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Adults’ Attitudes Toward Multiracial Children

Gayle L. Chesley
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A between-groups experimental design was used to examine adults’ attitudes toward multiracial children of African descent. The purpose was to determine if the races of the respondent, the child, and the child’s friends are related to adults’ ratings of children’s self-perception and depressive symptoms. A total of 156 undergraduate students (African American = 78, European American = 78) read a vignette in which the race of the target child (European American, African American, or multiracial) and the child’s friends (European American or African American) were experimentally controlled. Participants assessed the child using a revision of Harter’s Self-Perception Profile for Children and a revised version of Kovacs’s Children’s Depression Inventory—Short Form. Ratings of the child’s global self-worth and depressive symptoms were negatively correlated. The results of a 2 × 2 × 3 MANOVA revealed a significant three-way interaction for the races of the child, the respondent, and the child’s friends on adults’ ratings of the child’s peer acceptance. The implications of these findings are discussed.

Keywords: multiracial; race; children; development; self-worth; social acceptance; friendship

Since the U.S. Supreme Court’s repeal of state laws prohibiting interracial marriages (Loving v. Virginia, 1967), the number of multiracial children in this country has greatly increased and is likely to grow as the social stigma toward interracial unions declines (U. M. Brown, 1995; Root, 1996). Unfortunately, there have been few empirical studies on the psychosocial development of these children including those of African descent. The present investigation was conducted to increase our understanding of multiracial children born to African American and European American parents. More specifically, the study was designed to examine adults’ attitudes toward these
children. Research in this area is valuable because adults’ perceptions of a child have a significant impact on the child’s view of self (Cooley, 1902), but the empirical literature on adults’ attitudes toward multiracial children is very limited (e.g., Jackman, Wagner, & Johnson, 2001). The results of the present study are offered as an early step in correcting this deficit.

Through their interactions with significant others and society as a whole, children internalize the appraisals of others and begin to regard themselves in ways consistent with their perception of these evaluations (Cooley, 1902; Harter, 1999). Cooley (1902) described one’s view of self as the looking glass self that reflects the importance of these imagined judgments of others. Most researchers have focused on children’s perception of self and given relatively little attention to the role of societal influences. For example, Harter (1985) studied children’s global self-worth, a measure of children’s perception of their worth as a person, and their perception of adequacy in different domains (e.g., scholastic competence, physical appearance). Harter (1999) proposed that self-worth is based on the child’s perceived competence in the domains he or she deems most important. Research has supported this conception of global self-worth (Harter, 1986; Harter, Whitesell, & Junkin, 1998). This view of self is undoubtedly affected by the attitudes and behaviors of others. An important consideration in children’s development of self-worth is how the cultural surround affects their sense of self.

As children develop a sense of self based on their perceived adequacy in different domains, this personal identity is influenced by their perception of the groups to which they belong. One area that greatly affects adults’ perceptions of others and, in turn, the person’s perception of himself or herself is race (Sodowsky, Kwan, & Pannu, 1995). The idea that attitude toward race is shaped by community socialization is supported by past literature. Bowles (1993) determined, based on her clinical work, that a child’s racial group identity is formed by the reflected judgments of family members and the community. Okun (1996) found, through interviews with people of color, that racial stereotypes were internalized for individuals socialized in a dominant European American culture. These individuals developed their own “internalized racism” (Okun, 1996, p. 213), which negatively affected their sense of self and racial identity. Thus, these findings suggest that adults’ attitude toward race affect children’s sense of self. Multiracial children face unique challenges in developing a racial identity. Unlike their monoracial peers, these children experience unique social pressures to identify with a single aspect of their racial heritage (P. M. Brown, 1990).

Society has debated the racial classification of multiracial children for decades. Throughout history, no interracial union has been more controversial than the pairing of African American and European American parents.
Beginning in the early 1900s, the one-drop rule was established and applied to African American/European American multiracial individuals by the United States Bureau of the Census. This rule categorizes anyone with a traceable African American ancestor as African American (Tatum, 1997). Although this standard is no longer an official practice of the Bureau of the Census, classifying multiracial children according to the race of the parent of color is still common (Bowles, 1993; Wardle, 1987). For example, Kerwin, Ponterotto, Jackson, and Harris (1993) interviewed nine African American/European American multiracial children. They found that all four of the older children, ages 13 to 16 years, could recall a time when they believed they had to choose one racial identity over another. This poses developmental challenges because the lack of social validation for a multiracial self-classification can lead to anxiety, doubt, and an inconsistent view of self (Hershel, 1995).

Although it has been suggested that both African American and European American adults classify multiracial children of these two heritages as African American (P. M. Brown, 1990), this premise has not been empirically tested. Based on clinical work with multiracial children, Bowles (1993) determined that both people of color and European Americans are often hostile to multiracial individuals who choose to adopt both cultures, which may encourage multiracial children to deny a part of their heritage. However, much of the literature in this area is based on personal experience and speculation because of the dearth of relevant empirical research. Therefore, adults’ current attitudes toward African American/European American multiracial children in the United States are unknown.

How young people see themselves is partly shaped by peer relationships (Nishimura, 1995). Children’s friendships are an important area to examine because their relationships are essential to self-concept development. Adults’ views of children’s peer relationships affect how children view those interactions and, in turn, how they view themselves. Unfortunately, very little is known about adults’ attitudes regarding the friendships of multiracial children. Most researchers have overlooked this group and focused on the friendships of monoracial children.

Studies on children’s choice of friends have consistently shown that similarities in race and gender are important. By 7 years of age, most children have developed a sense of racial differences and are able to classify individuals into racial groups (Carter, Detine-Carter, & Benson, 1980). After this age, racial similarity is an important predictor of friendship. Results from Graham, Cohen, Zhikowski, and Secrist’s (1998) longitudinal study corroborate this age-related increase in same-race friends. They obtained friendship nominations from 145 boys and girls at two points in time—first when
children were in Grades 1 to 3 and then 3 years later. They found that same-race/same-sex friendship selection was more prevalent than other-race/other-sex selection at both times, and the number of same-race/same-sex mutual friends increased over the 3-year period.

DuBois and Hirsch (1990) examined cross-race friendships inside and outside of school. A sample of 292 African American and European American students from an integrated junior high school completed self-report surveys. Few students reported a close, other-race school friend (European Americans = 31%; African Americans = 24%). Of the students who did, less than half reported that they saw the friend frequently outside of school, although contact outside of school was more common for African Americans (African Americans = 42%; European Americans = 22%). The results of this study suggest that the close friends of both African American and European American students are likely to be of the same race as them. Hallinan and Williams (1989) and Hoxter and Lester (1995) found that this same-race preference continued into late adolescence and early adulthood.

The degree to which individuals show same-race preferences has been shown to differ as a function of race. Ramsey and Myers (1990) interviewed 41 children, ages 4 to 6, and found that European American children exhibited a greater in-group bias than did African American children as shown by their racial contact patterns. This finding should be interpreted cautiously given the small sample size; however, a stronger same-race preference among European American students as compared to African American students was also demonstrated in a larger sample of college students (Mills, Daly, Longmore, & Kilbride, 1995). Taken together, these studies suggest that African American individuals may be less likely to choose friends based on racial similarity than European Americans throughout childhood, adolescence, and into early adulthood. Nonetheless, both racial groups reported stronger friend preferences for peers of the same race. This similarity selection bias presents a problem for multiracial children in that very few peers are similar in racial background. Because African American and European American peers often segregate themselves, multiracial children might conclude that they must identify with one racial group. The same-race preference observed in children may be due, in part, to adults’ attitudes toward African American and European American friendships.

Research has shown that adults tend to have negative views of crossrace friendships. In one study conducted in Britain by Owusu-Bempah (1994), 102 social work students—the majority of whom were White—read a vignette about either a Black, White, or multiracial child with either Black or White friends. Results revealed that respondents saw no problem with the multiracial child having Black friends, but viewed the child’s friendships
with only White children as “pathological.” Respondents’ comments about
the latter situation included, “Stephen’s best friends are White, so he may be
confused about his identity,” and “Stephen has problems reconciling his own
identity, he may be trying to be White” (Owusu-Bempah, 1994, p. 132).
Clearly, the respondents in this study classified the multiracial child as Black
and viewed friendships with White peers negatively.

Another variable related to children’s view of self is their level of depres-
sion. At this time, the relationship between adults’ views of a child’s depres-
sion level and race has not been examined. However, there is evidence to sug-
gest a negative relationship between ratings of self-worth and level of
depression (see Harter, 1999). In their comparison of 44 inpatient children
with a depressive disorder and 22 nondepressed inpatient children, Asarnow
and Bates (1988) found that depressed participants reported lower general
depression; scholastic competence, athletic competence, and physical
appearance than did nondepressed children. In their study of 30 normal ado-
lescents and 30 adolescent inpatients diagnosed with depression, King,
Naylor, Segal, Evans, and Shain (1993) found that ratings of global self-
worth distinguished youth who were depressed from their nondepressed
peers. At discharge, depressed adolescents who showed declines in depres-
sive symptoms also showed increases in global self-worth. The results of the
Asarnow and Bates and King et al. studies provide support for Harter’s
(1999) conclusion. Specifically, depressive symptomatology in children
appears to be negatively related to self-worth. As noted previously, adults’
perceptions of children affect the ways in which children view themselves.
The extent to which race influences adults’ views of children’s depressive
symptoms and sense of self has not yet been investigated.

Additional research on multiracial children is needed to directly deter-
mine adults’ perceptions of multiracial children. In the present study, a quan-
titative method was employed to directly explore adults’ perceptions of mul-
tracial children. African American and European American participants
were presented with one of six vignettes and related illustrations in which the
race of a child (i.e., African American, European American, multiracial) and
the race of the child’s friends (i.e., African American, European American)
were experimentally manipulated. It was expected that African Americans
and European Americans would rate the child differently based on the race of
the child. In addition, it was hypothesized that respondents would differ in
their attitudes toward a multiracial child’s friendship with European Ameri-
can and African American peers. The role of depression in relation to adults’
perceptions of the multiracial child was also explored. It was anticipated that
there would be a negative correlation between adults’ ratings of the child’s
level of depression and global self-worth. Although the present study was
designed to discuss adults’ attitudes toward multiracial children, no measure of this construct (e.g., The Attitudes Toward Multiracial Children Scale; Jackman et al., 2001) was included to ensure that respondents were naïve to the purpose of the study.

METHOD

PARTICIPANTS

In the present study, 156 undergraduate student volunteers who self-identified as either African American (n = 78) or European American (n = 78) participated. All students were recruited from psychology classes at a comprehensive university in the southeastern United States. Participants ranged in age from 18 to 44 years with a median age of 19. There were 122 women and 34 men who completed the study. Participants’ year in school was as follows: 42% freshman, 31% sophomore, 14% junior, and 13% senior. Students registered online to participate in the study in exchange for class credit. Respondents represented a variety of majors including psychology (16%), biology (13%), nursing (11%), and education (10%).

INSTRUMENTS

Self-Perception Profile for Children (SPPC). The SPPC (Harter, 1985) is intended for children in Grades 3 through 6 and is widely used in research to measure specific domain competencies and global self-worth (Granleese & Joseph, 1994). The Social Acceptance, Athletic Competence, Physical Appearance, and Global Self-Worth subscales were used to assess participants’ views of the child. Each subscale contains six items, which are scored from 1 to 4. A subscale’s score is determined by the average score of the six items for that subscale with higher scores thought to indicate a more positive view of self. The psychometric properties of the measure were found to be sound across four samples as reported by Harter (1985). The internal consistency of the SPPC, as measured by Cronbach’s alpha, is high for each subscale: Social Acceptance = .78, Athletic Competence = .83, Physical Appearance = .80, and Global Self-Worth = .80. The factor pattern of the measure was replicated across several samples. The factor loadings for each subscale are substantial, and the crossloadings are negligible. This self-report measure provides separate scores on judgments of domain competencies as well as a score on Global Self-Worth that has no item overlap with the
competency scores (Harter, 1982). An advantage of the SPPC over other measures is that it was specifically designed to decrease socially desirable responses.

Participants in this study completed a modified version of the SPPC. Respondents used the measure to report their perception of the child in the vignette rather than the traditional method of having children rate themselves. As such, the wording of SPPC items was changed slightly to make the statement applicable to the child in the vignette (e.g., “This child would rather play outdoors in his spare time” in place of “Some kids would rather play outdoors in their spare time”). The internal consistency of scores in the modified SPPC, as measured by Cronbach’s alpha, remained high and was similar to results reported for the original measures: Social Acceptance = .78, Athletic Competence = .81, Physical Appearance = .88, and Global Self-Worth = .86. These results are consistent with past research (e.g., Smith & Brody, 2000; Trent, Cooney, Russell, & Warton, 1996) in which Harter’s measures were adapted for use with adult respondents.

Because Schumann et al. (1999) found lower internal consistency for scores on some SPPC subscales between African American girls, scores in the present study were analyzed by race to determine if the revised measure was differentially reliable for both African American respondents and European American respondents. No detrimental effect on the internal consistency of the revised SPPC subscales was found for African American respondents as compared to European American respondents, as it was found that the internal consistency for both groups was above .70 on all SPPC subscales and on the Children’s Depression Inventory—Short Form (CDI-S). Thus, correlation coefficients remained high for both groups when analyzed separately. These results support the use of the revised measures with both races.

**CDI-S.** The CDI-S (Kovacs, 1992) is a 10-item version of the Children’s Depression Inventory (CDI). This self-report inventory is designed to be used with children and adolescents, ages 7 to 17, to measure the severity of depressive symptomatology. The CDI-S total score is calculated by summing item responses with higher scores believed to reflect greater depression. Each item consists of three related statements that differ in the level of symptom severity. Total scores on the CDI and CDI-S are typically equivalent ($r = .89$) (Kovacs, 1992).

As with the SPPC, the wording of items on the CDI-S was modified to fit the child in the vignette. For example, “I read books all the time” would appear as “This child reads books all the time.” The adult participants were instructed to respond based on their perception of the child. The modified CDI-S was found to be internally consistent as indicated by a Cronbach’s
alpha of .79, so adapting the measure for use with adult respondents appeared to have no detrimental effects on its internal consistency. This finding is consistent with Wierzbicki’s (1987) examination of the Children’s Depression Inventory—Parent Form (CDI-P) (Kazdin, Esveldt-Dawson, Unis, & Rancurello, 1983) in which the CDI items were revised to allow parents to rate depression in their children.

**Personal information questionnaire.** This measure was administered to collect demographic data from participants in the study. Respondents were asked to indicate their age, gender, class (e.g., sophomore), college major, and race (i.e., African American/Black, European American/Caucasian, other).

**PROCEDURE**

Participants signed an informed consent agreement after the principal investigator provided oral and written information about the study. They were then asked to read a short, three-page vignette about a child’s first day of school. The vignette was divided into three paragraphs, and a picture was used to illustrate the text for each paragraph. The primary investigator monitored the time spent on each page as well as students’ compliance with the procedure. In the first picture, the child is shown eating breakfast with his parents—either a European American mother and father, an African American mother and father, or an African American father and a European American mother. The text in this section is the longest to allow the participants the greatest exposure to the picture of the child with his parents. The second picture depicts the child sitting in a classroom with other students. The final picture is an illustration of the child asking two classmates if he can play with them. The vignette for all conditions was identical, but the pictures used to illustrate the vignette varied in terms of the race of the target child (African American, European American, or multiracial) and race of the child’s friends (African American or European American). The sex of the child in all conditions was male to control for the effects of gender. Respondents were not told that there were different versions of the vignette. After reading the vignette, participants completed the revised versions of the SPPC and CDI-S followed by the personal information questionnaire. The sessions lasted approximately 20 minutes.

Using a table of random numbers, African American and European American participants were separately assigned to one of the six experimental conditions based on the race of the child (i.e., African American, European American, multiracial) and his friends (African American, European American, multiracial) and his friends (African American, European American, multiracial).
American). This procedure resulted in 13 African American and 13 Euro-
pean American respondents in each experimental condition. As such, the 
current study was designed to examine main and interaction effects for these 
independent variables (i.e., race of the target child, the child’s friends, and the 
respondent) on five dependent measures (i.e., the SPPC Global Self-Worth, 
Social Acceptance, Physical Appearance, and Athletic Competence 
subscales and the CDI-S).

RESULTS

The correlation between the SPPC Global Self-Worth subscale and the 
CDI-S score was calculated using a Pearson product-moment correlation 
coefficient. It was hypothesized that ratings of the child’s global self-worth 
would be significantly and negatively correlated with ratings of the child’s 
level of depression. As indicated in Table 1, a significant and negative corre-
lation was found between adults’ ratings on the Global Self-Worth subscale 
and their scores on the revised CDI-S, $r = -.68, p < .01$. It is worth noting that 
participants’ scores on the CDI-S were significantly correlated with each of 
the four SPPC subscales. Likewise, statistically significant intercorrelations 
were found for the SPPC Global Self-Worth, Social Acceptance, Athletic 
Competence, and Physical Appearance subscales.

Table 2 contains the means and standard deviations for the CDI-S and the 
SPPC subscales by the race of the respondent, the race of the child, and the 
race of the child’s friend. As mentioned earlier, higher scores on the SPPC 
suggest a more positive impression of the child; higher scores on the CDI-S 
are thought to indicate greater depression.

A MANOVA was selected for the present analysis because of the high cor-
relations across the dependent measures (see Table 1) with the race of the 
child (European American vs. African American vs. multiracial), the race of 
the child’s friends (European American vs. African American), and the race 
of the respondent as between-subjects factors (European American vs. Afri-
can American) on the revised CDI-S and the Social Acceptance, Athletic 
Competence, Physical Appearance, and Global Self-Worth subscales of the 
revised SPPC. Analysis revealed a multivariate three-way interaction for the 
race of the child, the race of the child’s friends, and the race of the respondent, $F(10, 280) = 8.7, p < .05$ (effect size = .07). Univariate analyses revealed this interaction was significant only for social acceptance, $F(2, 144) = 3.44, p < 
.05$ (effect size = .05). Figure 1 depicts the social acceptance means for the 
interaction.
To explore the source of the differences for social acceptance scores, results were separately analyzed by the race of the respondent, the race of the friend, and the race of the multiracial child. Post-hoc tests using the Sheffe test revealed no significant difference between the European American, African American, and multiracial child by the race of the respondent (European American, \( p = .55 \); African American, \( p = .62 \)), or by the race of the friend (European American, \( p = .52 \); African American, \( p = .61 \)). When the three child race conditions were analyzed individually, there was no significant

**TABLE 1**

<table>
<thead>
<tr>
<th></th>
<th>Social Acceptance</th>
<th>Athletic Competence</th>
<th>Physical Appearance</th>
<th>Global Self-Worth</th>
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</thead>
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<td>-.61</td>
<td>-.56</td>
<td>-.68</td>
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<td>Social acceptance</td>
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<td>.54</td>
<td>.65</td>
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</tr>
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<td>.64</td>
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<td>Physical appearance</td>
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<td>.74</td>
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</tr>
</tbody>
</table>

NOTE: CDI-S = Children’s Depression Inventory—Short Form; SPPC = Self-Perception Profile for Children. All values are significant at \( p < .001 \).

**Figure 1: Participants Mean Ratings on Social Acceptance by Race of Child, Race of Respondent, and Race of Friend**

NOTE: Abbreviations used in the legend are as follows: EA = European American, AA = African American.

To explore the source of the differences for social acceptance scores, results were separately analyzed by the race of the respondent, the race of the friend, and the race of the multiracial child. Post-hoc tests using the Sheffe test revealed no significant difference between the European American, African American, and multiracial child by the race of the respondent (European American, \( p = .55 \); African American, \( p = .62 \)), or by the race of the friend (European American, \( p = .52 \); African American, \( p = .61 \)). When the three child race conditions were analyzed individually, there was no significant
<table>
<thead>
<tr>
<th>Race of Respondent</th>
<th>Race of Child’s Friends</th>
<th>Dependent Measure</th>
<th>European American</th>
<th>Multiracial</th>
<th>African American</th>
</tr>
</thead>
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<tr>
<td>European American</td>
<td>European American</td>
<td>CDI-S</td>
<td>3.15 (2.88)</td>
<td>2.62 (2.90)</td>
<td>2.46 (2.11)</td>
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<td>Social acceptance</td>
<td>2.68 (0.54)</td>
<td>2.37 (0.60)</td>
<td>2.27 (0.69)</td>
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<td>Athletic competence</td>
<td>2.78 (0.66)</td>
<td>2.63 (0.59)</td>
<td>2.64 (0.48)</td>
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<td></td>
<td>Physical appearance</td>
<td>2.99 (0.59)</td>
<td>3.06 (0.55)</td>
<td>2.94 (0.57)</td>
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<td></td>
<td>Global self-worth</td>
<td>3.11 (0.57)</td>
<td>3.11 (0.69)</td>
<td>2.99 (0.67)</td>
</tr>
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<td>European American</td>
<td>Social acceptance</td>
<td>2.85 (2.08)</td>
<td>2.85 (2.15)</td>
<td>2.31 (1.80)</td>
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<td>Athletic competence</td>
<td>2.42 (0.59)</td>
<td>2.67 (0.47)</td>
<td>2.49 (0.51)</td>
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<td>2.73 (0.66)</td>
<td>2.91 (0.34)</td>
<td>2.63 (0.47)</td>
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<td>Global self-worth</td>
<td>3.15 (0.29)</td>
<td>3.12 (0.41)</td>
<td>2.82 (0.50)</td>
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<td>3.54 (3.04)</td>
<td>2.38 (1.66)</td>
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<td>Athletic competence</td>
<td>2.55 (0.56)</td>
<td>2.69 (0.48)</td>
<td>2.81 (0.72)</td>
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<td>Physical appearance</td>
<td>3.25 (0.47)</td>
<td>3.04 (0.44)</td>
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<td>Global self-worth</td>
<td>3.08 (0.61)</td>
<td>2.98 (0.64)</td>
<td>3.27 (0.47)</td>
</tr>
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<tr>
<td></td>
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<td>Physical appearance</td>
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<td>2.79 (0.92)</td>
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</tr>
<tr>
<td></td>
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<td>Global self-worth</td>
<td>3.38 (0.66)</td>
<td>3.01 (0.63)</td>
<td>3.09 (0.74)</td>
</tr>
</tbody>
</table>

NOTE: CDI-S = Children’s Depression Inventory—Short Form.
effect for the race of the respondent or the race of the friend when the child was either African American or European American. Specifically, there was no significant main effect for the race of the friend, $F(1, 48) = .02, p = .90$, or the race of the respondent, $F(1, 48) = .21, p = .65$; no significant interaction effects were found when the child was European American, $F(1, 48) = 2.37, p = .13$. Likewise, there was no significant main effect for friendship, $F(1, 48) = 1.57, p = .22$, or the race of the respondent, $F(1, 48) = .57, p = .46$; no significant interaction effects were found when the child was African American, $F(1, 48) = .01, p = .97$. A significant two-way interaction for the race of the respondent and the race of the friend was found for the multiracial child, $F(1, 48) = 5.38, p < .03$ (effect size = .10). See Table 3 for means and standard deviations on social acceptance scores for this effect.

**DISCUSSION**

The present results support the hypothesis that adults’ ratings of children’s global self-worth and level of depression would be significantly and negatively correlated. As ratings of global self-worth increased, ratings of depression decreased. This finding was not surprising given previous research that found depressed adolescents rated themselves as having lower self-worth (Asarnow & Bates, 1988; King et al., 1993). Additionally, Harter (1999) has consistently found a significant inverse relationship between self-worth and negative affect in children, such that higher levels of depression were associated with lower perceptions of self-worth. It is worth noting that the negative correlation between scores on the CDI-S and the SPPC Global Self-Worth subscale provide support for the validity of the revised measures used in this study.

A significant three-way interaction was found for scores on the SPPC Social Acceptance subscale. Although statistically significant, the interaction of the race of the child, the race of the child’s friend, and the race of the respondent accounted for only 5% of the variability in respondents’ SPPC social acceptance scores. This finding strongly suggests that adults’ ratings of a child’s acceptance by peers are formulated based on consideration of a number of factors in addition to race. These might include the gender of the child; the gender of the African American parent in an interracial relationship; the nature, length, and quality of the peer relationship; and respondents’ perceptions of their own friendships during childhood, adolescence, and adulthood. Follow-up analyses to the three-way interaction revealed no significant main or interaction effects for the race of the respondent and the race
of the friend across the three child conditions (i.e., European American, African American, and multiracial). However, when the child conditions were analyzed individually, a significant two-way interaction was observed in the multiracial child condition. This interaction effect accounted for 10% of the variance, which suggests that race was somewhat more important in adults’ ratings of the multiracial child.

The results reveal that respondents rated the multiracial child with friends of the respondent’s race as having lower social acceptance than multiracial children with friends of a different race. European American individuals saw a multiracial child with African American friends as having greater peer acceptance than a multiracial child with European American friends, whereas African American individuals viewed a multiracial child with European American friends as being more socially accepted than a multiracial child with African American friends. This result is similar to Owusu-Bempah’s (1994) finding in which a mostly White sample of British social work students viewed a multiracial child’s friendship with Black children as normal but interpreted a multiracial child’s friendship with White children as problematic. Although the Owusu-Bempah study did include a small number of Black participants, their responses were not analyzed separately from White respondents, so it is impossible to determine if they responded similarly to African American participants in the present study.

A possible explanation for the findings in the present study is that participants saw the friendship of a multiracial child with children of the respondent’s race as being somewhat unusual. Participants in the present study may have considered the multiracial child to be different from them. Thus, they may have seen friendship with children who were also racially different from them as being more normal. The finding that both races in the study perceived a multiracial child’s friendships as being more socially accepted if they occurred with children of a race other than that of the respondent has serious

### TABLE 3
Means (standard deviations) for Social Acceptance Scores for the Multiracial Child by Race of Friend and Race of Respondent

<table>
<thead>
<tr>
<th>Race of Friend</th>
<th>European American</th>
<th>African American</th>
</tr>
</thead>
<tbody>
<tr>
<td>European American</td>
<td>2.37 (0.60)</td>
<td>2.56 (0.61)</td>
</tr>
<tr>
<td>African American</td>
<td>2.67 (0.47)</td>
<td>2.13 (0.59)</td>
</tr>
</tbody>
</table>
implications for multiracial children. Kerwin et al. (1993) reported that several of the African American/European American multiracial children they interviewed felt pressured to select a group of friends according to race. Based on the present results, it seems that participants of both races believed that the multiracial child in the vignette would see himself as less accepted by children of the participant's own race. If true, African American/European American multiracial children may have difficulty identifying with a particular racial group because each of these groups may consider the child as being different and more fitting for membership in the other group.

In the past, writers seemed to accept the idea that multiracial children are informally classified by society as African American (see Bowles, 1993). In addition, some research supported this notion. Winn and Priest (1993) reported that most of the multiracial children interviewed in their study chose an African American racial identity based on the perception that this self-label was more accepted by society. U. M. Brown (1995) determined from interviews with multiracial young adults that most of these individuals classified themselves as African American in public but multiracial in private. He concluded that multiracial individuals face societal pressure to negate their European American heritage.

The results of the present study suggest that the situation is more complex. That is, societal views appear to be dependent, in part, on the race of the adult who is rating the multiracial child. The current findings are in contrast to past assumptions and the results of previous qualitative research, which suggested that both African American and European American adults use the one-drop rule to classify African American/European American multiracial children. Although the present findings suggest European American adults may classify multiracial children using the one-drop rule, the data do not support this assumption for African American adults. As this finding runs counter to previous speculation, additional studies, similar to the present investigation, are needed to explore adults' use of the one-drop rule with these children.

Participants in this study appeared to view the friendships of multiracial children differently than they did the peer relationships of African American and European American children. The race of the child, the friend, and the respondent did not have a significant effect on participants' social acceptance scores for the African American and European American boy in the vignette. By contrast, the race of the respondent and the friend were significant factors in participants' ratings of the multiracial child. This finding is consistent with the work of others, such as U. M. Brown (1995) and Winn and Priest (1993), who reported that multiracial children represent a unique population whose needs are different from those of children with parents of the same racial background.
No interaction or main effects were found for the global self-worth, athletic competence, and physical appearance variables and the CDI-S. There are several possible explanations for this result. First, adults may be perceiving European American, African American, and multiracial children as having a similar sense of self-worth and satisfaction with their physical appearance, comparable physical abilities in athletic games, and equivalent levels of depression. A second explanation is that the 12 cells in the MANOVA each contained 13 participants, which is insufficient to detect small effects. It is possible that results for these dependent measures would have been statistically significant given a larger sample. A third possible reason for the nonsignificant results is the convenience sample of undergraduate students who participated in this study. For example, their age was, on average, younger, and they were more highly educated than the general population. As a result, their responses may not be representative of adults in general.

This study is limited in several ways. First, the SPPC and the CDI-S were originally designed to directly measure a child’s own perception of self and depressive symptoms. In this study, the inventories were adapted for use with an adult population to measure respondents’ views of a child’s sense of self and level of depression. Although the internal consistency and the correlation pattern offer evidence in favor of the psychometric properties of the revised measures, the degree of correspondence between each revised measure and its original version is uncertain. Second, respondents were given limited information about the target child. For example, the different pictorial representations of the vignette varied in regard to external factors such as the skin color of the child, parents, and friends. In real life, adults are likely to focus on additional factors when assessing a child’s sense of self and depression level. Third, the principal investigator in the present study was a European American woman. It is possible that participants might have responded differently had the examiner been of a different race (e.g., African American) or gender. The gender composition of the sample represents another limitation of the study. The vast majority of participants were female, so it was impossible to analyze gender differences between respondents because of the small number of male students in each of the 12 cells. Thus, it is unclear if male and female adults responded differently to the experimental conditions. Additionally, some critics might question the racial composition of the sample. Because participants’ racial classification was based on their self-report, it is possible that some respondents may have self-identified inaccurately (e.g., a multiracial participant may have self-identified as African American).

Finally, it is possible that participants may have been influenced by demand characteristics. Although respondents were exposed to only one experimental condition, they may have inferred the hypotheses of the study.
and responded as they thought they should rather than in a manner consistent with their true attitudes. If the design of the study was sufficiently transparent, participants may have concluded that its purpose was an examination of racial attitudes. Although the SPPC was designed to guard against this occurrence, the possibility cannot be ruled out.

Several delimitations restrict the generalizability of the study. As noted previously, all participants were undergraduate students, so their attitudes may not be representative of the adult population at large. In addition, respondents attended a university in the southeastern United States, so their responses may not be representative of individuals from other regions of the country. The focus of the present study was on African American/European American multiracial children, so the results may not generalize to multiracial children of different races. Adults’ attitudes toward these children should be examined in future studies.

Other issues merit investigation to expand on the paucity of research on multiracial children, especially those of African American descent. The present sample was restricted in terms of age, education level, and geographic region. Replication of the study with adults of varying ages, education levels, and from different geographic locations is recommended to determine if the present findings hold across these samples. Second, the child’s gender in the vignette was male. The study could be replicated using a female child to determine if respondents vary their ratings of the child’s self-worth and depressive symptoms based on gender and race. Third, the focus of this study was adults’ perceptions of a child’s view of self. It would be interesting to replicate the study with African American and European American children to examine their attitudes regarding the multiracial children born to African American and European American parents. Fourth, Zack (1993) hypothesized that individuals who have strong ethnic pride in their African American or European American identity may hold more negative views of mixed-race individuals. This question should be addressed in future research using the present design to examine African American and European American adults’ ratings of the African American/European American multiracial child while taking into account the effect of respondents’ racial identity.

REFERENCES


