnicity spouses are African American or Native American also have increased rates of distress, regardless of gender. In addition, Kroeger and Williams (2007) find that among young women, only white women cohabiting with African American partners do not have life satisfaction benefits over singles. In contrast, they find that young men in committed relationships have significant life satisfaction and depressive symptom benefits over singles, regardless of partner race.

Although these studies have examined variations in the effect of interracial relationships on mental health by race and gender, both of these studies use cross-sectional data, and thus do not adequately test any selection processes that may have been present. That is, perhaps women with higher levels of depression are more likely to become involved in certain types of interracial relationships, resulting in higher rates of depression for women in such groups. We build on

previous research by conducting a longitudinal analysis that examines the following questions: 1) Do white women with lower levels of psychological well-being select into interracial relationships with black, Asian, or Hispanic partners? 2) Net of any selection processes, do interracial relationships with either black, Asian, or Hispanic partners have a negative effect on respondent psychological well-being? We focus on white women in this analysis because previous studies have especially highlighted the negative effects of involvement in some types of interracial relationships on the psychological well-being of white women. In addition to testing for selection processes, we build on past research by accounting for previous interracial relationships among women who are currently in same-race relationships, allowing us to further isolate the effects of interracial relationship involvement on psychological well-being. We use a nationally representative longitudinal sample, the National Longitudinal Study of Adolescent Health, which includes relationship and mental health information from several thousand young adults in both young adulthood and in adolescence.

Interracial Relationships and Mental Health and Well-Being

As interracial relationships become more prevalent in society, research is increasingly examining the effects of involvement in interracial relationships on individual mental health and well-being. Since interracial marriage became legal in all U.S. states in 1967 (see Hirschman, Alba, and Farly 2000), rates of interracial relationships have increased. For example, although only 2.9 percent of all U.S. marriages in 2002 were interracial, the number of interracial marriages has increased from 157,000 in 1960 to over 1.6 million in 2002 (Joyner and Kao 2005). In addition, some research suggests a growing prevalence of interracial cohabiting and dating relationships. Regarding cohabitation, one study suggests that there was a greater increase in interracial cohabiting and dating relationships between 1990 and 2000 than there was in

interracial marriages (Joyner and Kao 2005). In fact, almost 10% of all cohabiting relationships in the U.S. are interracial (Fields and Casper 2001). Regarding dating, about 35% of European-Americans and over 50% of African-Americans, Hispanic-Americans, and Asian-Americans have dated someone of another race or ethnicity (Yancey 2002).

In the past, research highlighted the substantial psychological strain related to social and familial disapproval of interracial relationships (Park 1928; Stonequist 1935; Porterfield 1982). However, in light of these increases in interracial relationships, recent research has started to reassess the psychological well-being outcomes of individual involvement in interracial relationships, and has found that not all interracial relationships are accompanied by substantial strain or increased distress, due to the increased prevalence and acceptance of interracial relationships in contemporary society (Bratter and Eschbach 2006; Kroeger and Williams 2007). For example, among young adults, Kroeger and Williams find that there are more similarities than differences between individuals in same- and interracial relationships, and speculate that this may be due to the greater racial diversity and decreased parental control over individual partner choice in contemporary society. They examine whether individuals in same- and interracial relationships benefit similarly from their involvement in their relationships, and find, that accept among women cohabiting interracially with black partners, that respondents generally do benefit similarly from involvement in their relationships, regardless of partner race. When focusing exclusively on marriages, Bratter and Eschbach (2006) compare rates of psychological distress between individuals in same-race and interracial marriages, considering variations by gender and race-ethnicity. They find that white women in interracial marriages have an increased risk of distress, and that individuals intermarried with African American or Native American also have increased rates of distress.

Gender and racial differences in the effects of interracial relationships on psychological well-being

What the studies of Kroeger and Williams (2007) and Bratter and Eschbach (2006) have in common is that they both find that white women with black partners are not benefiting psychologically from involvement in their relationships (compared to singles or white women in same-race relationships). Kroeger and Williams note that women may be affected more negatively than men by involvement in interracial relationships because of gender differences in socialization. That is, men are socialized to be competitive and aggressive, which discourages them from forming intimate relationships, whereas women are socialized to be passive and nurturing, which encourages them to develop intimate relationships with others (Marini 1988). As a result, women are more likely to have close intimate relationships in which they have high levels of trust and social support, whereas men are more likely to have “instrumental” relationships in which they receive advice or aid (Umberson et al. 1996).

Because women tend to have more intimate relationships built on trust and social support than men, women in interracial relationships might be more negatively affected by disapproval from family and friends than men in interracial relationships. In addition, because the majority of women’s relationships are composed of intimate ties with family and friends, close social relationships might be more salient to women. That is, maintaining intimate relationships with family and friends might carry more meaning for women than for men. Research shows that the impact of stressors on individual well-being depends on the “salience to the individual of the role-identity domain in which” those stressors occur (Thoits 1995:59). Therefore social ties that are marked with conflict and stress will carry more psychological consequences for individuals who place greater importance on them. If intimate ties carry more meaning for women than men,

conflict with and disapproval from friends and family will affect women more negatively than men.

But why might involvement in interracial relationships among white women with *black* partners have a different effect on psychological well-being than involvement in other types of interracial relationships? One possibility, put forth by Lee and Bean (2005), is the existence of black exceptionalism. In their discussion of black exceptionalism, Lee and Bean discuss how racial barriers may be decreasing more rapidly for Asians and Latinos than they are for blacks. They discuss how the color line in the US is still present, but that instead of being drawn between whites and nonwhites as it was in the past, it is now being drawn between blacks and nonblacks, with blacks facing greater racial discrimination and barriers than the nonblacks. From this viewpoint, it makes sense that involvement in interracial relationships with blacks might be more disadvantageous for mental health and well-being than other types of interracial relationships, due to the greater proportion of discrimination and racial barriers faced by blacks in current society.

Similarly, Bratter and Eschbach (2006) discuss how intermarried individuals with African American partners might be negatively affected by experiences such as discrimination towards their partners and/or the history of negative group relations between these groups and the white majority. In other words, individuals in racial groups that have historically experienced negative group dynamics between one another might be affected more negatively by involvement in interracial relationships. These individuals might also receive more disapproval and lack of support from family and friends than individuals in racial groups that have *not* historically experienced negative group dynamics between one another. Indeed, Whiteman and Lee (2002) find that individuals in white-black marriages experienced more discrimination than

individuals in Asian-white or Latino-white marriages. This greater discrimination might result in negative mental health consequences for those in white-black relationships, while those involved interracially with Asians or Hispanics may not receive such discrimination and thus may not experience any negative consequences on psychological well-being.

In light of the ideas discussed above, we focus on white women in this analysis and the effects that different types of interracial relationships have on their psychological well-being. In addition to focusing on one group of individuals that past research has emphasized as being especially affected by involvement in interracial relationships, we also build on past research in two other ways. First, no study to our knowledge has examined whether white women with higher levels of depression actually select into certain types of interracial relationships. We directly test this, as we examine whether women with more depressive symptoms at baseline, who are not in current interracial relationships at Wave 1, are more likely to ever be in an interracial relationship later in life. In addition to testing such selection processes, we also recognize that even if there are such selection processes at work, that involvement in certain types of interracial relationships may still have a significant impact on psychological well-being. For example, Kamp Dush, Taylor, and Kroeger (2007) find that although individuals with lower levels of life happiness select into unhappy marriages, involvement in unhappy marriages still increases the likelihood of having high levels of psychological distress even after accounting for selection. This may also be true for those in interracial relationships.

Second, when examining the effect of white women's current relationships on their psychological well-being, net of any selection processes, we account for interracial relationship dating histories among the white women who are currently in same-race relationships. Rather than grouping together all white women currently in same race relationships, we separate them

according to whether they had a past history of dating interracially. Accounting for these dating histories will allow us to more adequately assess the effect of involvement in certain types of interracial relationships on subsequent psychological well-being.

In sum, we aim to build on prior research in this area in two ways. First, by examining whether women with higher levels of depression, who are not in interracial relationships at Wave 1, select into interracial relationships later in life, we assess potential selection processes that may be occurring in the data. Second, by accounting for the interracial dating histories of white women currently in same-race relationships, we more adequately assess the effects of involvement in interracial relationships on well being.

Statement of the Problem

Using data from Wave 3 of Add health (N=1841), we examine the psychological well-being of white women in black, Asian, and Hispanic interracial relationships to that of white women in same-race relationships. We first ask, do white women with lower levels of psychological well-being select into interracial relationships with black, Asian, or Hispanic partners? We next ask, net of any selection processes, do interracial relationships with either black, Asian, or Hispanic partners have a negative effect on respondent psychological well-being?

In our examination of psychological well-being, we consider both positive and negative dimensions of psychological well-being and mental health, including life satisfaction and depressive symptoms. Researchers often focus on only depressive symptoms when examining differences in psychological well-being between groups (Umberson and Williams 1999). However, psychological well-being is a complex construct that is comprised of many different dimensions. For example, psychological well-being includes both the presence of “positive

affect, and the relative absence of psychological distress” (Williams 2003:474). Considering both positive indicators (e.g. life satisfaction) and negative indicators (i.e. depressive symptoms) allows for a broader understanding of the relationship between involvement in interracial relationships and psychological well-being outcomes.

Within models that examine potential selection of more depressed women into interracial relationships, we control for *age*, *geographic location of school*, and *socioeconomic status*.

Within models that assess the effects of current involvement in interracial relationships on psychological well-being, we control for a range of indicators that past research has related to both union status and psychological well-being: *the presence of children in the household*, *previous marriages*, *previous cohabitations*, *age*, *education*, *currently attending school*, *geographic location where respondent grew up*, and *socioeconomic status*.

We operationalize *geographic location where R grew up* with the geographic location of respondent schools at Wave 1. Individuals may have different attitudes toward and exposure to interracial relationships based on whether they grew up in a predominantly rural, suburban, or urban area. Those in rural areas may be less exposed to people of various races and may have less favorable attitudes toward interracial relationships, whereas individuals in urban areas may have more exposure to and more favorable attitudes toward interracial relationships. We operationalize *socioeconomic status* with the variable *parent education*. Although we control for respondent education and whether or not respondents are still attending school, these alone are not adequate indicators of socioeconomic status because these individuals are still quite young, and therefore many have not finished school and/or started their careers yet.

METHOD

Data and Analytic Sample

The first and third waves of the National Longitudinal Study of Adolescent Health (Add Health) were used for these analyses (Udry, 2003). The Add Health study is based on interviews with students in grades 7 through 12 from a sample of 145 U.S. middle, junior high, and high schools and their parents in 1995. The original sample consisted of all the students who were in attendance on the day that the in-school questionnaire was administered (N = 90,118). Data used for this project from the first-wave of Add Health were the contractual data that included in-home interviews administered in 1995 to 20,745 of the students.

The third-wave of data from the original Add Health sample was collected in 2001 (Note that the second wave of the Add Health data will not be used). The respondents in Wave 3 were required to be at least 18 years old at the time of the interview. The full sample for Wave 3 included 15,197 or 73% of the original in-home sample. For a more detailed description of the data, see Chantala, Kalsbeek, and Andraca (2004). Wave 3 is a nationally representative sample of young adults aged 18 to 26. Within this analysis, our analytic sample (N=1,841) consists of white women who are in one current heterosexual relationship at Wave 3 with exclusively white, black, Asian, or white-Hispanic partners. There were too few nonwhite-Hispanic partners to keep them in the analysis. Therefore, any reference to Hispanics in this analytic sample will only include white-Hispanic individuals. Individuals were also dropped if they had missing data on key variables. In addition, individuals who were in an interracial relationship at Wave 1 were dropped, in order for us to more clearly analyze selection of more depressed women at Wave 1 into interracial relationships in young adulthood. All information regarding the relationships that the women were currently in came from the Table of Relationships, or Section 17. In compiling

the table of relationships, respondents were asked to list each partner whom they had a romantic or sexual relationship with since the summer of 1995. We use this data both to compile the interracial relationship histories of the sample, as well as to gather information regarding their current relationship. Our current analyses only include white women who are in romantic relationships at Wave 3. Prior to the conference, we plan to rerun our initial selection analyses with all white women at Wave 3, to more fully capture the selection processes across a nationally representative sample of young women.

Key Variables

Race. For respondents and partners, race was measured with dichotomous dummy variables for non-Hispanic white, non-Hispanic black, non-Hispanic Asian, and white-Hispanic partners (there were too few nonwhite-Hispanic partners to include them in the analysis). Individuals who identified as more than one race or as ‘other’ were excluded from the analysis, to allow for clearer interpretation of results. Only white respondents with exclusively non-Hispanic white, non-Hispanic black, non-Hispanic Asian, or white-Hispanic partners were included in the analysis.

Ever involved in interracial relationship was measured with dichotomous variables for ever being involved with an Asian, black, or Hispanic partner. To measure whether one was ever involved in an interracial relationship between Wave 1 and Wave 3, we coded each romantic or sexual relationship reported in the Table of Relationships for each type of interracial relationship (i.e. Asian, black, or Hispanic). We then created dichotomies indicating whether each respondent reported at least one past or current relationship with an Asian, black, or Hispanic partner.

Life satisfaction. To measure life satisfaction, respondents were asked *How satisfied are you with your life as a whole?* Respondents answered this question on a scale of 1 to 5 (1-very dissatisfied, 2-dissatisfied, 3- neither satisfied nor dissatisfied, 4-satisfied, and 5-very satisfied).

Depressive symptoms. We measured depressive symptoms at both Waves 1 and 3 with a scale created from nine questions of the Center for Epidemiological Studies Depression Scale (CES-D). Respondents rated how often in the last seven days they had experienced both negative and positive indicators of depressive symptoms. Regarding negative indicators, respondents were asked how often in the last seven days: *You were bothered by things that usually don't bother you; You could not shake off the blues, even with help from your family and your friends; You had trouble keeping your mind on what you were doing; You were depressed; You were too tired to do things; You were sad; and You felt that people disliked you.* Regarding positive indicators, respondents were asked how often in the last seven days: *You felt that you were just as good as other people; and You enjoyed life.* Response choices to each question included, 0- Never or Rarely, 1-Sometimes, 2-A lot of the time, 3-Most of the time or all of the time. Positive indicators were reverse coded and responses on all nine items were summed.

Relationship Type. Relationship type was measured using both the respondent's current relationship status and her history of interracial relationships. Same-Race- Have Only Dated Whites = 1 for women currently in and who had only ever been in romantic or sexual relationships with whites. Same-Race- Asian History = 1 for women who were currently in a relationship with a white partner, but had previously dated Asian partners. Same-Race- Black History = 1 for women who were currently in a relationship with a white partner but had previously dated black partners, and Same-Race- Hispanic History = 1 for women who were currently in a relationship with a white partner but had previously dated Hispanic partners.

White-Asian, White-Black, and White-Hispanic each equaled 1 for women who were currently in a relationship with an Asian partner, a black partner, or a Hispanic partner respectively. All relationship type categories are mutually exclusive. Any woman that fit into more than one of these categories (e.g. had dated both African Americans and Hispanics in the past) was excluded, as there were not enough women in this category to keep them in the analysis.

Control variables

We measured *union type* with dichotomous variables for single, dating, cohabiting, and married individuals. To be coded as single, one had to report not being in a current relationship. To be coded as dating, one had to report being in one current relationship, not living with their partner, and not married. To be coded as cohabiting, one had to report being in one current relationship, living with their partner, and not married. Finally, to be coded as married, one had to report being in one current relationship, living with their partner, and married.

Presence of children is a dichotomous variable in which respondents that have at least one child of their own living in their household are coded as 1 (regardless of whether the child is biological or a step-child). *Previously married* and *previous cohabitations* are both dichotomous variables in which respondents with previous marriages and cohabitations are coded as 1. *Age* was measured in years. *Education* was measured with dummy variables for less than high school education, high school graduate, and greater than high school education. *Currently attending school* is a dichotomous variable in which people who are currently attending school receive a 1. *Geographic location* of school at Wave 1 was measured with dichotomous variables for rural, suburban, and urban school locations. Regarding parent education, parents were asked their highest level of education during Wave 1 of the survey. If level of education was missing on the parent report, then the adolescent report of parent education was used. Only the value of the

parent in each household with the highest level of education is recorded. *Parent education* was measured with dummy variables for less than high school education, high school graduate, and greater than high school education.

Analytic Approach

We first use multinomial logistic regression to examine the association between Wave 1 depressive symptoms and subsequent involvement in interracial relationships. Second, we use OLS regression to examine whether there is any association between current relationship type and life satisfaction or depressive symptoms, net of any selection processes. Add Health is a clustered probability sample, so we apply sampling weights to all regression models to control for design effects and region (see Chantala and Tabor 1999).

RESULTS

Table 1 presents the unweighted means and standard deviations of all variables in the analysis. At Wave 1, the sample had a mid-level of depressive symptoms, and the overall mean of depressive symptoms actually decreased over time, as these adolescent girls moved into young adulthood. These young women also enjoyed a relatively high level of life satisfaction at Wave 3. By Wave 3, about 6% of the sample was currently in an interracial relationship while 13% had ever been in an interracial relationship. In results not shown, we find that of that 2.1% were ever in relationships with Asian men, 6.5% were in ever in relationships with Black men, and 4.1% were ever in relationships with Hispanic men. Overall, we find that 87% of the sample at Wave 3 was in same-race relationships and had only ever been in same-race relationships with white men, 1% were in same-race relationships but had previously had Asian partners, 3% were in same-race relationship but had previously been with black partners, and 3% were in same-race relationships and had previously been with Hispanic partners. We also find that 1% of those in

current relationships were currently with an Asian partner, 3% were currently with a black partner, and 1% were currently with a Hispanic partner. Of those in relationships, 43% were in dating relationships, 24% were cohabiting, and 33% were married. Three percent had been previously married, and 27% had previously been in a cohabiting union.

Turning to the demographic characteristics of the sample, the mean age at Wave 1 was approximately 16 and at Wave 3 was 22. Just over a quarter had children in the household. In terms of education, the majority had more than a high school education including 40% that were currently in school, while fewer than ten percent had not received a high school diploma. In terms of background variables, a majority grew up in suburban communities, followed by those rural locations, and the minority grew up in urban locations. Parents' education, a proxy measure for adolescent SES, was similar to the respondents at Wave 3 such that two-thirds had more than a high school education, and only 6% had less than a high school education.

(TABLE 1 ABOUT HERE)

Selection into Interracial Relationships

Table 2 presents the likelihood of women with more depressive symptoms at Wave 1 entering into an interracial relationship later in life. Note that women in this table were not in an interracial relationship at Wave 1. The results indicate that women with more depressive symptoms are not more likely to enter into interracial relationships with Asians, blacks, or Hispanics as compared to whites as indicated by the nonsignificant coefficients in Model 1 of Table 2. These coefficients remain nonsignificant with the addition of controls in Model 2. The only variable that significantly predicted entrance into interracial relationships over same-race relationships was parents' education. Women with parents' with less than a high school education had 100% and 96% lower odds of ever being in romantic relationships with Asian and

Hispanic partners, respectively, and 185% greater odds of ever being in romantic relationships with black partners than women with parents' with a high school degree only. When we vary the excluded group, we do not find any evidence of depressive symptoms at Wave 1 predicting membership into one race of interracial partners over another. In sum, we find no evidence that more depressed women are selecting into interracial relationships.

(TABLE 2 ABOUT HERE)

The Effects of Relationship Type on Psychological Well-Being

Table 3 presents the effect of relationship type on Wave 3 life satisfaction (Models 1 through 3) and depressive symptoms (Models 4 through 6). For both life satisfaction and depressive symptoms, the bivariate relationship between relationship type and the dependent variable is presented first, followed by the addition of Wave 1 depressive symptoms, and then the addition of all other controls. Model 1 illustrates that both individuals currently in relationships with black partners and those in same-race relationships who have had black partners in the past have significantly less life satisfaction than white women who have only ever been in same-race relationships. These relationships remain significant with the addition of Wave 1 depressive symptoms (Model 2) and the addition of all other controls (Model 3). Individuals in no other same- or interracial relationship types have significantly different levels of life satisfaction than white women who have only ever been in same-race relationships.

As with the results for life satisfaction, Model 4 illustrates that individuals in current relationships with black partners have significantly more depressive symptoms than white women who have only ever been in same-race relationships, and this relationship remains significant with the addition of Wave 1 depressive symptoms (Model 5) and the addition of all other controls (Model 6). However, unlike the results for life satisfaction, women who are

currently in same-race relationships who have had black partners in the past do *not* have significantly more or fewer depressive symptoms than white women who have only ever been in same-race relationships.

With regard to the control variables, we find that those with more depressive symptoms at Wave 1 are more likely to report lower life satisfaction and more depressive symptoms at Wave 3. We also find that the female cohabitators have more life satisfaction and less depression than do women in dating relationships, however respondents who had previously experienced cohabitation dissolution had less life satisfaction. Married women are reporting more life satisfaction than women in dating relationships, but no more depressive symptoms than women in dating relationships. We also find no differences between previously divorced and those never divorced. Older women have fewer depressive symptoms. We also find that respondent's enrolled in school have greater life satisfaction. We find few other variables related to Wave 3 well-being after taking into account Wave 1 well-being.

(TABLE 3 ABOUT HERE)

Limitations

Our study has a number of limitations. First, we have a rather small sample size. Second, although we only examine selection of women who are *not* currently in interracial relationships at Wave 1 into interracial relationships later in life, this is still not an absolute test of selection, as we have no measures of whether these women ever dated interracially prior to Wave 1. Due to the youth of the sample at Wave 1, we believe very few from our sample had previously had interracial relationships at Wave 1. But, nonetheless, it limits the extent to which we can be sure of our findings. A third limitation is that we only examine women in current interracial relationships at Wave 3. We plan to expand our study prior to the conference to incorporate a

full selection model of all women at Wave 3, as well as to add a fourth table to the paper examining mental health among all women by their history in interracial relationships, regardless of their relationship status at Wave 3.

Finally, although we include other variables as controls, we do not theoretically analyze potential selection processes through variables other than depressive symptoms. For example, while women may not be selecting into interracial relationships on measures of depressive symptoms, our findings suggest that they are selecting into interracial relationships on measures of parent education. Women with parents' with less than a high school education had 100% and 96% lower odds of ever being in romantic relationships with Asian and Hispanic partners, respectively, and 185% greater odds of ever being in romantic relationships with black partners than women with parents' with a high school degree only. This selection process is unveiling a potential class issue, suggesting that those with lower SES are *less* likely to have Asian or Hispanic partners, and are *more* likely to have black partners later in life. This is a finding that should be more thoroughly explored in future research. Although we do not explore this class issue specifically, we do control for parent education in models predicting Wave 3 life satisfaction and depressive symptoms, and find that involvement in interracial relationships with black partners still has a negative effect on well-being net of this selection process.

Discussion

Consistent with past research, our results illustrate that white women with black partners have less life satisfaction and more depressive symptoms than white women in same-race relationships. In addition, we find that this relationship is not due to white women with higher levels of depression selecting into relationships with black partners. Further, we find that the effect of having a black partner may have lasting effects on the psychological well-being of

white women, as even white women with same race partners who have had black partners in the past have less life satisfaction than those who have only ever dated white men. In sum, these results suggest that there is a negative causal relationship between involvement in interracial relationships with black partners among white women and psychological well-being. But why might involvement in interracial relationships with black partners have a negative effect on well-being, while involvement in interracial relationships with Asians or Hispanics does not? We address this issue below.

As previously mentioned, past research on interracial relationships highlighted the substantial psychological strain related to social and familial disapproval of interracial relationships (Park 1928; Stonequist 1935; Porterfield 1982). However, recent research has found that not all interracial relationships are accompanied by substantial strain or increased distress, due to the increased prevalence and acceptance of interracial relationships in contemporary society (Bratter and Eschbach 2006; Kroeger and Williams 2007).

For example Kroeger and Williams (2007) find that young adults generally benefit similarly from same- and interracial relationships. Our findings among white women in relationships with Hispanic or Asian partners support this, as white women in relationships with Asians or Hispanics do not differ on measures of life satisfaction or depressive symptoms from those with same-race partners. These similarities in psychological well-being among those in same- and interracial relationships suggest a growing similarity between same- and interracial relationships themselves. This similarity may illustrate the increased acceptance of interracial relationships in contemporary society. However, white women with current or past black partners in our sample are the exception, as these women have lower levels of psychological well-being than those who have only dated same-race partners, suggesting that acceptance of

interracial relationships with black partners may not be as prevalent as acceptance of interracial relationships with Hispanic or Asian partners.

These findings offer support for the existence of black exceptionalism (Lee and Bean 2005), illustrating that racial barriers may be decreasing more rapidly for Asians and Hispanics than they are for blacks. From this viewpoint, it makes sense that involvement in interracial relationships with blacks might be more disadvantageous for mental health and well-being than those with Asian or Hispanic partners. It is possible that black exceptionalism exists with regards to interracial relationships because black individuals have historically experienced more negative group dynamics with whites than have Asian or Hispanic individuals. White women in relationships with black individuals might also receive more disapproval and lack of support from family and friends than those in relationships with Asian or Hispanic individuals. Indeed, Whiteman and Lee (2002) find that individuals in white-black marriages experienced more discrimination than individuals in Asian-white or Latino-white marriages. This greater discrimination might result in negative mental health consequences for those in white-black relationships, while those involved interracially with Asians or Hispanics may not receive such discrimination and thus may not experience any negative consequences on psychological well-being.

It is important for scholars to continue to examine instances of black exceptionalism in their research, as doing so will allow for a more adequate assessment of current racial barriers in the United States. As Lee and Bean (2005) note, it is dangerous to generalize changes in racial barriers to all races, as assuming that racial barriers have decreased for all races “could result in support for color-blind policies that fail to recognize that race and racial/ethnic divides have different consequences for different minority groups” (p. 42). For example, with regards to

interracial relationships, it would be disadvantageous for scholars to generalize that individuals in *all* types of interracial relationships benefit similarly to those in same-race relationships from involvement in their relationships. By noting the differences between white women involved with black, Asian, and Hispanic partners, we more adequately assess racial barriers regarding romantic relationships within the United States.

Conclusion

In sum, our findings add to existing research that finds that white women with black partners have lower psychological well-being than white women with same-race partners. In addition, we find that white women in same-race relationships who have had black partners in the past also have lower psychological well-being than women who have only ever dated white partners, though this difference is not as severe as it is between women with current black partners and those who have only ever dated white men. In contrast, we find that white women with Asian or Hispanic partners do not differ on measures of life satisfaction or depressive symptoms from white women with same-race partners. Finally, our results indicate that these results are not due to selection, suggesting that the relationship between having a black partner and lower psychological well-being is causal. These findings offer further evidence that racial barriers may be decreasing more rapidly for Asians and Hispanics than they are for blacks.

Table 1. Means and Standard Deviations for all Variables in Analysis

	<u>Wave 1</u>	<u>Wave 3</u>
Psychological Well-Being		
Life Satisfaction	---	4.33 (0.72)
Depressive Symptoms	5.80 (4.34)	4.12 (3.87)
Relationship Variables		
Interracial Relationship	---	0.06
Same-Race White Only	---	0.87
Same-Race Asian History	---	0.01
Same-Race Black History	---	0.03
Same-Race Hispanic History	---	0.03
White-Asian	---	0.01
White-Black	---	0.03
White-Hispanic	---	0.01
Dating	---	0.43
Cohabiting	---	0.24
Married	---	0.33
Demographics		
Age	15.98 (1.72)	22.34 (1.73)
Previous Marriages	---	0.03
Previous Cohabitations	---	0.27
Children in Household	---	0.28
Education Variables		
Less than High School	---	0.09
High School	---	0.29
Greater than High School	---	0.62
Currently in School	---	0.39
Rural School Location	0.28	---
Suburban School Location	0.53	---
Urban School Location	0.19	---
Socioeconomic Status		
Parent Less than High School	0.06	---
Parent High School	0.28	---
Parent Greater than High School	0.66	---
N	1841	1841

**Table 2. Multinomial Logistic Regression of Partner History on Wave 1
Depressive Symptoms Plus Controls**

	<u>Asian</u>	<u>Black</u>	<u>Hispanic</u>	<u>Asian</u>	<u>Black</u>	<u>Hispanic</u>
	<u>1</u>	<u>1</u>	<u>1</u>	<u>2</u>	<u>2</u>	<u>2</u>
Depressive Symptoms	0.92	1.02	1.03	0.92	1.02	1.05
Age	---	---	---	0.94	0.92	0.91
Parent Less HS	---	---	---	0.00***	2.85*	0.04**
Parent Greater HS	---	---	---	1.13	0.9	1.67
Rural School	---	---	---	0.7	1.19	0.51
Urban School	---	---	---	0.91	1.48	1.3
Constant	0.04***	0.07***	0.04***	0.1	0.22	0.13
N	1841	1841	1841	1841	1841	1841

*** p<0.001, ** p<0.01, *p<0.05

Note: Odds Ratios reported

Table 3. OLS Regression of Current Relationship Type on Wave 3 Life Satisfaction and Depressive Symptoms plus controls

	Life Satisfaction			Depressive Symptoms		
	1	2	3	4	5	6
Same-Race Asian History	-0.15 (0.1)	-0.19 (0.12)	-0.16 (0.11)	1.94 (1.64)	2.35 (1.66)	2.6 (1.53)
Same-Race Black History	-0.32* (0.12)	-0.30* (0.13)	-0.30* (0.12)	0.65 (0.54)	0.47 (0.58)	0.48 (0.57)
Same-Race Hispanic History	-0.02 (0.11)	-0.01 (0.12)	0.05 (0.11)	0.81 (0.85)	0.71 (0.89)	0.73 (0.85)
White-Asian	0.13 (0.19)	0.1 (0.19)	0.13 (0.19)	-0.56 (0.97)	-0.33 (1.02)	-0.08 (1.00)
White-Black	-0.49*** (0.12)	-0.49*** (0.12)	-0.35** (0.11)	1.56** (0.57)	1.62** (0.56)	1.39* (0.55)
White-Hispanic	0.03 (0.13)	0.07 (0.13)	0.08 (0.13)	0.22 (0.73)	-0.14 (0.85)	-0.28 (0.83)
Depressive Symptoms- Wave 1	---	-0.03*** (0.01)	-0.03*** (0.01)	---	0.24*** (0.03)	0.23*** (0.03)
Cohabiting	---	---	0.20** (0.07)	---	---	-1.03* (0.49)
Married	---	---	0.25*** (0.05)	---	---	0.42 (0.26)
Age	---	---	0.02 (0.01)	---	---	-0.24*** (0.06)
Previous Marriages	---	---	-0.18 (0.11)	---	---	0.62 (0.61)
Previous Cohabitations	---	---	-0.15* (0.07)	---	---	0.94 (0.50)
Children in Household	---	---	-0.02 (0.05)	---	---	0.11 (0.27)
Less than High School	---	---	-0.06 (0.08)	---	---	0.22 (0.48)
Greater than High School	---	---	0.07 (0.05)	---	---	-0.40 (0.24)
Currently in school	---	---	0.09* (0.04)	---	---	0.22 (0.24)
Parent Less than High School	---	---	-0.12 (0.10)	---	---	0.22 (0.45)
Parent Greater than High School	---	---	-0.01 (0.04)	---	---	-0.21 (0.23)
Rural School Location	---	---	0.04 (0.05)	---	---	-0.28 (0.23)
Urban School Location	---	---	0.07 (0.05)	---	---	-0.22 (0.25)
Constant	4.35*** (0.02)	4.52*** (0.04)	3.84*** (0.29)	3.99*** (0.12)	2.61*** (0.18)	8.04*** (1.32)
N	1841	1841	1841	1841	1841	1841
R-squared	0.02	0.05	0.09	0.01	0.08	0.10

*** p<0.001, ** p<0.01, *p<0.05

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