

The effects of Perceived ethnic/racial discrimination on moods.

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Signed Declaration

I confirm that I have read the NCI Ethical Guidelines for Research with Human Participants, and agree to abide by them in conducting this research. I also confirm that the information provided on this form is correct.

Signature of

Applicant _____

Date _____

Signature of Supervisor (where

appropriate) _____

Date _____

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Abstract

Racism has been hypothesised to affect our psychological health negatively. The purpose of this study was to discover the effects of perceived racial discrimination on moods particularly in Ireland. Participants (N= 50), were self-identified Africans (N= 43), Asians (N=5) and Caucasians (N= 2), specifically in Ireland. Participants were recruited from a community, face-to-face and social media, e.g. Facebook. The participants were required to complete Perceived Ethnic Discrimination Questionnaire Community Version (PEDQ-CV) which was used to assess racial discrimination and the Profile of Mood States (POMS) was used to examine various mood states. Preliminary analyses was conducted to assess the demographics (age, gender, ethnicity, marital and occupation status) of the participants. Additional preliminary analyses were used to assess the relationship between the PEDQ-CV questionnaire and the POMS questionnaire, compare mean scores and total scores of each ethnicity. Results showed that anger, depression and tension were positively correlated with the perceived racial discrimination but not significantly. Also self-identified Africans reported higher perceived racial discrimination. The results of this study imply that perceived racial discrimination is associated with negative moods.

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Introduction

Ethnicity is defined in the Oxford English dictionary as ‘the factor or state of belonging to a social group that has a common national or cultural tradition’. Discrimination is defined in the same dictionary as ‘the unjust or prejudicial treatment of different categories of people, especially on the grounds of race, gender and sex.’ Discrimination can also be expressed as understanding the differences between one thing and another i.e. right from wrong (defined by google). If you were asked to explain how you know what race a person is, you would probably say skin colour as that is the determining factor, not hair colour or eye colour (Whitely & Kite, 2009). However, Smedley (1999) noted that the word race was very broad, referring to groups of similar characteristics, e.g. a race of Bishops. It was from the 1700s that the meaning of race indicated groups of people sharing physical characteristics, mainly skin colour. Over time, racial groups based on skin became the norm of distinguishing “superior” Europeans from “inferior” others. These groups then developed to be the focus of stereotypes “proving” the inferiority of non-Europeans and defending European dominance and race laws that yield the freedom of non-Europeans (Smedley, 1999).

Wagner, Tennen, Finan, Ghuman and Burg (2012) investigated the effect of self-reported racial discrimination on endothelial response from acute stress in post-menopausal women. The study included 94 self-identified white women and 19 self-identified as a minority. Out of the 113 women, 43% with type 2 diabetes reported lifetime racial discrimination (Wagner et al., 2012). Wagner et al’s., (2012) study showed that the participants’ ethnicity, diabetes status and confounding variables did not moderate the effect of endothelial recovery from acute stress. However, the study demonstrated that it was the participant’s self-reported lifetime discrimination that was linked with the reduction of the endothelial recovery from acute stress response 20 minutes after mental stress (Wagner et al., 2012). The findings of this study imply that individuals who are exposed to lifetime racial discrimination and are experiencing acute stress are likely to slowly recover from acute stress. Also the reduction of endothelial recovery from acute stress is not associated with the individuals’ ethnicity, diabetes and confounding variables, such as, personality traits, mood and general distress. There are limitations to this study in regards to the small sample size of the minority groups, i.e. 19 self-identified as a minority, so there were restrictions of detecting racial differences. Additionally, the study included laboratory stressor procedures so results may not be generalised to real life stressors. Additionally, Individuals that are exposed to racism may view new situations as frightening

and harmful, so interpreting their stimulus as frightening or harmful could elevate their acute stressor (Broudy, Brondolo, Coakley, Brady, Casselles, Tobin & Sweeney, 2007).

A study conducted by Wei and Heppner (2010) examined racial discrimination stress, coping and depressive symptoms among 201 Asian Americans. The results suggested that symptoms of depression is significantly predicted by racial discrimination stress beyond perceived ordinary stress and perceived racial discrimination. Moreover, reduction of racial discrimination stress and symptoms of depression is influenced by subtle usage of reactive coping strategies and the high rate of family support. Family support is advised to help with discrimination and supporting the individual that is stressed when experiencing racial discrimination. There are many coping strategies that one could embark on. One of the many is reactive coping strategy which is to strongly emotionally react to discrimination but is suggested to increase depressive symptoms and racial discrimination stress. Wei, Ku, Russell, Mallunckrodt and Liao (2008) found that Asian Americans were more at risk of being racially discriminated when they used reactive coping strategies. Likewise, Noh, Beiser, Kasper, Hou and Rummens (1999) established that the Southeast Asian refugees were protected from depression by using the eastern, collectivist way of coping (also known as the cultural consistent coping strategy and forbearance coping strategy) when facing racial discrimination. This eastern, collectivist way of coping is learning how to cope with racial discrimination from their families. Later, Noh and Kasper (2003) found that when Korean Canadian immigrants used the Western coping strategy, (also known as individualistic coping strategy and active coping) buffered the effect of racial discrimination on depression. Noh and Kasper (2003) suggest that the Asian immigrants that have embraced the western coping strategy may be highly educated and have stable jobs.

Apart from coping strategies, research shows that a positive view of one's racial identity is a way of facing challenges with racial discrimination. Seller, Copeland-Linder, Martin and L'Heureux Lewis (2006) observed the interrelationships between racial discrimination, racial identity and psychological functioning within 314 African American adolescents. Seller et al's., (2006) study demonstrated that low levels of psychological functioning such as stress, symptoms of depression and psychological well-being was associated with racial discrimination. Results showed that individuals were more at risk of experiencing racial discrimination when they believed that other groups maintained a negative attitude towards their ethnicity, e.g. African Americans. Additionally, such low public regard reduced the effect

of racial discrimination on psychological well-being (Seller et al., 2006). Whereas, those who held a more positive attitude towards African Americans were associated with positive psychological functioning (Seller et al., 2006). Individuals with an ethnic minority background that are more prone to racial discrimination, may experience racial discrimination in their communities, schools and work which can lead to a negative view of themselves as a target for racial discrimination. Yet studies show that how individuals experience racial discrimination may be affected by specific racial identity attitudes and beliefs about one's ethnicity can ultimately serve as a protective factor (Sellers, Morgan & Brown, 2001; Seller et al., 2006). African Americans may hold a positive attitude towards their identity to stop the internalisation of inferiority beliefs e.g. employment (Seller et al., 2006). Such internalisation of inferiority beliefs can be used as a method that may affect their psychological functioning when facing racial discrimination (Jones, 2000).

However, Seller et al., (2006) results also suggested that the individuals that had a negative public regard can protect them from the effects of racial discrimination. They suggest that such results may be due to the fact that those specific individuals may have acquired coping strategies to help them face the challenges of racial discrimination and therefore use those coping strategies more often (Seller et al., 2006). Coping strategies from the Asian sample discussed earlier may also be beneficial to African Americans. Nevertheless, the individuals that hold a more positive public regard may not know of a coping strategy, so what will happen when they are faced with racial discrimination? As they might not be aware of coping strategies. With that being said, they may hold such positive beliefs because they are equipped with effective coping strategies or they have been brought up a certain way to attain such beliefs.

Perceived racial discrimination, self-control, anger and substance use was assessed in another study of African Americans adolescents. Gibbons, O'Hara, Stock, Gerrard and Wang's (2012), first aim of the study was to observe the association between racial discrimination and self-control over time. The second aim was to find out if the link between racial discrimination and self-control arbitrated racial discrimination and substance use. The result showed that substance use was predicted when there was an association between racial discrimination and low self-control. Secondly, in a word association task, participants with low dispositional self-control displayed an increase in substance-related response to double entendre words (e.g. pot, roach) when imaging a situation with racial discrimination. In addition to those findings, anger

also mediated the relationship between racial discrimination and substance use (Gibbons et al., 2012). Gibbons et al., (2012) state that the “double mediation” (pg. 1089) relationship was that racial discrimination led to more anger and low self-control which then led to the elevated use of substance and/or substance cognitions. This result suggests that racial discrimination can lead to anger and the only way the individual thinks they can relegate their anger is by taking drugs or misusing alcohol, which in the long-term is very bad for their health. Gibbons, Gerrard, Cleveland, Willis and Brody (2004) carried out a Family and Community Health Study and results indicated that the self- reports of black adolescents who went through racial discrimination by the age of 10/11 predicted use of alcohol and marijuana 2 years later. Gibbons et al., (2004) also found that the self- reports of the parents of those adolescents predicted the increase in substance use during 2 years. Nonetheless, in relation to Gibbons et al’s., (2012) study, racial discrimination and anger may not be the cause of substance use, it is possible that other factors e.g. getting bad grades in school and getting teased about it, including racial discrimination lead to anger and therefore lead to substance use.

Research shows that perceived racial discrimination can influence stress, depressive symptoms, distress, anger, sadness. Racial discrimination can happen anywhere, persons with an ethnic minority background are highly likely to encounter racial discrimination in various contexts. For example Fisher, Wallace and Frenton (2000) study showed that there is a highly significant number of African American adolescents that experience racial discrimination in classrooms from teachers and classmates. Although this current study is not measuring or comparing different ethnic backgrounds, it can be perceived that Africans are exposed to racial discrimination more than any other ethnicity, considering the history of slavery to the police brutality in America. An old study by Kessler, Mickelson and Williams (1999) reported that 49 % of black people from a large scale (ages, 25-74) experienced one major racist event, for example, hassled by police, while 81 % black people experienced day- to- day racial discrimination e.g. harassment. Statistical Information on the mappingpoliceviolence.org, black people are 3 times more likely to be killed by police than white people. Furthermore, 71% of those black people were unarmed compared to the 29% that were armed or suspected possession of a gun. On top of that, 97% of the police that committed an offence were not charged. This kind of exposure or just witnessing such racial discrimination can lead to negative moods and eventually have an impact on stress and depressive symptoms or the families that have to go through such tragic loss. On the other hand, police brutality is not major

in Ireland, although Ireland should not be perceived as a country where individuals with different ethnic backgrounds do not experience racial discrimination.

The Perceived Ethnic Discrimination Questionnaire- community dwelling (PEDQ-CV) questionnaire that it used in this present study was investigated in a previous study by Brondolo, Kelly, Coakley, Gorden, Thompson, Levy and Contrada (2005). Brondolo et al., (2005) study evaluated the PEDQ-CV and PANAS (positive and negative affect scale) on moods on a multi-ethnic Asian sample. The PEDQ-CV is a 34 measure evaluating lifetime experiences of ethnic discrimination within an interpersonal and social context. The scale they used included Lifetime Exposure Scale- four subscales: Social Exclusion, Stigmatisation, Discrimination at Work/School and Threat/Aggression. Psychological distress was examined and it comprised of depression, anxiety and negative moods (such as, upset, completed using PANAS schedule- Crawford & Henry, 2004). Both anxiety and depression as the dependent variables displayed significant effects for the PEDQ-CV. The Lifetime Exposure Scale was positively correlated with the PANAS negative mood subscale. Experiencing ethnic discrimination in an interpersonal environment has been recognised as a stressor adding to racial disparities in health. When an individual is exposed to racism, their ongoing experiences is viewed differently in a way that they see new situations as harmful which in return contributes to their overall stress (Broudy et al., 2007). This could be because of the individual's community, i.e. a community with less minority groups. Broudy et al., (2007) carried out a study on Perceived Ethnic Discrimination in Relation to Daily Moods and Negative Social Interactions. Using the Perceived Ethnic Discrimination Scale- Community Version and controlled for personality factors they found that ethnic discriminations were positively related with daily levels of anger and the intensity of participants' scoring of routine social interactions as exclusionary, harassing and unfair.

The second questionnaire that is used in this current study is the POMS questionnaire. The POMS questionnaire was established and designed by McNair, Lorr and Droppleman (1971). The questionnaire consist of 65 items that the participants is required to respond to. POMS questionnaire examines six mood states: Tension-Anxiety, Depression-Dejection, Anger-Hostility, Vigour-Hostility, Fatigue-Inertia and Confusion-Bewilderment (Cheung & Lam, 2005). POMS questionnaire has been used extensively in the sports and athletes area Cheung & Lam, 2005). For example, the questionnaire was used in examining football players (Simpson & Newby, 1994; cited in Cheung & Lam, 2005) and swimmers (Morgan, Brown,

Raglan, O'Connor & Ellickson, 1987; cited in Cheung & Lam, 2005). Although the POMS questionnaire was designed to measure current mood states in individuals undergoing psychotherapy and counselling, the questionnaire has examined different mood states in medical students and the normal population as a whole (Cheung & Lam, 2005). No study has used POMS questionnaire to measure racial discrimination, so this current study is the first to use both PEDQ-CV and POMS questionnaire to assess the effects racial discrimination on moods.

Similar to the findings from Broudy et al., (2007) study, Rucker, Neblett and Anyiwo (2014) conveyed a study in America that involved visual imagery paradigm that examined how race centrality, perpetrator race and the racial composition of an individual's primary community is connected with mood responses to racial discrimination vignettes. The 129 self-identified African Americans rated their mood after exposure to vignettes comprising of blatant and subtle discrimination with black and white actors. Participants with higher racial centrality showed more anger and disgust and had a more effective mood rating subsequently after the subtle discrimination. In addition, Rucker et al., (2014) discovered that they were significantly higher levels of disgust and distress reported by the participants when the perpetrator was white. Their results suggests that the environment and individual factors assist to shape affective reactions to discrimination. Racism may influence psychological functioning especially through its effects on depressed mood (Contrada & Baum, 2010). Depression strengthens the pain connected with social exclusion and other negative events (Bazner, Bromer, Hammelstein & Meyer, 2006). It was reported that racism had significant outcomes on trait and daily diary measures on negative mood in a community sample (Broudy et al., 2007). Individuals with higher levels of experiencing racism reported higher levels of trait negative mood and high levels of daily sadness, anger and nervousness in their diaries. Daily sadness and/or anger from exposure to racism may influence how those individuals view their environment as harmful or threatening. As a result those persons could perceive racism as one of life's struggles which can contribute to depression, even though depression is considered to be more than just sadness and anger.

Most research studies about racial discrimination are conducted in America, but they are only a few that were conducted in Ireland. Garner (2004) set out to cover both rationalisation and racism of the Irish life experience. The Irish have been both victims and perpetrators of racism in its "naturalist" and "historical" forms (Goldberg 2002). Garner emphasises on the

importance of the Irish Diaspora in relation to both rationalisation and racism of the Irish. There has been a divide between the Irish and those of other ethnic origin, especially blacks. Garner believes that until 2004 (keeping in mind that study was carried out in 2004) that Ireland was an anti-black, anti-traveller racism and anti-Semitism before the situation of immigration and asylum. The second study is a more recent one carried out by McGinnity, Nelson, Lunn and Quinn (2009) who performed an Irish experiment that measured discrimination facing ethnic minority job applicants. They found that CVs given out with Irish names on it were more than twice as likely to get called back for an interview compared to African, German and Asian names. The results suggest that there is strong discrimination against non-Irish candidates across a variety of jobs in the Irish workforce. The researchers argued that their findings may be related to the fact that many people migrate to Ireland and there is a solid national identity (McGinnity et al., 2009).

Rational/aim of study

A study will be carried out to see the effects of perceived racial discrimination on moods in Ireland, also taking into account demographics, such as age, gender, and socioeconomic status. The PEDQ-CV and POMS questionnaire will be used to measure racial discrimination on moods. As mentioned earlier, this current study will also not be comparing racial discrimination in Ireland and America. The study aims to be a framework to investigate racial discrimination for any future studies or research in Ireland. Day- to- day racial discrimination in education, communities, workplace etc... Is suggested to be important in the influence on negative moods, which can in turn affect how they perform in their lives.

Hypothesis 1: Perceived racial discrimination will negatively affect daily moods.

Hypothesis 2: There will be significantly higher rates of racial discrimination amongst Self-identified Africans than other ethnicities.

Methods

Participants

A total of 50 participants (30 females, 60%; 20 male, 40%) completed the Perceived Ethnic Discrimination Questionnaire (PEDQ) and the Profile of Mood States (POMS). The participants were recruited from social media, universities and a community. The total sample was comprised of 43 self-identified Africans (86%) 5 self-identified Asians (10%) and 2 self-identified Caucasians (4%). The participants ranged in age from 17-58. More than half of the sample were unemployed (26, 52%) while 23 were employed (46%) and 1 was retired (2%). Out of the 50 participants, the majority were single (36, 72%) 10 were in a relationship (20%) and 4 were married (8%).

Procedure

Most participants were recruited from social media, i.e. Facebook by sharing the questionnaire and direct messaging various people to fill the questionnaire, with information and consent (see Appendix C) given prior to filling out the questionnaire. While other participants were approached face-to-face in two universities (National College of Ireland and Institute of Technology Blanchardstown) and was asked to take part in the study. When they agreed to take part, those participants were then asked to give their email or preference of social media to allow the researcher to forward the questionnaire and consent form to them individually. Participants were required to complete 2 questionnaires online that enquired about their ethnicity, age, gender, occupation status and marital status. Additionally, they were required to complete open-ended questions that queried about experience of racial discrimination and past/current mood. Both questionnaires took approx. 10-30 minutes. Moreover, Participants were reminded about their rights of participation and the confidentiality of their responses. Participants were informed of benefits and risks that may arise to participating – in the case of any unlikely ethical implications that may arise, such as upset or anxiety, participants were free to contact the researcher.

*Measures- 2 Questionnaires**Perceived Ethnic Discrimination (PEDQ-CV).*

The first questionnaire is the Perceived Ethnic Discrimination Questionnaire- Community Version (PEDQ-CV) (see Appendix A) developed by Brondolo et al., (2005). This scale is a modification of the PEDQ-Revised B which was established by Contrada et al., (2001). PEDQ-CV measures everyday perceived racial/ethnic discrimination that college students and adults in communities from any ethnic backgrounds experience (Brondolo et al., 2005). The Perceived Ethnic Discrimination Questionnaire (PEDQ) defines a treatment that was unfair to an individual because of their race, ethnicity and/or origin (Atkins, 2014). However, the PEDQ-CV has reduced level of difficulty in vocabulary, and items were established to fit the life experiences for adults who are not students in comparison to the PEDQ.

PEDQ-CV consists of the Lifetime Exposure scale that comprises of 34 items on a 5 point Likert scale ranging from 1 (never) to 5 (very often) which measures racism, coping and health. Under this scale are four subscales: Social Exclusion, Stigmatisation, Discrimination at Work/School and Threat/Aggression. The items in the questionnaire begin with “Because of my ethnicity...” and is followed by statements used to describe some sort of exposure to maltreatment (e.g., “have you been kept out of a public place or group?”) The PEDQ-CV is made to allow researchers to measure the experiences of racial ethnic discrimination in various ethnic groups by recognising everyday life experiences in discrimination that may be similar among groups. The four subscales have factor loadings of 0.55 or higher (Atkins, 2014) and has been shown to have good internal consistency with lifetime exposure discrimination, resulting in its reliability and reported to have construct validity (Cronbach’s alpha > .75) and is used worldwide (Brondolo et al., 2005). Cronbach’s alpha = .75) in this current study.

Factor Loadings for the PEDQ-CV total items (Brondolo et al., 2005).

(Exclusion: Been nice to face, but said bad things behind back (.67), Made you feel like an outsider because of appearance (.63), Those speaking a different language made you feel like an outsider (.63), Ignored you (.62), Hinted you are stupid (.62), Clerk or waiter ignored you (.58), Called you bad names (.57), Made rude gestures (.55)

Stigmatisation: Hinted you must be lazy (.75), Hinted you must not be clean (.69), Hinted you were dishonest (.64), Not trusted you (.62), Hinted you must be violent (.58), Not taken you seriously (.58)

Discrimination in school/work: Treated unfairly by coworkers (.66), Boss or supervisor unfair (.66), Treated unfairly by teachers (.63), Thought you couldn't do things/handle a job .56.

Threat: Actually hurt you (.80), Threatened to hurt you (.70), Actually damaged your property (.68), Threatened to damage your property (.62).

(Some factor loadings for each subscale were not available).

Scoring for the PEDQ-CV is grouping the relevant statements into the four subscales, exclusion (19 items- someone said something disrespectful; has someone been nice to your face; made you feel like an outsider; those speaking another language; ignored you; clerk or waiter ignored you; bank tellers ignored you; called you bad names; made rude gestures; thought you were stupid; kept out of a public place; kept out of certain places; taxi driver passed you by or refused your service; unwilling to help you; left out of a social gathering; avoided sitting next to you; police been unfair; avoided talking to you), stigmatisation (7 items- hinted you must be lazy; hinted you must be not clean; hinted you were dishonest; not trusted you; hinted you must be violent; have not taken you seriously; hinted that you are stupid), workplace/school discrimination (4 items- treated unfairly by co-workers; boss or supervisor unfair; thought you couldn't do things or handle a job; treated unfairly by teachers) and threat (4 items- actually hurt you; threatened to hurt you; actually damaged your property; threatened to damage your property).

Profile of Mood States- POMS

The second questionnaire is the Profile Of Mood States (POMS) (see Appendix B) which is a standard validated test published and designed by McNair, Lorr and Dopleman (1971). The POMS brief consisted of 65 words and statements that are included in the questionnaire. Each word or statement requires participants to respond to on a 5 point Likert, ranging from 0= "Not at all", 1= "A Little", 2= "Moderately", 3= "Quite a Lot" or 4= "Extremely" and from 0= "Extremely", 1= "Quite a Lot", 2= "Moderately", 3= "A Little" or 4= "Not at all" for the words "Relaxed" and "Efficient" to reflect their mood i.e. how they've been feeling in the past week and today. The participants responds to the 65 word statement without a time limit. Analysing

Results

*Descriptive. Table 1.**Table 1 Descriptive Results*

	N	Mean	Minimum	Maximum	Std. Deviation
Gender	49	1.41	1	2	.50
Age	49	20.51	18	50	5.67
Ethnicity	49	1.20	1	3	.49
Marital	49	1.36	1	3	.60
Occupation	49	1.50	1	3	.55

Table 1 displays the mean scores and standard deviations of the participants' demographics. The variable age from the 49 participants, ranging from 18-50, with (M= 20.52, SD= 5.67). The mean gender is (1.41) and standard deviation of (.50). The variable ethnicity from the 49 participants range from 1-3 (M=1.20, SD=.49). Marital status (M= .35, SD= .60) and occupation (M= 1.49, SD= .55).

*Independent samples T-test. Tables 2.**Table 2 independent samples T-test*

TotalScores	Ethnicity	N	Means	Std. Deviation
Etotalscores	African	42	36.21	14.57
	Asian	5	29.00	8.60
	White	2	20.00	1.41
Stotalscores	African	42	13.52	5.42
	Asian	5	9.00	1.23
	White	2	8.50	2.12
WDtotalscores	African	42	7.83	3.54
	Asian	5	6.00	2.45
	White	2	4.00	.00
Ttotalscores	African	42	7.24	2.83
	Asian	5	5.60	1.67
	White	2	5.00	1.41

An independent samples T-test was conducted to compare PEDQ-CV and POMS total scores between the ethnicity groups. Results from table 2 show that the self-identified Africans scored higher in all total scores compared to the two other ethnicity groups. Additionally, Asians scored higher than Caucasians in most of the total scores apart from total mood disturbance. There was a significant difference in scores between African and Asians in the stigmatisation score, $t(29.01) = 4.53$, $p = .00$, sig two-tailed. According to Cohen (1988), $.01 =$ small effect, $.6 =$ medium effect and $.14 =$ large effect. The mean difference for stigmatisation was small (eta squared $= .03$). Whereas, there were two significant differences between self-identified Africans and Caucasians in exclusion, $t(22.59) = 6.59$, $p = .00$, sig two-tailed and workplace discrimination, $t(41.00) = .7.02$, $p = .00$, sig two-tailed. The magnitude of the difference in means for exclusion was small (eta squared $= .05$) and small (eta squared $= .05$) for workplace discrimination. However, there were no significant differences between Asians and Caucasians.

One-way ANOVA. Table 3.

Descriptive.

Table 3 One-way ANOVA descriptive

TotalMoodDisturbance	Ethnicity	N	Mean	Std.Deviation
	African	42	46.00	40.67
	Asian	5	34.00	36.20
	White	2	38.00	36.77
	Total	49	44.00	39.57

Table 4 Test of homogeneity variance.

Table 4 One-way ANOVA test of homogeneity variance

Levene statistic	Df1	Df2	Sig
0.64	2	46	.94

Table 5 *ANOVA*

Table 5 ANOVA

Total mood disturbances	Sum of squares	df	Mean squares	F	Sig
Between groups	730.12	2	365.06	.23	.80
Within groups	74420.00	46	1617.83		
Total	75150.12	48			

A one-way between group analysis of variance (ANOVA) was conducted to explore the impact of ethnicity on the total mood disturbance score from the POMS questionnaire. Participants were divided into three groups, African (n= 42), Asian (=5) and white (n= 2). Table 3, displays the mean and std. deviations for the three groups with Africans scoring higher (M= 46.00, SD= 40.67) than Asians (M= 34.00, SD= 36.20) and Caucasians (M= 38.00, SD= 36.77) but Asians scoring lower than Caucasians. The Post-hoc comparisons with Tukey HSD test indicated that the mean scores were non-significant, $p > .01$.

Table 4 shows that the variance in scores is the same for each of the three groups (sig =.94) (significant if more than .05). in addition, table 5 results show that there was a non-statistical significance difference in level of total mood disturbance scores across the three ethnicity groups $f(2, 46) = .23, p > .01$. The effect size, calculated using eta squared, was small = .01.

*Correlation analyses. Table 6**Descriptive statistics**Table 6 Correlation Analyses descriptive*

Total scores	Mean	Std.Deviation	N
Stigmatisation	12.86	5.30	49
Exclusion	34.82	14.21	49
Workplace discrimination	7.49	3.47	49
Threat	6.98	2.74	49
Tension	11.14	7.65	49
Depression	15.10	12.15	49
Anger	11.82	9.77	49
Fatigue	9.78	6.34	49
Confusion	9.47	5.70	49
Vigour	12.86	6.66	49
Total mood disturbance	44.45	39.57	49

A Pearson product-moment correlation coefficient was used to investigate the relationship between the PEDQ-CV total scores and the POMS total score. Preliminary analyses were performed to ensure no violation of the assumptions of linearity, normality and homoscedasticity. Table 3 presents the means and standard deviations of the total scores, with exclusion having the highest mean (M= 34.82, SD= 14.21) and threat scoring the lowest (M=

6.98, SD= 2.74) from the PEDQ-CV questionnaire. In the POMS questionnaire, depression had the highest mean (M= 15.10, SD= 12.15) and the lowest mean score was confusion (M= 9.47, SD= 5.70).

According to Cohen (1988), determining the strength of the relationship varies if the Pearson correlation coefficient (r) is small $r = .10 - .29$, medium $r = .30 - .49$ and large $r = .50 - 1.0$. There was a medium, positive relationship between exclusion and depression, $r = .34$, $n = 49$, $p > .01$. There was a small, positive relationship between stigmatisation and anger, $r = .29$, $n = 49$, $p > .01$. Results also showed a small, positive relationship between workplace discrimination and tension, $r = .24$, $n = 49$, $p > .01$. These results indicate that high levels of exclusion, workplace discrimination and stigmatisation are associated with high levels of depression, anger and tension.

Discussion.

It was hypothesised that Africans would significantly experience racial discrimination compared to the other two groups. However, results from the independent samples T-test partially supports this second hypothesis, as there were only three significant differences between Africans and Asians and Caucasians. Whereas, previous studies have proved that self-identified black/Africans score significantly higher than other ethnicity groups in greater lifetime perceived racial discrimination. The results in the current study may partially disagree with the second hypothesis because of the mean method used to resolve the missing answers in the PEDQ-CV questionnaire. If the mean method had not been used on the PEDQ-CV questionnaire then the results from this current study would have copiously supported previous study. Results from the ANOVA analysis also suggests that there were no statistical significance in total mood disturbance scores between the three ethnic groups in the POMS questionnaire. Though, Africans scored higher than both Asians and Caucasians in the mean scores but Asians scoring lower than Caucasians. They may have not been a significant difference between the ethnicity groups in the POMS questionnaire as most of the participants may not have been exposed to any racial discrimination that week or day. Although, Africans had the highest score and Caucasians scoring higher than Asians might be due to racial discrimination or other factors that impacted their mood. With that being said, results from this current study supports the first hypothesis as medium and weak positive relationships were found between the PEDQ-CV and the POMS questionnaire. However there were no significant findings with the relationships but anger was associated with stigmatisation, depression associated with exclusion and tension associated with workplace discrimination. Similar to the results from Brondolo et al's study (2005) that revealed a positive relationship between the PEDQ-CV subscales and daily anger, nervousness and sadness from the PANAS questionnaire. Brondolo et al., (2005) results were significant in contrast to this current study. Consequently, the contrast with significant results from the Brondolo et al's., (2005) and this current finding may be due to less perceived racial discrimination in Ireland. The results from this current study has contributed to the findings of other studies in respect to the association between perceived racial discrimination and negative moods.

The PEDQ-CV questionnaire allows examination of various aspects of perceived interpersonal racial discrimination. The results from this current study indicate that exclusion, workplace/school discrimination and stigmatisation are associated with daily anger, depression and tension. With Africans scoring higher than the other two ethnic groups in all the total scores

from the PEDQ-CV questionnaire. This outcome is in contradictory with Brondolo et al (2005) findings, where threat and stigmatisation were associated more with trait and state negative affect. They suggest that experiencing humiliation and threat can lead to high levels of emotional salience and this kind of exposure presumably forms a personal perception of the world (Brondolo et al., 2005). The result from the current study implies that self-identified Africans in Ireland experience more racial discrimination in comparison to Asians and Caucasians. When an individual experiences exclusion, workplace discrimination, stigmatisation and threat as a form of racial discrimination, it might shape the way they view their surroundings. For example, when an individual perceives their stimulus as either stigmatising, threatening or believe they are excluded because of their ethnicity, those individuals might form dispositional tendencies to experience anger, depression or tension. These dispositions may lead to the individual perceiving experiences as distress (Brondolo et al., 2005).

As mentioned earlier coping strategies is beneficial when facing racial discrimination. Though the coping strategies were examined among Asian groups (Loh and Kasper, 2003), such strategies might work for other minority groups. For example, the participants that took part in the current study, can use the eastern or collectivist coping strategy to help with depression as a consequence of experiencing racial discrimination. Even though many studies support the positive results from the coping strategies used by Asians, people are different and therefore react differently with racial discrimination. So a coping strategy that is found to increase depressive symptoms when faced with racial discrimination could work completely opposite for an individual. For example, avoidance coping strategy- avoiding racial discrimination in school could influence the student to focus solemnly on school work also positivity from friends and family could help. For them, reactive coping strategy could be too traumatic. Whereas, some might not cope with avoiding racial discrimination. Racial ethnic minority groups in Ireland may use such coping strategy when faced with racial discrimination in schools, employment and communities. Individuals in Ireland may find that planning a way to solve the problem presented (racial discrimination) is a good coping strategy rather than avoiding the problem. With that being said, is it possible that some individuals may not use their everyday coping strategies depending on their mood? For example, the individual that usually avoids refrains from racial discrimination in school might one day react by speaking back or pushing back because they were angry that day. Also, the individual's moods would most likely be negatively affected when facing racial discrimination. Although, various coping

strategies are not measured in the current study, it can be advised that individuals that face racial discrimination across multiple contexts should adopt to coping strategies, such as western and collectivist coping strategy. From the results of previous studies and this current study, racial discrimination that impacts on daily moods could ultimately attenuate or strengthen stress and symptoms of depression.

Evidence from this study and previous study discussed earlier have shown that Africans/blacks report more lifetime perceived discrimination. So it can be suggested that during the adolescent period of an African American, that they should be educated on racial discrimination and coping strategies that can be accomplished by the influence, support and socialisation of family. According to (Rucker et al., 2014) there are developmental factors that can influence certain African Americans to hold beliefs on how they identify themselves and the awareness of racial discrimination, which can influence their attitude and beliefs either positively or negatively. For example, once an individual is aware of racial discrimination towards their race, it may affect their interaction with other ethnic groups, causing them to be in a certain mood amongst other groups and which may very much negatively result in greater exposure to racial discrimination. According to Rucker et al., (2012), there are five ways in which this ethnic group perceives their racial identity (what it means to be part of this racial group). *Salience*: is when the individual identifies their race as relevance in a specific moment or situation. *Centrality*: is the degree to which an individual defines themselves in respect of their race across situation. *Ideology*: one's beliefs, attitudes and opinions with regards to the way the members of that ethnic group should behave. *Private regard*: Africans/blacks that feel that others negatively or positively perceive their ethnic group. Lastly, *public regard*: when one feels positively or negatively about their own ethnic group. These five factors of racial discrimination all contribute to the way an individual perceives discrimination. In other words, how an African views his ethnicity is likely to affect their perception of a situation as racially discrimination. Sellers and Shelton (2003) found that racial centrality was positively related to how an individual perceived the racial discrimination act, even after controlling for perceptions of racial discrimination. Hence, it is highly likely that self-identified Africans in this study scored higher on perceived racial discrimination because of the racial identity they hold of themselves.

The topic of racial identity is an important one because it has the power to shape one's perceptions of racial discrimination and perceptions of the world. A study by Trail, Goff,

Bradbury and Karney (2012) investigated ethnic identity in Latino married couples and how it affected their marriage. The study showed that the wives' marital quality was negatively predicted by their husbands' experience to racial discrimination but only for those who had husbands with weak racial identity (Trail et al., 2012). On the other hand, this effect was buffered from wives who had husbands with strong racial identity. The husbands with the weak racial identity most likely hold negative public and/or private regard about their ethnicity while the individuals with the strong ethnic identity hold positive public and/or private regard about their race. Furthermore, the study revealed that holding strong ethnic identity buffered the association between the husbands' discrimination and verbal aggression toward their wives (Trail et al., 2012). The findings of this study is similar to the current study in respect to anger being associated with perceived racial discrimination. It is possible that a coping strategy aided the reduction in the association between the husbands' discrimination and verbal aggression. Whereas the husbands who experience racial discrimination and are verbally aggressive towards wives may be due to not having a coping strategy. However, the verbal aggression, probably not only to their wives, might be a way of coping with racial discrimination.

Additionally, the Family and Community Health Study (Gibbons et al., 2012) also implies that developmental factors can lead to substance use when experiencing racial discrimination. Families, especially parents attain great influence on their children, so if an adolescent witnesses their parent(s) consuming alcohol regularly or taking drugs to alleviate from their angry mood, the children are likely to do the same. Also, if the parents see their child taking drugs or alcohol and is able to prevent it or positively motivate their child to stop, it can lead to reduction in substance abuse. However, such prevention particularly in the wrong way may lead to the adolescent becoming angrier and therefore increase in substance use. It just shows that individuals who experience racial discrimination are unaware of how to handle the situation and might get more frustrated. For example, the Trail et al (2012) study, the husbands that use verbal aggression on their wives is likely to consume substances, such as alcohol. Additionally, stigmatisation was positively correlated to anger, so participants in this study that scored high on stigmatisation might consume alcohol or take drugs as a consequence of experiencing discrimination.

Limitations and directions for future research.

1. The sample size in this study was small (N=50), with Africans (N=42), Asians (N=5) and Caucasians (N=2). It would be beneficial for future researchers to test the hypotheses with a bigger sample and with similar number of participants for each ethnicity.
2. The methodology used to resolve the missing values in the PEDQ-CV questionnaire slightly reduced the validity of the questionnaire. It can be suggested that future researchers choose a different method if that same problem approaches.
3. Both the PEDQ-CV and the POMS questionnaire are based on self-report, so the answers rely on memory. Therefore, participants can over-exaggerate or under-exaggerate on the questionnaires. Although, there is no time limit in answering the questionnaires, some participants might have completed the questionnaire in a rush, effecting the reliability of the questionnaires.

Despite these limitations, the study shows a positive relationship between subscales in the PEDQ-CV and negative moods, such as anger, depression and tension. Also, self-identified Africans scoring higher than Asians and Caucasians in the two questionnaires. Additionally, the reliability for the PEDQ-CV questionnaire is strong, Cronbach's alpha =.75 even though the meauun method was performed on the questionnaire. Cronbach's alpha>.85 for the POMS questionnaire was strong. Also, this is the first study to investigate the effects of racial discrimination on moods in Ireland.

Counselling implications

There are numerous counselling implications from the studies mentioned above and also this study. It is very important for specialists to understand that daily moods, such as anger and depression persist over a long period of time which can lead to stress, depressive symptoms and anxiety. These specialists need to consider both the cultural-context and environment of the individual. Also raise awareness of the coping strategies that can increase or decrease such negative psychological outcomes.

Conclusion

This is a conceptual study of previous studies that investigated perceived racial discrimination on moods. It was firstly hypothesised that racial discrimination will negatively affect moods and secondly hypothesised that self-identified Africans will perceive more racial discrimination amongst the three ethnic groups. The results supported the first hypothesis but partially supported the second hypothesis. The second hypothesis might have been partially supported because racial discrimination might not be as significant in Ireland. Similar to Brondolo et al's study (2005) negative moods, such as anger, depression and tension were found in this current study. As mentioned earlier, comparisons between the perceived racial discrimination studies carried out outside Ireland were not assessed. However, it is important to note that findings from this current study were not as significant as findings from studies investigated outside Ireland. Also, coping strategies were not assessed in this study, but examples of coping strategies were mentioned. Even though effects of racial discrimination on moods in Ireland were not as significant, results are consistent in respect to positive relationships between racial discrimination and negative moods.

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Appendix

Appendix A

PEDQ – Community Version

Think about your ethnicity/race. What group do you belong to? Do you think of yourself as: Asian? Black? Latino? White? Native American? American? Caribbean? Irish? Italian? Korean? Another group?

YOUR ETHNICITY/RACE: _____

How often have any of the things listed below happened to you, because of your ethnicity?

BECAUSE OF YOUR ETHNICITY/RACE ...

A. How often... Never Sometimes Very
Often

1. Has someone said something disrespectful, either to your face or behind your back?

1 2 3 4 5

2. Have you been kept out of a public place or group? 1 2 3 4 5

3. Have you been treated unfairly by teachers, principals, or other staff at school?

1 2 3 4 5

4. Have others thought you couldn't do things or handle a job?

1 2 3 4 5

5. Have others threatened to hurt you (ex: said they would hit you)?

1 2 3 4 5

6. Have others actually hurt you or tried to hurt you (ex: kicked or hit you)?

1 2 3 4 5

7. Have others avoided talking to you or answering you? 1 2 3 4 5

8. Have you felt that you were kept out of certain places? 1 2 3 4 5

9. Have policemen or security officers been unfair to you? 1 2 3 4 5

BECAUSE OF YOUR ETHNICITY/RACE...

How often... Never Sometimes Very often

10. Have others hinted that you are stupid? 1 2 3 4 5

11. Have others threatened to damage your property? 1 2 3 4 5

12. Have others actually damaged your property? 1 2 3 4 5

13. Have people called you bad names related to your ethnicity?

1 2 3 4 5

14. Have others made you feel like an outsider who doesn't fit in because of your dress, speech, or other characteristics related to your ethnicity? 1 2 3 4 5

15. Were you left out when others were planning a party or get-together?

1 2 3 4 5

16. Have you been treated unfairly by co-workers or classmates?

1 2 3 4 5

17. Have others hinted that you are dishonest or can't be trusted?
1 2 3 4 5
18. Has someone made rude gestures? 1 2 3 4 5
19. Have others avoided touching or sitting next to you (ex: in class or on a bus)?
1 2 3 4 5
20. Have you been left out of social gatherings or get-togethers (ex: going to lunch or to a bar)?
1 2 3 4 5
21. Have people like waiters, bank tellers, or secretaries been unfair or treated you badly?
1 2 3 4 5

BECAUSE OF YOUR ETHNICITY/RACE...

How often... Never Sometimes Very often

22. Has a clerk or waiter ignored you or made you wait longer than others to be served?
1 2 3 4 5
23. Have people been nice to you to your face, but said bad things about you behind your back?
1 2 3 4 5
24. Have people who speak a different language made you feel like an outsider?
1 2 3 4 5
25. Have people on the street been unwilling to help you or give you directions?
1 2 3 4 5

26. Has a taxi driver passed you by or refused you service? 1 2 3 4 5
27. Have others hinted that you must be violent or dangerous?
1 2 3 4 5
28. Have others physically harmed members of your family? 1 2 3 4 5
29. Have others ignored you or not paid attention to you? 1 2 3 4 5
30. Has your boss or supervisor been unfair to you? 1 2 3 4 5
31. Have others hinted that you must not be clean? 1 2 3 4 5
32. Have people not trusted you? 1 2 3 4 5
33. Have people not taken you seriously or not wanted to give you responsibility?
1 2 3 4 5
34. Has it been hinted that you must be lazy? 1 2 3 4 5

PEDQ Lifetime Total subscales for full version:

Total Scores

Exclusion: someone said something disrespectful; has someone been nice to your face; made you feel like an outsider; those speaking a different language; ignored you; clerk or waiter ignored you; called you bad names; made rude gestures, thought you were stupid

Stigmatization: hinted you must be lazy; hinted you must be not clean; hinted you were dishonest; not trusted you; hinted you must be violent; not taken you seriously

Workplace discrimination: treated unfairly by co-workers, boss or supervisor unfair, thought you couldn't do things or handle a job, treated unfairly by teachers

Threat: actually hurt you, threatened to hurt you, actually damaged your property, threatened to damage your property.

Appendix B

Read each word/statement below, decide how you have been feeling, in respect to the word/statement, in the PAST WEEK AND TODAY, and select the appropriate statement "Not at All", "A Little", "Moderately", "Quite a Lot" or "Extremely" to indicate your feeling.

1. Friendly	Not at all	A little	Moderately	Quite a lot	Extremely
2. Tense	Not at all	A little	Moderately	Quite a lot	Extremely
3. Angry	Not at all	A little	Moderately	Quite a lot	Extremely
4. Worn Out	Not at all	A little	Moderately	Quite a lot	Extremely
5. Unhappy	Not at all	A little	Moderately	Quite a lot	Extremely
6. Clear Headed	Not at all	A little	Moderately	Quite a lot	Extremely
7. Lively	Not at all	A little	Moderately	Quite a lot	Extremely
8. Confused	Not at all	A little	Moderately	Quite a lot	Extremely
9. Sorry for things done	Not at all	A little	Moderately	Quite a lot	Extremely
10. Shaky	Not at all	A little	Moderately	Quite a lot	Extremely
11. Listless	Not at all	A little	Moderately	Quite a lot	Extremely
12. Peeved	Not at all	A little	Moderately	Quite a lot	Extremely
13. Considerate	Not at all	A little	Moderately	Quite a lot	Extremely
14. Sad	Not at all	A little	Moderately	Quite a lot	Extremely
15. Active	Not at all	A little	Moderately	Quite a lot	Extremely
16. On Edge	Not at all	A little	Moderately	Quite a lot	Extremely
17. Grouchy	Not at all	A little	Moderately	Quite a lot	Extremely
18. Blue	Not at all	A little	Moderately	Quite a lot	Extremely
19. Energetic	Not at all	A little	Moderately	Quite a lot	Extremely
20. Panicky	Not at all	A little	Moderately	Quite a lot	Extremely
21. Hopeless	Not at all	A little	Moderately	Quite a lot	Extremely
22. Relaxed	Not at all	A little	Moderately	Quite a lot	Extremely
23. Unworthy	Not at all	A little	Moderately	Quite a lot	Extremely
24. Spiteful	Not at all	A little	Moderately	Quite a lot	Extremely
25. Sympathetic	Not at all	A little	Moderately	Quite a lot	Extremely
26. Uneasy	Not at all	A little	Moderately	Quite a lot	Extremely
27. Restless	Not at all	A little	Moderately	Quite a lot	Extremely
28. Unable to Concentrate	Not at all	A little	Moderately	Quite a lot	Extremely
29. Fatigued	Not at all	A little	Moderately	Quite a lot	Extremely
30. Helpful	Not at all	A little	Moderately	Quite a lot	Extremely
31. Annoyed	Not at all	A little	Moderately	Quite a lot	Extremely
32. Discouraged	Not at all	A little	Moderately	Quite a lot	Extremely
33. Resentful	Not at all	A little	Moderately	Quite a lot	Extremely
34. Nervous	Not at all	A little	Moderately	Quite a lot	Extremely
35. Lonely	Not at all	A little	Moderately	Quite a lot	Extremely
36. Miserable	Not at all	A little	Moderately	Quite a lot	Extremely
37. Muddled	Not at all	A little	Moderately	Quite a lot	Extremely
38. Cheerful	Not at all	A little	Moderately	Quite a lot	Extremely
39. Bitter	Not at all	A little	Moderately	Quite a lot	Extremely
40. Exhausted	Not at all	A little	Moderately	Quite a lot	Extremely
41. Anxious	Not at all	A little	Moderately	Quite a lot	Extremely
42. Ready to Fight	Not at all	A little	Moderately	Quite a lot	Extremely
43. Good Natured	Not at all	A little	Moderately	Quite a lot	Extremely
44. Gloomy	Not at all	A little	Moderately	Quite a lot	Extremely
45. Desperate	Not at all	A little	Moderately	Quite a lot	Extremely
46. Sluggish	Not at all	A little	Moderately	Quite a lot	Extremely

47. Rebellious	Not at all	A little	Moderately	Quite a lot	Extremely
48. Helpless	Not at all	A little	Moderately	Quite a lot	Extremely
49. Weary	Not at all	A little	Moderately	Quite a lot	Extremely
50. Bewildered	Not at all	A little	Moderately	Quite a lot	Extremely
51. Alert	Not at all	A little	Moderately	Quite a lot	Extremely
52. Deceived	Not at all	A little	Moderately	Quite a lot	Extremely
53. Furious	Not at all	A little	Moderately	Quite a lot	Extremely
54. Efficient	Not at all	A little	Moderately	Quite a lot	Extremely
55. Trusting	Not at all	A little	Moderately	Quite a lot	Extremely
56. Full of Pep	Not at all	A little	Moderately	Quite a lot	Extremely
57. Bad Tempered	Not at all	A little	Moderately	Quite a lot	Extremely
58. Worthless	Not at all	A little	Moderately	Quite a lot	Extremely
59. Forgetful	Not at all	A little	Moderately	Quite a lot	Extremely
60. Carefree	Not at all	A little	Moderately	Quite a lot	Extremely
61. Terrified	Not at all	A little	Moderately	Quite a lot	Extremely
62. Guilty	Not at all	A little	Moderately	Quite a lot	Extremely
63. Vigorous	Not at all	A little	Moderately	Quite a lot	Extremely
64. Uncertain about things	Not at all	A little	Moderately	Quite a lot	Extremely
65. Bused	Not at all	A little	Moderately	Quite a lot	Extremely

Assessment scoring

Mood Profile Score

Anger (0-48)

Confusion (0-28)

Depression (0-60)

Fatigue (0-28)

Tension (0-36)

Vigour (0-32)

$$(\text{Anger} + \text{confusion} + \text{depression} + \text{fatigue} + \text{tension}) - \text{vigour} = \text{Total Mood Disturbance}$$

Appendix C

Consent form

What is the purpose of this study?

Hello, my name is Christie McDonald-Agu and I am currently in my final year undergraduate psychology degree in National College of Ireland. As a final year student, I am required to conduct a research study. My study is on perceived ethnic/racial discrimination on moods. The aim of this study is to see whether perceived minor racial/ ethnic discrimination impacts mood in different ethnic groups. This project has been approved by the Psychology Research Ethics Committee. so my study is on perceived ethnic/racial discrimination on moods.

Who can take part in the study?

To participate in the study you must be a self-identified African and Asian between the ages of 18-60, living in Ireland.

What you are being asked to do:

You are invited to complete 2 questionnaires - the Perceived Ethnic Discrimination Questionnaire (PEDQ), and the Profile On Mood States (POMS) questionnaire. In the PEDQ-CV, the questions include a list of things that may have happened to you because of your ethnicity. The result of how often those specific things have happened to you will determine stigmatisation, workplace discrimination, exclusion and threat and harassment. In total the questionnaires take approx. 10-30 minutes to complete.

Confidentiality

All data will be kept confidential and anonymised (i.e. stored using a number and not your name). Your data will not be used for any other purpose than for the current proposed research project.

Can I stop taking part whenever I wish?

Your participation in this study is voluntary. You do not have to take part and you can stop at any time you wish. You have the right to ask that any data you have supplied to that point be withdrawn/destroyed. You have the right to omit or refuse to answer or respond to any question asked of you without penalty.

Potential risks/ benefits:

Many participants find it rewarding to contribute to research, particularly if the research centres on a personal topic of interest. For example, it may be beneficial to know the kind of moods associated with racial/ethnic discrimination.

Whilst study participation is unlikely to involve any substantial risk to participants, you may find that the questions asked cause you to experience negative feelings such as anxiety. Should the study affect you in any way, or should you have any queries about the study, please feel free to contact me at Christabel.mcdonald@gmail.com.